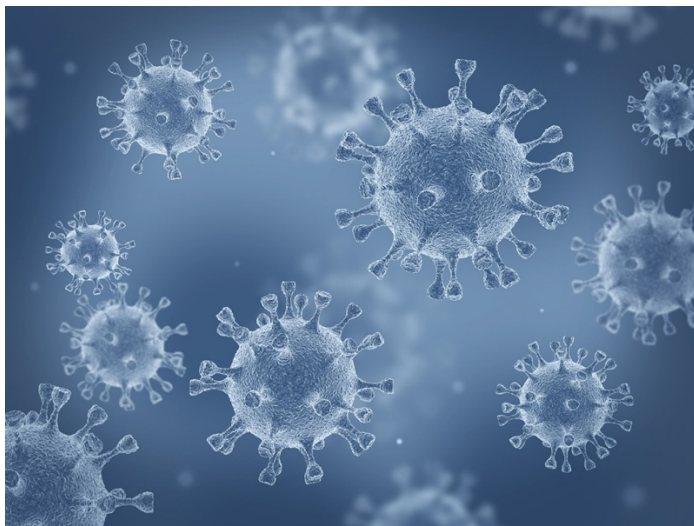


Evaluation of the Council of Europe's Support to Member States in Addressing Challenges related to the Covid-19 Pandemic

Benchmarking Exercise



Final Report

Prepared by Abigail HANSEN

November 2021

The Benchmarking Exercise was supported and guided by the Directorate of Internal Oversight of the Council of Europe, and was conducted by an independent consultant Abigail Hansen. This report does not necessarily reflect the views and opinions of the Council of Europe.

Contents

Abbreviations.....	5
Executive Summary.....	6
1. Background	7
1.1 Context.....	7
1.1.1 Council of Europe Covid-19 Response	7
1.2 About the Evaluation	8
1.3 About the Benchmarking Exercise	8
1.3.1 Purpose and scope.....	8
1.3.2 Phases	9
1.3.3 Methods and approaches	9
1.3.4 Participating organisations	10
2. Findings	10
2.1 Preliminary responses.....	11
2.1.1 Early monitoring and appreciation of urgency	11
2.1.2 Early co-ordination and co-operation.....	11
2.1.3 Establishing strategies and priorities	11
2.1.4 Preparedness	12
2.1.5 Early response teams.....	13
2.2 Organisational responses and their effectiveness.....	14
2.2.1 Institutional responses.....	14
2.2.1.1 Response teams.....	14
2.2.1.2 Leadership	15
2.2.1.3 Alignment with member states	15
2.2.1.4 Cross-sectorial approaches.....	16
2.2.1.5 Internal co-ordination	16
2.2.1.6 Working modalities	17
2.2.1.7 Duty of care	19
2.2.1.8 Resource mobilisation	19
2.2.2 Operational responses	20
2.2.3 Cross-cutting approaches	23
2.2.3.1 Co-operation and partnership.....	23
2.2.3.2 Information and communication.....	24
2.2.3.3 Integration of human rights, gender, vulnerability and inclusiveness	25

2.2.3.4	Reporting, monitoring and evaluation	27
2.3	Adaptability, innovation and change	28
2.3.1	Adaptability	28
2.3.2	Innovation and change	28
2.4	Best practice and lessons learnt	30
2.4.1	Best practice	30
2.4.2	Lessons learnt	31
3.	Conclusions	33
4.	Annexes.....	38

Abbreviations

ADB	Asian Development Bank
EU-ARLR	EU Assembly of Regional and Local Representatives
Consultant	Independent consultant conducting the benchmarking exercise
Covid-19	Coronavirus disease, caused by the SARS-CoV-2 virus
DG	Directorate(s)-General of the European Commission
DIO	Directorate of Internal Oversight of the Council of Europe
EBRD	European Bank for Reconstruction and Development
EC	European Commission
EP	European Parliament
EU	European Union
Evaluation	Evaluation of the Council of Europe's support to member states in Addressing Challenges related to the Covid-19 Pandemic
IFRC	International Federation of Red Cross and Red Crescent Societies
IPCR	Integrated Political Crisis Response arrangements of the Council of the European Union
National Societies	National Societies of the International Federation of Red Cross and Red Crescent Societies
OECD	Organisation for Economic Development and Cooperation
OHCHR	Office of the United Nations High Commissioner for Human Rights
OSCE	Organisation for Security and Cooperation in Europe
ToR	Terms of Reference
UN	United Nations
UN DCO	United Nations Development Coordination Office
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNODC	United Nations Office on Drugs and Crime
WFP	World Food Programme

Executive Summary

In 2020, the Covid-19 pandemic resulted in urgent new challenges to Europeans and highlighted the escalating challenges facing multilateral institutions. The Council of Europe launched in 2021 an evaluation of its support to member states during the crisis, examining the extent to which this assisted them in fulfilling their commitments to maintaining human rights, rule of law, and democracy.

This benchmarking exercise was conducted as part of the evaluation of the Council of Europe's support to member states in addressing challenges related to the pandemic. Its purpose is to identify good practices on institutional responses in the context of Covid-19 and is intended to contribute to the overarching evaluation. Information was obtained through document review, and interviews with participating organisations structured around a Benchmarking Questionnaire.

Some key observations are as follows:

Early responses

- Establishing an early strategic response provided a framework for organisations' subsequent handling of the crisis.
- Crisis preparedness was an essential factor in the speed and effectiveness with which organisations were able to respond.
- Dedicated crisis response teams provided an essential pivot-point for intervention.
- Early, hands-on leadership contributed strongly to the effectiveness of an organisation's response.

Strategies and approaches

- While alignment of member state priorities was at times challenging, organisations were successful in developing an advisory and mediating role.
- Organisations developed multi-sectorial approaches, and strengthened their internal co-ordination, which contributed to the effectiveness of responses.

Institutional responses

- Organisations rapidly adopted new working modalities, which brought both positive and negative effects.
- Organisations demonstrated strong commitment to the duty of care to staff, partners, and other stakeholders.

Operational responses

- Organisations mobilised significantly increased resources to respond to the crisis, while strengthening and expanding their donor base.
- Operational responses were broad-ranging and needs-focused, and were guided by local monitoring.
- Organisations' co-operation and partnership efforts contributed to the effectiveness of their responses.
- Organisations ensured strong information flows and communication about the pandemic and their own efforts.
- Organisations generally integrated human rights, gender, vulnerability and inclusiveness issues in their strategies and operations.
- Organisations have ensured regular monitoring and evaluation, which has contributed to adjustments to their responses, and future planning.

Responsiveness

- Organisations have demonstrated considerable adaptability and innovation, and have effected lasting changes.

- Organisations have developed best practices in approaching the pandemic and are integrating lessons learnt into their future responses and crisis preparedness.

Key best practices and lessons learnt are as follows:

Leadership

- Organisations require strong, involved leadership and dedicated structures in order to effectively address crises.

Relationships

- Strong relationships with staff, partners, stakeholders and beneficiaries must be prioritised, and actively nurtured. Organisations need to ensure that key stakeholders are proactively included in crisis responses from the outset, otherwise tensions and misunderstandings can develop and be compounded.
- Making unilateral decisions can be counter-productive during a crisis. Organisations and states need to work together, and in a coherent manner, otherwise each party's measures will be undermined.
- Trust should be built at all times, not just during a crisis. And the trust that has been built during this crisis should be actively maintained, in preparation for the next.

Meaning

- An important part of dealing with crisis is 'meaning-making'. During crisis, organisations should frame their communication in ways that enhance deeper understanding of events, and their effects on populations and individuals.

Preparedness

- Building long-term crisis preparedness is essential, and requires a whole-of-institution approach, and should focus on resilience and 'anti-fragility' – to bounce back from shock, and to bounce back 'better than before'. Organisations need to prepare proactively for future crisis, developing capacities, systems and training
- Organisations also need to develop capacities to assess, filter and prioritise information during a crisis, since incoming data can often be massive, contradictory, unreliable, or false.
- Organisations need to develop stronger monitoring and early warning systems. They also need to develop a stronger and broader understanding of risk, as well as risk and crisis management protocols, otherwise there is a possibility of being unprepared for new kinds of crisis.

Moving forward

- While there is a place for new working modalities, these come with certain limitations which should be more deeply explored.
- Organisations may fumble, lose time and make mistakes in a crisis, but they can recover and shine with the right corporate approach and the commitment of staff.
- Organisations need to build on the momentum that has been established. Now.

1. Background

1.1 Context

1.1.1 Council of Europe Covid-19 Response

In 2020, the Covid-19 pandemic resulted in urgent new challenges to Europeans under the European Convention on Human Rights, the European Social Charter and other instruments of the Organisation.

More broadly, the pandemic highlighted the escalating challenges facing multilateral institutions, and the central role these institutions play in finding common solutions to common problems.

The Council of Europe initiated a rapid and extensive response in order to meet member states' expectation of policy support relating to all areas of its mandate. Its action on the effects of the pandemic has included work on standards' compliance and intergovernmental co-operation, with the latter performing a research and development function in which pooled knowledge, expertise and the content of the Organisation's *acquis* are contributing to solutions for fluid threats in what was and remains a highly dynamic environment.

There has also been significant activity by the Committee of Ministers, Commissioner for Human Rights, the Congress of Local and Regional Authorities, the Parliamentary Assembly, the European Court of Human Rights and the Council of Europe Development Bank, as well as the Directorate General of Human Rights and Rule of Law and the Directorate General of Democracy, including the European Directorate for the Quality of Medicines, and others.

Several Steering Committees have held specific sessions on their Covid-19 response or organised thematic sessions within their regular meetings. The work carried out for and with member states has been conducted in and from Strasbourg and in the external and field offices where staff on the ground have also reshaped some of their activities.

1.2 About the Evaluation

The evaluation of the Council of Europe's support to member states in addressing challenges related to the Covid-19 pandemic was included in the work programme of the Directorate of Internal Oversight (DIO) for 2021. The evaluation was commissioned due to the unprecedented nature and amplitude of the risks and demands the pandemic imposed on the Organisation in terms of adaptability and flexibility of its working methods, as well as contents of its work.

The purpose of the evaluation is to primarily assess the extent to which the Council of Europe's response to the crisis, through its support to member states, assisted them in fulfilling their commitments to maintaining human rights, rule of law and democracy in the context of threats and challenges posed by the Covid-19 pandemic. In addition, the evaluation assesses the relevance, effectiveness, and efficiency of key activities and actions that took place between March 2020 and August 2021.

Its findings will be used by the senior management of the Council of Europe, line managers and interested staff members to better understand the effect of the Covid-19 pandemic in the results of the Council's work, its performance under these circumstances and opportunities arising from it in view of improving the response to potential future crises. The evaluation findings will also be used to promote general improvement and innovation in terms of working methods.

1.3 About the Benchmarking Exercise

1.3.1 Purpose and scope

The current benchmarking exercise is being conducted as part of the evaluation of the Council of Europe's support to member states in addressing challenges related to the Covid-19 pandemic. The exercise was contracted by the Directorate of Internal Oversight (DIO) of the Council of Europe, and was conducted by an independent consultant, Ms Abigail Hansen.

The Terms of Reference (ToR) of the benchmarking exercise state that its purpose is *"to identify and collect good practices on response to emerging needs of national authorities in the context of the*

Covid-19 pandemic with regard to devising strategies, programming and co-ordination, and ideas on factors which influence its effectiveness, by comparator organisations” (see Annexe A).

The findings of the benchmarking exercise are intended to help answer key evaluation sub-questions of the overarching evaluation.

The anticipated audience and users of the benchmarking exercise are implicitly linked to those of the overall evaluation, which are defined in the Concept Note as including the Secretariat General of the Council of Europe, in particular its senior management, as well as the Committee of Ministers, and potentially national authorities and Council of Europe staff members involved in Covid-19 related activities. The evaluation may also be of interest to other international organisations working in areas similar to the Council of Europe mandate (see also Annexe C, Stakeholders below).

1.3.2 Phases

The benchmarking exercise comprised four distinct stages:

Inception stage: This stage required the design of the benchmarking methodology, and the conduct of a preliminary document review.

Data collection stage: This stage required the collection of data, through a further review of documentation and interviews with key informants of selected organisations

Analysis and reporting stage: This stage required the analysis of the collected data, the production and submission of a Draft Final Report, and a Final Report.

Discussion and dissemination stage: This stage will require the attendance by the consultant at a meeting of the evaluation’s Reference Group in early 2022, in order to present the findings of the benchmarking exercise, and respond to questions. An additional meeting was also conducted with other stakeholders, in order to discuss and disseminate the findings more broadly.

1.3.3 Methods and approaches

The benchmarking exercise commenced on 27 July 2021, with a Methodological Note approved in late August 2021.

