COVID-19Rapid Response Series

Strengthening the Role of Local and International Non-Governmental Organizations in Pandemic Responses A K2P Rapid Response responds to urgent requests from policymakers and stakeholders by summarizing research evidence drawn from systematic reviews and from single research studies. K2P Rapid Response services provide access to optimally packaged, relevant and high-quality research evidence for decision-making over short periods of time ranging between 3, 10

and 30-days.

Rapid Response



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Synthesis of evidence on a priority question or topic Ő

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International experiences



Faculty of Health Sciences Knowledge to Policy | K2P | Center

K2P COVID-19 Rapid Response Series Strengthening the Role of Local and International Non-Governmental Organizations in Pandemic Responses



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Merit Review

The K2P Rapid Response undergoes a merit review process. Reviewers assess the summary based on merit review guidelines.

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Contents

Key Messages	8
Preamble	12
Defining NGOs	14
What assets do NGOs bring?	14
Role of local and international NGOs in pandemic response efforts	15
Measures adopted by NGOs in other countries to combat COVID-19	18
NGO coordination models	19
Lessons learned from NGOs involvement in Ebola response	21
Country level implications	23
References	26
Annexes	30

Key Messages

Key Messages

- The scope and intensity of the COVID-19 pandemic means that no single agency can work alone to effectively control and mitigate its impact. Governments need to collaborate with a wide array of agencies and institutions to shape the collective response needed to achieve desired goals.
- Non-governmental organizations (NGOs) have the opportunity and the responsibility to play a major role in pandemic response particularly among the most vulnerable population groups; they have the technical expertise, human resources, communications and infrastructure needed to contribute significantly to the response.
- However, it remains unclear to what extent NGOs are being mobilized and harnessed in the COVID-19 response and the existing mechanisms to optimize their involvement.

This rapid response document is part of the K2P COVID-19 Rapid Response Series. It seeks to answer the following questions:

- What roles can local and international NGOs play in pandemic responses?
- What are the existing models of NGOs coordination in crisis situations?
- What measures have been adopted by NGOs in other countries to combat COVID-19?

Role of local and international NGOs in pandemic response

A comprehensive synthesis of the evidence revealed an array of critical services that NGOs can provide to respond to the needs of those affected by emergencies, epidemics/pandemics and humanitarian crises:

- ----> Public health education and community empowerment
- -----> Provision of response training to local leaders and public health staff
- ------> Provision of medical supplies and hygiene kits
- ----> Coordination of fundraising activities and volunteers
- -----> Provision of support to government in identifying unmet needs and managing logistics
- ----> Participation in contact testing, surveillance and case management
- Provision of social support and care to communities and vulnerable populations affected by social distancing measures
- ----- NGO Networking and collaboration
- ----- Continuation of NGO's role

Measures adopted by NGOs in selected countries to combat COVID-19

A growing number of countries are involving national and international NGOs in their collective responses. These NGOs have adopted a number of measures, the most common being the provision of social support and care to vulnerable populations affected by social distancing measures, public health education and community engagement, and provision of medical supplies and hygiene kits.

NGO coordination models

Existing models for NGOs coordination which have been implemented internationally, nationally and locally in crisis and disaster settings include: (1) The Sphere Project; (2) The Cluster Approach; (3) Code of Conduct; (4) Centralized and Decentralized Approaches; (5) National Disaster Management Authority; (6); Integrated Collaboration Framework; (7) Model of Temporal Coordination; (8) Webbased Collabit Application; (9); 5x5 Model; and (10) Model of Information Coordination

Lessons learned from NGO involvement in Ebola response

While international and local NGOs played a crucial role in the Ebola outbreak in West Africa, analysis of the response revealed a number of weaknesses which undermined the overall response as well as generated key lessons for future responses.

Country level implications

The COVID-19 pandemic has exposed the fragility of health systems worldwide (including EMR) and highlighted the need to scale-up public health capabilities, infrastructures and human capacities to respond effectively to growing demands without overwhelming the health system. Harnessing the role of NGOs can significantly contribute to an organized and efficient response.

