

Report of the
Collaborative Council Task Force Meeting on
Water Supply & Sanitation
for Emergencies



Geneva, 12-13 August 1996

Summary of Proceedings and Decisions
(Special Working Group for Emergencies - Water Supply and Sanitation)

TABLE OF CONTENTS

Part I

Executive Summary	
Conclusions and Recommendations	1
Mission Statement	2
Key Speakers	2
Composition of Special Working Group for Emergencies	3
Mid-Term Workplan of the Special Working Group for Emergencies	3
Key Points Made at the Closing Session	4
Follow-up Meeting with the Department of Humanitarian Affairs	4
Priorities Identified	5

Part II

Summary of Presentations	
Dr. W. Kreisel, Executive Director, Health and Environment, WHO	6
Mr. P. McDermott, Deputy Director, Emergency Programmes, UNICEF	8
Mr. R. Wirasinha, Executive Secretary, Water Supply and Sanitation Collaborative Council ..	10

Part III

Appendix 1

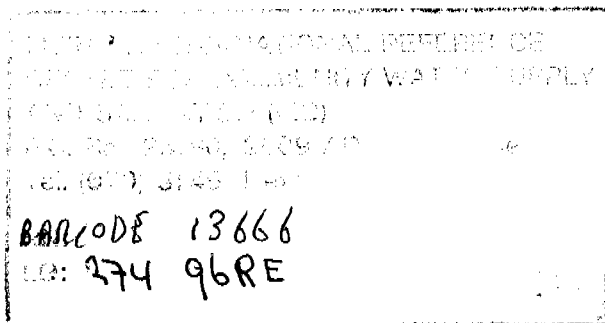
List of Participants

Appendix 2

Background

Appendix 3

Agenda



PART I

Executive Summary

At its global meeting in Barbados in November 1995, the Water Supply and Sanitation Collaborative Council (WSSCC) having recognized the urgency and growing needs and complexities of dealing with human suffering arising from armed conflict, natural disasters, environmental and climatic conditions and changes, requested UNICEF to organize a Task Force to encourage greater interagency collaboration and coordination of water supply and sanitation programmes of assistance in emergencies. The specific objective of this Meeting was to consider the formation of a Special Working Group for Emergencies (within the Collaborative Council) to address the above concerns. The activities of the Special Working Group would deal with critical gaps in coordination, collaboration, communication and advocacy in emergencies with respect to Water Supply and Sanitation (WSS) programmes which currently are not being addressed. It is the intention of the Collaborative Council to complement, without duplicating, the important work being done by other fora on emergencies, such as: the NGO Forum on Emergencies under the joint leadership of OXFAM and ICRC, the Interagency Technical Cooperation on Water and Sanitation Issues (primarily on refugees) under the leadership of UNHCR, other working groups of the Collaborative Council, and the role of overall coordination in emergencies by the Department of Humanitarian Affairs (DHA).

Because the WSSCC is an informal international network of water supply and sanitation professionals, participation in the task force is based on the expressed interest and availability of individuals and their organizations

This Task Force meeting was held in WHO Headquarters, Geneva on 12-13 August 1996. WHO acted as host, while UNICEF acted to convene and coordinate. UNICEF also provided financial support for three national participants from Angola, Bangladesh and Cambodia. The main objectives of the Meeting were to establish a rationale, administrative structure and modes of operation of the Special Working Group for Emergencies. A total of 23 representatives from UN agencies, national governments, donors and NGOs participated.

Conclusions and Recommendations

During the meeting discussions, the participants strongly agreed that there was sufficient need to form a Special Working Group for Emergencies as a formal activity of the Collaborative Council. Core members of the Working Group were identified, comprising representation from Cambodia, Rwanda, OXFAM, MSF, ICRC, IFRC, WHO, UNHCR, DHA and UNICEF (coordinator). Priority activities were established for the immediate and long-term including: improving coordination and collaboration of WSS activities in emergencies; accepting the recommendations of the Meeting on Sanitation in Emergencies in Oxford, December 1995; developing a set of guidelines on professionalism and code of conduct in emergencies; the urgent

need for joint assessment missions and implementation strategies in emergencies; the preparation of a key advocacy paper on the concerns of the Collaborative Council on WSS in emergencies for the Mid-Term Review of the Barbados Action Programme - Collaborative Council (Meeting of the Coordinators and Task Managers), London, 13-14 November 1996, and the development of a broad framework for joint collaboration in emergencies, particularly at country level. In addition, the participants also formulated a mission statement of the Collaborative Council Special Working Group for Emergencies.