During the data collection stage, 18 persons were interviewed, in individual or small group meetings. These were structured around a Benchmarking Questionnaire that had been developed in the inception phase. Given the legal and logistical constraints imposed by the pandemic, all interviews were conducted on a remote basis via video and mobile platforms (Zoom, Skype, Teams, WhatsApp, etc.).

The benchmarking exercise was conducted on the basis of a set of key principles, intended to ensure that the needs and constraints of participating stakeholders are respected, and the values of the Council of Europe are upheld.

Confidentiality: Participating stakeholders were advised that any information, or sources, can be provided on a confidential basis, in order to facilitate free and frank discussion. The data collected will be treated in accordance with the Council of Europe data protection rules and will be deleted after five years, or at any time sooner at the request of interviewees.

Do No Harm: Given the complexity and rapid onset of the pandemic, and potentially sensitive nature of organisational responses in this regard, a strict “Do No Harm” approach was adopted.

Transparency: **Relevant information concerning the exercise was made freely available, and in an accessible manner, with participants** informed of the exercises’ purpose, and the general nature of the questions that will be asked. The Final Report will be shared with them.

Inclusiveness: Participating stakeholders were provided with appropriate opportunities to participate in and provide input to the benchmarking exercise.

The benchmarking exercise also expressly examined the manner in which participating organisations took account of cross-cutting issues, such as human rights, gender and vulnerability, in their responses to the pandemic.

1.3.4 Participating organisations

The Methodological Note identified organisations that would be approached to participate in the benchmarking exercise. While no fixed selection criteria were adopted, these included the similarity of their mandate to that of the Council of Europe, and their specialised experience in crisis management and/or resilience. The participating organisations were the European Commission, the International Federation of Red Cross and Red Crescent Societies, the Organization for Security and Co-operation in Europe, the United Nations Educational, Scientific and Cultural Organization, the Office of the United Nations High Commissioner for Human Rights, the United Nations Office on Drugs and Crime, and the World Food Programme.

The interviewees encompassed a variety of functions touching on the conception and implementation of the institution's response, including governance and management, policy and strategy, programmes and operations, partnerships and resource development, finance and administration, and communications.

2. Findings

This section contains the core findings of the benchmarking exercise, based on the data collected, and in line with the evaluation and benchmarking criteria outlined in the Methodological Note. It outlines the organisations' early responses, during the first weeks of the pandemic, in particular relative to their growing awareness of the scope of the emerging crisis, and their formulation of strategies and operational planning.

It then examines responses that emerged in the months that followed, both at the organisational level, that is relative to their own internal needs and functioning, and those at the programmatic and operational level, which responded to the needs of their beneficiaries and stakeholders.

A number of cross-cutting approaches are also examined, including organisations' co-operation and partnerships, communication and outreach, monitoring and evaluation, and the integration of human rights, vulnerability and inclusiveness issues.

Finally, it identifies elements of adaptability, innovation and change demonstrated by organisations, as well as best practices and lessons learnt.

The findings also encompass an examination of the effectiveness of organisations' responses, in particular the main challenges experienced, any factors influencing effectiveness, and mechanisms in place to measure their impact. It is however emphasised that the purpose of the benchmarking exercise is not to conduct an evaluation of what organisations have achieved, which would require rigorous triangulation of data, and hence the findings are drawn primarily from organisations' own perceptions and synthesised in [Section 3 Conclusions](#).

2.1 Preliminary responses

2.1.1 Early monitoring and appreciation of urgency

The Covid-19 pandemic took the entire world unawares, and international organisations reported that they were taken aback by the rapidity with which a ‘localised’ event was transformed into a global crisis, and to which they were required to respond at multiple levels. It is evident, however, that organisations quickly grasped the need to react as a matter of urgency, and their mobilisation and

“Our response was quick, in only a few days; as soon as we understood [the scope of the pandemic], we went into a state of emergency and set up the team right away”

turnaround periods can, in many instances, be measured in hours and days, rather than weeks. Certain organisations, for the example the European Commission and the IFRC, were monitoring events in Asia in the first days of 2020, with the EC then having commenced crisis co-ordination committee meetings in February as the scope of the crisis emerged.

Several organisations reported, however, that their realisation of the implications of the crisis did not truly dawn until the first lockdowns and travel restrictions were imposed, but that they nevertheless were impressed by the rapidity in which their organisations responded, both internally and operationally.

Generally, organisations with strong crisis management mandates, or with existing internal risk monitoring and management structures, were able to pivot in a more proactive and rapid manner.

2.1.2 Early co-ordination and co-operation

There was significant evidence of early internal co-ordination of organisations’ responses. This included co-ordination between agencies within larger structures (such as the EU and UN); between units within those agencies; and between headquarters and their regional, national and local presence (such as the IFRC).

Relative to external co-ordination, there was also evidence of very early inter-organisational co-operation, and of engagement with organisations’ own member states. For example, UNESCO engaged from late February with the UN guiding bodies, as well as with the permanent delegations of UNESCO member states in Paris, where it is headquartered.

There was a conscious effort on the part of organisations to avoid duplication of effort; for example, the UN OHCHR was initially careful not to compete with humanitarian organisations, since it was perceived at that time as a primarily medical crisis. However, the demarcation of institutions’ mandates increasingly overlapped as the pandemic expanded, thus necessitating greater cross-sectorial co-operation (*see also 2.2.1.5 below*).

2.1.3 Establishing strategies and priorities

In parallel with organisations’ growing awareness of the scale of the crisis, there was a rapid understanding of the need to develop new and ambitious strategies, while aligning these with shifting political priorities, and organisations’ own overarching mandates. The speed at which organisations advanced at the policy level was remarkable.

The *Draft Council Conclusions on COVID*, for example, were formulated by the Council of the European Union¹ in mid-February, when events were still in their earliest stages, and incorporated WHO

¹ <https://data.consilium.europa.eu/doc/document/ST-6013-2020-INIT/en/pdf>

resolutions that had been passed only a few days earlier. This prescient document underscored the importance of global, regional, and intra- and inter-institutional co-ordination, together with the EU Council Integrated Political Crisis Response (IPCR) arrangements², and established the strategic approach that EU and member states adopted thereafter.

Specific challenges arose for the EC at the strategic and policy level, however, given the EU's unique role and structure. The EU clearly retained its legal power to impose certain policies upon its member states, and maintain a stabilising influence, with for example the European Central Bank ensuring that the European economy was equipped to absorb the shock of the crisis through *inter alia* the €1 850 billion Pandemic Emergency Purchase Programme (PEPP), and other monetary policy measures.

However, even in less fraught times, harmonisation of policy is not possible across all sectors, for example relative to health, which is within the primary remit of national governments. The EU has therefore generally maintained a relatively low policy profile in the sector. With the arrival of the pandemic, however, health policy suddenly became an issue of overarching concern, and, at the insistence of member states, the EC dramatically scaled up its role in the sector, and adopted an advisory role, providing recommendations and advice, and acting as a repository of reliable information. This approach has been maintained throughout the pandemic, across numerous sectors, however navigating member states' priorities has not been without considerable tension however, as described at [2.2.1.4](#) below.

The IFRC for its part recognised the looming threats with a response launched as early as January 2020, triggered by the emerging cases in China, with a view to intervening before the outbreak became widespread. Whilst initially considered a localised problem, the IFRC quickly realised that planning for a global response was necessary, itself a challenge given that even regional responses require enormous resources. While initially quite modest, their response was soon scaled up to encompass the Asia-Pacific region, but with a strategic preparedness to expand globally if necessary. Whilst the initial focus was on health, this was also expanded to pre-emptively examine the socio-economic impact (notably food security and livelihoods), and strengthen the capacities of the Federation's National Societies; in this sense the response soon resembled the multi-dimensional approaches incorporated in their 'ordinary' crisis interventions, though at a vastly broader scale.

These anticipatory strategies, supported by an existing disaster preparedness and management mandate, became in their view '*highly relevant over time*', since this overarching strategic framework remained stable, even as the pandemic – and populations' needs – evolved.

Central to the formulation of priorities was an emergency appraisal of likely needs, and the concomitant mobilisation of existing and potential human and financial resources. Assessing needs was often difficult in early 2020, as sourcing reliable information proved challenging in a situation in extreme flux, particularly in development contexts, and given the massive movements of peoples across the globe or in individual countries, and indeed within institutions themselves.

2.1.4 Preparedness

Existing crisis management mechanisms in organisations were required to dramatically expand their capacities almost overnight, as they found themselves at the epicentre of unfolding events. Many organisations, whilst already equipped with risk management and related mechanisms, found

² <https://www.consilium.europa.eu/media/29699/webipcr.pdf>

themselves taken unawares, and required to respond to a crisis that cut across nearly all sectors of human existence, and which were often outside their usual mandate and spheres of operation.

Indeed, even humanitarian and crisis agencies (IFRC, WFP), with emergency response protocols and capacities developed over many decades, found themselves dramatically challenged by the pandemic's speed, breadth, and impact.

A strong example of how existing crisis management safeguards were triggered can be seen in the EU response. Their existing mechanisms include the Union Civil Protection Mechanism (UCPM)³ and its Emergency Response Coordination Centre (ERCC)⁴; the IPCR arrangements; and the EEAS Crisis Response Mechanism (CRM). In 2005, the European Commission developed the *Provisions on the 'ARGUS' General Rapid Alert System*⁵, consisting of an internal communication network and a specific co-ordination process to be activated in the event of a major multisectoral, transboundary crisis. This aims to provide an internal exchange platform for EC services and beyond, develop co-ordination process, and ensure effective public communication.

These provisions had already been activated on several occasions, including the 2010 Icelandic volcanic eruption, the 2011 Fukushima crisis, and the more recent migration crisis. In late January 2020, these were again activated as the pandemic unfolded, which triggered the creation of dedicated crisis response teams (see [2.1.5](#) and [2.2.1.1](#) below).

To an extent, the pandemic arrived at a serendipitous moment for the OHCHR, since the development of an office-wide Risk Register had been planned to take place in 2020, as part of the UN Secretariat's overall risk management processes. As a result, the Office was able to provide real-time inputs to the Secretariat regarding emerging critical risks, and the continued protection of human rights.

Similarly, UNESCO had commenced a major reform in 2018, examining a range of internal issues, including human resources and revamping IT systems. As a result of workplace changes flowing from this initiative, staff were already familiar with the Microsoft Teams conferencing platform and were therefore rapidly operational from the first lockdown.

2.1.5 Early response teams

An integral component of organisations' early emergency strategies was the creation of dedicated Covid-19 response teams, which were generally composed of one or two units at the headquarters level. These tended to be surprisingly small, often just a handful of persons, which allowed for the centralisation of information, streamlined strategy development, and the co-ordination of response implementation at the internal and programmatic levels.

Organisations appear to have had differing approaches concerning the internal unit or sector that would spearhead their response, which appear linked to the perceived priorities at the outset of the crisis. For example, the IFRC response was largely co-ordinated by their partnerships division, the EC by dedicated crisis management and health policy units, and UNESCO its Office of the Director-General. Ultimately, the origin of the team does not appear to have impacted on organisations' responses, whereas the rapidity of their composition and the clarity of the role were crucial.

With the activation of the EC ARGUS mechanism, as described above, a Crisis Coordination Committee was rapidly convened, which met regularly to synergise the action of Commission services and EU

³ <https://ec.europa.eu/echo/what/civil-protection/mechanismen>

⁴ <https://ec.europa.eu/echo/what/civil-protection/emergency-response-coordination-centre-ercen>

⁵ <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52005DC0662&from=en>

agencies. The EC also established a co-ordinating response team at the political level, composed of the five commissioners responsible for the most affected areas and lead by the President.

The OHCHR for its part quickly adopted several leadership initiatives. A Covid-19 Coordination Team and Covid-19 Task Force were established, which brought together all necessary human rights expertise. The task force was intended to support information flow and develop internal guidance and public messaging on human rights. At the operational level, under the auspices of the Policy, Planning, Monitoring and Evaluation Service (PPMES), the Office convened a Covid-19 Crisis Response Team (CRT), enabling business continuity and setting the framework for new work modalities, such as teleworking, and keeping staff safe and supported, while ensuring continuity of the Office's global human rights work.

The OSCE rapidly established a Covid-19 Task Force, which was replaced by a Crisis Management Team (CMT) at their Secretariat, comprised of senior OSCE stakeholders, which made recommendations to their Secretary-General. Covid-19 presented a particular challenge to the organisation, given its decentralised structure, with 16 different missions and executive structures. However, the CMT soon established best practice policy that was shared with the different missions through an inter-office memorandum. The OSCE established three main response mechanisms: the CMT, weekly meeting with executive structures, and high-level meetings at the Ambassador level. The development of a communication strategy through a dedicated working group complemented this approach (*see also [2.2.3.2 below](#)*).