Key recommended actions for different entities are provided below:

For Local and international NGOs

- -----> Step beyond their traditional responses in order to address public needs in communities and contribute to the control and the mitigation of outbreak
- Work with government to identify what critical core services they can provide and ensure they have the capacity to deliver

For International NGOs

- Be flexible throughout the course of pandemic to respond to evolving needs and priorities
- Provide local NGOs with technical and financial assistance to contribute to the humanitarian response
- -----> Place developmental priorities second to saving lives and preventing spread of outbreaks during a pandemic

For Governments

- -----> Strengthen stewardship function, including harnessing existing NGO capacities, coordinating and integrating efforts across different partners and steering the response in a rapidly changing situation
- -----> Promote the role of NGOs in pandemic response and create clear and transparent avenues of communication
- -----> Conduct quick assessment of key service gaps that NGOs can fill and work with NGOs to identify and map the resources and capacities available within NGOs
- -----> Establish different clusters or pillars at city/governorate/province level to bring the different stakeholders together in a common platform for more effective response
- Adopt a proper coordination model/mechanism with clear roles and responsibilities to bring more cohesion and coherence to the response

Content

Preamble

The world is currently witnessing the worst public health crisis in recent history, with COVID-19 pandemic affecting 768,363 people in over 195 countries and territories around the world (as of March 30th 2020) (WorldOMeter, 2020). The scope and intensity of such pandemic means that no single agency can work alone to effectively control and mitigate its impact. Governments need to collaborate with a wide array of agencies and institutions to shape the collective response needed to achieve desired goals.

Non-governmental organizations (NGOs) have the opportunity and the responsibility to play a major role in pandemic preparedness, response and recovery, particularly among the most vulnerable population groups (Mahmood 2009); NGOs have the technical expertise, human resources, communications and infrastructure required to contribute significantly to the response; they are also a trusted entity with strong ties to the community which can facilitate information and resource distribution (Rao and Silbey 2016; Mondal et al 2015).

Given the growing number of NGOs operating in the Eastern Mediterranean Region (EMR) (Al-Mandhari et al 2019; National Platform of Maltese NGDOs, 2011), their mobilization is strategic in controlling the spread of COVID-19 and mitigating its impact on community. Nonetheless, it remains unclear to what extent NGOs are being mobilized and harnessed in the COVID-19 response, the degree to which NGO's central role in the crisis response is recognized and promoted, and the existing mechanisms to optimize their involvement.

As the pandemic continues to accelerate, there is an unprecedented need for all stakeholders to play their roles in mitigating the widespread pandemic (Laverack, 2017). Furthermore, given that the current pandemic is expected to have immense short- and long-term impacts on a large number of people, predominantly vulnerable ones, it is critical for NGOs to be mobilized now and not delay their involvement in the response to COVID-19. The cost of not engaging the relevant stakeholders in the right way can have devastating impact on

Background to K2P Rapid Response

A K2P Rapid Response responds to urgent requests from policymakers and stakeholders by summarizing research evidence drawn from systematic reviews and from single research studies.

K2P Rapid Response services provide access to optimally packaged, relevant and high-quality research evidence over short periods of time ranging between 3, 10, and 30-day timeframe.

This rapid response was prepared in a 3-day timeframe and involved the following steps:

1) Formulating a clear review question on a high priority topic requested by policymakers and stakeholders from K2P Center.

2) Establishing what is to be done in what timelines.

3) Identifying, selecting, appraising and synthesizing relevant research evidence about the question

4) Drafting the K2P Rapid Response in such a way that the research evidence is present concisely and in accessible language.

5) Submitting K2P Rapid Response for Peer/Merit Review.

6) Finalizing the K2P Rapid Response based on the input of the peer/merit reviewers.

7) Final Submission, translation into Arabic, validation, and dissemination of K2P Rapid Response

The quality of evidence is assessed using the AMSTAR rating which stands for A Measurement Tool to Assess Systematic Reviews. This is a reliable and valid measurement tool to assess the methodological quality of systematic reviews using 11 items. AMSTAR characterizes quality of evidence at three levels:

8 to 11= high quality 4 to 7 =medium quality 0 to 3 = low quality health systems and population outcomes and lead to another avoidable human tragedy.

This rapid response document aims to promote and strengthen the role of local and international NGOs in the COVID-19 response. Specifically, it (1) presents the best available evidence on the role of NGOs in pandemic response, (2) provides an overview of measures adopted by NGOs in other countries to combat COVID-19 pandemic; (3) describes existing NGO coordination models, (4) highlights lessons learned from NGO involvement in Ebola response, and (5) concludes with country-level implications This rapid response document is part of the K2P COVID-19 Rapid Response Series. It seeks to answer the following questions:

- What are the existing models of NGOs coordination in crisis situations?
- What measures have been adopted by NGOs in other countries to combat COVID-19?

