Experiences of Local Faith Actors in Disaster Risk Reduction, COVID-19 Response and Humanitarian Localization.

Perspectives of Caritas Africa Member Organizations



Advocacy and Capacity Strengthening in Disaster Risk Reduction, Preparedness and Governance in sub-Saharan Africa

Caritas AFRICA

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List of Acronyms

BRICE	Building Resilience through Integrated Community Engagement
CA	Caritas Africa
CAFOD	Catholic Agency for Overseas Development
CMDRR	Community Managed Disaster Risk Reduction
CAMO	Caritas Africa Member Organization
CI	Caritas Internationalis
CIMO	Caritas Internationalis Member Organization
DRR	Disaster Risk Reduction
EP&RP	Emergency Preparedness and Response Plan
FAO	Food and Agricultural Organization
HCT	Humanitarian Country Team
HRP	Humanitarian Response Plan
IEC	Information Education and Communication
IPC	Infection Prevention and Control
KII	Key Informant Interviews
MoU	Memorandum of Understanding
NFI	Non-Food Items
OCHA	Office for Coordination of Humanitarian Affairs
PPE	Personal Protective Equipment
UN	United Nations
UNDP	United Nations Development Programme
UNHCR	United Nations High Commission for Refugees
UNICEF	United Nations International Children's Emergency Fund
SADI	Safety, Access, and Dignity with Inclusion
SCIAF	Scottish Catholic International Aid Fund
SWG	Sector Working Group
WASH	Water Sanitation and Hygiene
WESCOORD	Water and Environmental Sanitation Coordination
WFP	World Food Programme

Executive Summary

This report is a result of an online inquiry that was conducted from 17th August to 20th December 2020 by Caritas Africa, in collaboration with CAFOD to assess humanitarian programming by National Caritas Organizations. The study collected responses from 30 out of 46 Caritas Africa Member Organizations.

This review was complemented by discussions on Humanitarian Localisation with 6 National Caritas Organisations in Nigeria, Democratic Republic of Congo, Central African Republic, Ethiopia, South Sudan and Uganda. This inquiry further involved consultations with Caritas Internationalis members supporting humanitarian work in these countries. The data collection tools included; desk review of existing literature on COVID-19 response in sub-Saharan Africa, open ended questionnaires, Key Informant Interviews and virtual consultative meetings.

The information mapping exercise sought to:(1) assess Community Managed Disaster Risk Reduction activities in-country, (2) Identify trends and opportunities in humanitarian localization (3) and to deepen the understanding of the nature of humanitarian programming by Caritas Organizations working in Africa. A snapshot of the findings indicates that: out of the 30 member organizations that responded,20 (67%) of Member Organizations were implementing DRR projects while 10 (33%) were not implementing DRR projects at the time of the study.

The survey established that 29 out of 30 the Caritas Africa Member Organizations interviewed, responded to COVID-19 through various emergency relief efforts including the provision of medical supplies, Water Sanitation and Hygiene interventions, engagements in humanitarian policy advocacy and, the dissemination of critical information on COVID 19 using media channels such as radio, television, Information Education and Communication (IEC) materials and social media.

It was further established that half of the Caritas Organizations that were mapped, 15 (50%) had Emergency Preparedness and Response Plans. According to the survey, some of the DRR related activities implemented by CAMOs included: *Capacity strengthening on DRR, Policy dialogue on Disaster Risk Reduction*, *Development of organizational and community preparedness and contingency plans*, *Establishment of community structures at local level, documentation* and *use of DRR early warning systems* in collaboration with other agencies and local government bodies.

In their response to the global pandemic Caritas Africa Members faced a number of challenges which included: *lack of and/or inadequate funding for emergency relief*

efforts, lack of contingency funds and *Emergency Preparedness and Response Plans* (EPRPs) weak humanitarian coordination among actors at the local and national level, and inadequate staff capacity. These, amongst others, continue to affect local and national Caritas organizations in their humanitarian programming.

