SUPPORTING PREPAREDNESS AND RESPONSE FOR COVID-19 AND BEYOND THROUGH THE WHO RESOURCE MAPPING (REMAP) TOOL

Overview and process for using the WHO REMAP tool for identifying technical and financial resources that can be applied toward COVID-19 plans

Supporting preparedness and response for COVID-19 and beyond through the WHO resource mapping (REMAP) tool: overview and process for using the WHO REMAP tool for identifying technical and financial resources that can be applied toward COVID-19 plans

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Acknowledgements

I.   Background

The ongoing COVID-19 pandemic has underscored the reality that many countries lack the necessary financial and technical resources and tools for preparedness and response. Given that countries with strong health systems have faced challenges to prevent, detect and control COVID-19, the pandemic has further highlighted the risk that all countries face from the risk of health emergencies.

The WHO Resource Mapping (REMAP) tool supports Member States, particularly low and middle-income countries (LMICs), to effectively implement national health security plans through the identification of financial and technical resources necessary to complete country priority actions. The process promotes strong collaboration and coordination between countries and partners based on data collected on country gaps and needs and partner activities and priorities, supports monitoring of health security plans, and facilitates the leveraging of disease-specific actions and investments for longer-term preparedness. The REMAP tool is in Excel, although an online version is currently under development and planned for launch in 2022. More than 15 countries within the WHO African Region have requested support to use the REMAP tool and process (1) since 2018, primarily to advance implementation of National Action Plans for Health Security (NAPHS) (2), with the tool providing information and visualizations on health security investments and activities supported by the government and partners at national and subnational levels, including detailing specific technical and geographical areas of support, needs and gaps.

For example, WHO supported the Nigeria Centre for Disease Control (NCDC) in 2019 and 2021 through REMAP in resource mapping for health security in each of the country's 36 states and federal capital territory, resulting in the mapping of more than $384 million in health security investments and activities supported by the government and 46 partners, while identifying significant funding gaps in immunization, laboratory and workforce development that need to be addressed for implementation of the NAPHS.

COVID-19 REMAP follows a similar approach as resource mapping for health security, with a more focused scope to specifically map resources that can address short-term COVID gaps. Piloting of COVID-19 REMAP in Chad, Niger and Senegal has been carried out in close collaboration with partners such as the European Commission's Directorate-General for International Cooperation and Development (DEVCO), the United Kingdom Department for International Development (DFID)'s Tackling Deadly Diseases in Africa (TDDAP) program and the World Bank-led Global Financing Facility (GFF). The GFF, a partnership to advance the global conversation on financing the Sustainable Development Goals (SDGs), includes the World Bank, the Bill and Melinda Gates Foundation, GAVI, Global Fund, the Japan International Cooperation Agency (JICA), the United States Agency for International Development (USAID), UNICEF, and other partners. As an example, the WHO REMAP

team and World Bank- GFF jointly supported the Ministry of Public Health Niger in resource mapping for COVID-19, an exercise that identified and detailed more than $30 million in COVID-19 investments and activities in Niger, both from partners and the government. The exercise demonstrated large gaps in funding for pillars in the country plan including infection prevention and control, health service capacity and quarantine sites.

II.   Target audience and purpose

This document is primarily aimed at decision makers and emergency managers within and across ministries and government bodies, as well as health security stakeholders including partners who require identifying and visualizing how existing investments and activities align with those of other investors, and with the needs of countries. The document is designed to enable better understanding how the WHO resource mapping (REMAP) tool supports implementation of national COVID-19 preparedness and response plans, and to provide countries with guidance in design and execution of the REMAP process within the COVID-19 context in their country. The document will be disseminated to stakeholders including WHO Health Emergencies (WHE) Programme focal points in the Regional Offices, Country Offices and Ministries considering a resource mapping exercise, and partners engaged in health emergency initiatives.

