

The New Way of Working

Strengthening the Humanitarian, Development, Peace Nexus



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Opportunity and obligation

- Humanitarian interventions to look further ahead and seek connection with HSS
- Development workstreams and policy dialogue not to stop but adapt, target fragile and conflict affected areas in a more operational manner.
- Need to sit around the same table to work on issues of overlap and connection, identify health system bottlenecks that require collaboration

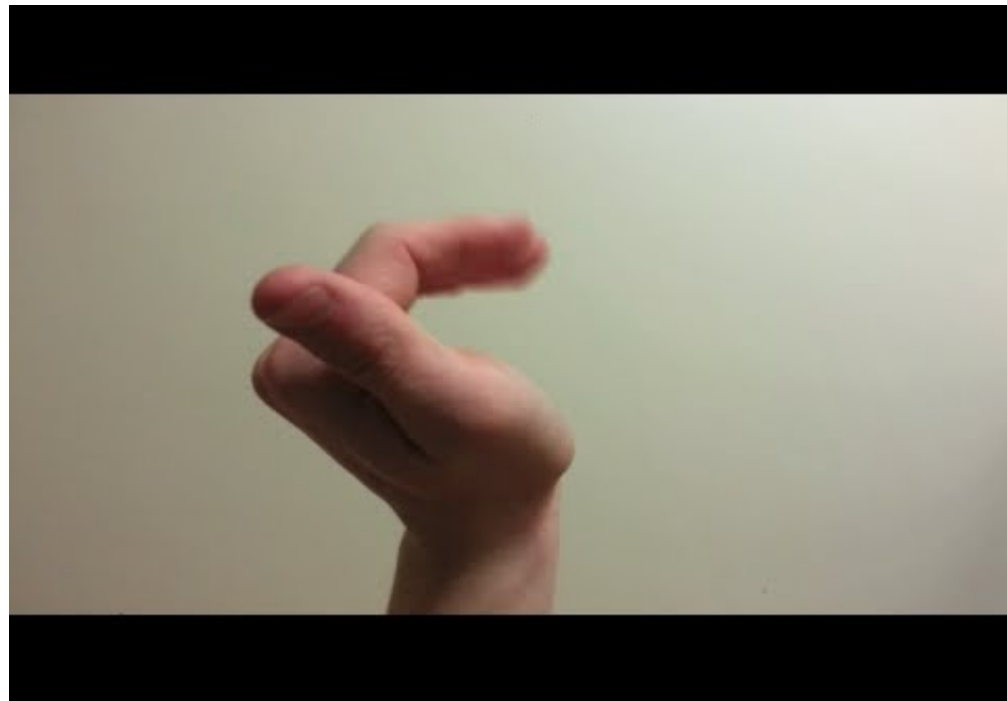
The Humanitarian-Development Divide

	Humanitarian	Development
Culture/Approach	Substitution/parallel	Complementarity
Outlook	6-12 months*	5-10 years
Coordination/ Leadership	System-led	Government- led
Planning Frameworks/ Tools	HRP/HeRAMS	UNDAF/NHSP/ SARA
Legal Frameworks	Humanitarian Principles/ IHL	Sovereign Law, Aid effectiveness principles
Types of Settings	Fragile/ Unwilling	Stable/Willing



Clapping with one hand???

And the other tied behind our back.....



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New Way of Thinking: 2016 Global Processes