Study Selection Process

We identified relevant studies by searching the following key databases in March 27, 2020: PubMed, Health Systems Evidence, and Social Systems Evidence

We used the following search strategy for PubMed, limited to English and years 2004-2020: ("Voluntary Health Agencies"[Mesh] OR "Organizations"[Mesh] OR "Organizations, Nonprofit"[Mesh] OR "Charities"[Mesh]) OR ("non-governmental organization*"[TIAB] OR "non-state actor*"[TIAB] OR "non-governmental agenc*"[TIAB] OR "non-governmental entit*"[TIAB] OR "nongovernmental bod*"[TIAB] OR "civil society organization*"[TIAB]) AND ("Pandemics"[Mesh] OR "Epidemics"[Mesh] OR "severe acute respiratory syndrome coronavirus 2" [Supplementary Concept] OR "COVID-19 testing" [Supplementary Concept] OR "COVID-19" [Supplementary Concept] OR "COVID-19 vaccine" [Supplementary Concept] OR "spike glycoprotein, COVID-19 virus" [Supplementary Concept] OR "Disaster Planning"[Mesh] OR "Relief Work"[Mesh]))

Of the 2,613 hits retrieved, 15 articles were selected. We also searched Google Scholar and the grey literature which retrieved additional studies.

Defining NGOs

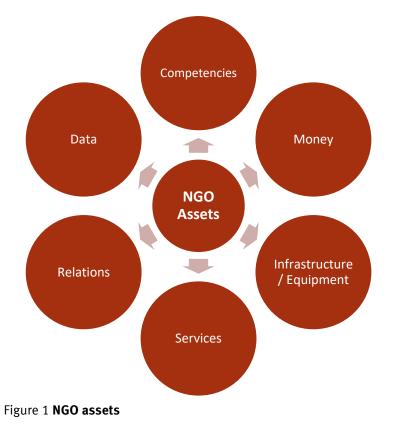
The term non-governmental organization — NGO — is very broad and encompasses many different types of organizations with no generally accepted definition of an NGO (Willet, 2002).

According to the World Bank, NGOs "include many groups and institutions that are entirely or largely independent of government and that have primarily humanitarian or cooperative rather than commercial objectives" (World Bank 1990). The term can be used to cover all not-for-profit organizations, voluntary, community, charities and social non-government associations (Laverack, 2017). NGOs can be organized on a local, national or international level (Willet, 2002). Fundamental Features of NGOs (Willet, 2002):

- -----> Independent from direct control of any government;
- Not constituted as a political party;
- ------> Not a criminal group

What assets do NGOs bring?

A systematic review of relevant NGO resources for emergency and disaster preparedness grouped NGO assets into five categories (Figure 1). These can ultimately, be used to assess NGO availability at national, state, and local levels (Acosta 2013).



K2P Rapid Response Strengthening the Role of Local and International Non-Governmental Organizations in Pandemic Responses 14

Role of local and international NGOs in pandemic response efforts

A comprehensive synthesis of the evidence revealed an array of critical services that NGOs can provide to respond to the needs of those affected by emergencies, epidemics/pandemics and humanitarian crises (Sheikhi et al, 2020; Sledge 2019; Shin et al, 2018; Ling, 2017; Tow et al, 2017; Concedda et al 2016; Mondal et al 2015; Acosta et al., 2013; Acosta and Chandra 2013).

These services can be grouped into the following broad categories:

- -----> Public health education and community empowerment
- -----> Provision of response training to local leaders and public health staff
- -----> Provision of medical supplies and hygiene kits
- -----> Coordination of fundraising activities and volunteers
- -----> Provision of support to government in identifying unmet needs and managing logistics
- ----> Participation in contact testing, surveillance and case management
- Provision of social support and care to communities and vulnerable populations affected by social distancing measures
- ------ NGO Networking and collaboration

In addition to NGO's critical role in pandemic **response** (as detailed in the main text), they can also contribute to the **preparedness** and **recovery** phases of a crisis.

Preparedness phase:

- -----> Develop strategies, materials and training tools to facilitate an effective response
- -----> Train and build capacity of NGO staffs and task forces in response and recovery services
- ------> Set up information channel to community
- Advocate for creation of national pandemic preparedness and response working groups (if not already present)
- Join working groups on national pandemic preparedness and response led by the country's ministry of health

Recovery phase:

- Provide technical and material aid in reconstruction of health systems and broader community development (e.g., resilience, sustainability)
- Refer community members to needed financial/educational/training services
- ------> Engage in fund-raising activities
- Provide direct assistance to individuals and families in form of donation or counselling
- -----> Support continued livelihood of communities including nutrition, social and spiritual support
- -----> Engage in monitoring
- ------> Identify gaps in community services for government partners to address
- -----> Share important recovery information with residents in the community