The WFP rapidly convened a cross-functional cell, spearheaded by their Emergencies Division, which conducted daily meetings, and in April declared a global L3 emergency for the first time, their top-level classification of crises⁶. This meant that senior management gave the emerging situation immediate top priority and triggered all emergency response mechanisms in order to source and deploy staff, and access corporate resources. The immediate challenges were enormous, however, with the co-ordination cell having to ensure clarity of information, coherence of approaches, and the early development of priorities.

2.2 Organisational responses and their effectiveness

2.2.1 Institutional responses

2.2.1.1 Response teams

Response teams that were established in the early stages of the pandemic tended to retain their tight, centralised structures, however these were subsequently complemented by newly created thematic or regional 'hubs'. For example, while the small, original EC unit was still the primary crisis management entity for the Commission by May-June 2020, this responsibility was spread to some extent across the Secretariat-General, and even further to line Directorates-General (DG), notably DG SANTE (health), DG ECFIN (economy and financial affairs) and DG ECHO (humanitarian assistance), while maintaining the strong and clear leadership at the top political level.

Within the IFRC certain responsibilities, such as resource mobilisation, remained at the global level, whereas operational management was rapidly decentralised, in line with 'ordinary' emergency response framework and mechanisms. Direct co-ordination and oversight of the regional response is therefore provided by the Secretariat, and in turn detailed operational management is provided by

⁶ <https://www.wfpusa.org/articles/understanding-l3-emergencies/>

regional offices at the cluster/sector and country level. This approach allowed localised responses that were in line with national plans and emerging contemporaneous needs, with National Societies retaining the lead role (*see also 2.2.2.1 below*).

The IFRC considers this country-level approach was a fundamental element of their response's effectiveness, since it was *"not a big monster where everything is imposed, [but] with a lot of flexibility and contextualising"*.

Similarly, within the OSCE the Crisis Management Team was supported by existing Security Management Teams (SMTs) in individual OSCE institutions and field operations, in order to ensure that Covid-related issues were managed at the thematic and local level.

Within the OHCHR strong interest was expressed by colleagues in participating in the task force's efforts, which rapidly increased to over 70 people in several weeks, meeting frequently across all the Office's Services and Divisions⁷, in order to ensure information exchange and co-ordination, and co-ordinated operational responses through to the field presences.

2.2.1.2 Leadership

Organisations strongly considered that the direct involvement of the highest echelons of management, from the very outset of the pandemic, was critical in developing strategic responses, ensuring engagement at the diplomatic and political level, maintaining internal and external coherence, reinforcing messaging, and increasing staff morale.

Certain organisations experienced challenges in this regard, however, with leaders who were seen as 'invisible', or with key management roles that were vacant during critical months of the pandemic, and which reportedly had discernible qualitative impacts on the overall institutional response.

2.2.1.3 Alignment with member states

Whilst organisations' engagement with their international partners continued relatively unaffected, and indeed improved in some respects, as outlined at [2.2.3.1](#) below, some experienced difficulties in achieving coherence with the priorities, policies and approaches of their own member states.

⁷ <https://www.ohchr.org/Documents/AboutUs/OHCHRorgchart2014.pdf>

This was particularly evident within the EU, with certain member states becoming highly defensive at the beginning of the pandemic relative to health issues (which are generally within the national legal remit as described at [2.1.3](#) above), and freedom of movement between states. Certain national political responses were centred on the need to be seen as protecting their own people, however it rapidly became evident that these approaches were contrary to the overarching objective of addressing the pandemic in a coherent and effective manner.

Whilst the EC has limited competence to regulate health issues, which are the responsibility of Member States, it was able to provide recommendations, particularly on issues where their guidance could provide a reference point for discussions between member states. A strong achievement in this regard was their proposal concerning EU Digital COVID Certificates, which entered into application on 1 July 2021⁸.

An additional area where the need for coherence rapidly became paramount was relative to border control, which in the early days of the pandemic threatened economies and supply chains. Whilst the EC did not have legal power to intervene, they were able to assist with the development of pragmatic solutions.

“We saw shocking things. You think the EU is cohesive and close, but with this crisis situation we saw that if someone decides to close borders, while epidemiologically this does nothing, it can trigger a psychological domino effect. That’s sort of the natural instinct of every politician [to want to show to electorate that you do at least as much to your people as your neighbour]. Then they realised that it is the wrong way to go, they come together in the Council to find common solutions and be consistent, to save money and lives, rather than going independently – and at the end agree solutions, such as the Green Lanes, recommendations on the freedom of movement, or regulation on the EU Digital Covid Certificate [formally proposed by the Commission].”

2.2.1.4 Cross-sectorial approaches

A striking feature of organisations’ responses is the rapidity and extent to which they appreciated the need to loosen existing internal thematic and structural divisions. For example, the line units created within the EC, as described above, were intended to ensure a multi-sectorial perspective, and high-level co-ordination.

Similarly, the OHCHR saw the emergence of a number of projects that were cross-divisional, for example recommendations relevant to the Covid-19 response regarding human rights mechanisms, treaty bodies, special procedures and Universal Periodic Review were combined in information sheets and helped feed into operations on the ground. Part of their cross-divisional approach was also the creation of an Office intranet, which provides updated information on global pandemic developments (see also [2.2.3.2](#) below).

2.2.1.5 Internal co-ordination

Organisations generally considered that the effectiveness of their own internal co-ordination was high, and increased understanding between different sectors and services. There were however challenges, with one interlocutor stating that “we tried to take stock, we pushed for as much foresight

⁸ <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32021R0953&from=EN>

as possible, to anticipate developments and prepare, but with mixed success. This was inevitable, in a situation that was highly fluid, and with both insufficient and an overload of information”.

An example of effective international co-ordination was the integration of the OSCE’s OIO Director into the crisis management team as a participant, which strongly facilitated the exchange of different inputs and perspectives, and provided real time insights regarding risk and management. This was in turn fed back into the monitoring processes already underway, which allowed for adjustments at the strategic and operational level (*see also* [2.2.3.4 below](#)).

2.2.1.6 Working modalities

What the world will most likely recall of the pandemic will be almost instantaneous movement of entire populations towards online working and education modalities, with highly variable results.

Connectivity also became a sudden imperative for international organisations, however they were largely able to move rapidly and smoothly towards generalised ‘teleworking’, where possible. Some organisations reported however a lack of internal clarity in this regard in the earliest stages of the crisis, particularly those with large numbers of decentralised staff, with one interlocutor stating “*we have quite a lot of staff, [thousands of] people across many locations, so it was not very straightforward*”.

Working modalities were developed in line with national lockdowns and other restrictions of movement, such as travel bans, but also through a swift understanding of their emerging duty of care to staff and others (*see* [2.2.1.7 below](#)). Organisations that are headquartered in EU member states also aligned themselves with the EC’s common approach to travel measures⁹, following the Council recommendation in October 2020¹⁰, which has adopted a ‘traffic light’ system relative to restrictions. Organisations’ Headquarters are all based in large, well-resourced cities, and were all operating at a very high technological level prior to the pandemic. The transition to homeworking was therefore relatively painless in these contexts, with staff provided with laptops and other productivity and communication tools, and only critical staff present in the premises.

Operational activities also continued remotely, with organisations finding ‘work-arounds’ to continue to implement programmes. For example, relative to OHCHR field monitoring missions, lockdowns and travel restrictions affected the Office’s capacity to carry out data collection, in order to document and report alleged human rights violations. The Office adapted by increasing its remote monitoring and support to local partners for the monitoring and investigation of situations of concern (*see also* [2.3.1 below](#)).

“We made extensive use of technology, platforms, and different ways of meeting. We adopted Zoom quite quickly, and, depending on the situation, we would move to ‘hybrid meetings’, a mix of online and face-to-face, depending on the traffic light system”

While organisations felt that they were ‘thrown into’ new working methods, there is a broad consensus that staff, partners and other stakeholders adapted rapidly and effectively, with minimal interruption to the flow of office-based activity. Indeed, many interlocutors were pleasantly surprised by how well the new modalities worked, and some organisations reported unanticipated positive effects.

⁹ <https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/travel-during-coronavirus-pandemic/common-approach-travel-measures-euen>

¹⁰ <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:02020H1475-20210202&from=EN>

OHCHR stated for example that online governance bodies meetings led to a boost in inclusiveness and participation, in particular from field colleagues, who for the first time occupied the same space as their Geneva counterparts in the 'virtual' space. For example, from a usual attendance of around 40 colleagues, the most recent Extended Policy Advisory Group (ePAG) meeting jumped to 107 participants, with many from the field. They also observed that meetings were attended by higher-ranking government representatives.

One organisation observed however that, while digitalisation can reach a larger audience, and save travel costs, more could have been done to train staff and partners on using technology, such as participating in events, and the most effective use of tools.

The OSCE reported that restrictions hampered the ability of staff outside their duty stations to travel, to which the organisation responded with more flexible and generous leave policies, which were highly appreciated by staff, particularly those with young families. Extensive staff surveys conducted by the OSCE in 2020 (see [2.2.3.4 below](#)) also highlighted that most staff enjoyed working from home, but that this produced some more insidious side-effects, with staff more isolated and engaging less. They highlighted a concern that if working practices remain fully remote, there will likely be an impact on quality of relationships between staff *"who are now organised in terms of atoms, rather than silos"*, with the organisation having *"not yet developed mechanisms to replace the range of formal and informal interactions, beyond strict fulfilment of individual responsibilities"*. The OSCE also observed that there may be a reluctance to go back to former working styles, with their emphasis on 'presenteeism'.

UNESCO also conducted a major survey in June 2020, to gauge how staff felt about the organisation's handling of the pandemic. The 2 000 responses were overwhelmingly positive, and led to a general review of their distance working policy.

Organisations expressed some sense of resignation however regarding the new working arrangements, and that staff adapted 'because they were forced to do it'. Some organisations also observed that fatigue appeared to set in after a certain period and engagement through workshops and other online events became significantly harder. In

"One has to assess at what cost things have been kept going, what has it meant for people. There is the new mantra 'reconciling family life' but I'm not convinced that people do as much work as they do in the office, and I don't think the same interactions happen between people".

addition, interlocutors noted that, while online work meetings provide positive opportunities to present information, it was far more difficult to negotiate and come to conclusions.

There was also a concern that the virtual environment excluded those without reliable – or any – internet connection. The OHCHR noted that exchanges with victims, civil society organisations and human rights defenders became increasingly difficult for these reasons, but also due to the significant safety risks of insecure connections.

Online working extended not only to the ordinary office context, but also to decision-making at the highest level. For example, governance, programmatic and treaty body meetings of the OHCHR were all conducted on a virtual basis, with urgent debates conducted and critical decisions made.

Organisations strongly considered that online working methods pose significant challenges at the diplomatic and political levels, with some interlocutors for example considering that serious issues and conflicts lingered that would have ordinarily been rapidly resolved.

“Delegates acknowledged that the only reason they had a conversation with me was because they already knew me, so I am not sure how effective online meetings actually are. You can’t say things in the same way, and you can’t create trust online, so we have been coasting, and living off relationships we created in the past”.

2.2.1.7 Duty of care

Organisations rapidly appreciated the need to fulfil their duty of care to their own staff, both at headquarters and in the field, and were highly pro-active in this regard, demonstrating a strong commitment to staff wellbeing and safety.

For example, UNESCO put in place a health co-ordination team as early as February 2020, chaired by their Assistant Director-General for Administration and Management and including senior managers and medical staff. The team met twice weekly in the early period, and ensured information was exchanged and responses developed regarding staff health and security, and appropriate communication and teleworking modalities.

“Not everyone is in their own home country, so there was a sense of needing to take care of people, so we were making daily calls. It was more a question of staff health than of organisational effectiveness, making sure people were not completely stranded”.

The WFP L3 declaration described above also meant that their own staff were prioritised, in particular relative to health. The extraordinary demands at the time meant that staff burnout emerged as a significant concern, and that some staff members themselves were infected by Covid-19. This in turn gave rise to logistical issues such as movement out of risk areas or towards medical treatment, with *‘real corporate attention to that level of detail’*.

“One thing we had to think about was duty of care, to our volunteers and staff. It was difficult, globally, but there was an effort to put that at the centre of our work, with helplines, limits on the number of meetings. There was a lot of effort in supporting wellbeing”.

From their own human rights-based approach, the OHCHR provided very early guidance on the protection of pregnant women as a vulnerable category, well before the first World Health Organization findings in this regard.

The OSCE responses to staff needs were highly consultative and based on robust, direct feedback, and can be considered an example of best practice (see [2.4.1 below](#)). They also adopted a rights approach to their

duty of care, for example through a specific internal office memorandum regarding pregnant women.

2.2.1.8 Resource mobilisation

Organisations instantly appreciated the critical need to mobilise vastly increased human and financial resources, in order to respond rapidly and effectively to the enormous challenges unfolding on a global scale.