Agenda 2030



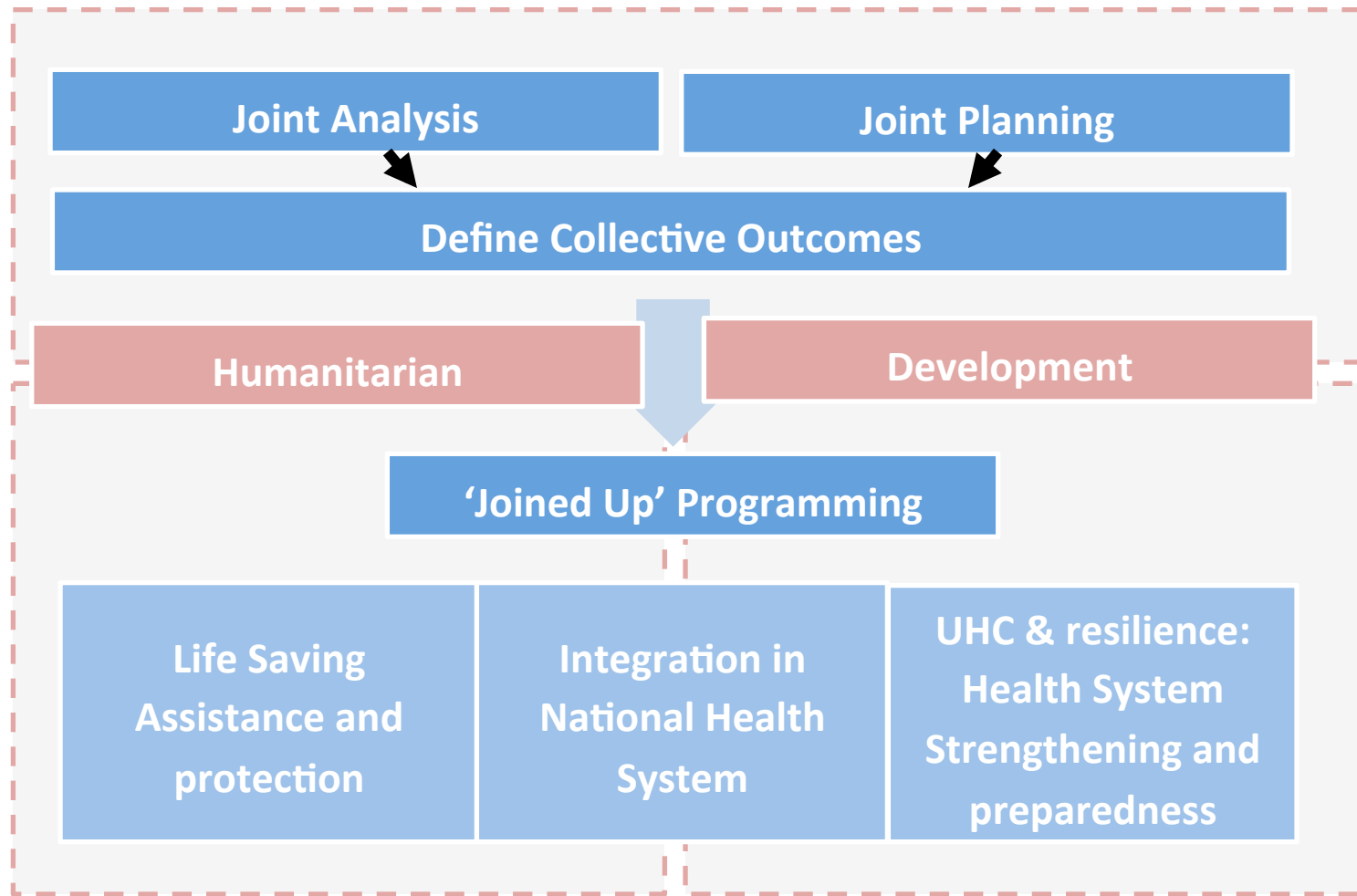
“Reach the Furthest First”

Agenda for Humanity



“Leave No One Behind”

Bridging the Hum-Dev Divide in Health



A new way of working

- Humanitarian interventions should focus on integration, early recovery and transition to local authorities as early as possible
- While development oriented workstreams should target fragile and conflict affected areas in a more operational manner.
- Review ongoing activities in fragile contexts and determine degree to which they are both conflict sensitive.

Adapt collaboration to the context

Three characteristics:

1. Responsibility to protect population
 2. Capacity
 3. Stability of context: Security/Access
- Implications of each for joined analysis, planning, and collective outcomes
 - Determines relationship of the international community with government and authorities



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A new way of working

HDPN opportunities for Health



Photo: WHO/C. Haskew



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HDN for health

1. Joint analysis: bringing together

- humanitarian assessments (MIRA/HNO/HeRAMS, etc),
- health sector performance/bottleneck/capacity assessment
- all hazard risk analysis, and
- context and conflict analysis



HDN for health

2. Define collective outcome:

- SDG3: As overarching goal Universal Health Coverage with financial protection, and resilience of the health system and communities against shocks.

HDN for health

3. Simple, flexible, **joint operational planning** at national and subnational level:

- Integrating where possible both humanitarian and development support in operational plans.
- Supported by Multi Year HRP, and a National Health Strategic Plan that prioritise areas and populations in most need,
- ‘Transition plan’ formulated that clarifies HDN approach during the crisis

Implementing HDPN for health

1. Focus on service delivery:

- EPHS and health financing with social & financial protection
- Address health system constraints for its implementation, and
- Address barriers from HH & community perspective
- Advocate for protection of health care



Implementing HDPN for health

2. Preparedness for additional acute emergencies

- Risk management for all hazards, including health security and IHR core capacities
- Strengthen investigation, control and response capacities

Implementing HDPN for health

3. Governance & partnership:

- Maintaining policy dialogue during the conflict
- District Health Management & community engagement
- Simple, flexible, joint planning at (sub)national level
- Coordination architecture that provides links between humanitarian and development partners, and other sectors
- Conflict sensitive programming
- Commitment to humanitarian principles & principles for Aid Effectiveness





Thank You...



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