The details of each service category are described below:



Public health education and community empowerment

- Launch education programs, including campaigns and advocacy, which focus on providing information about risk, as well as specific guidelines for prevention and early detection of risk (to guide community actions regarding prevention and treatment strategies)
- Raise awareness and disseminate information on a regular basis about precautionary measures including social distancing, hand washing and sanitization through offline and online platforms
- Promote consistent community engagement and help in preventing spread of misinformation to reduce fear and create positivity in the community (including setting up systems for feedback from community)

Provision of response training to local leaders and public health staff



- Provide response training to community leaders and public health staff (as first responders of their own communities), to enable them to detect and respond to the crisis early on, as well as facilitate adaptive implementation of international approaches in local context
- -----> Improve and/or develop new policies and procedures for health service delivery

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Provision of medical supplies and hygiene kits

- Assemble and distribute medical supplies such as masks, gloves and hygiene kits (hand sanitizers, toiletries, clean-up supplies) to affected communities (healthcare facilities and vulnerable populations)
- -----> Support the government with securing testing kits from countries where the NGOs are headquartered and other countries where they have operations (for international NGOs)



Contribution to social solidarity

- Report unfair trade practices by retailers who may exploit residents by selling essential commodities at inflated prices
- ------> Support community initiatives to prevent panic-buying and hoarding of essential commodities



Coordination of fundraising activities and volunteers

- -----> Collaborate with other entities to raise funds for the local healthcare system
- ------> Open up portals for individuals and institutions who are willing to donate masks, hand sanitizers and other essential commodities
- ----> Provide oversight and management of the collection, transportation, and distribution of volunteers and donations (money and goods) both inside and outside affected communities



Provision of support to government in identifying unmet needs and managing logistics

- ----> Collaborate with government to identify resource gaps in areas such as patient care, logistics and human resourcing
- -----> Conduct assessments of community needs, transported or distributed supplies, or warehoused supplies
- \dashrightarrow Engage in and support transportation and logistics services
- -----> Coordinate with municipalities and/or other entities to support in sanitization of public areas which sanitation workers are unable to cover



Participation in contact testing, surveillance and case management

- Assist in national surveillance activities by identifying and reporting high risk individuals (including checking temperature of members of the public and responding to emergency callouts to people with fever)
- Participate in isolation of suspicious cases, particularly in rural communities that lack treatment centers, to prevent further disease spread among vulnerable populations.
- ------> Support building temporary infrastructure and isolation units or expanding existing health care infrastructure
- Provide direct medical care for patients and ensure infection control. During Ebola epidemic in Sierra Leone, five NGO organizations ran Ebola treatment units which treat, and triage Ebola patients or individuals suspected of having Ebola



Provision of social support and care to communities and vulnerable populations affected by social distancing measures

- Provide food, water and medicine supplies to individuals or families who are placed under home quarantine
- Provide basic needs products such as grocery, water and medicines to poor individuals and vulnerable communities (where most workplaces and markets are shut down)
- Provide childcare or educational services especially for children who are separated from their infected or suspicious parents as well as for children of healthcare workers, who have to work while their children are home due to lockdown
- ----> Provide mental or spiritual counselling and care services
- -----> Provide financial support for families in need and whose work was interrupted



NGO Networking and collaboration

----> Collaborate, create networks and coordinate with other NGOs (both national and international) to minimize duplication of efforts, maximize outreach activities and amplify impact of response



Continuation of NGO's role

- ----> Promote health and safety of NGO's staff and families
- ----> Ensure continuity of key NGO business and services

Measures adopted by NGOs in other countries to combat COVID-19

Given the scale of COVID-19 pandemic, a growing number of countries are involving national and international NGOs in their collective responses (Table 1). These NGOs have adopted a number of measures, the most common being the provision of social support and care to vulnerable populations affected by social distancing measures; public health education and community engagement, and provision of medical supplies and hygiene kits (see Appendix A for details).

Table 1 Overview of measured adopted by NGOs in other countries to combatCOVID-19

Measures adopted by NGOs		China	Hong Kong	Hawaii	Iraq	Nepal	Philippines	Romania	NSA
Public health education and	х	Х				Х	х		
community engagement									
Provision of response training to local	х				Х				
leaders and public health staff									
Provision of medical supplies and	Х	х			х	Х			
hygiene kits									
Coordination of fundraising activities						х		х	
& volunteers									
Provision of support to government in									
identifying unmet needs and	Х	Х				Х			
managing logistics									
Participation in contact testing,	rticipation in contact testing, X					Х			
surveillance and case management									
Provision of social support and care to									
communities and vulnerable			х	Х	Х	Х		х	х
populations affected by social									
distancing measures									
NGO networking and collaboration				Х				Х	
Continuation of NGO's role									

NGO coordination models

Proper coordination within and between NGOs and governments will ensure a more effective and efficient response to crisis. Figure 2 highlights existing models for NGOs coordination which have been implemented internationally, nationally, and locally in humanitarian and disaster settings (Rouhi, Gorji & Maleki; 2019; Lotfi et al., 2016).