III.   Objectives of COVID-19 REMAP

- Mapping and visualizing coronavirus-related investments and activities (financial and technical) at the national and subnational levels
- Identifying and highlighting potential areas of collaboration between the government and partners
- Tracking and monitoring the implementation of the country's COVID-19 preparedness and response plans
- Supporting the mission of the COVID-19 Partners Platform to be an enabling tool for all countries, implementing partners, donors and contributors to collaborate in the global COVID-19 response

  This will facilitate:

- Better country visibility of available and potential resources for COVID-19 in order to accelerate implementation of national COVID-19 Preparedness and Response Plans
- Dialogue among countries and partners toward understanding where existing needs lie and where resources should be prioritized.
- Collaboration and synergies through harmonization of country, donor and partner efforts for effective COVID-19 preparedness and response

IV.   Why Conduct Resource Mapping for COVID-19?

An effective response to COVID-19 requires identifying country gaps and needs, mobilizing financial and technical resources (domestic and external) and monitoring and evaluation of national plans. The REMAP process involves mapping all partner activities and investments related to COVID-19 in the country, not just the activities that the government has included in the country preparedness and response plan. Partners tend to have their own priorities and areas of interest, and the mapping of all COVID investments and activities allows the country to have visualization of the full donor and partner landscape.

The REMAP tool reveals information related to whether partners are mostly supporting certain pillars of COVID-19 preparedness and response plans and if there is limited support for other key pillars. REMAP also reveals whether vulnerable geographic regions require greater levels of financial and technical support.

The Excel-based REMAP tool (a web version is currently under development) provides detailed information and graphic visualizations of current and planned partner projects and interventions related to COVID-19 at national and sub-national levels. The tool displays costs and contributions for each pillar included in the national COVID plan, allowing policymakers and partners to assess which areas may require additional investment.

Designated country focal points, with WHO support, can also use the tool to continually update the progress of implementation of each activity in the national COVID plan, allowing the country to track performance in real time. Figure 1 is an illustration of the front page dashboard of the REMAP tool, which is customized for each country.
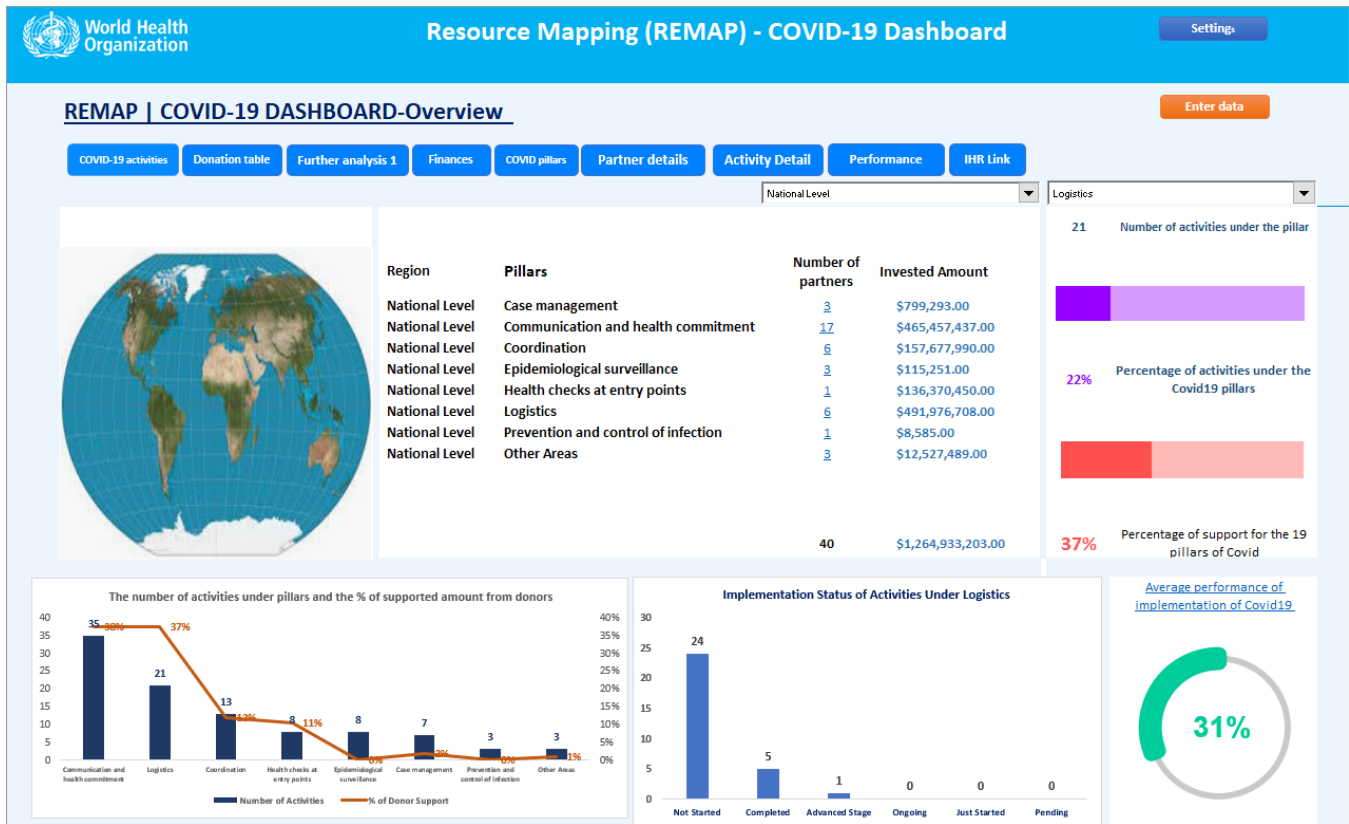
Figure 1: Illustration of the dashboard of the WHO Resource Mapping (REMAP) COVID-19 Excel tool