Mission Statement

Water supply and sanitation are critical for the health, and indeed the very survival, of people affected by emergencies.

There is common agreement that inadequate provision of water and sanitation services in emergencies is linked to poor coordination and collaboration between agencies.

Therefore, the Special Working Group on Water Supply and Sanitation for Emergencies will undertake advocacy of needs in the sector and promote improved coordination of and collaboration between agencies.

Key Speakers

Dr. Wilfried Kreisel, WHO Executive Director, Health and Environment, made opening remarks on behalf of WHO and also gave final comments at the closing session. Mr. Jim Howard, Consultant, representing the British ODA, acted as Chairperson. The meeting also featured a presentation by Mr. Peter McDermott, UNICEF Deputy Director for Emergencies, Geneva, on the challenge ahead regarding Water and Sanitation problems and needs in emergencies. Mr. Ranjith Wirasinha, Executive Secretary, Water Supply and Sanitation Collaborative Council provided an overview of the role of the Collaborative Council, as well as its function within the context of emergencies. Related presentations were also made by Mr. Claude Rakotomalala, UNHCR Senior Sanitary Engineer, Geneva on the work of the Interagency Technical Cooperation on Water and Sanitation Issues, Mr. Giorgio Nembrini, ICRC Senior Water and Sanitation Engineer, on the work of ICRC in emergencies and Mr. Maurice Herson, Emergencies Coordinator, OXFAM on the work of the NGO Forum on Emergencies, particularly on the follow-up to the Meeting on Sanitation in Emergencies, Oxford, December 1995.

Composition of Special Working Group for Emergencies

A small core group consisting of representatives of Cambodia, Rwanda, OXFAM, MSF, ICRC, FRC, WHO, UNHCR, DHA and UNICEF (coordinator) was established to work out the details of the new Special Working Group and to report on progress at the Mid-Term Review of the Barbados Action Programme - Collaborative Council (Meeting of Coordinators and Task Managers), which will be in London, 13-14 November 1996. In addition, a Mid-Term workplan was established.

Mid-Term Workplan of the Special Working Group for Emergencies

Major Activity	Expected Outcome	When
1. Enhance coordination at global, regional and country levels, particularly at country levels.	Short advocacy paper <ul style="list-style-type: none"> ● with diagram of collaboration among organizations, and key information on past meetings as well as list ● Summary of lessons learned from top 10 emergencies ● consequence of lack of coordination 	Nov. 96 C.C. Meeting, London
2. Promote Sanitation in Emergencies	Statement supporting the recommendations of the Meeting on Sanitation in Emergencies, Oxford, December 1995	Dec. '96
3. Promote Professionalism in Emergencies	Set of Guidelines on professionalism and code of conduct	Mar. '97
4. Advocate for Joint Assessment Missions and Implementation Strategies	Position paper	Mar. '97
5. Encourage others to work within a broad Framework for joint collaboration at country level	Set of recommendations	Mar. '97
6. Prepare a "Road Map" (Vision) for future activities of the Collaborative Council in Emergencies	Outline of Strategy Document	Mar. '97

Key Points Made at the Closing Session

Mr. Ngy Chanphal, Under Secretary of State, Ministry of Rural Development, Royal Government of Cambodia:

“Cambodia has suffered twenty years of war, disruption and emergencies, and the Government of Cambodia is now implementing rehabilitation and development programmes that need international support.”

Mr. Felix Matias Neto, National Director of Water Affairs, Ministry of Energy and Water, Angola:

“There is tremendous pressure on the limited resources within Angola, caused by the current flood of refugees, therefore many of the present programmes are of an emergency nature.”

Mr. S.A.F. Chowdhury, Secretary, Ministry of Local Government, Rural Development and Cooperation, Bangladesh:

“It is of great importance that the agencies working and intending to work in Bangladesh cooperate more closely with the Government’s programmes, and understand the Government’s national and regional plans, both in emergency and in long term programmes.”