Whereas some models focus specifically on coordinating among NGOs (e.g. Conceptual Integrated Framework for CPDR, Temporal Coordination of Disaster Response Activities, and Decentralized Approaches to Logistic Coordination in Humanitarian Relief), the other models focus on a general coordination among all organizations, governmental, or otherwise. In addition, except for a Conceptual Integrated Collaboration Framework and Collabit, which were designed for the stage of reconstruction and recovery response, the remaining models mostly focus on the response phase.

While these models have been applied to a diverse range of settings, they can provide useful insights to decision-makers seeking to strengthen

collaborations with NGOs and other partners during pandemics. It is important for decision-makers to prioritize and adapt the models that best fit their contexts, including those that have been used in settings similar to theirs, such as the type of crisis or the countries in which the crisis is taking place.

Model	Brief Description			
1. The Sphere Project	The Sphere Project includes universal rules on minimum standards in the domains of humanitarian services. It is considered as the best practice in disaster response and provides a tool for creating interagency coordination at the site of the disaster which included: (1) principles of agreement and cooperation, (2) a protocol for assuming duties, (3) identification of gaps in the health sector, and (4) a summary of the parts of the health sector.			
2. The Cluster Approach	The Cluster Approach has two major aims at the level of the country: (1) establishing a clear system of international leadership and response to needs in each cluster and (2) creating a framework for effective coordination and cooperation among national and international organizations in each cluster.			
3. Code of Conduct	Code of Conduct is used as a tool and guideline for creating coordination for agencies which are engaged in humanitarian measures, including NGOs and making decisions regarding humanitarian measures. It seeks to maintain the high standards of independence, effectiveness, and impact to which disaster response NGOs and the ICRC Movement aspires.			
4. Centralized and Decentralized Approaches	Decentralized and centralized approaches : systems and tools currently available to facilitate humanitarian coordination can be divided into centralized and decentralized categories in terms of the presence of one or more main players with authorization for directing relief operations. Recent study suggests use of a decentralized approach , in which each organization independently makes decisions. To share its information, experts, and responsibilities with other organizations, it can utilize any of the decentralized approaches such as Inter-Agency Standing Committee and Inter-Agency Working Group.			
5. National Disaster Management Authority	National Disaster Management Authority (NDMA) is a mechanism that aims to promote response during disasters. In fact, it is a disaster management tool in order to develop policy, plan, and guideline legislation at the national level. In Pakistan, this approach tries to address disaster risk and vulnerability to coordinate NGO activities at different levels.			
6. Integrated Collaboration Framework	The Integrated NGO Collaboration Framework for the community post-disaster reconstruction includes three interrelated components: (1) organizational structure, (2) operational processes, and (3) reconstruction goals.			

Table 2 NGO Coordination Models

7. Model of Temporal Coordination **Model of temporal coordination of disaster response:** the flat or horizontal structure promotes involvement of the staff in the decision-making process with managers by decreasing the level of middle managers. The coordination committee is responsible for coordinating with the other committees such as health and engineering committee.

8. Web-based Collabit Application

9. 5x5 Model

Collabit is a web-based open-source application aiming to effectively manage emergencies by sharing asynchronous data among nonprofit relief organizations and agencies in order to coordinate the response operation and recovery from disaster.

- The **five key "skill packages"** aim to provide mental health-specific platform to apply algorithms for common disorders. These packages are consistent with the WHO mental health intervention guide in non-specialist health settings and include: 1) case finding, engagement, follow-up, and psycho-education; 2) targeted psychological interventions; 3) medication management; 4) supervision and consultation; 5) quality oversight. The five "implementation rules" consist of the following: 1) assess context first; 2) identify priority care pathways; 3) specify decision-support tools, supervision, and triage rules; 4) use quality-improvement practices; 5) plan for sustainability and capacity building.
- 10. Model of Information Coordination

In 2004, and in response to the Tsunami of the shores of the Indian Ocean, the Center for Disease Control and Prevention (CDC) formed the **Responder Resilience and Mental Health Team** to contribute to the humanitarian relief efforts. Because of the complex relief efforts, there was a need for coordination between partners through the Internet and occasional ship-to-shore teleconferences. It was important to inform the emergency operations command about the psychosocial relief efforts through reports, critical resource documents on traumatic exposure metrics and intervention manuals with intervention mapping strategies.