V.   Building on REMAP for health security for COVID-19

COVID-19 REMAP uses a similar methodology and approach as the broader REMAP for health security. However, COVID-19 REMAP in collaboration with the COVID-19 Partners Platform (3) has a more focused scope of tracking resources that are made available to support activities related to COVID-19 and includes mapping of whether allocations for COVID-19 are new or being reprogrammed from support for essential health services.

Throughout the pandemic, partners and countries are continually making difficult decisions to balance the demands of implementing response activities while maintaining delivery of other essential health services. The importance of this is reflected in the inclusion of ***Maintaining Essential Health Services and Systems*** as a pillar in the global COVID-19 strategic preparedness and response plan (SPRP) (4). COVID-19 REMAP in pilot countries has shown that funds for urgent pandemic response have often been reprogrammed from funding for essential health service provision (i.e. reproductive, maternal, newborn, child and adolescent health). Reprogramming can lead to funding gaps and disruptions in routine service delivery and the identification through the COVID-19 REMAP tool and process of whether funding is newly mobilized or reprogrammed can facilitate planning, assessment, and coordination to protect services and systems.

The standard REMAP process for health security typically involves in-country support missions from WHO, while the process for COVID-19 REMAP implementation has been adapted to facilitate remote data collection (see section VII.)

Leveraging COVID-19 actions for sustainable preparedness

The data collected and displayed in the REMAP tool provides mapping and visualization of the donor and partner landscape to facilitate the implementation of the COVID-19 preparedness and response plan in the country, which contributes to strengthening health emergency preparedness beyond COVID. The nine pillars of the COVID-19 Strategic Preparedness and Response Plan (SPRP) are closely aligned with the capacities required for the implementation of the International Health Regulations (IHR, 2005) (5), including those described in the 19 technical areas in the Joint External Evaluation (JEE) (6) and National Action Plans for Health Security (NAPHS), supporting the leveraging of COVID-19 actions and investments for longer-term preparedness.

