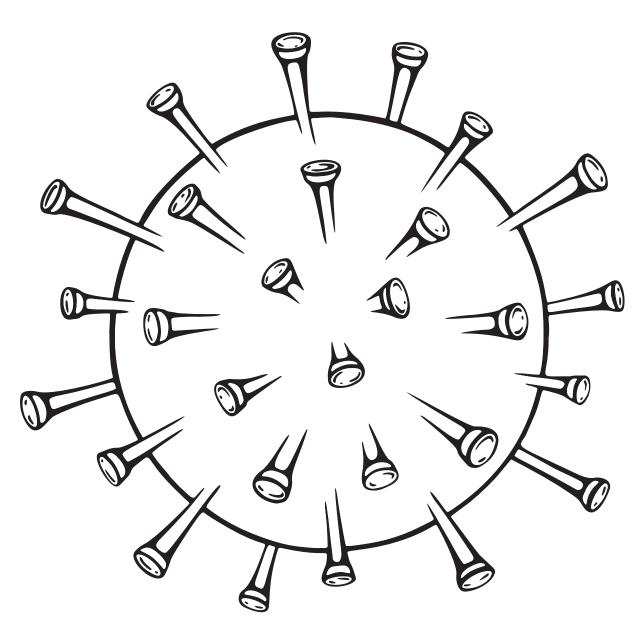
REINFORCE, REINFORCE, REINFORCE:

Localization in the COVID-19 Global Humanitarian Response

30 March 2020





ICVA has developed this note to support dialogue on strengthening principled and effective humanitarian action by NGOs during the COVID-19 response, with a focus on reinforcing local and national action wherever possible.

The Global Humanitarian Response Plan (GHRP) for COVID-19¹ details how the international humanitarian community plans to respond to the public health and immediate humanitarian consequences of the pandemic on populations in countries already facing ongoing humanitarian crises². The GHRP details priorities in support of existing government response plans, framed as global priorities for a multi-partner and multi-sectoral international response. It highlights the need for stronger partnerships and increased support to national and especially local staff and organizations working in humanitarian responses. Importantly, however, the plan does not attempt to articulate *how* this support will be delivered.

The impact of COVID-19 in humanitarian contexts is twofold. Firstly, there is the pressing concern of new major heath emergencies in countries that have limited health system capacity, densely crowded populations and limited resources. Secondly, there is the equally pressing challenge of maintaining existing humanitarian efforts and ensuring we do not fail to meet ongoing or new humanitarian needs in a principled and effective manner.

The response to COVID-19 highlights the urgent need for further concrete actions to be taken to support a more structured approach to localization of the humanitarian system. Initial planning for the GHRP has recognized that the response will be highly dependent on local and national actors, as international staff are restricted from travel or unable to freely deploy to field operations, global logistics are fragmented, and organizations expect to face many additional challenges to their usual ways of working. This represents a significant shift from existing practice in the international humanitarian system, which is still highly dependent upon the surge of international staff between emergencies and the relatively-free flow of relief items and expertise in many different areas.

The text of the GHRP highlights that a shift towards increased local leadership and delivery is now expected to take place out of necessity, not because it is an intentional process of change that many humanitarian actors have been working towards over recent years. This is reflective of the challenges that the localization agenda has faced in terms of translating commitments to action since the 2016 World Humanitarian Summit. Humanitarian actors currently demonstrate a wide range of approaches to localization, including in how partnerships are structured, ways funding is channeled, who contributes to programme development, and how needs and capacities are assessed. This diversity of approaches has been considered a strength in the past, including by ICVA³, but the scale of challenges now facing the humanitarian system highlights the need for increased consistency and broader agreement on approaches to be used by a wider range of stakeholders.

Collectively, humanitarian actors will face a number of challenges in the coming weeks and months, including deciding how to provide effective and appropriate reinforcement to local and national actors in diverse and complex humanitarian contexts. All stakeholders will need to engage in constructive dialogue to determine which actors will be best placed to deliver principled assistance to those most in need, now and in the future. Where transitions or changes are appropriate or necessary, these must be managed in a way that does not overwhelm partners, particularly local partners, nor leave them without necessary resources. For NGOs, acknowledging these challenges is the first step to ensuring they are fully part of the necessary discussions about how to adapt existing operations in a contextually appropriate manner where required. These discussions will not take place in isolation, and strong partnerships including with UN Agencies, the Red Cross and Red Crescent Movement and donors will also be vital in ensuring the continued delivery of principled and effective humanitarian assistance wherever it is most needed.