The report calls our attention to the grand bargain commitment to get more means and resources into the hands of the people in need and to improve the effectiveness and efficiency of humanitarian action. The findings suggest that localization is an inspirational agenda that is yet to materialize in the context of Africa. The required systemic changes are yet to be realized, the power transition from international actors to the local actors is not apparent on the ground.

The report however notes the increased collaboration by Caritas organizations with bilateral, multilateral and UN agencies in humanitarian response efforts.

The findings provide information on the local context, gaps and challenges faced by MOs in response to the pandemic and identifies the capacity strengthening needs for MOs in dealing with the pandemic, further it demonstrates the role of local communities in the humanitarian-development and peace nexus, by shaping and influencing legislation on disaster management and the overall humanitarian context. It was observed that local communities play a vital role in reducing the impacts of disasters, and in climate change mitigation and adaptation. This therefore calls for the participatory involvement of the local communities and civil society organisations in systematic disaster management in emergency and post emergency situations.

Following the presentation and analysis of the findings, the report will provide recommendations to Caritas internal and external stakeholders.

1. Background Information

1.1 General information on Caritas Africa

Caritas Africa is the network of 46 National Member Organizations (MOs) in 46 sub-Saharan African countries including islands in the Atlantic and Indian Oceans. It is the socio-pastoral arm of the Catholic Church and one of the seven regions of the *Caritas Internationalis* Confederation. At the sub-national level, the Caritas network in Africa is represented by 507 Diocesan Caritas organisations. They are part of the local communities they serve, and focus on human development, peace building and economic justice, while practically responding to some of the world's largest and most complex humanitarian emergencies.

Caritas organizations place the needs of the human person especially the poor and the vulnerable at the center of their concerns and work to empower local people.



Caritas Ghana distributes food packs among local communities, through project funds from the Caritas Internationalis and the Dicastery for Promoting Integral Human Development- Covid-19 Response Fund (CRF). Source: Caritas Ghana

By being part of the communities they serve, Caritas does not intervene in an emergency situation and then make an exit once the emergency program phases out, instead they accompany communities before, during, and after a crisis.

The role of Caritas Africa during disasters and emergencies is to liaise with the Humanitarian department of the Caritas Internationalis General Secretariat, and national Caritas and be consulted by them, in order to harmonise work within its region. Other roles include; *(1) building emergency response capacity among member organisations, (2) training staff for emergency deployment, (3) identify humanitarian expertise in sub-Saharan region to join the Caritas Internationalis Sector Working Groups and Pool of Coordinators, (4) promoting information sharing and collaboration in a multi-country*

emergency and (5) *develop policy positions and conduct advocacy in Humanitarian Policy.*

As part of Caritas Africa's regional programme to promote **Integral Human Development** and to meet objectives of its 2019-2023 Strategic framework, Caritas Africa implemented the "***Advocacy and Capacity Strengthening in Disaster Risk Reduction, Preparedness and Governance in sub-Saharan Africa***" program funded by Caritas Australia. The program run from November 2020 to June 2021 and sought to: *develop evidence for DRR advocacy through research*, *influence legislation* and *DRR strategy implementation*, and to *strengthen the capacity of Caritas Africa Member organisations in DRR advocacy.* This report is an outcome of this project as part of Caritas Africa's initiative to collaborate with partners, Caritas Internationalis Member Organisations (CI MOs) and the wider Catholic community, to understand the disaster risk profile of Africa and its humanitarian context and use this information to inform solutions that are tailored to the local context and, to assist local communities in Africa region to quickly respond to disasters and build back better.

1.2 Disaster Risk Profile of Africa

The disaster risk profile of Africa calls for the urgent need to find sustainable solutions to manage the impact of disasters and address shocks. Disaster Risk Reduction (DRR) is an important pillar to attain the Sustainable Development Goals (SDGs), and the aspirations of Africa's Agenda 2063. Man-made and natural disasters continue to put a risk in the development gains. In the recent years, Africa has been affected by *emerging diseases with pandemic potential* such as the ongoing COVID-19 pandemic and the *Ebola* outbreak. *Persistent drought conditions particularly* in the semi-arid eastern and southern regions of Sub-Saharan Africa have left millions of people in need of assistance.