This was particularly acute for organisations with a humanitarian mandate. For example, a key aspect of the IFRC COVID Response was its global Covid-19 Appeal, which brought together its resource

mobilisation, global crisis and health teams. Relationships with existing donors were strengthened, and new sources of funds emerged, in particular from the private sector (see also [2.2.3.1 below](#)).

Other organisations did not see a significant change in their donor base. The WFP for example utilised their Response Plan (see [2.2.2.1 below](#)) as the cornerstone of their own appeal to donors and the public, and while they saw an increase in resources overall, this was not enormous, and they did not observe many new sources of funding. However, they noted instead that *“we saw that donors kept returning, that donors made available resources earlier, there was a real frontloading of resources, and so we were able to respond quicker”*.

Whilst all organisations clearly required a significant increase in resources, they did not report significant challenges in this regard. The IFRC was however highly concerned about National Societies ability to continue their own self-funding activities, which was a significant factor in the development of their strategy of supporting their capacities and resilience, as described above.

2.2.2 Operational responses

Organisations’ programming and delivery were strongly aligned with their founding mandates, and focused on the emerging needs of their partners, beneficiaries and other stakeholders, particularly at the national and local level (see also [2.2.2.1 below](#)). Organisations were therefore careful to monitor events as they unfolded in the ground, despite considerable challenges in this regard, particularly in the early phases of the pandemic, in order to obtain accurate assessments of need (see also [2.2.3.4 below](#)).

Programme responses demonstrated the historic scope of the crisis and cannot be easily integrated within a consistent typology. Programming was highly contextualised, and for the most part conceived with flexibility in mind, given the extreme volatility of the crisis.

The scale of the EU’s overall global response¹¹ to the pandemic was vast, amounting to €46 billion from ‘Team Europe’, a joint action involving the EU, its member states and European financial institutions. Other support has included the EU’s Civil Protection Mechanism; support to the Covid-19 Vaccines Global Access initiative¹²; and the launch of the EC Coronavirus Global Response¹³.

Similarly, the response of the IFRC has been enormous in its operational scope, with support being directed through to its national societies, and its primary activities focused on health (support to health facilities, immunisation roll-out, health and hygiene promotion, community health services, etc.); socio economic support, primarily food and other in-kind assistance; and support to volunteers (access to PPE) and to National Society strengthening (readiness and sustainability). Their dedicated Covid-19 web-page provides an exceptional database of their expenditure and outreach, an exhaustive mapping of projects and activities through to the national level¹⁴, as well as a collection of reports concerning their Covid-19 response.

OSCE operational responses to Covid-19 have been largely within the purview of its individual institutions and structures. The OSCE Parliamentary Assembly, for example, has established regular Parliamentary Web Dialogues on relevant security developments pertaining to the ongoing Covid-19 crisis for members of the Assembly. These concentrate on three dimensions: the politico-military, the

¹¹ https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/safe-covid-19-vaccines-europeans/global-response-coronavirus_en

¹² <https://www.gavi.org/covax-facility>

¹³ https://global-response.europa.eu/index_en

¹⁴ <https://go.ifrc.org/emergencies/3972>

economic and environmental, and the human dimension, which includes human rights. The Office for Democratic Institutions and Human Rights (ODIHR) systematically monitors the effect of OSCE countries that have declared states of emergency relative to the pandemic on their official commitments to respect human rights, fundamental freedoms, governance and the rule of law principles. They have produced a large number of public statements and publications, and have undertaken specific projects related to the pandemic.

OHCHR's operational response relative to the pandemic has focussed on monitoring the human rights dimensions, in particular to mitigate the effects, often unintended, of measures designed to halt the spread of the virus. Together with UN partners, they have prepared a comprehensive Human Rights Guidance¹⁵ on a range of themes, numerous speeches, statements and editorials, and other tools and publications, including the *Checklist for a Human Rights-Based Approach to Socio-Economic Country Responses to Covid-19*¹⁶. The Human Rights Treaty Bodies¹⁷ and Special Procedures¹⁸ have also taken numerous initiatives in relation to Covid-19 with the aim of stressing the importance of adopting a human rights-based approach in addressing the crisis.

UNODC has responded to the crisis through various research and policy initiatives, whereby data is collected to explore the longer-term consequences that Covid-19 is having on drugs and crime. A series of research briefs and studies¹⁹ examine the impact of Covid-19 on specific topics, including the drug supply chain, smuggling of migrants and trafficking in persons, and trafficking of falsified Covid-19 related medical products. The UNODC has also prepared a large number of policy documents²⁰ related to Covid-19 on a wide range of issues, including crime prevention and criminal justice, corruption, crisis evaluation, cybercrime, and gender.

UNESCO's response underscored the importance of obtaining and disseminating reliable information as an integral part of their operational response, and also fed into the specific activities that were undertaken. This can be viewed not only as a cross-cutting approach, as described at [2.2.3.2](#) below, but also in the context of their general mandate relative to countering misinformation whilst supporting freedom of information²¹.

"It was clear by March that the need was data-data-data. We were lacking data with respect to schools and closures, and therefore the impact on education. We thought that a contribution of UNESCO would to provide this data. We convened an online meeting of around 60 ministers, which aimed to provide exchanges of best practices regarding online education".

Education represents UNESCO's largest sector, and the organisation conducted webinars and provided other guidance relative to educational policy in the Covid-19 context. They also started working with information technology companies to provide tools to schools and access to education in remote areas to over 120 countries.

Ministerial meetings were also held relative to open data and scientific knowledge, for example sharing information concerning vaccines and pharmaceuticals, and the impact of the pandemic on cultural industries.

¹⁵ <https://www.ohchr.org/EN/NewsEvents/Pages/COVID19Guidance.aspx>

¹⁶ https://www.ohchr.org/Documents/Events/COVID-19/Checklist_HR-Based_Approach_Socio-Economic_Country_Responses_COVID-19.pdf

¹⁷ <https://www.ohchr.org/EN/HRBodies/Pages/COVID-19-and-TreatyBodies.aspx>

¹⁸ <https://www.ohchr.org/EN/HRBodies/SP/Pages/COVID-19-and-Special-Procedures.aspx>

¹⁹ <https://www.unodc.org/unodc/en/data-and-analysis/coronavirus.html>

²⁰ <https://www.unodc.org/unodc/en/covid-19-policy-documents.html>

²¹ <https://en.unesco.org/publications/balanceact>

For its part, the operational response of the WFP was rapid, and in order to mobilise staff the Executive Director issued an institution-wide message regarding their ability to deploy. This resulted in a massive response from staff, and the creation of a dedicated surge unit, which has proved very effective in rotating staff, particularly since the Programme has the air capacity to do so.

In April, a Global Covid-19 Response Plan²² was developed, focused on the impact of the pandemic on their beneficiaries, and centred on three primary objectives, sustaining WFP objectives, enabling the global health and humanitarian response, and tracking impacts. The Plan provided a narrative to the organisation's strategy, gave direction and a voice to colleagues on the ground, and contributed to the visibility of both the issues and the institution, and is generally considered to have been a useful initiative.

Significant achievements of the WFP response included the establishment of two hospitals, as well as a global air service (which at one point was the largest operating airline in the world), providing transport for their own and other international staff, as well as moving relief-related cargo to areas of acute need. This allowed the organisation to 'surge', bringing staff into and out of the field in response to the shifting nature of the pandemic.

Organisations demonstrated a strong emphasis on support to direct partners or country counterparts. The IFRC for example ensured not only that National Societies retaining a lead role, as outlined above, but also that they were supported in their mission. This included relative to conducting or updating assessments and plans, local resource mobilisation, and monitoring of activities to ensure accountability to donors.

They observed that their support also extended to countries that have not usually required support, notably Italy and China in the early days of the pandemic. Facilitating peer-to-peer exchanges between countries was an important component of this support.

The pandemic generated significant challenges for all organisations in terms of programme delivery, and the requirement to work on new and pressing issues. Reprogramming or programming adjustment took place in many institutions, both to face the concrete challenges of the pandemic, and to adjust to financial constraints.

The OHCHR found creative solutions to continue implementing its planned work in the context of Covid-19, including reprioritisation and a shift in focus of existing work streams. The activities of international human rights mechanisms were particularly affected, such as country visits by special rapporteurs, however this was addressed through follow-up of previous reports, engagement with stakeholders, and a focus on trends and new challenges. Human rights treaty bodies held online sessions, to maintain the consistent protection of rights-holders.

The OSCE's analysis of project implementation challenges caused by the pandemic provided a mixed picture. In a survey covering around 1 000 project and program staff, 30.1% responded that they had overall experienced "slightly more" project implementation challenges than usual, while 56.8% responded that they had experienced "considerably more" project implementation challenges. Considerably more challenges had also been experienced in terms of project delays (43% of the respondents), delivery of capacity-building activities in particular (37% of the respondents), and delivery of project activities in general (33% of the respondents). In contrast, 90% of the respondents replied that the pandemic had no or little impact (in any direction) on gender mainstreaming and the integration of diversity considerations in projects.

²² <https://gisf.ngo/wp-content/uploads/2020/04/WFP-Global-Response-Plan-8.4.202.pdf>

2.2.3 Cross-cutting approaches

2.2.3.1 Co-operation and partnership

Establishing and maintaining co-operation and partnership, with a range of entities and stakeholders, and at the global, regional, national and local levels, was a cornerstone of the responses adopted by organisations, by ensuring coherence, effectiveness and complementarity.

A strong example of this can be seen in the responses of the EU and its institutions, and notably the Commission, which engaged in discussions with member states on a range of issues including non-medical responses, and restrictions of movement with a view to instilling coherence (see [2.2.1.3 above](#)). As one official noted *“it has been the same in all crises, whether the pandemic or migration; countries realised that acting together makes a lot of sense”*.

The IFRC has had highly successful dialogue and co-operation with international partners, including the International Committee of the Red Cross (ICRC), which allowed them to develop a common Red Cross Movement narrative relative to the crisis, even if their strategies are markedly different. The Federation also considers that the pandemic has brought the Movement’s membership closer, with greater engagement and sharing within and between different regions.

Their donor partnerships were also enhanced, with the strong engagement of the private sector being *“a big, beautiful surprise”*, with a 30% increase in their contributions, in addition to in-kind contributions to National Societies of highly specialised volunteers. Their engagement with the private sector has moved however beyond funding, with positive exchanges and partnership in different forums and initiatives.

Collaboration and dialogue with governments has also been significantly enhanced, with regular discussions and updates on a range of issues, such as risks, trends and advocacy relative to vaccination. They have also intensified collaboration with UN institutions, for example relative to implementation of guidance developed by the Office for the Coordination of Humanitarian Affairs (OCHA).

The OHCHR worked with a broad range of UN partners to address pandemic issues, including WHO, UN DCO, UN Women, IOM, UNHCR, UNICEF, ILO, UN Habitat, UN Water, UNODC and others.

The Office’s co-operation with partners has included sharing tools, expertise and lessons learnt, for example in the development of Global Compact’s risk register. It has supported the inclusion of human rights standards and principles in their guidance and actions, and contributed to resolving challenging human rights issues, for example through the provision of an indicators framework to help monitor the human rights impacts of Covid-19, and by supporting Resident Co-ordinators (RCs) and UN Country Teams (UNCTs) in their work on National Response Plans. The Office also participated in, and sometimes led, Protection Clusters and gender networks.

In Geneva, various co-ordination mechanisms were headed by UN and the WHO, which supported the Office’s working relationships with international organisations, and the Swiss and French governments.

OHCHR’s outreach and co-operation in the field relative to Covid-19 *“happened almost automatically”*, since the Office is embedded within the UN, hence has an advisory capacity at the country level and was also able to build upon its many established relationships with local organisations.

The OSCE for its part has leveraged the presence of UN Agencies in Vienna for guidance on best practices, and has participated in various meetings co-ordinated by UN, NATO, and other partners.

UNESCO has also leveraged its existing partnerships with other agencies, such as UNICEF and WHO, and has collaborated with other agencies, such as the OHCHR regarding countering stigma and discrimination against vulnerable people. Joint activities have also been undertaken at the local level within the UN system. Engagement with the permanent delegates of its member states was continuous, and highly effective.

The WFP also built on its established partnerships, for example a global MoU with WHO pursuant to which they had already collaborated in the Ebola response. Their air service was able to assist the WHO in the distribution of medical supplies, oxygen, respirators and other critical cargo, with the partnership having “*blossomed at a key moment*”. Other existing partnerships that were significantly developed and taken in new directions during the crisis included UNICEF and the European Space Agency.