A Holistic Approach to Localization

This note is framed around the seven areas identified in the *Measuring Localization Framework* developed by Humanitarian Advisory Group and the Pacific Island Association of NGOs (PIANGO). These complement the areas in the NEAR *Localization Performance Measurement Framework*. Both frameworks are based on previous work *Localisation in Practice: Emerging indicators and practical recommendations*, undertaken by the Global Mentoring Initiative for the START Network in 2018. These

frameworks and associated tools are useful, publicly available resources that can be used by organizations, networks or coordination bodies for assessing progress in relation to localization in their context.

The seven areas are: Partnerships, Leadership, Coordination and Complementarity, Participation, Policy Influence and Advocacy, Capacity, and Funding. The note highlights a number of recommendations or challenges for good practice in localization associated with each of these areas.

PARTNERSHIPS

Restrictions on the ability to maintain, let alone scale up, operational staffing and engagement levels in existing humanitarian operations will likely mean that many international actors will seek to form new partnerships with local and national actors during this time. These efforts will require new approaches to establishing and maintaining partnerships while working mostly or completely through remote means. To provide a common starting point, all humanitarian stakeholders should renew their commitment to upholding the Principles of Partnership⁴ (Equality, Transparency, Results-Oriented Approach, Responsibility and Complementarity) which provide a framework for all actors in the humanitarian space to engage on a more equal and constructive footing.

In responding to a global health emergency within already complex humanitarian settings, a zero-tolerance attitude towards risk will not be possible. There is an opportunity to collectively develop new approaches to risk sharing and risk management. To do so, partners must engage in open dialogue on how best to mitigate all necessary risks without compromising the ability to deliver a principled humanitarian response⁵. **Donors, UN agencies and international NGOs will**

need to reassess their approaches to risk-sharing with local and national partners⁶. At the same time, all partners need to understand their responsibility to manage an appropriate level of risk. Simply transferring risk through the chain of partnership between donor and field operation does not result in either effective partnership or effective operations.

Through their work in upholding collective principles, standards and accountability, NGO Fora in different countries may be a valuable resource to support the development of trust-based and risk-sensitive partnerships. NGO Fora operate in most humanitarian settings and act as networks to support their members and in many cases the broader NGO community. In some countries, sub-national NGO fora and networks of local CSO actors are also actively providing coordination and support. A number of INGO networks have recently included localization and partnerships as a key pillar of their strategic focus, in order to better support their members in these areas. At global and regional levels, ICVA and InterAction⁷ provide ongoing support to NGO Fora working in humanitarian settings including to promote engagement on topics related to localization.



LEADERSHIP

The potential impact of COVID-19 on vulnerable populations has mobilized the international community, including through the development of the GHRP, to prepare an international response in many crisis-affected countries. This response will stretch the existing leadership of humanitarian responses, through increasing responsibilities and reduced capacity in many settings. Humanitarian leadership may also be challenged as the authority of governments is reinforced in many countries, including through restrictions on the free flow of information. Humanitarian leadership at this time must be inclusive and work to support the entire humanitarian community, not only UN and international actors.

Locally relevant leadership will be needed to understand and engage with local and national governments as well as other key stakeholders including militaries and particularly health agencies. Local and district governments in particular are key stakeholders in enabling or restricting humanitarian access, particularly where they implement their own lockdown measures. NGOs with local presence through established humanitarian or development programmes can build on their existing relationships to support positive engagement with government agencies.

Other forms of local community and local government leadership should also be recognized and supported, particularly the role of village, camp or community leaders. In many cases these existing leaders may be relied on by governments to be the

focal point for management of the COVID-19 response within their communities. In situations where government movement restrictions are very strict, communities themselves may be the only responders. As they seek to engage remotely or with limited access, NGOs will need to build new models of support based on strengthening relationships with community workers and volunteers, including engaging emerging leaders within the populations they are supporting.

Experience from work in Ebola-affected countries⁸ has shown that faith leaders can play a key role in response to and recovery from health emergencies. In recent years a number of international faith-based networks or confederations have worked extensively on their own approaches to localization, which may provide lessons for other faith actors.