Lessons learned from NGOs involvement in Ebola response

The West African Ebola outbreak of 2013-2015 was a human tragedy that infected more than 28, 000 people and claimed more than 11 000 lives (Moon et al, 2015). While international and local NGOs played a crucial role in mitigating the Ebola virus outbreak, analysis of the response revealed a number of weaknesses as well as generated key lessons for future responses (Table 3) (Shin; Lin 2018; Ling, 2017; Canceddat et al, 2016; International Rescue Committee, 2016; Muriuki).

Gaps in Response	Recommended Action
Failure of international NGOs to	> International NGOs need to better understand the culture and
acknowledge the role of context	political context for technical aspects of the response
and politics undermined the	> NGOs should complement proper medical care with strong
effectiveness of the technical	interventions at community level
response	

Table 3 Lessons learned from Ebola Response

Gaps in Response	Recommended Action
Poor coordination between NGOs and government actors during the early response stifled response efforts at all levels and led to overlapping activities and duplicative efforts Unwillingness of NGOs to disclose project budgets made it difficult to forecast available donor aid and affected community trust in	 → Government should put in place a strong coordinating mechanism with clear roles and responsibilities to bring more cohesion and coherence to the response → NGOs should support government structures instead of creating their own, which may lead to further fragmentation of the system → Put in place systems to bring greater transparency to the response process
response activities Slow ability of international NGOs to shift from a development to an emergency approach	 NGOs presenting themselves as emergency responders need to ensure they have the capacity to rapidly deliver services NGOs need to place developmental priorities second to saving lives and preventing spread of outbreaks during an epidemic NGOs need to be flexible throughout course of an epidemic to respond to evolving needs
Delays in NGO response to the crisis Preference of governments to deal	 NGOs should adopt a more proactive approach Government should eliminate potential movement restrictions which may slow down response Local governments, bilateral and multilateral partners need to
with bilateral and multilateral partners while ignoring smaller NGOs especially in decision making.	understand and appreciate that local NGOs (with already established tight relationships with local residents), have a central role to play in pandemic response. — International NGOs may reinforce local NGOs with technical and financial assistance.
Lack of continuation of international NGOs activities after the outbreak affected sustainability of initiatives and the transition from the emergency Ebola response to a long-term health system Prescriptive approach in terms of how funding should be spent unintentionally limited options for	 To improve the current response systems, response activities during the crisis should continue after the crisis so that those changes can strengthen a community mitigation and preventive plan and facilitate transition from emergency Ebola response to a long-term health system International organizations may consider ways to develop and sustain relationships with local NGOs for a long-term disaster response operation in developing countries More flexible funding mechanisms would likely have enhanced a more robust response to the Ebola epidemic
unintentionally limited options for implementation and stifled innovation	

Country level implications

The COVID-19 pandemic has exposed the fragility of health systems worldwide (including EMR) and highlighted the need to scale-up public health capabilities, infrastructures and human capacities to respond effectively to growing demands without overwhelming the health system. This means that governments need to work in close partnership with a wide array of agencies and institutions to achieve the desired goals.

As described earlier, NGOs have the presence, skills and experience to contribute substantially to the pandemic response; yet, their involvement so far has been suboptimal given the scale of the problem. Harnessing the role of NGOs early on and assigning clearly defined responsibilities can significantly contribute to an organized and efficient response (Laverack, 2017). Ultimately, a country's success in fighting COVID-19 will come from leadership, planning, and cooperation across governmental and non-governmental entities to make the most of each partners' assets and maximize the response needed to mitigate the widespread and devastating pandemic (Table 4).