2.2.3.2 Information and communication

As indicated above, ensuring accurate and reliable flows of Information and data quickly emerged as a critical priority in responding to the crisis. Obtaining information regarding the pandemic’s impact, at the global, regional, country and local level, and across multiple sectors, was essential to formulating responses that corresponded to current and emerging needs. Further, it was apparent that such data should be shared both internally within institutions, and externally towards partners, beneficiaries, stakeholders, and the general public. In addition, multi-dimensional, general communications were an essential tool in institutions’ responses, to ensure messaging about their own strategies and responses; ensuring visibility of themselves, their partners, and the overarching issues they support; and countering misinformation, which had rapidly emerged as a significant obstacle to combating the progress of the virus.

In responses to these unique challenges, organisations developed dedicated Covid-19 communication strategies, accompanied by the provision of additional resources. They reported that they are generally pleased with their responses relative to information flows, and internal and external communications.

For many institutions, information-sharing and communication was an integral aspect of their own programming, such as UNESCO as described above, since it was linked to their original mandates. All organisations report, however, that their communication activities were dramatically scaled up from the onset of the pandemic.

The OHCHR developed a dedicated information management system, a Covid-19 tracker, guidance notes, regional Covid-19 snapshots and Covid-19 infographics, which have become regular aspects of their work. A strong focus has also been their internal communication efforts, which aimed to keep staff informed about pandemic and its impacts on staff. A regularly updated intranet site, as described above, was established for this purpose, which also contains frequent all-staff messaging and guidance on telecommuting and other Covid-related measures, as well as the human rights implications of the pandemic. This was halted towards the end of 2020, since by that stage other mechanisms existed to provide that information.

A key objective of the OHCHR crisis team has also been ensuring that information obtained from the ground is in turn communicated to senior management, to enable its subsequent uptake in strategy and programming.

The OSCE for its part ensured daily emails to keep staff up to speed on Covid-related protocols, and also developed an internal webpage dedicated to information related to the impact of Covid-19 on its operations, and the OSCE response.

In terms of external communication, the vast majority of organisations invested in dedicated websites/ webpages outlining their Covid-19 response, as well as the impact of Covid-19 on their mandate, and often containing comprehensive compendia of reports, briefings and internal evaluations and monitoring.

UNESCO conducted numerous meetings and ‘webinars’, with the aim of ensuring reliable data was accessible to the public and to policy-makers, and to counter misinformation. They also focused on reaching out directly in more vulnerable regions and populations. They consider that their outreach, and their provision of access to reliable data, were amongst their greatest achievements, with regular reports on the impact of the pandemic on all the issues within their competence, and their own Covid-19 response. Indeed, they are of the view that the pandemic has provided an opportunity for the organisation to increase their overall visibility, with their Director General appearing in, and writing for, the international media, providing data on school closures, cultural sites, the pandemic’s impact on the environment, etc.

“Our voice was heard and became a reference in our areas of competence. We did a campaign called ‘the next normal’; it was probably the best campaign we have ever done. We are proud of the visibility and our presence in terms of providing data, and knowledge about Covid-19, and bringing stakeholders together”

However, related to internet access difficulties described above, the organisation experienced challenges in ensuring an even and equitable dissemination of information, particularly to remote areas. In addition, several organisations noted that they struggled to overcome language barriers. The IFRC responded to this through a massive investment in translation, which was complemented by increased outreach through their National Societies. This again underscores the importance of providing increased support to local partners’ capacities.

Some organisations also struggled with maintaining regular internal communication cycles and ensuring visibility of their organisational positions and initiatives. Internal messaging occasionally created incoherencies between organisational and host country protocols and restrictions, with country staff uncertain as to whom they were answerable. Some organisations also observed that they struggled to create and fill positions for internal communication relative to Covid-related issues.

2.2.3.3 Integration of human rights, gender, vulnerability and inclusiveness

The pandemic triggered and exacerbated various human rights challenges, including: threats to multilateralism as countries imposed unprecedented executive measures; challenges to multilateral co-operation; exposure to the damaging impacts of inequalities, with significant risks to the enjoyment of economic and social rights; incidents of racism and xenophobia; risks to vulnerable persons and groups; adverse impacts on women and girls; and risks to civil and political rights, such as measures restricting freedom of expression, and new forms of surveillance and data collection.

The majority of organisations examined did not adopt a human rights-based approach to their Covid-19 responses, nor address any specific rights issues. There was however a strong tendency, in needs assessments and the prioritisation of responses, to focus on issues of inclusiveness, and vulnerability to the effects of the pandemic. This provided a *de facto* reinforcement of protection to women, children, the elderly, persons living with disability, and those with increased health risks.

The OHCHR played a major role in the establishment of the UN's socio-economic response framework to Covid-19, including the development of ten indicators for monitoring the human rights implications of the crisis.

The OHCHR has emphasised that human rights must be placed at the centre of pandemic recovery efforts, to ensure that no one is left behind²³. The Office has therefore provided extensive policy and technical advice to ensure that human rights were integrated in the responses of States, UN partners, National Human Rights Institutions, civil society and others, and that targeted actions were implemented to support vulnerable groups.

The OHCHR also established a strong approach to human rights risk management in the context of Covid-19. As indicated above, the Office provided inputs to the UN Secretariat Risk Register on the Secretary-General's Strategic Focus Areas and Critical Risks.

The EC indicates that rights issues emerged in their response to the pandemic in a number of ways. For example, the DG Employment report *"Social protection and inclusion policy responses to the Covid-19 crisis"*²⁴ highlights the uneven impact of the crisis across groups, with its findings now mainstreamed across all Directorates-General.

Health and freedom of movement also emerged as key concerns, with the need to impose and justify restrictions, whilst adhering to human rights obligations, becoming increasingly important as the pandemic progressed. Certain member states imposed restrictions on the freedom of expression and assembly, under the guise of a pandemic response, to which the EC responded strongly.

"One vulnerable group is returning migrants, who are going back to difficult places, where their families have been reliant on them on them for support, or they are stuck in migrant centres or quarantine. We have had to think of whole new populations"

The impact of Covid-19 on minority and migrant groups, for example unequal access to employment, vaccination, and other health and social services, were also the subject of particular attention by the EC and have been mainstreamed into the approaches of several Directorates-General.

The OSCE Office for Democratic Institutions and Human Rights (ODIHR) undertook a number of activities related to the pandemic, with a large number of publications addressing the rights implications of public emergencies, in particular relative to justice, gender, migrants, minorities, and other rights safeguards in states of emergency²⁵. Human rights in the pandemic context were also integrated into the activities of other OSCE institutions and structures, and was the specific focus of the 2021 OSCE Parliamentary Assembly²⁶.

²³ <https://www.ohchr.org/Documents/Publications/AnnualAppeal2021.pdf>

²⁴ <https://ec.europa.eu/social/main.jsp?catId=738&langId=en&pubId=8418&furtherPubs=yes>

²⁵ <https://www.osce.org/odihr/covid-19>

²⁶ <https://www.oscepa.org/en/news-a-media/press-releases/press-2021/human-rights-in-focus-at-first-meeting-of-the-osce-parliamentary-assembly-s-2021-remote-session>

In the early stages of the crisis, as the WFP was gaining an understanding of what was required to sustain populations and to scale up their activities, they rapidly identified specific needs of certain vulnerable groups, in particular the elderly, and those with pre-existing health conditions. They have therefore undertaken intensive and highly targeted mobile Vulnerability Assessment and Mapping (mVAM), to obtain information rapidly, directly and safely from affected populations.

2.2.3.4 Reporting, monitoring and evaluation

All organisations observed have undertaken contemporaneous and periodic internal and external reporting, monitoring and evaluation exercises, with reports and results generally made public on the dedicated websites described above. Several organisations developed Covid-specific real-time monitoring and evaluation from the outset of the pandemic.

Such reporting, monitoring and evaluation has encompassed the impact of Covid-19 on organisations' target groups and issues; its impact on the organisations themselves; and assessment of their organisational and organisational responses to the pandemic.

An impressive example of contemporaneous monitoring and evaluation is provided by the OSCE. In 2020, the audit unit of the OSCE Office of Internal Oversight (OIO) conducted two surveys entitled "*Navigating the Pandemic*", addressed to 1 900 staff members, regarding the pandemic's impact on the organisation. This encompassed issues such as remote working conditions, access to IT services, productivity, etc.

A second survey was distributed by OIO's evaluation unit to 1 000 staff in April/May 2021, which sought to identify lessons learned and best practices, and focused on the impact of the pandemic on various aspects of project planning and project implementation, as well as the reasons for such impact. In addition, focus group discussions were conducted with staff members in various field operations, and the budget utilisation rate was mapped, to gauge any dislocations or impacts of the pandemic on project delivery, and was compared to previous non-pandemic years. Furthermore, OIO's audit unit has carried out agile auditing tasks related to the organisation's Covid-19 crisis response. The organisation's monitoring focused on what was happening at the time, what was likely to happen in future, and how to prepare, the objective being to identify current and emerging risks, and support management in their response to the crisis, in real time.

The security management had a key role in monitoring "in real time" the impact of Covid-19 on staff. The reporting of cases (organisation-wide) was centralised in security management, who in turn notified the key stakeholders within the organisation. Through this reporting the OSCE was able to identify key vulnerabilities and flag potential cases that required medical support including medical evacuation. The establishment of a strict/formal protocol for sharing of medical/sensitive information at the beginning of the pandemic assisted security management in this role.

Some organisations saw an enlargement of their usual reporting scope during the pandemic, in order to reflect the globality of the crisis, and the breadth of responses. For example, the IFRC's reporting now encompasses the activities of all National Societies, rather than on what the Secretariat is doing, making all data Federation-wide.

Certain organisations consider however that reflection on some of the broader implications of their Covid-19 response is somewhat premature, with the pandemic still unfolding and evolving. The EC, for example, observed that while there is a clear intention to examine and revise the ARGUS crisis management mechanism, they will "*come back to the drawing board at a slightly later stage*".

2.3 Adaptability, innovation and change

2.3.1 Adaptability

There was a sense from organisations that, while they had been thrown into a strategic and practical no-man's-land, they were able to rapidly develop and adopt practical and effective solutions and 'work-arounds' to emerging and shifting constraints.

For example, the EU soon realised that it didn't have the mechanisms or structures in place, unlike the US, to speed up the development and manufacture of vaccines. This required them to develop a development, evaluation, approval and monitoring structure very quickly²⁷, which gained the unanimous agreement of member states, who understood the importance of a common approach to ensure their equitable distribution.

The EC also observed that legislative processes and timelines within the Parliament and Council were significantly enhanced, due to the urgency of the issues arising from the pandemic.

"We didn't have a template for this kind of escalation and spread, so it was improvised. Often there is 'managing as you go' in a crisis, and it worked fairly successfully, given the circumstances"

The IFRC observed that its Covid-19 response has needed to be revised and scaled up on four occasions, which entailed the development of new response plans for each National Society. This proved to be an extremely challenging process, requiring enormous flexibility, which was initially centralised in the Secretariat-General, but has since been spread more broadly.

UNESCO observed that the urgency created by the pandemic required more flexibility. This allowed them to develop an innovative coalition in support of distance learning. The coalition then collaborated directly with governments, providing equipment to schools, under the auspices of UNESCO. This has since become a flagship initiative, with three main areas of interest: teacher training, e-learning, and girls' education.

2.3.2 Innovation and change

Organisations report that the pandemic has facilitated the development of a range of new – and often innovative – modalities, approaches, procedures, and initiatives, many of which are likely to continue beyond the pandemic period. Several have also conducted, or envisage, specific evaluation processes to assess not only the effectiveness of their responses, but also how improvements and lessons learnt can be permanently institutionalised.

The EC rapidly understood the need to strengthen links with the scientific community and have already established contracts with scientists to provide rapid-response feedback and analysis on a range of issues. The EC anticipates conducting a full review of the organisation's crisis management cycle, incorporating key elements such as prevention, preparedness, response, recovery, but at a granular level, engaging in foresight by building scenarios and analysing meta-trends, encompassing the overall movement of multiple, simultaneous trends.

The EC considered that a highly successful initiative has been the digital vaccine certificates developed from a proposal of the EC, and effective since July 2021. EC interlocutors also consider that an

²⁷ <https://www.ema.europa.eu/en/human-regulatory/overview/public-health-threats/coronavirus-disease-covid-19/treatments-vaccines/vaccines-covid-19/covid-19-vaccines-development-evaluation-approval-monitoring>

important change has been a shift of mindsets between member states in their interactions in the Council, although there is a concern that they are likely to return to previous diplomatic approaches.

The IFRC indicated that the pandemic provided a testing ground for the development of national plans and is an initiative that will continue since it allows them to have a global response to crisis by providing a learning framework that allows them to observe what works and where, compare capacities, and adapt data collection. The crisis has also allowed the organisation to scale up their cash-transfer programming, with beneficiaries able to access cash vouchers as part of their emergency response, and which allowed them to overcome restrictions of movement to a significant extent.