Follow-up Meeting with the Department of Humanitarian Affairs

Following the closure of the Task Force meeting, a three-person delegation consisting of Mr. B. Doyle of UNICEF, Mr. J. Howard of ODA and Dr. D. Warner of WHO, met at the Palais des Nations with Mr. Martin Griffiths, Director of the UN Department of Humanitarian Affairs (DHA). Due to other urgent matters at the time of the Task Force meeting, DHA were not able to participate. The relevance of the new Special Working Group on Water Supply and Sanitation for Emergencies to the DHA was discussed. It was pointed out that the main concern of the special working group, that of interagency coordination and collaboration in emergencies, also was a major concern of DHA. It was agreed that the efforts of the special working group could assist DHA in its overall role as coordinator of UN emergency activities but that a close working relationship between the special working group and DHA was essential for this to happen. Mr. Griffiths stated that DHA welcomed the establishment of the special working group and gave assurances that DHA would be an active participant in its future activities. It was further agreed that until Mr. Griffiths could identify a DHA representative to participate in the Special working Group activities, information on the activities be sent directly to him.

Priorities Identified (in order of importance)

1. Justification for coordination, highlighting: assessment of past experience, advocacy needs for coordination and collaboration, and consequences of lack of coordination
2. Advocacy for more emphasis on sanitation
3. Professionalism: Standards for recruitment
Orientation towards emergencies
4. Joint assessment and joint implementation in support of linkages between short and long-term development needs
5. "Road map" for future interactions of the Collaborative Council within emergencies
6. Framework for sector collaboration at country level
7. Diagram of collaborating organizations, including list of key meeting on emergencies
8. Advocacy to raise profile of WSS in emergencies, including the mobilization of resources
9. Linkages between sectors (Health, Nutrition, Household Food Production and Water Supply and Sanitation) and organizations
10. Ethical issues, codes of conduct
11. Summary of experience and lessons learned in water supply, sanitation and the environment from the "top ten" WSS emergencies

PART III

Summary Of Presentations

Dr. Wilfred Kreisel, Director, Environmental Health Division, WHO

It is a pleasure for WHO to host the first meeting of the Collaborative Council's Task force on Emergencies which has been convened by UNICEF, our partners in many health related subjects including Water Supply and Sanitation development for the underprivileged peoples in the world.

Emergencies contribute to the plight of the poor and exacerbate their water supply and sanitation problem, with consequent adverse health consequences. Emergencies be they natural, as in the case of earthquakes, drought and volcanic eruptions, or man-made as in the case of civil strife, disruption of the life of the population and their displacement, result in the breakdown of services and the need to respond rapidly and effectively to rectify the situation. Under such conditions, together with food and shelter, the first priority is to provide an adequate and safe supply of water and an effective means of excreta disposal. If this is not done, water-borne diseases quickly spread in the cramped conditions which are a feature of refugee camps and other temporary settlements created to deal with such disasters.

It is not only water-borne diseases, and particularly diarrhoea, which pose health threats under emergency conditions. The dislocation of normal life and the lack of infrastructure create conditions which are conducive to upsurges in other diseases including malaria resulting from lack of drainage and AIDS as a result of social/family breakdown.

Environmental conditions are also a major concern under emergency conditions. In addition to drainage problems with the associated water ponding, garbage often poses a problem due to lack of organization for its collection and hygienic disposal. Such unsanitary conditions provide breeding grounds for disease vectors such as rats and flies.

Poor health status is the norm under emergency and refugee situations with physical injuries adding to the ravages of disease. This is particularly the case where the emergency results from civil unrest and/or ethnic conflict.

All of the health problems, and in particular the conditions caused by water-borne disease, are also augmented by malnutrition and generally run-down physical conditions. These problems are most serious among high-risk groups such as women and children. Many of the children have frequently become orphans as a consequence of the emergency and refugee situation.

There are other health-related emergencies such as cholera outbreaks and the Ebola outbreak in Zaire in 1995, which also require rapid and coordinated responses. A quick response to ensuring safe water and sanitation is particularly important in the case of cholera epidemics.