Nearly 85 percent of the actions in the COVID-19 Strategic Preparedness and Response Plan can lead to sustained health security preparedness capacities if built upon and invested in (7). Resource mapping helps countries and partners to know what is being supported in the country, where the gaps are, and what potential financial and technical resources are available to support and sustain these critical actions for preparedness.

VI.   Linking to the COVID-19 Partners Platform

On 30 January 2020, the Director-General of World Health Organization (WHO) declared the coronavirus disease 2019 (COVID-19) outbreak a public health emergency of international concern (PHEIC) under the International Health Regulations (IHR 2005), following advice from the International Health Regulations Emergency Committee. On 4 February 2020, the Director-General of WHO briefed the Secretary-General of the United Nations and requested the activation of the United Nations crisis management policy to establish a Crisis Management Team (CMT) to coordinate the United Nations system-wide scale up to assist countries to prepare for and respond to COVID-19.

On 16 March 2020, the COVID-19 Partners Platform developed by WHO was launched with the UN Development Coordination Office (DCO). The primary objective of the Platform is to support global coordination and monitoring of country preparedness and response to the pandemic in support of Article 44 of the International Health Regulations (IHR 2005). Functioning as an enabling tool for all national authorities, UN Country Teams, and partners to coordinate and scale-up efforts to address the COVID-19 pandemic, the platform features real-time tracking to support planning, implementation, and resourcing for country preparedness and response activities.

Serving as a key coordination and governance mechanism, the COVID-19 Partners Platform enables transparency, collaboration, and ownership in strengthening preparedness and response capacities. The Platform enables stakeholders to:

- Develop and share preparedness and response plans and activities, aligned with WHO's nine pillars of operational preparedness and response; Monitor and review actions being undertaken at national and subnational levels;
- Cost and share resource requirements when funds are not available at the country level, and enable planners to forecast how requirements might change according to defined COVID-19 transmission scenarios;
- View and enter donor contributions that have been committed for emergency response activities, targeted to defined country needs;
- Request critical emergency supplies.

COVID-19 Partners Platform resource tracking (restricted access with password)

To enable greater country ownership and to reflect the most pressing needs at national and subnational levels the Platform provides a flexible system for countries to show resource needs. Regional pages were developed to enable WHO regional offices to upload their support plans and report resource needs. The Partners Platform facilitates partners including World Bank, GAVI, The Global Fund, Development Banks, the European Union and others to see what each other is supporting, make informed decisions, and coordinate on the COVID-19 response. In this way donors can ensure their contributions are going towards implementing key activities and internationally standardized interventions. Donors can request Platform metadata on what needs exist and what actions are being implemented when and where. The objective is to facilitate transparency into the funding of the response to COVID-19, and donors will gain visibility into country needs for the response.

To further facilitate countries, WHO developed the COVID-19 resource mapping (REMAP) tool, a more comprehensive data collection tool which further supports transparency, collaboration, and efficiency for countries, UN agencies, implementing partners, and donors in their COVID-19 response and making the linkages to the IHR monitoring and evaluation framework including the 19 technical areas of health security. The REMAP process involves deep dive resource mapping conducted in individual countries, collecting detailed information at the national and subnational levels and providing analysis of which pillars within the country's COVID-19 plan are receiving support. This supports the work of the Partners Platform to facilitate sharing of information on COVID-19 investments in all countries to support planning, implementation and resourcing of country preparedness and response activities.

The COVID-19 REMAP results that show the resource mapping data, including details of partner financial and technical support at national and sub-national levels, can be submitted to the COVID-19 Partners Platform and upon country validation, the result also can be shared to the Strategic Partnership for Health Security and Emergency Preparedness (SPH) Portal where the information can be made publicly available without access restriction. Sharing the REMAP data facilitates resource mobilization efforts and the identification of key partners to address country gaps and needs, helping enable national authorities, UN Country teams and partners to jointly plan for actions and resource needs, identify funding gaps and monitor progress against national plans.