NGOs must continue to support and strengthen women's leadership, including through relevant women's organizations or networks, recognizing the role women play in providing essential (and often unpaid) care services in their families and in their communities. Recent WHO analysis from 104 countries found that women make up 70 percent of the workforce in the health and social sectors. In many places, gender norms can keep women from directly accessing information and services, which are often mediated through male community leaders and male heads of household. Working with women-led organizations to develop appropriate public messaging and dissemination strategies will ensure vital information reaches more women and marginalized groups.

COORDINATION AND COMPLEMENTARITY

An increased reliance on local and national actors should be complemented by an increase in the active engagement of these actors in coordination mechanisms. This will require the consistent and meaningful inclusion of national partners in HCTs (or equivalent), Country-Based Pooled Fund advisory boards, sectors/clusters, response planning teams and other such groups. In many humanitarian settings, participation by local and national NGOs in coordination meetings has not traditionally been prioritized. This response presents an opportunity to rethink the levels of participation and engagement by national NGOs in coordination mechanisms, at national or sub-national levels. Steps can be taken to make meetings more inclusive, such as to translate meeting notes into local language, ensure national actors are consulted in agenda setting or allow shadowing or twinning with experienced NGO representatives. Conducting meetings in a virtual space may in fact enable greater participation, for example from local NGO representatives who are not based in capitals.

The Grand Bargain called for humanitarians to 'reinforce and not replace' local and national capacities. Over the past years some progress had been made in this regard, but independent evaluations of the Grand Bargain¹⁰ have shown that at operational level there was still much to be done. We are now facing a situation where for the foreseeable future it may be impractical, if not impossible, for some international actors to maintain their previous level and type of engagement in humanitarian field operations. This brings opportunity for a new type of engagement, with a focus shifted to 'reinforce, reinforce'. Local and national actors will continue to require a wide range of technical, operational and organizational support and this should not just be a matter left for partnership capacity assessments. All local, national and international individuals and organizations will need to assess their own capacities and support requirements and be prepared to both share existing capacities but also call for external support wherever needed. More than ever before, local capacities in accessing and engaging communities may become the basis on which complementary action is built.



International NGOs have a responsibility to quickly and effectively change their ways of working to allow for a more supportive and complementary approach. This may include investment in online capacity sharing approaches, and remote guidance and support by INGO experts. For this to work, local and national partners will need to clearly understand the types of support they can call on. New systems will be required to enable a need-based approach to the provision of external support based on the assessments of local partners themselves. There will be an ongoing role for INGOs in providing support, guidance, expertise and ensuring consistency across different contexts. Acknowledging that progress in shifting funding flows from international to national actors remains limited11, INGOs will likely continue to manage significant portions of donor funding, including through partnership arrangements with local and national NGOs.

Coordination between the COVID-19 health response and broader humanitarian emergency responses may also require reliance on humanitarian-development 'Nexus' approaches. The GHRP reflects this type of thinking, including in planning for response in protracted refugee and displacement settings and highlighting implications on overburdened national health systems. For many NGOs which are already working to deliver a mix of humanitarian and development programming, this will be an extension of their ongoing work and they will be well placed to adapt to this modality. Inter-agency and multisector coordination groups which include local responders will play a key role in aligning communications and programming and will help to avoid confusion between organizations which may have previously worked in separate silos. They will also help to ensure the feasibility of operationalizing plans and guidelines, particularly around cross-cutting issues including health, protection, education and livelihoods; whether in host communities, refugee camps, informal settlements or otherwise.

PARTICIPATION

Accountability to those affected by ongoing humanitarian crises and by the impacts of COVID-19 must remain central to the work of all humanitarian actors. Community engagement and the management of misinformation are crucial aspects of any humanitarian response. Past experience has shown that health-related humanitarian operations have the potential to be securitized, politicized and to lead to mistrust and stigmatization if not conducted in a manner that is understanding of local context and culture¹². **NGOs working** at the local and national level will often be best placed to bridge this gap, including understanding local community perspectives regarding appropriate roles for national and international partners. Local actors may be best placed not only to understand the implications of the health emergency for their local partners and the communities they serve, and to ensure that communities themselves are able to drive humanitarian decision-making and response adaptation.