Unfortunately, emergency situations are becoming an ever increasing feature of our work today. We only have to look at the former Yugoslavia, Rwanda, Burundi, Somalia, Liberia, etc. to appreciate the need for concern and the need for the development of capacity at the international level to respond in a coordinated fashion.

In recognition of this situation, the Collaborative Council, at its Third Global Forum, Barbados (30 October - 3 November 1995), established its Task Force on Emergencies. UNICEF was identified as a Council member with a critical role to play in relation to emergencies. As such, they were requested to act as a focal point and take the lead in bringing together a group of Council members to discuss a framework for developing action plans for responding to emergencies. The group identified comprises a well-balanced mix of countries which have, during the course of recent years, experienced different types of emergencies (Angola, Bangladesh, India, Mauritania, Mozambique, Philippines, Zimbabwe), major international NGOs (Water Aid, OXFAM, RedR) and worked with appropriate UN bodies (UNICEF, UNHCR, WHO).

In the light of the realities of the situation, WHO has reviewed and strengthened its capacity to respond to emergencies. An important element of this effort is the Organization's support role to national efforts under emergency situations within the framework of a coordinated response by our external support partners. Here it should be noted that the Collaborative Council places emphasis on the need for countries themselves to prepare operational plans for dealing with emergencies. On the other hand, it is important that the international community also has well-developed plans and clearly identified responsibilities to respond without delay.

In 1993, the Forty-Sixth World Health Assembly addressed the questions of emergency and humanitarian relief operations and health and medical services in times of armed conflict, and requested WHO to strengthen its capacity.

In 1994, the Forty-Seventh World Health Assembly took up the question of collaboration within the United Nations system and with other inter-governmental organizations in response to emergencies, while in the following year, the Forty-Eighth Assembly addressed the specific question of humanitarian action in emergencies.

The important issue of collaboration within the UN system and with inter-governmental organization under different emergency situations (nuclear accidents, violent conflict and refugee situations) was a major item on the agenda of the Forty-Ninth World Health Assembly in May of this year.

Violence was recognized as a leading worldwide public health problem, and as such, WHO was requested to initiate public health activities to address the problem through coordination of the Organizations technical programmes and through strengthened collaboration with government and other organizations of the UN system.

With regards to the coordination of emergency humanitarian assistance of the United Nations system, it should also be noted the Fifty-Seventh Session of the UN General Assembly urged the relevant organizations of the United Nations system to review; during the period 1995-1997, issues concerning their role and operational responsibilities, as well as their operative and financial capacities in relation to humanitarian programmes.

It is clear that the initiative of the Collaborative Council to establish a Task Force on Emergencies with the specific objective of addressing a coordinated and planned approach to the provision of water supply and sanitation, comes at an opportune time. Also, with WHO now playing a key role in health-related emergencies, we attach great importance to having been requested to host this meeting, which by bringing together countries, NGOs and UN system organizations should contribute significantly to the strengthening of the coordinated response related to water supply and sanitation in all types of emergency.

I would like to wish you well in your deliberations and look forward to the outcome and recommendations of this meeting which could be of guidance to us all in our future efforts.

Mr. Peter McDermott, Deputy Director, Emergency Programmes, UNICEF

On behalf on UNICEF and the Office of Emergency Programmes of which I am Deputy Director, based here in Geneva, today's gathering is important for three reasons: firstly, because it is an important time, secondly because the meeting itself is important and thirdly, the decisions of the meeting are extremely important.

The timing of the meeting is extremely fortuitous and important for two main reasons:

- changing of the global environment
- changes in the international relief system.

The Global Environment:

- is more and more complex; there are more dangerous emergencies
- The nature of emergencies has changed from intra to inter state, countries
- challenges to traditional relief delivery due to contested governance, sovereignty etc.
- the size of affected populations is unprecedented
- the immediacy of media, public sensitivity

International Relief Community

- Failings: Iraq, Somalia, Rwanda, Former Yugoslavia led to the creation of the

Department of Humanitarian Affairs (DHA)

- deaths Somalia and Rwanda were not overwhelming due to conflicts but due to cholera, diarrhoea, dysentery, etc.
- evaluations CDC Atlanta -Somalia, etc. Corane University
- Multidonor evaluation on Rwanda
- failing in particular in health, water and sanitation sectors
- need to learn lessons
- this calls for:
 - increased Professionalism
 - minimum standards
 - minimum qualifications -accreditations
 - codes of conduct
 - agreed on division on labour
 - accountability
 - coordination

There is an urgent need to review the concepts of intervention, principles, guidelines and a new emphasis on integration. What does this mean? Essentially that it is "no longer business as usual".