This is enhanced by the linkage between investments and efforts for COVID-19 response that are reflected in the Partners Platform with the preparedness information collected and displayed in the SPH

Portal (8), a digital platform for monitoring progress in longer term health security preparedness capacities.

VII.   The COVID-19 REMAP Process

As in the standard REMAP process, countries lead the resource mapping implementation while WHO provides ongoing guidance and technical support that includes adapting the tool for the national context and facilitating partner engagement. The following describes the steps in the design and implementation of COVID-19 REMAP[1] in countries. The WHO Secretariat will support the country in each of the steps and promotes the use of REMAP data to build partnerships for the implementation of national priority COVID-19 measures that are responsive to gender, equity and human rights. WHO Headquarters provides a range of support including customization of the Excel-based REMAP tool for each country, customized data collection sheets and a manual with instructions in use of the tool and data collection sheets, and training of country focal points in the REMAP tool and process.

COUNTRY REQUEST

1
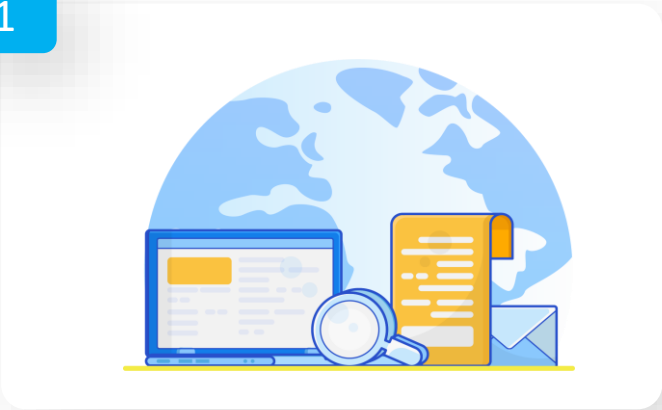
The country will request for resource mapping to the WHO country office. The request will be forwarded to the WHO regional office, which will inform WHO headquarters.

This process begins with a planning meeting involving the three levels of WHO and country representatives to determine the scope of the mapping and the process for moving forward.

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[1] *This process is designed to be in alignment with the following document jointly prepared by GFF-WHO-WB-GF-GAVI: "Resource Mapping and Expenditure Tracking for COVID-19 Response: A Design Checklist and Overview of Tools", which is intended to inform policymakers and development partners who are designing and implementing resource mapping and expenditure tracking (RMET) for COVID-19 response. It provides examples on how resource mapping data can be used to strengthen COVID-19 responses and provides a checklist and design tradeoff considerations for countries that seek to improve an existing exercise or for countries that are assessing technical requirements for an upcoming exercise for COVID-19 response.*

The WHO REMAP tool is customized for each country depending on country context and the requested scope of the mapping. The tool has a range of functionality that begins with mapping external and domestic budget commitments. The tool can also be used to track whether investments committed by partners have been disbursed (delays in disbursements can reflect concerns about the capacity of the implementing agency or other issues) and whether COVID-19 investments are new or reprogrammed from essential health services. The REMAP tool can additionally be used for expenditure tracking to monitor the flow of how the disbursed funds are being spent.