Their risk management was also massively scaled up in response to the pandemic, in particular relative to financial and human resources risks. As a result, the Covid-19 risk strategy that was developed has now become a global risk strategy and register, which will be used more generally into the future. The pandemic highlighted the need to support National Societies' capacity, particularly in remote settings, and has prompted a rethink about the implications of remote working, digital deployment, and fast-tracking responses and information flows. This is leading the organisation towards a more systematic use of virtual missions, and other resource-saving approaches.

The pandemic has also highlighted their constraints relative to procurement, logistics and financial systems, which are usually country-specific, but which suddenly needed to operate at a global scale. The pandemic required a rapid response, to ensure that National Societies had adequate resources, which in turn obliged the organisation to adjust its procedures to make them more flexible. While this responded to urgent needs on the ground, it also increased their obligation to ensure financial monitoring. As a result, the organisation has revised their monitoring practices relative to risk and auditing, with each country collaborating directly with risk management, operations, and senior management. This in turn has brought these teams much closer and has allowed support at a more strategic level.

For the OHCHR, the pandemic accelerated the development of their own risk register and plan, which will be reviewed annually, in order to help the Office to anticipate and manage a future crisis more efficiently.

The Office considered that they have considerably improved and consolidated how they describe what they do, with a shift away from formal and legalistic language. This has been a result of a significant investment in communication and media, and donor relations, in order to strengthen messaging. Office staff also consider that the home-work balance is considerably improved, with teleworking likely to remain at least to some extent. Changes relative to the conduct of meetings, incorporating an online component for increasing participation from staff/experts away from HQs are also likely to remain. Similarly, the OSCE highlighted that there is now greater understanding of personal constraints, for example relative to childcare.

Other Office activities will also be conducted differently, for example a large-scale evaluation of the *United Nations Free & Equal Campaign* took place remotely in 2020, as did evaluations conducted in 2021, and future evaluations are expected to adopt similar methodologies.

The OSCE saw a concerted effort to integrate health issues into the workplace, noting that "*we started pandemic without a medical doctor in the organisation, now we have one, and we have the beginnings of a health policy*".

UNESCO indicated that Covid-19 impacts are now integrated in future planning, and their crisis preparedness responses have been strengthened and expended. They have also observed stronger

internal co-ordination, and have permanently changed working methods, with missions reduced by 85% during the pandemic. The digital sector, in particular relative to digital learning, science, oceans, and fighting discrimination through media, is now more prominent in programming and will be mainstreamed. Whilst internal procedures have not fundamentally changed, the pandemic has allowed the adoption of more flexible methods, which will likely remain in the future.

They also report that the pandemic has changed how the organisation communicates with the media and the public, since this has become more habitual, and capacities and confidence have been raised. In addition, the ministerial meetings regarding open data and scientific knowledge, and cultural industries described above have prompted ongoing discussion and activities.

The WFP indicates that their response helped to trigger new relations within governments at the national level, which helps to contribute to resilience. It also allowed for greater flexibility in human resources and working rules, much of which has remained.

However, some organisations expressed considerable doubt as to the extent to which many of these changes have become institutionalised, with many still at a nascent stage and not entirely stable.

“Management has not fully integrated the advantages it would obtain from identifying threats early, and developing key steps and measures to navigate a disruptive event more effectively”

“The pandemic created awareness, but a false sense of security”

Further, despite a tightening of risk management plans, there is uncertainty as to whether there has been adequate analysis of the Covid-19 response relative to other forms of crisis.

2.4 Best practice and lessons learnt

Organisations demonstrated strong insight of their own achievements and challenges, and what approaches were effective – or were not. The following sections outline the best practices and lessons learnt contain reflections from interlocutors in their own words, with their own narrative, about their organisations’ experiences.

2.4.1 Best practice

Investing in strong leadership and structures

- *“Decision-making requires not only quality information, but also structures and leaders who are able and available to make these decisions”.*

Valuing relationships

- *“We never compromised the health of staff, and we worked very closely with the staff union here. In our duty of care, we showed flexibility in human resources rules, and we drafted internal policy in a timely manner”.*
- *“National sustainability was an issue, since we expected National Societies to scale up quickly, but suddenly income-producing activities were not available, so we had to provide specific funds to support them. As a result, we didn’t see any that were overwhelmed”.*
- *“We have been building a Covid-19 learning strategy, but we have decided to build beyond that. A lot of our National Societies are quite resilient, but there has been a great deal they’ve had to respond to, not just Covid-19 but all the other crises. We have decided that we will invest more at the country level to support them more, for example by providing stronger peer-to-peer support”.*

Building preparedness

- *“Training, awareness-raising and maintaining networks are important elements in building preparedness”.*

Building trust and understanding

- *“We had to address a lack of trust – in governments, in health systems – so how do you change that? How do you build enough trust so that people go and get the vaccine? We took some of these learnings from Ebola, where we had done a lot of perception surveys, and modified a lot of our messaging on the basis of that”.*
- *“An important part of dealing with crisis is ‘meaning-making’, not just communication. The success or failure of an organisation in a crisis is as much about communication as it is about substance in this super-connected world. So how we communicate with the world makes what we do a success or failure – in the eye of the beholder”.*

Focusing on resilience and ‘anti-fragility’

- *“You can’t prepare for everything, you manage a crisis as best you can, then you try to recover and then you reflect on the system, preparedness, and activities. The focus should be on resilience and ‘anti-fragility’, so that next time you can rebound more quickly, and hopefully come out of it stronger”.*

‘Making it happen’

- *“We lost a couple of months in March. By then, the US was pushing funds into BARDA [Biomedical Advanced Research and Development Authority], whereas we had to design [the vaccine response], and then implement it. This was a big institutional leap forward”.*
- *“Our corporate approach was very effective. There was a lot of effort to ensure [we] could stay and deliver. It was an overriding concern because so many people rely on us, so there was an immediate recognition that this was in jeopardy. It all happened very fast, and it is heartening to see that kind of corporate shift can happen in that way. There was no fumbling, and people stepped up. So, there is recognition that we have a model that is very operational”.*

Building on momentum

- *“How long will political momentum last, how well are lessons being learned? We have to use this window of opportunity to boost institutions. We’ve got to do stuff now”.*

2.4.2 Lessons learnt

Working together

- *“One of the things we didn’t do well with was concerning the vaccines, where we focused on getting countries on board, however Parliament felt excluded from the development of the strategy. Now we have a contact group, and meet with three committees, in order to brief them and provide a forum for them to contribute, but we should have done this earlier”.*
- *“In a crisis, making decisions solely within borders just doesn’t work, it doesn’t last five minutes if you have completely different rules to your neighbours, since it will weaken public measures, and your own policies will be undermined”.*

Early monitoring

- *“The crisis taught us how to do better with respect to monitoring, early warning, sensemaking, and having people who can separate grain from chaff in a situation of information overload”.*

Stronger understanding of risk

- *“We have known for a long time there was likely going to be a pandemic – and we didn’t do anything. In a rational world we would say ‘let’s be better prepared’, but we keep fighting the last war. We have to keep our understanding of risk much broader”.*

- *“Risk management was another big lesson we had to learn, in particular that it is important to document risk separately”.*
- *“We realised the need for risk management, and crisis management protocols clarifying who is making the decision, and how is that decision being made”.*

Understanding the limitations of new working modalities

- *"We have to be careful about what can be replaced. While some opportunities have arrived, and need to be explored, we have to think about what this means in terms of human rights monitoring".*
- *"One of the lessons was that purely remote modalities are not without risk in terms of dislocation from the work context, having a work-life balance, and impact on the wellbeing of staff".*
- *"One lesson learnt has been that it was important to keep the presence of key staff in the last 18 months. We needed to meet, and we needed a core team to be present when the strict lockdown was over".*

Thinking ahead

- *"We are thinking about what do we need to pre-position in future. We have always focussed on providing food, but we didn't think beyond that, in terms of protective material, psycho-social support for staff and family, those extra levels of support. It is about taking what we now understand, and running forward with that, putting those capacities in place, even if it is not immediately needed, to ensure we have what we need going forwards. That is a real challenge".*

Some interlocutors' reflections could not be placed neatly within a lens of best practice and lessons learnt, and showed considerable uncertainty as to whether there has been adequate institutional uptake of core issues exposed by the crisis, and whether it is perhaps too early to examine its broader implications.

- *"No one could have foreseen what the pandemic would involve. We should have learnt some lessons, but I'm not sure we could have done better. I think for what it was, and how unprepared we were, I don't think that was possible".*
- *"Our response worked, fairly successfully, given the circumstances. But that does not mean we could not do better!"*
- *"While our Covid-19 response was effective, it is not certain this would have been the case if the virus had been more deadly or localised, or if it has been a crisis that affected the organisation in different ways, such as a cyber-attack. This is an example of how Covid-19 is unique, but destructive events are not. So the successful navigation of the pandemic maybe created a false sense of safety, that we are able to react to anything".*
- *"One of the things that could be helpful is that the organisation reflects not just on how it well it reacted, but what does it do to prepare for it? I think it's thought about, but in a very sectorial way".*
- *"The organisation was good at managing short-term risks, but less at looking towards the future, and shaping it".*
- *"We did an evaluation, we worked out what worked, what didn't, and adapted protocols, and we now have a number of sectorial initiatives. However, the lessons learnt will have to come at a later stage, when we can all pull together, and have a global overview and make suggestions".*

3. Conclusions

Conclusion 1: Establishing an early strategic response provided a framework for organisations' subsequent handling of the crisis.

While the pandemic took international organisations unawares, they rapidly grasped the need to react as a matter of urgency, showing exceptional turnarounds in their mobilisation. Those who initiated early monitoring and proactive approaches were generally those with crisis management mandates, such as humanitarian organisations, or with strong internal risk management structures. There was

early co-ordination and co-operation of their responses, with cross-sectorial approaches becoming more important as the pandemic expanded.

Organisations developed new strategies and policies in line with shifting political priorities at remarkable speed, in comparison to their usual practices and modalities, and were deft in their handling of challenges that arose.

Conclusion 2: Crisis preparedness was an essential factor in the speed and effectiveness with which organisations were able to respond.

Organisations with existing crisis management mechanisms were required to dramatically expand their capacities, but the breadth and impact of the pandemic meant that even they were challenged. Organisations without well-developed mechanisms struggled to respond in the early stages of the pandemic.

Conclusion 3: Dedicated crisis response teams provided an essential pivot-point for intervention.

Organisations swiftly established dedicated Covid-19 response teams, often surprisingly small, allowed for the centralisation of information, and streamlined strategy development and the co-ordination of response implementation. The rapidity and clarity of their creation was more important than how they were structured within the organisation.

Crisis response teams were soon complemented by more decentralised thematic, regional or country teams, to provide operational management of the response with greater flexibility and contextualisation.

Conclusion 4: Early, hands-on leadership contributed strongly to the effectiveness of an organisation's response.

The direct involvement of senior management from the outset of the pandemic was critical in developing strategy, ensuring diplomatic and political engagement, maintaining coherence, and reinforcing messaging and staff morale.

Conclusion 5: While alignment of member state priorities was at times challenging, organisations were successful in developing an advisory and mediating role.

Certain organisations struggled achieving coherence with, and between, the priorities, policies and approaches of their own member states, however they were able to assist with the development of pragmatic solutions to common problems. Providing an advisory role, and acting as a source of reliable information, were for certain organisations as important as more concrete operational responses.

Conclusion 6: Organisations developed multi-sectorial approaches, and strengthened their internal co-ordination, which contributed to the effectiveness of responses.

Organisations quickly appreciated the need to loosen existing internal thematic and structural divisions, which helped to ensure a multi-sectorial perspective. This was supported by generally high levels of internal co-ordination, which strengthened understanding between different sectors and services. It was also facilitated by the development of tools, such as intranet systems, which provided updated information on developments related to the pandemic. Integration of different sector heads within crisis management teams also supported the exchange of inputs and perspectives.

Conclusion 7: Organisations rapidly adopted new working modalities, which brought both positive and negative effects.

Organisations were able to transition smoothly to generalised 'teleworking', including at the operational level to ensure programme continuity. Some organisations experienced unanticipated positive effects, including increased inclusiveness and participation, and more flexible human resources policies. Challenges included increased isolation, reduced engagement, impaired working relationships, internet difficulties, and safety risks to stakeholders. Significant challenges also exist at the diplomatic and political level.

Conclusion 8: Organisations demonstrated strong commitment to the duty of care.

Organisations appreciated the need to fulfil their duty of care and were highly pro-active and generally consultative in this regard.

Conclusion 9: Organisations mobilised significantly increased resources to respond to the crisis, while strengthening and expanding their donor base.

Organisations, particularly those with a humanitarian mandate, quickly appreciated the need for vastly increased human and financial resources. Relationships with existing donors were strengthened, and new sources of funds emerged, in particular from the private sector.

Conclusion 10: Operational responses were broad-ranging and needs-focused, and were guided by local monitoring.