Enormous efforts have been made, but there is a long way to go - UNICEF itself is going through a major process of organizational adaptation:

- mission statement
- strategy paper
- rapid Response, etc.

At this meeting, we need to clarify :

1. the major issues facing the sector in emergencies
2. the coordination mechanisms which currently exists
3. where possible gaps are.

What are the challenges of this meeting?

- Look at linkages
 - water and war
 - Copenhagen principles
 - relief and development
 - standardization
- Predictability and consistency of response
- Southern expertise, involvement policy and implementation
- Raise profile WES donors and international response
- In addition to the technical look at people, software, other sectoral linkages.
- Need for much clearer view on coordination, what others are doing and what advances there are in the Collaborative Council & Water Sector?

This is an extremely important meeting, one with important decisions which will have far reaching consequences for us all in the future. We need to challenge ourselves - there is an urgent need for additional coordinating today, as well as for future Water Supply and Sanitation emergencies.

Mr. Ranjith Wirasinha, Executive Secretary, Water Supply and Sanitation Collaborative Council

The end of the cold war unfortunately did not as anticipated bring about a peace dividend but an escalation of unrest and wars. These, in addition to natural catastrophes, have resulted in a continuum of emergency situations and large numbers of refugees and have impacted adversely on the programmes and resources of many organisations and agencies at national as well as international levels. Resources have had to be diverted to meet the needs of emergencies, thereby limiting development programmes. Furthermore, agencies have been drawn at short notice to manage and provide the needs of these emergencies. Provision of water supply and sanitation has been the immediate, if not the first need. The situation calls for a framework for collaboration to make the best of available resources and the support of agencies involved and to provide guidance on the quality of emergency infrastructure to be provided particularly where the investments are likely to be heavy and the services to be provided more lasting. The weight of this burden and the need for a collaborative framework prompted many of the members of the Collaborative Council to make a call on the Council at its Third Global Forum in Barbados, to help work out such a collaborative and policy framework. Although the Council in the past did not involve itself in emergency activities, in appreciation of the importance of the need, endorsed the setting up of a task force for the purpose. UNICEF which today diverts a third of its resources to dealing with emergency situations was requested to co-ordinate the Task Force, which task it willingly accepted.

For those of you who are not familiar with the Collaborative Council and its work, I have distributed papers on the Council and its current programme of activities by way of a briefing and so shall not go into a detailed description. I would be happy, of course, to elaborate depending on need as we proceed with the business of this meeting.

The Council came into being in its present form, at the end of the Decade to make the best of limited resources through improved collaboration at all levels - global, regional and in particular at the country level and importantly, by involving all stakeholders.

It was the view that collaboration in specific terms would be most effective at the country level and with a globally accepted set of principles to support. The Council has carried out case studies on country level collaboration carried out in Asia, Africa and Latin America, and identified collaborative mechanisms/arrangements that may be adopted for different tasks under different conditions. These cover formal as well as informal arrangements, with informal arrangements being more effective in certain situations. These tools are presently being promoted through workshops and seminars. UNICEF fortuitously is again the lead agency for this task under the Council because of its extensive geographic presence and its past activities in providing assistance to governments to formulate national sector strategies, without which governments would have difficulty in playing its rightful role in co-ordinating sector activities and assistance.

The Council works towards its goals through two mechanisms - one, a biennial forum for consensus building to the extent possible and necessary, on ways and means to overcome barriers to progress in the sector, and the other, working groups/task forces in between such fora to identify/formulate the tools needed (ways and means) on which to develop consensus, at the biennial forum. The working groups/task forces are voluntary and international and representation of the North and South.