Engagement of displaced communities is an important challenge, with particular need to engage migrant and refugee populations and internally displaced persons in preparedness for the COVID-19 response. Local organizations led by refugees and migrants themselves can be key partners at this time. This includes both in operational settings and in advocacy towards donors and host governments to support displaced communities who are among the most vulnerable in this crisis. In cases where these organizations are not present or not permitted to engage, support through international networks including refugee rights and advocacy groups can facilitate engagement and represent refugee and migrant perspectives on areas of critical need¹³.

With many community members, and humanitarian workers, largely restricted to their homes, there is increased reliance on online communications and a related increase in the chance for miscommunication and misinformation to spread. This is particularly of concern in contexts where social media is the predominant form of information sharing. Online communication methods may prove challenging for communication with older people, who are a particularly vulnerable group in this crisis. Innovation by local and national NGOs, supported by international networks and partners¹⁴, will be needed to develop effective communications strategies for engaging older populations.

All humanitarian stakeholders should work to ensure communications are clear, concise and jargon-free. In their daily work, many local and national actors do not communicate primarily in English, so communications with international partners will need to be translated, often multiple times. International partners should consider how to adjust their communications methods, style and frequency accordingly. There are already positive examples in this space, where NGOs are providing critical services including in on-demand translation and language services¹⁵. The COVID-19 response is already highlighting new challenges around the acceptance of humanitarian action by governments and communities. Shared understanding and open communication between local, national and international actors across medical, humanitarian and development sectors may be central to overcoming these challenges.



POLICY INFLUENCE AND ADVOCACY

International NGOs have a clear role to play in advocacy with donors to enable more flexible and responsive partnership and funding arrangements, and for continued support to ongoing humanitarian aid programming separate from the COVID-19 response. This includes to engage donors around providing new flexible funding but also allowing flexibility within existing programs to enable quick adaptation of existing programmes and response to new emergencies. This will include both public and private advocacy and influencing. In many cases stronger messaging will be achieved through collective advocacy including through networks of national NGOs such as A4EP16. Through the IASC Humanitarian Finance Results Group (RG5), ICVA, SCHR¹⁷ and other NGO networks have been championing issues of new quality funding, increased flexibility in existing agreements, and simplification in negotiation, due diligence and reporting procedures.

Advocacy with national governments regarding protection of the most vulnerable, particularly women and children, older persons, migrants, refugees and other displaced people, is also of key importance. In some countries local and national NGO actors, including through their relevant NGO Networks or Fora, are well placed to engage their own governments on issues related to ensuring a principled, rights-based and whole-of-society response is enabled and supported by government policies and practices. Advocacy related to balancing duty of care while avoiding stigmatization of international humanitarian workers may also be needed, including in cases where governments are restricting all contact by international staff of NGOs with the communities they have been serving. Blanket decisions have wide-ranging implications for broader humanitarian action and all NGOs will need to work together in ensuring their advocacy efforts with governments are aligned, targeted and delivered by those best placed to do so.

ICVA, along with other NGO networks, will continue to amplify the voices of national and local NGOs in global dialogues to help influence policy decisions. ICVA is committed to ensuring the voices of local and national actors are heard in global forums, including by supporting national NGOs to engage in the IASC Operational Policy and Advocacy Group. Advocacy for further engagement will continue as further international coordination and policy mechanisms are established.

CAPACITY

Managing human resource capacity will be a defining challenge for most humanitarian organizations over the coming months. In settings where international capacities are sustained, these will still be required wherever possible to focus on existing humanitarian needs. Additional capacity to deliver on new responses, whether related to COVID-19 or otherwise, will by necessity come from local and national staff and organizations. In some cases, any distinction between national and international may be less relevant than whether NGOs have been able to maintain their existing operations and are able to scale up within the needed timeframes.

International organizations, including both NGOs and UN, which are facing staffing shortages will likely aim to recruit locally, as travel restrictions will prevent international staff from entering many countries for the foreseeable future. Individual choice in employment and career is the right of all humanitarian workers, but international organizations should be aware of, and where possible mitigate, the implications of their hiring practices on the capacity of local partners. Ethical and appropriate recruitment practices should be upheld, particularly to avoid staff 'poaching' or recruitment without reasonable transparency and transition periods in place. It is also important that the existing staff of local and national actors do not lose their current jobs due to slow approvals or suspension of programmes by donors¹⁸.