Entity	Recommended Action				
Local and	ightarrow Step beyond their traditional responses in order to address public needs in				
international	communities and contribute to the control and the mitigation of outbreak				
NGOs	\rightarrow Adopt a more proactive approach to pandemic response				
	ightarrow Work with government to identify what critical core services they can provide				
	and ensure they have the capacity to rapidly deliver. Services could include				
	one or more of the below:				
	\rightarrow Public health education and community empowerment				
	ightarrow Provision of response training to local leaders and public health staff				
	ightarrow Provision of medical supplies and hygiene kits				
	\rightarrow Contribution to social solidarity				
	ightarrow Coordination of fundraising activities and volunteers				
	ightarrow Provision of support to government in identifying unmet needs and				
	managing logistics				
	ightarrow Participation in contact testing, surveillance and case management				
	ightarrow Provision of social support and care to communities and vulnerable				
	populations affected by social distancing measures				
	\rightarrow NGO Networking and collaboration				
	\rightarrow Continuation of NGO's role				
	ightarrow Coordinate with other NGOs and government actors to avoid overlapping				
	activities and duplicative efforts				
	\rightarrow Support government structures instead of creating their own, which may lead				
	to further fragmentation of the system				

Table 4 Recommended action for different entities

Entity	Recommended Action
International	ightarrow Be flexible throughout course of the pandemic to respond to evolving needs
NGOs	and priorities
	ightarrow Place developmental priorities second to saving lives and preventing spread
	of outbreaks during a pandemic
	ightarrow Provide local NGOs with technical and financial assistance as they are well
	positioned to contribute to the crisis in terms of their geographical location
	and knowledge of local community structures
Governments	ightarrow Strengthen stewardship function, including harnessing existing NGO
	capacities, coordinating and integrating efforts across different partners and
	steering the response in a rapidly changing situation
	ightarrow Promote and strengthen the role of NGOs in pandemic response and create
	clear and transparent avenues of communication
	\rightarrow Conduct quick assessment of key service gaps that NGOs can fill
	ightarrow Work with NGOs to identify and map the resources and capacities available
	within NGOs
	ightarrow Create greater links between government, bilateral and multilateral partners
	and NGOs
	\rightarrow Establish different clusters or pillars at city/governorate/province level to
	bring the different stakeholders together in a common platform for more
	effective response (Laverack, 2017)
	ightarrow Adopt a proper coordination model/mechanism with clear roles and
	responsibilities to bring more cohesion and coherence to the response
	ightarrow Eliminate potential movement restrictions to allow NGOs to respond in a
	timely manner and improve effectiveness of NGOs' responses in current and
	future epidemic outbreaks (Shin et al, 2018)
	\rightarrow Facilitate NGOs access to timely risk information (Shin et al, 2018)
	\rightarrow Involve NGOs in the country's pandemic preparedness planning and response
	plans

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Annexes

Annexes

Annex I: Measured adopted by non-governmental organizations in other countries

to combat COVID-19

Measures	Description			
China				
(Lieberman, 2020; Sn	nape, 2020; IFRC, 2020, Save the Children, 2020).			
Public health education & community	\twoheadrightarrow National Red Cross Societies are engaging people and			
empowerment	communities – online and offline – in helping prevent			
	misinformation and reduce fear and improving hygiene by			
	promoting effective measures such as handwashing.			
	\rightarrow Across some parts of China, the Red Cross Society of China			
	staff and volunteers are carrying out health education and			
	promotion activities			
Provision of medical supplies and	> Save the Children China has delivered 36,000 face masks			
hygiene kits	from a storage facility in Indonesia to hospitals in Wuhan,			
	with support from local volunteers.			
	\rightarrow Project HOPE, a relief organization which has operated in			
	China since 1983 has delivered over 2 million face masks,			
	11,000 protective suits, and 280,000 pairs of exam gloves			
	public hospitals in Wuhan, in addition to more than 365,00	0		
	face masks and other protective gear to the Shanghai			
	Children's Medical Center and the Hubei Provincial Charity			
	Federation in the first two weeks of February 2020.			
	ightarrow Civil society organizations' professionals and volunteers ha	ive		
	traced and challenged the deployment of protective masks			
	and other vital resources by officially backed charities			
	> Establishing a project specifically with the purpose of			
	purchasing and distributing medical resources to Wuhan an	۱d		
	the surrounding cities			
Participation in contact testing,	\twoheadrightarrow Across some parts of China, the Red Cross Society of China			
surveillance and case management	staff and volunteers are checking the temperature of			
	members of the public and responding to emergency callou	ts		
	to people with fever			
Provision of support to government in	> Médecins Sans Frontières has offered to support health			
identifying unmet needs & logistics	authorities in mainland China and Hong Kong.			
management	ightarrow Civil society organizations' professionals and volunteers ha	ive		
	produced policy recommendations, and organized teams al	ble		
	to deliver goods directly to hospitals.			
	Romania			
	insider, 2020; Save the Children, 2020)			
Coordination of fundraising activities &	ightarrow Save the Children Romania announced the opening of an			
volunteers	emergency fund for the immediate support of the medical			