Membership in the Council is open to all those interested and concerned with progress of water supply and sanitation services for all and having affiliations to appropriate governmental and non-governmental organizations. No subscriptions are involved. About 200 to 250 members drawn from those who could contribute to the deliberations on the issues for discussion and/or could be helpful in follow-up action, will be invited to the forum. The Council limits its activities to developmental issues. Attendees at Council Meetings are encouraged to speak from their own experience and background and present their agency/country position only if relevant, in order to maintain objectivity. Resolutions are not accommodated at the fora and the Council works on consensus, the collective wisdom being made available to countries, agencies and organisations to adopt, as they see fit.

The distribution of participants at this current meeting in Geneva is typical of the Council which embraces all and provides a neutral umbrella. The Council is very grateful to UNICEF for its role as Co-ordinator, WHO for graciously hosting the meeting, and ODA/UK for providing the services of a Facilitator. I thank all of you who have found the time to be here and contribute from your valuable experience and knowledge.

**Water Supply & Sanitation Collaborative Council Task Force Meeting
for Emergencies**

12-13 August 1996, Geneva

LIST OF PARTICIPANTS

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***Collaborative Council Task Force Meeting
on
Water Supply and Sanitation for Emergencies
at
The World Health Organization, Geneva
12-13 August 1996***

Background:

At its global meeting in Barbados in November 1995, the Water Supply and Sanitation Collaborative Council, recognizing the urgency and growing needs and complexities of dealing with human suffering arising from armed conflicts, natural disasters, environmental and climatic conditions and changes, requested UNICEF to facilitate a meeting of a small Task Force to forward greater inter-agency collaboration in emergencies.

This Task Force aims would be to establish, if agreed, a “**Special Working Group for Emergencies**” who would over a period of 12-18 months (or a shorter time frame) bring into being a structure that would ensure greater cooperation and effectiveness between all those involved in water, environment and sanitation programmes in emergencies.

This Special Working Group for Emergencies would continue to be under the auspices of the Water Supply and Sanitation Collaborative Council.

Among the needs being identified by Agencies, NGO's, government institutions and communities working directly or indirectly supporting emergency programmes, are:

1. Clear policies and guiding principles for emergencies in general, and possibly for specific geographical field operations.
2. Building of local capacity for emergency preparedness and action.
3. Specific emergency programme planning, management, monitoring and evaluation tools
4. Practical guidelines and possible assistance for field managers and technical staff involved in emergencies.

Challenge:

To address these challenges the Collaborative Council aims to build upon but not duplicate the excellent work which is ongoing primarily in support of refugee and large scale displaced populations. This work is being done by the NGO Forum on Emergencies under the leadership of

Oxfam and ICRC and by the Inter-Agency Technical Cooperation on Water and Sanitation Issues under the leadership of UNHCR. To complement this important work, the Collaborative Council Task Force for Emergencies would aim to review the full spectrum of emergencies (non displaced affected populations, those internally displaced and refugees) as a basis for identifying gaps in needs, especially for the development of more comprehensive approaches and sustainable solutions in the four main areas mentioned above .

Specific Objective of Meeting:

The specific objective of the Task Force Meeting is to consider the formation of a “**Special Working Group for Emergencies**” (within the Collaborative Council) to meet our increasing concern at the seriousness and extent of emergencies caused by human strife, environmental and growing climatic conditions and changes.

If a consensus is reached by the Task Force that the formation of a Special Working Group for Emergencies is of importance and practicable, it is crucial that the Task Force gives shape and form to its intent by producing:

1. A Task Force Statement, outlining their concerns and need for a Special Working Group for Emergencies.
2. The Terms of Reference for this Working Group.
3. Its goals.
4. Its Timetable (work plan over the next eighteen months).
5. Its Composition.
6. Its Funding.
7. Its Administration.
8. Its means of Communication within the Collaborative Council.
9. Its means of Communicating to a wider circle (press etc.).

Further, in determining the composition of the **Special Working Group for Emergencies** the Task Force should consider that it comprise a small core of sector professionals of no more than ten persons who fully represent all those who provide ongoing support to emergencies, as well as those who are actively involved in emergencies at field level. These would include representation of :

- a) national expertise from developing countries who have emergency experience, preferably from emergency through development phases;

- b) the donor community, especially those who continually provide emergency assistance;
- c) NGOs actively involved in emergencies, and;
- d) international agencies directly involved in emergencies at country level.