Many African countries have limited efforts to fund DRR initiatives and support towards recovery initiatives after a major disaster. Land-locked countries depending on rain-fed agriculture are highly susceptible to climate variability. Also, most informal settlements are located in areas such as flood plains and drainage basins that are highly vulnerable to disasters. (World Bank & GFDRR, 2010).

This inquiry by Caritas Africa assesses contributions by local faith actors and local communities to the African Union Commission's Program of Action for the Implementation of Disaster Risk Reduction 2015-2030 in Africa, in line with the Africa Regional Strategy for Disaster Risk Reduction. This is in response to the call for all government organizations, partners and stakeholders, including the private sector, to align their DRM strategies and programmes to the Program of Action (POA) for

coherence of DRM in Africa. The specific objectives of the African Union POA for DRR are:

→ Strengthen links between **disaster risk reduction, climate change adaptation and other development imperatives,** as an integral part of sustainable development, and related frameworks, programmes and processes;

→ Strengthen long term **capacities, including coordination mechanisms, at continental andregional levels** to support the implementation of the Africa Strategy and the SFDRR and to systematically contribute to building resilience to natural hazards;

→ Strengthen mechanisms, frameworks and **capacities at national and local levels** for mainstreaming, implementing and coordinating disaster risk reduction strategies and programmes;

→ Embed a holistic approach to **systematically incorporate risk reduction measures** into design and implementation of disaster preparedness, response and recovery programmes;

→ Develop and mobilize resources, including practical tools, to contribute to the implementation of programmes and projects on DRR.

The UN Agenda 2030and the UNDRR (United Nation Office for Disaster Risk Reduction) policy document "***Disaster Risk Reduction and Climate Change Adaption – Pathway for Policy Coherence in Sub Saharan Africa"*** call for enhanced policy coherence for sustainable development. In fostering policy coherence between Disaster Risk Reduction (DRR) as stipulated in **Sendai Framework 2015-2030** and Climate Change Adaptation (CCA) as per the **Paris Agreement**, a suitable pathway for coherence and linkage in the two policies is of necessity in Sub Saharan Africa. Such coherence and linkage will promote efficient and effective preparedness, response and recovery processes while making more efficient use of financial and human resources.

Further, it is important to note that **19 Sub Saharan African Countries where** Caritas Africa operates and are part of the study, are signatories of the Paris Agreement.

This study by Caritas Africa is desirous to contribute to disaster resilience building in sub–Saharan Africa in disaster risk management and climate change adaptation.

Following the declaration of the COVID-19 Outbreak a Public Health Emergency of International Concern by WHO on 30th January 2020, a rallying call was made to all countries to immediately take notice and take action. In response, Caritas Africa released a ***Call to Action*** encouraging all its member organizations to respond to the pandemic as defined its mission, ***to serve communities in need and promote justice*.** Member organizations were encouraged to supplement the efforts of governments, health care workers and other stakeholders to slow the spread of the disease, protect vulnerable groups and support people in need to build back better.

1.3 Objectives of the Report

This report provides an analysis of the experiences and the role of faith actors and local based communities in humanitarian action, Disaster Management and COVID-19 response in sub-Saharan Africa.

The findings seek to:

- → Highlight **experiences of Caritas Africa member organizations in response to COVID-19** within their local contexts
- → Deepen understanding of the **challenges faced by Caritas Africa member organizations** in response to the pandemic and Disaster Risk Reduction related initiatives
- → Demonstrate the "**realities on the ground**" **on the dynamics of localisation** in practice, based on a study of 6 country cases in sub-Saharan Africa.
- → Inform the **future of humanitarian policy advocacy work of Caritas Africa**, in an effort to reduce the impact of humanitarian crises in Africa region, by engaging in policy debates on actions for efficient, appropriate and timely preparedness and response.
- → Suggest **policy recommendations and considerations** for Caritas internal and external stakeholders

2. Materials and Methods

2.1 Study Sites

This study received responses from 30 out of 46 Caritas Africa member organizations.