Measures	Description				
	system, with a focus on the emergency care sections for children, maternity and newborn intensive care units. 				
Provision of social support and care to communities and vulnerable populations affected by social distancing measures	The Romanian Red Cross joined the fight against coronavirus. It helps people who are in self-isolation with food and hygiene products				
NGO networking & collaboration	Several non-profit organizations (NGOs) and foundations in Romania have decided to join the fight against the novel coronavirus and raise funds for the local healthcare system				
	Hong Kong				
Provision of social support and care to communities and vulnerable populations affected by social distancing measures	 (Westbrook, 2020) → KELY Support Group, which works closely with many schools, is providing video chats with young people for mental health support during the coronavirus outbreak. 				
Hawaii					
NGO networking & collaboration AND Provision of social support and care to communities of vulnerable populations affected by social distancing measures	 (Big Island Now, 2020) → Coordination with Federal State and NGO (non-governmental organization) partners to help address medical responses and provide education programs to the community on the novel coronavirus 				
USA (Lamb, 2020; Save the Children, 2020)					
Provision of social support and care to communities and vulnerable populations affected by social distancing measures	 CTB is partnering with World Central Kitchen, a not-for-profit non-governmental organization has introduced pay-what-you-can and free meals at their City Centre location to help support vulnerable community members during the COVID-19 crisis. In the U.S., Save the Children and No Kid Hungry have partnered to help make sure schools and community programs have the support they need to keep feeding vulnerable children, as well as provide books, games and 				
	other educational materials along with afterschool and summer programs to help kids make up for lost time in the classroom.				
Iraq (NGO coordination committee for Iraq, 2020)					

Measures	Description
Provision of social support and care to communities and vulnerable populations affected by social distancing measures	NGOs could also support in preparing separate rooms in a building to ensure isolation and food and medicine supplies for patients inside the hospitals during the quarantine period.
Coordination of fundraising activities & volunteers	→ Some foreign NGOs working in the health sector have said they can utilize 5-10 percent of their budget in combating the novel coronavirus,
Provision of social support and care to communities and vulnerable populations affected by social distancing measures	Under the area of home quarantine and health kits, the foreign NGOs have said they would be providing food, water and medical aid to individuals or families who are infected and need to be separated from other family members or the community.
	Africa
(PQMD, 2020; Jerving, 2	2020; Byatnal, 2020; Holmes, Boyce & Katz, 2020)
Public health education & community engagement Provision of medical supplies & hygiene kits Provision of support to government in	 NGOS recognized the importance of engaging with communities to discuss how the virus spreads and ways to avoid getting sick. Engagement with communities to explain how they can avoid the virus and what needs to happen when someone in the community contracts the virus. It also includes setting up systems for feedback from communities Consistent community engagement and control of the spread of misinformation Part of preparedness measures for NGOs in Africa include ensuring access to personal protective gear — like masks and gowns. The Alliance for International Medical Action is working with
Provision of support to government in identifying unmet needs & logistics management	The Alliance for International Medical Action is working with national governments to identify resource gaps in areas such as patient care, logistics and human resourcing
Participation in contact testing, surveillance and case management	INGOs will play an oversized role in the implementation of prevention, detection, and response to emerging infectious epidemics in Africa than they would in other settings.
Provision of response training to local leaders and public health staff	CRS began programs in Senegal focused on community-based infectious disease surveillance that includes training community volunteers on the signs and symptoms of eight infectious diseases
NGO networking & collaboration	Before covid-19 reached the African continent, NGOs started preparing to contain the virus by conducting meetings to

Measures	Description
	 discuss how to prepare in case the coronavirus reaches Africa. → World Vision, for example, has convened an oversight group and is assessing capacities to respond → WHO hosted meetings with governments and NGOs in Africa to provide updates on the situation and outlined preparedness measures → NGOs across the continent are passing along information to their field teams to prepare for a potential outbreak. They are also meeting with national ministries of health → In Nigeria, A number of intercountry and regional collaborations have been established with the goal of ensuring shared capabilities. → World Vision has convened a global executive oversight group for COVID-19 and its recommending all of its offices in Africa and Asia take preparedness measures such as assessing internal capacities to respond and looking into how it might procure masks. → In Kenya, Médecins Sans Frontières is part of a national task force to organize preparedness.
Continuation of NGO's role	 Medair developed its contingency plans and readiness checklists for disease emergencies — including considerations of risk for on-the-ground staff and the scaling-up of interventions It has been suggested to benefit from the lessons learned to address the Ebola virus in 2014 and to use the already existing structures for the Ebola response as a basis and scale them up

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