2
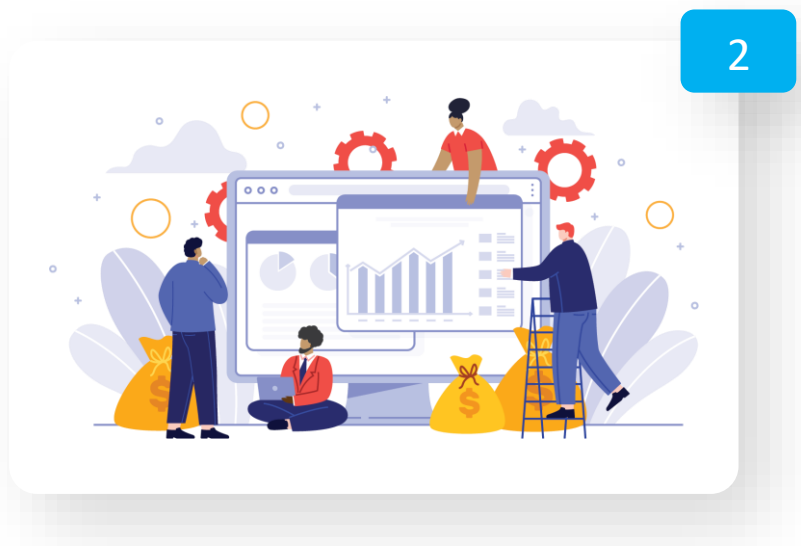
Countries can also integrate WHO resource mapping for COVID-19 with GFF resource mapping and expenditure tracking for national health strategies when practicable. This links emergency response with health system planning and reduces duplication in data collection efforts. In Niger, for example, WHO and GFF collaborated in joint resource mapping and expenditure tracking for COVID-19 and the national health strategy.

WHO will work with countries to design a REMAP process that best fits the country context and goals and follows the principles of good governance and accountability. As part of the preparation of the tool, the country or the WHO country office will provide WHO headquarters with the national COVID-19 preparedness and response plan, which will be loaded into the tool to facilitate plan monitoring and evaluation and the identification of needs for financial and technical assistance. WHO headquarters will also make any other adjustments to the tool relevant for the country in consultation with national experts.

Prior to the COVID-19 pandemic, resource mapping exercises involved in-country workshops with participation from the three levels of WHO, national ministries and technical experts, and partner representatives. However, given travel and other public health social measures related to the pandemic, the COVID-19 REMAP process involves data collection coordinated by WHO and the national government with the support of partners on the ground. Once travel becomes possible, there are plans for increased in-country support.

The data collection process involves close collaboration between the three levels of WHO, partners and the national government. It is important that the resource mapping includes collecting data from all relevant entities to give a complete picture (government, external donors, private agencies, implementing agents). The resource mapping should gather the appropriate level of detail for the country's needs, including collecting data on the national and subnational levels, and be closely aligned with the pillars of the country preparedness and response plan. The mapping should capture technical assistance as well as financial assistance and take care to avoid double counting.

Data that can be collected through the tool includes how much donors have pledged for COVID-19 activities in the country, how much pledged money is yet to be disbursed, the nature of the funded activities, the details of technical assistance provided by partners, the geographical breakdown of partner support, whether COVID funding is new or reprogrammed, the nature of the original allocation of reprogrammed funding, and the level of domestic and external support for each of the pillars in the country's COVID plan.

WHO headquarters will provide a customized data collection sheet for each country, the details of which will depend on the context. For example, in the case of an exercise where resource mapping for COVID-19 is being combined with GFF mapping of national health strategies, WHO headquarters and World Bank/GFF will collaborate on creation of a data collection sheet that captures data on both health security activities and health systems expenditures. Should the exercise be focused solely on resource mapping for the national COVID-19 preparedness and response plan, WHO headquarters will provide the relevant data collection sheet and instructions in its use. WHO headquarters will work closely with the WHO regional office, which will coordinate the data collection in collaboration with the WHO country office, the government, and any partner assisting in the process. The data collection sheet will be provided to the government focal point and all partners active in COVID-19 preparedness and response

DATA COLLECTION AND VISUALIZATION

in the country. In some countries, a consultant may be engaged to administer the data collection process.

The data collection sheet is used to identify the ongoing investments and activities related to COVID-19 in the country, both from partners and the government (including details such as the name of the partner supporting the project, the location, the main pillar being supported, etc.) The completed sheets will be returned to WHO headquarters to collate in the REMAP tool, which visualizes the partner and donor landscape in the country, including displaying the geographic areas and pillars receiving investment and support.