2.2 Study design

The mixed study collected data from the 30 CAMOs with key informant responses from Catholic Relief Services (CRS), Scottish Catholic International Aid Fund (SCIAF), Caritas Norway, Caritas Germany, CAFOD & Trocaire in Partnership.

The inquiry also engaged the Bishop President of Caritas Africa and representatives of Caritas Uganda and the Catholic Diocese of Rumbek in South Sudan.

Key informants were interviewed in the following countries receiving UN OCHA Country Based Pooled funds: Nigeria, DR Congo, Central Africa Republic, South Sudan and Ethiopia.

A follow up virtual meeting was held with Directors of National Caritas Organizations and Emergency Response Officers to present preliminary findings, seek clarifications and to collect additional information.

2.3 Data collection tools and procedure

The data collection tools included qualitative and quantitative questionnaires, key informant interviews, document reviews and virtual consultative meetings.

2.4 Methods of data analysis

Qualitative and quantitative data were analyzed to draw conclusions from the study. The quantitative data was analyzed through data validation, editing and coding using excel sheets. Qualitative data was synthesized through content, narrative and discourse analysis.

3. Findings

3.1 DRR Initiatives by Caritas Africa Member Organisations

Out of the 30 member organizations that responded the survey, 20 (67%) of the Member Organizations interviewed were implementing DRR projects while 10 (33%) were not implementing any DRR projects at the time the study was conducted.

3.1.1 Disaster Risk Reduction Projects.

Findings from the survey indicate that most Caritas Africa Member Organizations employ different approaches in Humanitarian Capacity Strengthening. In the case of **NCJPC Liberia**, program staff were taken through a course on *Building Resilience through Integrated Community Engagement (BRICE*). The objective of this project activity was to train Caritas Liberia staff on how to engage local communities in initiatives to reduce their vulnerability and build resilience through an integrated community engagement process in Liberia. The project also facilitated the establishment of community disaster management committees.

NCJPC Liberia further informed the inquiry that they had trained volunteers, and developed simple local Disaster Risk Management plans and strategies to strengthen structures and local actors in DRR and based on what worked well in these communities



Cleaning of Drainages in Doloken, Kru town. Source: NCJPC Liberia

In Madagascar, Caritas project staff were trained through support from the Emergency Capacity Building and Risk Reduction Project.

Caritas Mozambique's DRR interventions target communities that live in areas susceptible to floods and drought. They reported that their project participants have been taken through training sessions on

mitigation, adaptation and resilience. Some project activities reported at the time of the study included reforestation, introduction of drought resistant crops and training on disaster mitigation.

Caritas Kenya and **Caritas Niger** indicated that they influence projects, policies and processes on Community Managed Disaster Risk Reduction. Their initiatives also call for: strengthening the local adaptation capacity to climate change, community engagement in development of preparedness and contingency plans and consultations with civil society and government actors.

> **"In Kenya, the Diocesan Caritas Organizations usually collaborate with the National Management Authority (NDMA) and the County Steering Group members. Within these platforms, they receive on a monthly basis, drought early warning bulletins that indicate the drought phase of each county at a particular month." (Caritas Kenya)**

Caritas Lesotho reported that they engaged communities in capacity strengthening actions towards HIV Prevention.



Staff of Caritas Democratic Republic of Congo (ASBL), facilitating awareness creation on COVID-19.

In DRC Congo, **Caritas Congo ASBL** is implementing a humanitarian programme that facilitates information mapping and sharing of disaster alerts with the Humanitarian Community (OCHA) and the Caritas Internationalis Confederation.

> "We are currently implementing a Humanitarian Watch project, which occasionally raises alerts on emerging humanitarian crises in communities to trigger rapid response by humanitarian actors. This project includes a training component for watchmen (diocesan Caritas, parish and local NGOs)." Caritas DR Congo ASBL.