Organisations' programming and delivery were aligned with their mandates, and focused on the needs of partners, beneficiaries and stakeholders, supported by careful monitoring of events on the ground. Programming was contextualised and flexible, whilst often vast in scope, from large-scale humanitarian assistance, through to research, policy development, information dissemination, advocacy, and support to local partners.

Conclusion 11: Organisations' co-operation and partnership efforts contributed to the effectiveness of their responses.

Establishing and maintaining co-operation and partnership with a range of stakeholders was crucial in ensuring coherence, effectiveness and complementarity. Organisations strengthened and leveraged existing partnerships, and fostered new relationships, including with other organisations, governments, and the private sector. Organisations demonstrated great generosity, sharing their tools, expertise and lessons learnt.

Conclusion 12: Organisations ensured strong information flows and communication about the pandemic and their own efforts.

Organisations helped to provide accurate, reliable flows of information, both internally and to others, and engaged in intense communication initiatives that ensured messaging and visibility, and helped combat misinformation. Some organisations consider that these efforts were amongst their greatest achievements during the pandemic.

Conclusion 13: Organisations generally integrated human rights, gender, vulnerability and inclusiveness issues in their strategies and operations.

While most organisations did not apply specific human rights approaches to their responses, there was nevertheless a strong focus on issues of inclusiveness and vulnerability. Several organisations provided policy and technical advice related to these issues in the pandemic context, as an expansion of their ordinary mandates, and these approaches were directly mainstreamed in their operations.

Conclusion 14: Organisations have ensured regular monitoring and evaluation, which has contributed to adjustments to their responses and future planning.

Organisations have undertaken real-time or periodic internal and external reporting, monitoring and evaluation which have focused on past and current responses, and preparation for future needs and risk. Deeper reflection on their responses may be premature, given that the pandemic is still continuing.

Conclusion 15: Organisations have demonstrated considerable adaptability and innovation, and have effected lasting changes.

Organisations developed practical and effective solutions and 'work-arounds' to emerging and shifting constraints. Strategy and policy were developed rapidly and have been revised as needs and events have evolved. They have also established new, innovative and flexible modalities, mindsets, approaches, procedures, and initiatives, many of which are likely to be permanently institutionalised. It is uncertain however whether organisations will be prepared to address future crises, particularly if they are fundamentally different.

Conclusion 16: Organisations have developed best practices in approaching the pandemic and are integrating lessons learnt into their future responses and crisis preparedness.

Organisations identified some key factors that contributed to the effectiveness of their pandemic responses, as well as aspects of their responses that were more problematic, and which provide opportunities for learning. These are synthesised as follows:

Leadership

- Organisations require strong, involved leadership and dedicated structures in order to effectively address crises.

Relationships

- Strong relationships with staff, partners, stakeholders and beneficiaries must be prioritised, and actively nurtured. Organisations need to ensure that key stakeholders are proactively included in crisis responses from the outset, otherwise tensions and misunderstandings can develop and be compounded.
- Making unilateral decisions can be counter-productive during a crisis. Organisations and states need to work together, and in a coherent manner, otherwise each party's measures will be undermined.
- Trust should be built at all times, not just during a crisis. And the trust that has been built during this crisis should be actively maintained, in preparation for the next.

Meaning

- An important part of dealing with crisis is 'meaning-making'. During crisis, organisations should frame their communication in ways that enhance deeper understanding of events, and their effects on populations and individuals.

Preparedness

- Building long-term crisis preparedness is essential, and requires a whole-of-institution approach, and should focus on resilience and 'anti-fragility' – to bounce back from shock, and to bounce back 'better than before'. Organisations need to prepare proactively for future crisis, developing capacities, systems and training
- Organisations also need to develop capacities to assess, filter and prioritise information during a crisis, since incoming data can often be massive, contradictory, unreliable, or false.

- Organisations need to develop stronger monitoring and early warning systems. They also need to develop a stronger and broader understanding of risk, as well as risk and crisis management protocols, otherwise there is a possibility of being unprepared for new kinds of crisis.

Moving forward

- While there is a place for new working modalities, these come with certain limitations which should be more deeply explored.
- Organisations may fumble, lose time and make mistakes in a crisis, but they can recover and shine with the right corporate approach and the commitment of staff.
- Organisations need to build on the momentum that has been established. Now.

Afterword

The responses of international organisations to the Covid-19 pandemic, which commenced in the first few days of 2020 and is continuing to date, can be characterised by their rapidity, adaptability, and responsiveness. Their new responsibilities were quite literally thrust upon them, with a global urgency, however they assumed them fiercely, intelligently, and with a sensitivity and purpose that encompassed the needs of their organisations, their colleagues, and their partners, through to the most vulnerable of their beneficiaries, adopting approaches that were both global and granular.

They demonstrated creativity and courage at the strategic and operational level, innovation and nimbleness in finding solutions to practical and political challenges, and a willingness to learn, and develop fundamentally different ways of being and doing.

Quite remarkably, these extraordinary responses, arising from an extraordinary time, were mostly conceived and spearheaded by small, strategic teams, upon whose decisions and actions the very lives and livelihoods of billions depended. They have given life to the reflection of Margaret Mead: *never doubt that a small group of thoughtful, committed individuals can change the world; indeed, it's the only thing that ever has.*

We do not know what future crises the world will face, only that they will come. While it is too early to say what the abiding lessons of this pandemic have been, it is clear that they are rooted in our greatest human qualities – communication, care, courage, creativity, and community.

4. Annexes

Annexe A: Summary of good practice

Entity	Initial Responses	Organisational	Operational	Responsiveness/ Change
EC	<p>Early crisis co-ordination committee meetings</p> <p>Early co-ordination between EU/EC agencies</p> <p>(EC/EU) Early strategy development (<i>Draft Council Conclusions on COVID</i>)</p> <p>Existing disaster preparedness and management mechanisms (UCPM, IPCR arrangements, ERCC, CRM, ARGUS, etc.)</p> <p>Establishment of Crisis Coordination Committee, and co-ordinating response team (5 commissioners)</p> <p>Creation of line units within Directorates-General (DG) (DG SANTE, DG ECFIN DG ECHO), ensuring multi-sectorial perspectives & high-level co-ordination</p> <p>Early advisory role (recommendations and advice, providing reliable information)</p>		<p>Ongoing advisory role (recommendations and advice, providing reliable information)</p> <p>Spearheaded EU Digital COVID Certificates</p> <p>Vast scale of EU/EC global support (€46 billion 'Team Europe', Civil Protection Mechanism, Covid-19 Vaccines Global Access initiative, EC Coronavirus Global Response, etc.)</p> <p>Established and maintained strong co-operation and partnership, notably through discussions with member states on a range of issues</p> <p>Addressed Covid-related human rights issues at the policy and political level</p>	<p>Anticipated review of EC's crisis management cycle</p> <p>Enhanced legislative processes and timelines within the European Parliament and Council</p> <p>Established contracts with scientists to provide rapid-response feedback and analysis on a range of issues</p> <p>(EU/EC) Established a rapid vaccine development, evaluation, approval and monitoring structure</p>
IFRC	<p>Early monitoring and response to pandemic (early January 2020)</p>	<p>The Covid-19 Appeal brought together resource mobilisation,</p>	<p>Decentralisation of operational management</p>	<p>Reporting now encompasses the</p>

Entity	Initial Responses	Organisational	Operational	Responsiveness/ Change
	<p>Early coordination between HQ and field</p> <p>Existing disaster preparedness and management mandate, and associated mechanisms</p>	<p>global crisis and health teams</p> <p>Relationships with existing donors were strengthened, and new sources of funds emerged, in particular from the private sector</p>	<p>National Societies retained lead role in operational responses, allowing flexibility and contextualisation</p> <p>National societies were supported regarding <i>inter alia</i> conducting or updating assessments and plans, local resource mobilisation, and monitoring of activities</p> <p>Facilitated peer-to-peer exchanges between countries, including to those that have not usually required their support</p> <p>Vast scale of IFRC operational response, directed through to IFRC national societies</p> <p>Creation of a dedicated Covid-19 web-page, providing an exceptional data-base of IFRC expenditure, outreach, projects, activities and reports</p> <p>Successful dialogue and co-operation with international partners, thus bringing the Movement's membership closer</p> <p>Increased engagement with the private sector, enhanced collaboration and dialogue with national governments, intensified collaboration with UN institutions, resulting in ongoing exchanges and partnerships</p>	<p>activities of National Societies, thus making all data Federation-wide</p> <p>The Covid-19 risk strategy is now an ongoing global risk strategy and register</p> <p>Monitoring practices have been revised relative to risk and auditing</p> <p>Initiated the development of national plans, which will be ongoing</p> <p>Scaled up cash-transfer programming, which allowed beneficiaries to access cash vouchers during the crisis</p>

Entity	Initial Responses	Organisational	Operational	Responsiveness/ Change
			Strong investment in translation, complemented by increased outreach through their National Societies	
OHCHR	<p>Early co-ordination between UN agencies</p> <p>Proactive avoidance of duplication</p> <p>Establishment of Covid-19 Coordination Team, Covid-19 Task Force, Covid-19 Crisis Response Team (CRT)</p> <p>Real-time inputs to the UN Risk Register relative to human rights</p>	<p>Early staff guidance on the protection of pregnant women as a vulnerable category, well before WHO findings</p> <p>Creation of Office intranet, with updated information on human rights impact of the pandemic</p>	<p>Recommendations on Covid-19 and human rights mechanisms, treaty bodies, special procedures & Universal Periodic Review</p> <p>Increased remote monitoring and support to local partners, enabling monitoring and investigation of situations of concern</p> <p>Online governance bodies meetings resulted in an increase of inclusiveness and participation</p> <p>Creative solutions found to continue implementing work, through reprioritisation, shifts of focus, follow-up of previous reports, engagement with stakeholders, and a focus on trends and new challenges</p> <p>Monitored the human rights dimension of the pandemic, in particular to mitigate the effects of measures designed to halt the spread of the virus</p> <p>Preparation of Human Rights Guidance, <i>Checklist for a Human Rights-Based Approach to Socio-Economic Country Responses to Covid-19</i>, plus numerous initiatives emphasising the need for human rights-based approaches to addressing the pandemic</p>	<p>Development of an OHCHR risk register and plan, and of remote evaluation methodologies</p>

Entity	Initial Responses	Organisational	Operational	Responsiveness/ Change
			<p>Provided policy and technical advice to ensure human rights were integrated in responses of States, UN partners, etc.</p> <p>Developed a dedicated information management system, a Covid-19 tracker, guidance notes, regional Covid-19 snapshots and Covid-19 infographics</p> <p>Played a major role in establishing the UN's response framework to Covid-19</p> <p>Worked with a broad range of UN and other partners to address pandemic issues (sharing tools, expertise & lessons learnt, supporting inclusion of human rights standards & principles in guidance and actions, provision of an indicators framework to help monitor human rights impacts of Covid-19)</p>	
OSCE	Establishment of COVID Task Force, replaced by a Crisis Management Team (CMT)	<p>Integration of OIO Director into crisis management team, facilitating the exchange of different inputs and perspectives, etc.</p> <p>Adoption of a rights-based approach to duty of care, for example creation of an internal office memorandum regarding pregnant women</p>	<p>Crisis Management Team supported by existing Security Management Teams (SMTs), to ensure COVID-related issues managed at thematic & local level</p> <p>ODIHR monitoring and publications on the effect of declared states of emergency on human rights and rule of law commitments</p> <p>Parliamentary Assembly Web Dialogues on Covid-19 security developments</p>	<p>Extensive and contemporaneous monitoring and evaluation of their pandemic response</p> <p>Greater integration of health issues into the workplace</p>

Entity	Initial Responses	Organisational	Operational	Responsiveness/ Change
		<p>Creation of more flexible and generous leave policies for staff most affected by Covid-related restrictions</p> <p>Daily emails and an internal webpage to inform staff on COVID-related protocols, and impact of COVID on operations</p> <p>Highly consultative responses to staff needs, based on robust, direct feedback (contemporaneous staff surveys)</p> <p>Sharing of best practice Covid-19 policies</p>	Leveraged the presence of UN Agencies in Vienna for guidance on best practices	
UNESCO	<p>Early cooperation with member states and UN guiding bodies</p> <p>IT preparedness, allowing transition to remote working</p>	<p>Creation of health co-ordination team, to ensure duty of care to staff and others</p> <p>Review of distance-working policy in response to a major staff survey</p>	<p>Conducted webinars and provided other guidance relative to educational policy in the COVID context, and ensuring reliable data was accessible to the public and policy-makers, with a focus on reaching out directly to vulnerable regions and populations.</p> <p>Ministerial meetings relative to open data and scientific knowledge, for example relative to vaccines/ pharmaceuticals, and impact of the pandemic on cultural industries</p> <p>Strong media outreach, which increased institutional visibility</p>	<p>Crisis preparedness responses strengthened and expended, and working methods have permanently changed (missions reduced by 85%)</p> <p>The digital sector is now more prominent in programming and will be mainstreamed</p>