The **Special Working Group for Emergencies** may, as determined from time to time, draw on the larger community involved in emergencies to form specialized subgroups to work on specific areas of identified need such as the development of emergency management tools.

Venue/Host:

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Special Notes:

1) the location of the Conference Room for the Meeting will be posted on a notice board inside the main entrance of the WHO Building.

2) instructions (with map) on how to get to the WHO Building, Geneva will be provided when you check-in to your hotel in Geneva.

Dates: Monday 12th and Tuesday 13th of August 1996 (two days).

Meeting Coordinator:

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List of Invited Participants:

Donors: DANIDA, Dutch AID, ECHO (EU), ODA (UK) and SDC

Developing Countries: Angola, Bangladesh, Burundi, Cambodia, Rwanda and Sudan

NGOs: Federation of Red Cross, ICDDR, MSF, Oxfam and Red R

International Agencies: DHA, UNHCR, UNICEF, WHO and the World Bank

Other: ICRC

**Agenda
of the
Collaborative Council Task Force Meeting for Emergencies
12-13 August 1996 -WHO, Geneva.**

Specific Objective of Meeting:

The specific objective of the Task Force Meeting is to consider the formation of a **“Special Working Group for Emergencies”** (within the Collaborative Council) to meet our increasing concern at the seriousness and extent of emergencies caused by human strife, environmental and growing climatic conditions and changes.

Day One: Monday, 12 August

- | | |
|-------------|--|
| 09.00-09.15 | Opening of the Meeting and Welcome by Dr Wilfried Kreisel, Executive Director, Health and Environment Division, World Health Organization, Geneva. |
| 09.15-09.30 | Meeting Agenda and “The Challenge Ahead”, Mr. Peter McDermott, UNICEF, Geneva. |
| 09.30-09.45 | The role of the Collaborative Council within the context of Emergencies, Mr. Ranjith Wirasinha, Executive Secretary, Water Supply and Sanitation Collaborative Council |
| 09.45-10.00 | Coffee/Tea Break |
| 10.00-10.20 | Brief overview of the work of the Inter-Agency Technical Cooperation on Water and Sanitation in Emergencies, Mr. Claude Rakotomalala, UNHCR |
| 10.20-10.40 | Brief overview of the work of the NGO Forum on Emergencies, Oxfam & ICRC |
| 10.40-11.20 | Plenary Discussion of the Agenda and Objective of the Meeting: |

Is a “Special Working Group for Emergencies” needed ?. If not, what is needed in order to improve collaboration, coordination, greater complementarity and information exchange for enhanced emergency programme planning and implementation, and what tools do we need to achieve this objective?.

If a consensus is reached by the Task Force that the formation of a Special Working Group for Emergencies is of importance and practicable, it is crucial that the Task Force gives shape

and form to its intent.

11.20-11.50 Plenary Session to draft a statement, outlining the concerns of the Task Force and the need for a *Special Working Group for Emergencies*.

11.50-12.00 Formation of two Discussion-Groups on issues pertaining to:

Group One: Determine the Terms of Reference for the *Special Working Group for Emergencies*, its Goals, Timetable (work plan over the next eighteen months), its Composition and Funding.

Group Two: Determine the Administrative arrangements of the *Special Working Group for Emergencies*, its means of communication within the Collaborative Council and that of communicating to a wider circle (press etc.).

The approval of the drafts of the two Discussion Groups to be done in the plenary sessions of Day Two of the Meeting.

12.00-12.30 Discussion-Group Work

12.30-14.00 Lunch Break

14.00-17.00 Continuation of Activities of Discussion-Groups

Day Two: Tuesday 13 August

09.00-10.00 Presentation of Findings and Recommendations of the Discussion-Groups

10.00-10.30 Coffee/Tea Break

10.30-11.00 Continuation of Presentations

11.00-12.30 Plenary Session to Synthesize Outcome of Discussion-Groups

12.30-14.00 Lunch Break

14.00-15.00 Plenary Session: Continuation of Synthesis of Meeting

15.00-15.30 Coffee/Tea Break

15.30-16.15 Plenary Session: Draft Report of the Meeting

16.15-16.30 Closing of the Meeting