3.1.2 Existence of Emergency Response Preparedness Plans.

From the findings, half of Caritas Africa Member Organisations mapped 15 (50%) had Emergency Preparedness Response Plans whereas 15 (50%) did not have EPRP in place during the time of mapping exercise. Further analysis revealed that that some MOs such as **Caritas Zimbabwe** and **CADECOM (Caritas Malawi)** had expired EPRP and reviews had not been facilitated due to lack of funds to develop new plans. Caritas organizations in **Liberia, Senegal** and **Niger** indicated the development of EPRPs was still work in progress.

Other disasters than Covid-19 that countries responded to since January 2017 to December 2020

The study established that Caritas Africa Member Organizations provided humanitarian assistance or development programmes to those affected by climate change, floods and famine, conflicts and insecurity.



Emergency food distribution in Rajaf Community
(Source: Caritas South Sudan)

Some of the disasters responded to over the last 3 years include:

Disaster	Interventions
Landslides	• Provision of food and non-food items • Rehabilitation of homes
Conflict/ Insecurity and Fragility	• Formation and training of village Peace Committees, Women / Children Peace Clubs • Mediation processes • Establishment of community-based structures to mitigate resource-based conflicts • Facilitating access to justice through community-based justice actors
HIV Prevention/ Treatment and Care	• In Eswatini, Cameroon, South Africa and Angola, Caritas organizations run programs on HIV/AIDS prevention, treatment and care for those affected. • Caritas Botswana contributes to addressing the spread of HIV/AIDS through awareness creation and facilitating access to treatment centers, through provision of transport for people living with HIV/AIDS. • Caritas Swaziland participates in the Caritas Internationalis "HAART" campaign, launched by Caritas in 2009 to provide medicines to keep HIV infected children healthy. • Caritas Zambia provides support to dioceses to address gender inequalities and consequences of HIV/AIDS. The agency has developed HIV/AIDS work place policies and action plans to improve social wellbeing of women and female headed households.
Drought	• Provision of farming inputs and facilitating capacity strengthening for improved agricultural production through agro-ecological approaches, conservation agriculture and small-scale irrigation, • Provision of drought resistant varieties of seed • Water projects
Floods	• Provision of food and non-food items
Ebola	• Community awareness and mobilization • Water, Sanitation and Hygiene interventions such as distribution of hand washing equipment and products, • Psychosocial and nutritional support for patients and their contacts.
Cholera	• Awareness creation on prevention measures, • Water, Sanitation and Hygiene interventions • construction of treatment centers
Fire	• Provision of medical consumables to government hospitals to provide proper health care for victims, • Financial support for medical personnel requisitioned for the provision of burn care • Psychological support and support for patients and their families, transport of burn victims leaving the hospital to their homes, • Distribution of school kits and payment of examination files to the children of victims, distribution of food to victim households.

3.2 Response to COVID-19 by CAMOs

The mapping exercise found that most Caritas Africa Member Organizations (CAMOs) responded to COVID-19 through various emergency relief efforts.

3.2.1 Funding Sources for COVID-19 Response:

Caritas Africa members indicated that they acquired resources for COVID-19 response from 3 sources:

- **Local fund-raising initiatives**
- **Repurposed funds from ongoing projects**
- **New donations and support from international community; Including the fund set by the Dicastery for the promotion of Integral Human development and Caritas Internationalis (Covid-19 Response Fund)**