Entity	Initial Responses	Organisational	Operational	Responsiveness/ Change
			<p>Initiated partnerships with IT companies to provide tools to schools and access to education in remote areas</p> <p>Leveraged existing partnerships with other agencies, with joint activities undertaken at the local level</p>	<p>More flexible interpretation of internal rules and procedures, which <i>inter alia</i> allowed the creation of a coalition in support of distance learning, without having to follow formal processes</p>
UNODC	Early co-ordination between UN agencies		Extensive research and policy initiatives regarding the longer-term impacts of Covid-19 on drugs and crime	
WFP	<p>Existing disaster preparedness and management mandate, and associated mechanisms</p> <p>Declaration of global L3 emergency (top-level classification of crisis), triggering all emergency response mechanisms</p> <p>Establishment of cross-functional cell, spearheaded by the Emergencies Division</p>	<p>WFP Response Plan resulted in donors providing early and repeated support, which allowed more rapid operational responses</p> <p>L3 declaration resulted in staff health being prioritised, allowing specific Covid-related responses, for example staff mental health, movement out of risk areas or to medical care etc.</p>	<p>Establishment of two hospitals, and a global air service, which at one point was the largest operating airline in the world</p> <p>Development of Global Covid-19 Response Plan, focused on the impact of the pandemic on beneficiaries, which gave direction and a voice to field staff, and contributed to visibility</p> <p>The Executive Director issued an institution-wide message regarding staff's ability to deploy, leading to the creation of a dedicated surge unit</p> <p>Rapid identification of vulnerable groups' needs, through mobile Vulnerability Assessment and Mapping (mVAM)</p>	<p>New relations within governments were triggered, which will contribute to resilience</p>

Terms of reference

Evaluation of the Council of Europe's support to member States in addressing challenges related to the Covid-19 pandemic: Benchmarking exercise

Background

These terms of reference describe the benchmarking exercise to be conducted as part of an evaluation which assesses, among other issues, the extent to which the programmatic response of the Organisation to the crisis, in supporting member States, has been effective, identify shortcomings, areas of improvement as well as lessons learned and good practices.

The evaluation results are expected to guide the organisation in improving its response to potential future crises and a general improvement and innovation in terms of working methods.

Object of evaluation

Council of Europe's action on the effects of the pandemic has included work on standards compliance and intergovernmental co-operation, with the latter performing a research and development function in which pooled knowledge, expertise and the content of our *acquis* are contributing to solutions for fluid threats in what was and remains a highly dynamic environment. There has been significant activity by the Commissioner for Human Rights, the Congress of Local and Regional Authorities, the Parliamentary Assembly the European Court of Human Rights and the Council of Europe Development Bank, as well as the Directorate General of Human Rights and Rule of Law and the Directorate General of Democracy, including the European Directorate for the Quality of Medicines, and others. The work carried out for and with member states has been conducted in and from Strasbourg and in the external and field offices where staff on the ground have also reshaped some of their activities.

The evaluation will look at the initiatives and activities developed by the Council of Europe since the pandemic started impacting the Organisation's business, i.e. from the beginning of March 2020 till August 2021. It will not address the dealings of the European Court of Human Rights for reasons of limited time and resources allocated to this evaluation. However, potentially, good practices in its adaptation to the crisis may be briefly explored.

Part II of the Secretary General's annual report 'Multilateralism 2020' puts forward the following areas of the Organisation's work aimed at supporting the member states in times of the pandemic (non-exhaustive list):

- Prevention of torture and inhuman or degrading treatment or punishment

- Social rights
- The independence and efficiency of justice
- Media
- Data protection
- Artificial intelligence
- Cybercrime
- Bioethics
- Access to public documents
- Drug abuse
- Corruption
- Crime
- Migration and refugees
- Children's rights
- Anti-discrimination
- Education
- Youth
- Culture, nature and heritage
- Democracy and governance
- Gender equality and violence against women
- Trafficking in human beings
- Quality standards for safe medicines and their safe use.

This evaluation will take into account a selection of these and other activities, as relevant.

Purpose and Objectives

The purpose of the benchmarking is to identify and collect good practices on response to emerging needs of national authorities in the context of the Covid-19 pandemic with regard to devising strategies, programming and co-ordination and ideas on factors which influence its effectiveness, by comparator organisations.

Scope and methodology

The benchmarking exercise shall be done through a review of documentation and, if necessary, interviews with key informants of the selected organisations. A brief review of good practices of crisis management in international organisations should also be performed.

These organisations in question should include (insofar as their mandate is similar to that of the Council of Europe) the European Union (EU)¹, the Office of the High Commissioner for Human Rights (OHCHR), the Organisation for Security and Cooperation in Europe (OSCE), the United Nations Educational, Scientific and Cultural Organization (UNESCO) and the United Nations Development Programme (UNDP). Other organisations which could be considered are:

- UNODC,

¹ In particular, the European Commission, the EU's Assembly of Regional and Local Representatives and the European Parliament.

- Asian Development Bank,
- World Bank,
- World Food Programme,
- OECD,
- or other organisations as relevant.

The final selection shall be made in consultation with the Council of Europe evaluation team.

The collected data will be used to answer the following evaluation questions:

To what extent were the activities of the CoE perceived as useful by its partners and were used?

To what extent did the CoE response lead to outcomes? (what was the yield of CoE outputs?)

To what extent and how have the CoE working methods been adapted? To what extent can they be used outside the context of the Covid-19 pandemic?

The benchmarking should include:

- ☐ a review of general literature on crisis management in international organisations,
- ☐ a review of documentation of international organisations,
- ☐ interviews with key personnel of the selected organisations (at least 15 interviews).

Qualifications of the consultant

The consultant shall provide the following competencies and expertise:

- ☐ Extensive knowledge of evaluation principles, methodology and best practices;
- ☐ Thematic knowledge and experience in crisis management/crisis response/organisational behaviour and/or evaluation thereof;
- ☐ Proven record of at least 10 years' experience in conducting evaluations in the context of international co-operation;
- ☐ Professional fluency in oral and written English and working knowledge of French;
- ☐ A good knowledge and understanding of the Council of Europe will be an asset.

Work Plan, key deliverables and fees

The benchmarking exercise will include three stages:

- ☐ **Inception stage:** the consultant will design the methodology of the exercise including:
 - o sources of information for general literature review;
 - o sources of information for the data collection (document review and interviews);
 - o an outline of the report;
 - o proposed criteria for the assessment of the organisational response to the COVID-19 pandemic.

The consultant will submit a methodological note covering the above elements, on which DIO will comment and discuss by phone.

- **Data collection stage:** the consultant will collect data using the methods described in the methodology section of the note as they will be agreed upon in the inception stage.
- **Analysis and reporting stage:** the consultant will analyse collected data, produce a draft report in English of 15-20 pages and submit it to the DIO for comments which will be taken into consideration for finalising the report. The consultant may be asked to attend the meeting of the evaluation reference group (by videoconference) which is currently planned for November 2021 to present the findings of the benchmarking and review and answer questions.

The following key deliverables are foreseen for this evaluation with the corresponding deadlines:

Deliverable	Due date
Start of assignment	27 July 2021
Methodological note	9 August
Data collection	By 9 September
Draft report	20 September
Final report	30 September
Reference group meeting in Strasbourg (potentially)	25 November 2021
TOTAL	

Annexe B: Benchmarking Criteria and Questionnaire

Below are the preliminary criteria that have been developed in order to guide the analysis of data and inform the benchmarking findings:

Benchmarking Criteria	Benchmarking Questions (see below)
Organisations' formal responses relative to Covid-19 were based on needs, were formulated in consultation with relevant stakeholders, took cross-cutting issues into account, and were objectively appropriate.	Description of response (Q. 1) Formulation of response (Q. 2-6)
Organisations' responses ensured adequate internal engagement, and allowed for appropriate adaptation of existing strategies, operations and procedures.	Institutional engagement (Q. 7-10) Institutional adaptations (Q. 11)
Organisations' responses have addressed the challenges of Covid-19 in an effective manner, and in co-operation with other organisations.	Effectiveness (Q. 12-17) Co-operation and partnership (Q. 18)
Organisations' responses have resulted in improved institutional adaptability and approaches, and provided an opportunity to identify lessons learnt and best practices.	Adaptability and improvement (Q. 18-20) Lessons learnt and best practice (Q. 21-23)
Organisations identify factors of the Council of Europe response that are relevant to the Evaluation.	Observations of the Council of Europe Covid-19 response (Q. 24)

Below is a list of questions that will form a basis for interviews conducted:

Description of response:

1. What were the approaches taken in your organisation to respond to Covid-19?

Formulation of response:

2. How did the approaches come into existence?
3. What inspired them?
4. Who was consulted?
5. Were the needs of women and vulnerable groups taken into account in the formulation of the approaches?
6. Were human rights considerations taken into account in the formulation of the approaches?

Institutional engagement:

7. Who participated in the response?
8. Who was responsible?
9. Who was consulted?
10. To whom is progress reported?

Institutional adaptations:

11. What particular adaptations are/were required?

Effectiveness:

12. How effective was the implementation of the approaches?
13. What have the challenges been?
14. What has been successful?
15. Were the needs of women and vulnerable groups taken into account in the implementation of the approaches?
16. Were human rights considerations taken into account in the implementation of the approaches?
17. Is there any mechanism to measure the impact of your organisation's response?

Co-operation and partnership

18. Did your organisation engage in co-operation or partnership with other organisations in the formulation or implementation of your approaches?

Adaptability and improvement:

19. What do you consider could be improved in terms of your organisation's adaptability?
20. Which if any of the approaches adopted during the pandemic do you think should be retained, once the organisation returns to focussing on its "normal" mandate.

Lessons learnt and best practice:

21. What lessons have you learnt from your experience with the pandemic?
22. What would you have done differently?
23. What has worked well?

Observations of the Council of Europe Covid-19 response

24. What are your observations of the Council of Europe's response (if any)?

Further data:

25. Could you recommend any documentation that we should read?
26. Could you recommend any other persons who should be interviewed?

Annexe C: Indicative List of Stakeholders

Key stakeholders:

- European Union (EU)
- UN Office of the High Commissioner for Human Rights (UN-OHCHR)
- Organisation for Security and Cooperation in Europe (OSCE)
- United Nations Educational, Scientific and Cultural Organization (UNESCO)
- United Nations Development Programme (UNDP)

Other Stakeholders (ToR):

- European Commission (EC)
- EU's Assembly of Regional and Local Representatives
- European Parliament
- UNODC
- Asian Development Bank
- World Bank
- World Food Programme
- OECD

Additional Stakeholders (suggested):

- Humanitarian: International Committee of the Red Cross/ International Federation of the Red Cross, UNHCR, UN-OCHA
- Cross-cutting: UN-WOMEN, UNICEF
- Military/ security: NATO, European Defence Agency...

Annexe D: Persons Consulted

Name	Role	Institution
ALBERNAZ ROCHA DE OLIVEIRA Bia	Policy, Planning, Monitoring & Evaluation Service	OHCHR
BANNON Victoria	Independent Consultant	IFRC
BHOLA Aditi	Policy, Planning, Monitoring & Evaluation Service	OHCHR
BUHREN Karin	Policy, Planning, Monitoring & Evaluation Service	OHCHR
CHARAF, Ahmimed	Senior Advisor to the Director General, Global Strategies and Governing Bodies	UNESCO
COX Malcolm	Evaluation Division, Directorate of Internal Oversight	Council of Europe
GEORGIADIS Sylta	Policy, Planning, Monitoring & Evaluation Service	OHCHR
GOLDMAN Maria	Evaluation Division, Directorate of Internal Oversight	Council of Europe
HELDT Birger	Senior Evaluator, Internal Oversight	OSCE
JONYNAS Ignas	Deputy Head of Unit, Secretariat-General	European Commission
KERVELLA Marc	Head, Internal Audit	OSCE
LANDER Brian	Deputy Director, Emergencies	World Food Programme
LEMAHIEU Jean-Luc	Director, Policy Analysis and Public Affairs	UNODC
MC NULTY Michael	Head, Security Management	OSCE
MORALES Mercedes	Chief, Donor Relations	OHCHR
ONGITI Diana	Covid-19 Appeal Manager	IFRC
ORESHKINA Maria	Evaluation Division, Directorate of Internal Oversight	Council of Europe
PEACOCK Aaron	Chief, Talent Development	OSCE
ROWAN John	Deputy Head of Unit, Secretariat-General	European Commission
TEDADA Saori	Policy Officer, Executive Direction and Management	OHCHR
WORRELL Jennifer	Chief, Policy, Planning, Monitoring and Evaluation Service	OHCHR