RESEARCH SNAPSHOT

Research for health in humanitarian crises

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Resilient health systems learn, innovate, and share decision-making

This study suggests that resilient health systems- those which maintain effective service delivery in the face of shocks or crises- may be those with the capacity to innovate and learn from mistakes.

How a health system responds to a pandemic

This study focused on the United Nations Refugee and Works Agency in the Near East (UNRWA), aiming to find out if and how UNRWA is resilient in the face of COVID-19 and what was at the core of this resilience.

They found that an open culture of learning, sensitivity and commitment towards beneficiaries, and autonomous decision making are critical for meeting population needs. In addition, being historically present, providing services and interventions that are contextually relevant, builds trust with the community.



Health staff at Beit Hanoun HC in Gaza wearing full personal protective equipment to protect themselves and others from the transmission of COVID-19 virus. @ 2020 UNRWA Photo Dr. Nisreen Halabi (Head HC)

Background

How to maintain effective health service delivery in the face of crises, shocks and stressors has long been debated. Health systems which can do this as well as learn from this experience and strengthen their services, structures and organisations - are labelled resilient. However, it is still unclear what builds and enables resilience, especially in the face of unprecedented global shocks such as the COVID-19 pandemic. UNRWA supports 5.7 million Palestinian refugees with primary health care in addition to other services. Despite operating under extreme stress and diverse shocks since inception, this health system has managed to grow and strengthen its operations. This study built on an existing research partnership to inform programming of UNRWA and other agencies in the region.

How the research was conducted

Researchers collected data on how trust in UNRWA relates to the effectiveness of both routine service delivery and COVID-19 response. Interviews and online surveys were conducted with 38 community members, UNRWA headquarters and emergency preparedness staff, health managers and professionals (nurses, doctors, laboratory staff) and staff of Social and Relief Services across UNRWA health systems in Gaza and Lebanon.

Key findings

- UNRWA health systems in Gaza and Lebanon adapted service delivery and introduced new services to meet the needs of populations during COVID-19.
- Emergency preparedness and planning is a core resilience capacity of UNRWA which has been honed across multiple security related shocks. While COVID-19 was a new type of shock, the agency used similar strategies for preparedness, including collaboration and communication via emergency coordination bodies and shared decision-making with field offices.
- The ability to rapidly innovate and adapt service delivery strategies, and implement and evaluate strategies in real time, allowed the agency to deploy effective responses. A learning culture was also key.
- Described as "a pillar" and "a unifying body" by Palestine refugees surveyed, UNRWA is constantly expected to provide more and better services.

Implications for humanitarian practitioners and policymakers

While this research was conducted within a specific health system, lessons may be widely useful to other systems dealing with a long-term humanitarian crisis.

- Humanitarian practitioners and policymakers should consider the diverse underlying capacities that sustain health system resilience and invest in strengthening these collectively rather than focusing on single targets.
- While emergency preparedness and planning may be critical to meeting challenges like COVID-19, preparedness and planning is only effective where collaborative structures and networks exists which can implement, review and revise plans as necessary. At UNRWA, the collaboration between Health and Education Programmes and the joint decision making with the Gaza Field Office enabled the prompt establishment of medical points at schools, two months after the inception of the pandemic, to serve as triage.
- A culture of learning, rewarding employee innovation in service delivery and allowing realtime adjustment of responses, is critical in sustaining resilience in the face of immediate shocks and longer-term stressors.
- Demonstrating compassion towards beneficiary populations, providing services consistently and being responsive to community needs create a sense of belonging, a key driver of trust.

Recommendations for future research

More research is required on enablers of resilience capacities in different settings – for example, in complex emergency settings versus more stable ones, or high income versus low - and across different kinds of shocks and stressors. Strategies for building resilience capacities in different contexts should also be developed and evaluated.

About the study team

This study was conducted by Queen Margaret University, Edinburgh and the United Nations Refugee and Works Agency in the Near East.

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Keywords

Health system resilience, Palestine refugees, UNRWA, emergency preparedness and coordination, COVID-19.

Articles and further reading

Elrha project webpage https://www.elrha.org/project/trust-and-resilienceduring-covid-19/

IGHD project webpage https://bit.ly/3NOJVdN



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http://www.elrha.org/programme/research-for-health-in-humanitarian-crises/