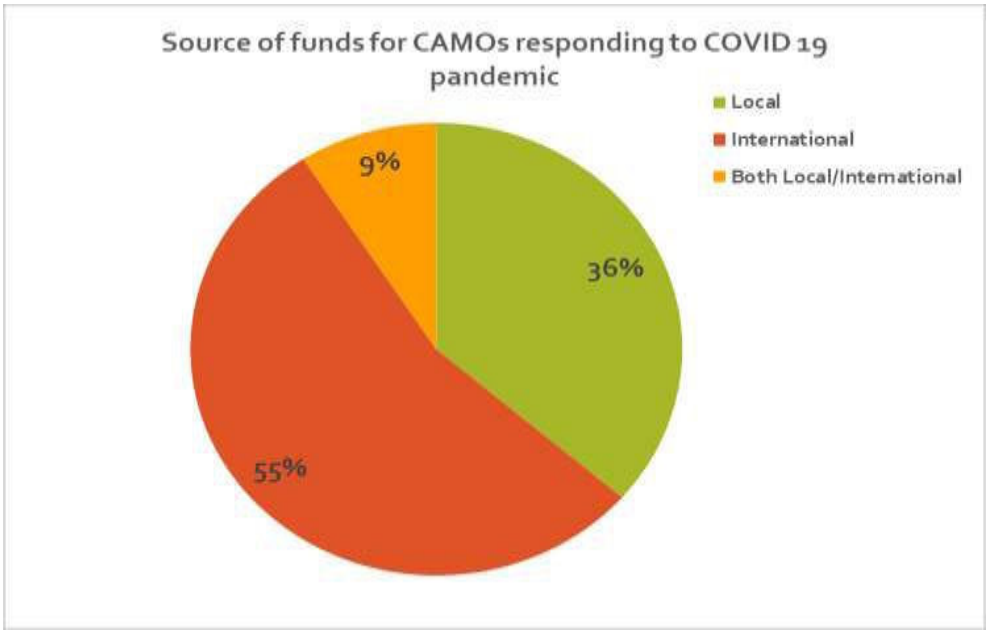


Figure: Source of funds for CAMOs responding to COVID 19 pandemic

3.2.2 Nature of Interventions:

The survey suggests that most Caritas Africa Member Organizations implemented numerous interventions to reduce the spread and impact of COVID 19. However, inadequate funds limited their reach. The major interventions reported for COVID-19 response included:

- **Infection Prevention and Control (IPC) trainings** for health care workers in Catholic hospitals
- **Training of front-line staff in hygiene promotion measures** relevant to COVID-19 prevention
- **Food and cash assistance** to vulnerable groups.
- **Provision of emergency food aid to vulnerable groups and among Caritas staff** during the curfew and lockdowns.
- **Provision of medical supplies including oxygen concentrators** and **PPEs** to Catholic based health facilities, distribution of COVID 19 hygiene kits and setting up of hand washing stations.
- **Media campaigns** through television, radio and use of Social Behavioral Change/ IEC materials.