An additional "Activities" data sheet will be provided to the government focal point and is only for the government to fill out. The government focal point will use this sheet to indicate the level of progress in implementing each of the activities in the national COVID-19 plan, as well as whether each individual activity requires external technical or financial support for implementation. This sheet will be returned to WHO headquarters for visualization in the REMAP tool.

WHO will provide any necessary guidance/trainings on the REMAP process remotely through videoconference as long as the pandemic restricts travel. Once travel becomes possible, WHO will provide necessary support on the ground where possible to facilitate training and engagement with partners to address bottlenecks and enhance collaboration for COVID-19 preparedness and response.

CONTINUING USE AND UPDATING OF THE TOOL

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The REMAP process is designed to continue beyond the initial mapping, with the data in the tool being continually updated by country focal points.

WHO headquarters and regional offices will offer trainings to one or more national focal points to continue the process with WHO support, inputting information from new partners and periodically updating existing information on COVID investments and activities in the

For countries that have already done a REMAP exercise, updating the data allows REMAP to be a living process, providing continual visualization of the partner and donor COVID-19 landscape in the country.

Country focal points are also encouraged, with WHO training and support, to use the REMAP tool to continually track and update progress in implementing activities in the national COVID-19 preparedness and response plan.

The frequency of updates is up to the country and will depend on country context but the setting of a timeline is encouraged, whether it be monthly, quarterly or every six months, and can be tied to an existing periodic review of the national COVID-19 preparedness and response plan. Partners should be made aware of the country's timeline and the country should request that partners commit to providing updated data on their investments and activities in accordance with the country's schedule. Country focal points should send REMAP data collection sheets to partners and ask them to return the data in time for the scheduled update of the tool.

Countries have had success in scheduling REMAP updates to coincide with regularly scheduled technical working group meetings or with periodic coordination meetings held between the government and partners. Once the REMAP tool is updated the country is encouraged to discuss with partners the data and what it demonstrates about gaps and needs and opportunities for further collaboration.

WHO headquarters and WHO regional offices will provide any necessary technical support in ongoing use of the tool.

VIII.   Conclusion

The COVID-19 pandemic has highlighted the need for countries to quickly implement national priority actions to prevent, detect and respond. This requires better understanding of how resources are being used and how partners are supporting through bilateral and multilateral actions.

The WHO COVID-19 REMAP tool is designed to support implementation of national COVID-19 preparedness and response plans through identifying and visualizing resources for country priority actions and fostering collaboration between Member States and partners. Countries and partners often have limited visibility on the full scope of COVID investments and activities at the national and subnational levels, and the REMAP tool and process facilitates coordination and collaboration toward more effective resource mobilization and allocation. WHO is also supporting countries through REMAP to advance partnerships for addressing current COVID-19 risks toward longer-term health security.

WHO and partners collaborate through resource mapping to support countries in enhancing COVID-19 preparedness and response and building health system resiliency. The WHO Health Security Preparedness (HSP) Department is also working closely with health accounts teams at WHO and the Organisation for Economic Co-operation and Development (OECD) on mapping health system expenditures that contribute to health security, a collaboration that will inform the resource mapping and expenditure tracking for COVID-19 preparedness and response as well as broader health emergency preparedness efforts.

WHO is planning to expand COVID-19 REMAP in countries, working with partners and countries who have expressed interest in using the tool for plan implementation. WHO will provide countries with

technical support in the use and continual updating of the tool, including training national focal points to periodically input new data into the tool after the REMAP exercise is concluded. **Countries who wish support in conducting a REMAP exercise should contact their WHO Country Office, which will coordinate with the Regional Office and Headquarters.** For further information on accessing REMAP please contact sph@who.int

Citations

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Further Reading

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