In some contexts, local and national actors will have been at the forefront of past health-related responses. However, in many other cases these organizations will not be experts in responding to health emergencies. If such a response is required, innovative approaches will be needed to help strengthen existing capacities as rapidly as possible.

Traditional approaches to capacity strengthening, based on in-person trainings and workshops may need to be replaced with dynamic, on-the-job, and remote-assistance approaches that prioritize capacity sharing within networks of local, national and international actors wherever possible.

The potentially serious health risk associated with the COVID-19 response add to the need to ensure that local and national partners are appropriately supplied and supported to effectively respond while caring for the health, safety and security of their staff. This is a compelling argument for all donors, including UN agencies and INGOs, to urgently and comprehensively increase the level of unrestricted core funding support to local and national actors. Currently, when local partners are recipients of humanitarian funding their allowable indirect costs are typically limited in comparison to international partners. This impedes the ability of local partners to develop the necessary systems to improve staff capacity, ensure accountability, and provide for staff care and safety. If local and national NGOs are to play a central role in the complex environment of the COVID-19 response, they must be supported fairly and responsibly to do so.



FUNDING

The text of the GHRP notes that increased funding should be channeled as directly as possible to local and national actors, in line with Grand Bargain commitments. However, almost the entire allocation of funding within the plan is to UN agencies and the plan does not suggest how funding will flow from this point. This means navigating effective partnerships between UN Agencies and NGOs, particularly local and national NGOs, will be a central issue in coming weeks. The practical details of needs-based funding amounts, as well as the mechanisms through which funds will reach local partners still require additional work. In the coming weeks, as detailed plans are developed for COVID-19 response at the country level, it will be critical to engage with local and national partners in needs assessment and planning. In line with Grand bargain commitments, funding models should be developed that enable resources to be allocated as directly as possible to those partners best placed to respond, prioritizing local and national actors where possible.

Pooled funds will likely play a central role here, as they are one for the few existing mechanisms that allow local and national NGOs to access significant volumes of direct funding. A number of pooled funds have existing good practice in relation to localization that could be shared and built upon in other contexts¹⁹. This may be an opportunity to reinforce collective NGO-led funding platforms, such as the START Fund²⁰ or SAFER²¹, where they operate or to propose new funds in other settings.

It is essential that additional funds are mobilized to support the GHRP for COVID-19 and not diverted from ongoing humanitarian operations, and that future humanitarian funding allocations are not compromised by the COVID-19 response. This funding remains critical to address the needs caused by conflicts and disasters, while also contributing significantly to affected people and essential services capacity to cope with the pandemic. Reductions or diversions in funding to existing humanitarian operations will only serve to further increase the vulnerabilities of people that already susceptible to health crises.

The implications of the COVID-19 are a call for a change in attitudes, mindsets, and behaviours in terms of simplification, flexibility and risk sharing. In alignment with Grand Bargain commitments, funding streams should be flexible to enable rapid adjustments in the response which will be necessary in such a fast-evolving crisis. Funding should be directed as much as possible to local responders, who are critically the front-line of response for COVID-19. In addition, a simplified and harmonized approach to cost allocation and reporting and minimized bureaucratic processes will enable humanitarian partners to respond in a timely and appropriate manner.

A short-term challenge will be to ensure that existing and new funding is sufficient flexible to handle delayed implementation, cost extensions, cancelled activities, staff-care needs, risk management and other such costs. Building flexibility into the response in these areas will be particularly critical given the shift in approach toward a more locally led response, and the need for international and local partners alike to adjust to a new way of working. This further highlights the need for strengthened risk-sharing approaches between all partners that ensure due responsibility for management of the increased level of risk associated with this flexibility. Among donors, UN agencies and INGOs, it is important to ensure that there is a consistent approach to these issues. Consistency in terms of agreements, flexibility, and costing will reduce the burdens on field staff implementing programming.

Donors are currently indicating that existing funding in 2020 will not be significantly affected by the COVID-19 response. However, the global financial outlook for 2021 presents a huge unknown with regard to ongoing funding. Collective advocacy, looking forward to 2021 humanitarian budget allocations, will be important to ensure that donors have an appropriate understanding of the risks of increased global vulnerability, including to pandemic events, that could result from reduced funding of humanitarian operations. ICVA will support NGOs to communicate to donors the critical role of national and local responders in humanitarian preparedness and response and the need to ensure sufficient, flexible and continued funding to support these and all NGO actors.



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