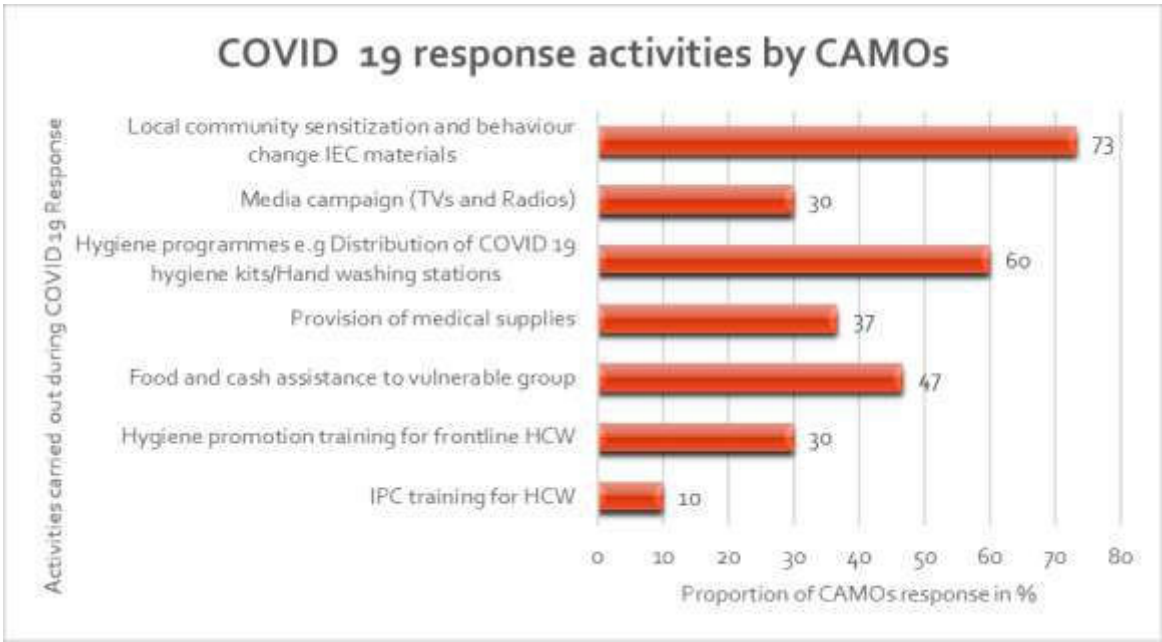


Figure: COVID 19 response activities by CAMOs

The analysis of the activities carried out towards response to COVID 19 pandemic by CAMOs shows that majority (73%), of MOs conducted local community sensitization through use of media and IEC materials. Most MOs also indicated that they distributed COVID 19 hygiene kits and hand washing stations. IPC training for health care workers was carried out by a few members.



Food Packages for Caritas Ghana Staff (Source: Caritas Ghana)



Covid-19 prevention measures observed during food distribution. Photo (Source: Caritas South Sudan)

3.2.3 Challenges faced by CAMOs in Humanitarian work

- **Funding for Humanitarian and DRR work**: 13 Caritas Africa Member organisations listed funding fluctuation as one of the main challenges. They further indicated that they would need support to access unrestricted funds and that they would appreciate a learning opportunity to access and sustain core funds. Other members listed underfunding for humanitarian response initiatives.

- **The need for skilled and experienced staff:** the survey confirmed findings on this from existing literature on humanitarian work. Rapid staff turnover was identified as one of the major constraints as a result, National and local Caritas Organisations have to engage lean staff for humanitarian work. The skills shortage affects the quality and impact of humanitarian programming. It was further observed that most staff are employed on short-term contracts and this inhibits both skills development, programme and organizational learning.

- **Involvement in humanitarian coordination mechanisms:** 19 out of 30 respondents affirmed that they were participating in UN led coordination forums such as the Inter agency working group, WASH Cluster/WESCOORD, Health and Nutrition Clusters. It was observed by one member that some of these meetings only sought to collect information on what local actors were implementing. The information is however not consolidated, and it makes it difficult to measure impact. Other members felt that they had lean staff which made it difficult for them to participate in some of these forums. It was also observed that decisions in these coordination forums were top-down and that at the grass-root level the meetings were not regular. The Grand Bargain localisation workstream in humanitarian coordination groups recommends that those facilitating these forums should make attempts to understand the barriers by actively reaching out to local and national actors.

3.2.4 Emerging issues from the findings:

- The COVID-19 pandemic presents to us a **new reality of emerging disasters** in the humanitarian context. Caritas Africa Member organizations relied on their experience in community- based disaster risk reduction interventions to inform their emergency relief efforts.

- **There is a need to shift power from international systems to community led capacities:** Following travel and quarantine restrictions, international staff scaled back the number of their staff in international field locations. This placed the burden on local and resident staff to deliver emergency relief efforts. Widespread loss of income and limited access to social safety nets drove a considerable number of people into vulnerability and worsened conditions for those who were already receiving humanitarian assistance.

- The pandemic **tested our capacities for emergency preparedness and response**. The survey established that only 15 of the CA Mos interviewed had emergency preparedness and response plans.

- 29/30 CAMOs interviewed, indicated that they responded to the pandemic through a variety of interventions. This responds to the Sendai Framework for Disaster Risk Reduction which underscores the **role of local governments and communities in strengthening risk management and governance**. Civil society organizations continue to play important role in facilitating DRR trainings, community strategy development and taking part in organized voluntary work.

- The findings from the inquiry reveal **key trends and opportunities in humanitarian localization.** This has been captured in detail in sections 4.0 and 5.0 below.

4. Analysis of the role of Local Faith Based Actors and Communities.

The Catholic Church over the years, has promoted active citizen engagement on several issues such as; voter education, climate change mitigation and adaptation, humanitarian policy and amongst others, debt service relief and progressive taxation. This is in the view that an enlightened citizenry should have reasonable opinions on development issues as they navigate political processes.

Local communities have a role to play in shaping and influencing legislation on disaster management and the overall humanitarian context. They also play a vital role in reducing the impacts of disasters, and in climate change mitigation and adaptation.

Results from Hazard Vulnerability and Capacity Assessments (HVCAs), documentation of Early Warning Signs (EWS) and community coping mechanisms demonstrate that local communities understand their humanitarian context, their priority needs and are therefore best placed to define their priorities in Disaster Management. Decision makers should therefore take into consideration local knowledge on community-based disaster mitigation in decision making. These linkages should also be pronounced within processes from the sub-national to the global level.

Research evidence suggests that 84% of the world's population identify with a particular religious group. Religious leaders are trusted sources of information and play a crucial role in community engagement and empowerment of vulnerable groups.



The Caritas Family mobilized more than 160 million Rwandan Francs (over 160 000 euros) to support those affected by the COVID-19 crisis. (Source: Caritas Rwanda)

- The study by Caritas Africa demonstrates the important role played by faith actors in **building community resilience and promoting sustainable development** through nexus approaches. The theological interpretation of "SEE, JUDGE and ACT" and policy dialogue provides leadership in the sustainable development agenda.

- Faith actors are part of the communities they serve, they are present before, during and after a crisis. **Effective partnerships and social cohesion require building of trust over time**. Their presence and accompaniment feeds into their understanding of the local context, and into their interventions which contribute to sustainable, development and peace.

- **Information mapping and evidence gathering**: to develop evidence for advocacy, Caritas organizations regularly collect data to inform programming and the impact of their interventions. This data may be used to inform projects, policies and processes amongst like-minded actors.

- **Representation**: The Caritas structure connects grassroots communities to decision makers at the National, Regional, Continental and global level. These platforms provide opportunities for dialogue with multi-stakeholders in efforts to shape public policies.

- Community based radio stations and other traditional media facilitate **awareness creation on critical policy issues**, government processes, policy gaps and also provide a platform for decision makers to understand citizen priorities. In addition, **the media as a "watch-dog," informs the mass agenda**. This is an efficient platform for accountability, through budget monitoring, exposing corruption, acknowledging progress made by decision makers and mobilizing community action towards a particular development issue.

- As frontline responders, local and National actors must take into consideration the safety of their staff and the local communities that they serve. **As such, faith actors play a pivotal role in introducing justice issues within various policy areas**. **The COVID-19 pandemic has brought increased attention to the need for access to safe vaccines with reference to the preferential option for the poor.** In a statement dated June 18th 2021, the Southern African Catholic Bishop's Conference, indicated that they joined the South African Council of Churches

following the commitment by the Council to ensure that all Churches advocate for every South African who wants a vaccine to get it, especially poor people, and those who live on the margins of society. Faith actors in Africa therefore will be instrumental by raising their prophetic voices on fair and equitable distribution of vaccines and borrowing on lessons learnt from the distribution of personal protective equipment.

5. Key Trends and Opportunities in Humanitarian Localization

5.1 Study Overview

The year 2020 saw an increase in diverse humanitarian needs amidst a strain on the global economy and on funding streams for humanitarian work. Notably, the effects of the global outbreak of the Corona virus Disease (COVID-19) were intensified among communities that were already living in fragile, disaster risk contexts and experiencing protracted humanitarian crises. Barrier measures to curb the spread of the virus, limited the field presence of international aid workers and inevitably placed local and national actors at the frontline of humanitarian response. Considering their proximity to the affected populations, local actors need institutional capacities and adequate tools to respond to disasters and work towards early recovery.

This section is a result of a qualitative review that relied on: semi-structured online interviews with a small group of respondents, individual discussions with members of the CI Confederation, review of findings from the Caritas Africa survey on humanitarian programming, Caritas Internationalis survey on quality of funding within CI MOs, and vast secondary sources such as policy briefs, research, statements and reports on humanitarian localisation.

The table below summarizes activities and consultations for this study:

	Event	Format	Rationale
August 2020	Reflections between Caritas Africa and CAFOD on the study, primary purposes and proposed actions for 2021	Online reflection	Reflect on general observations on the localisation agenda in Africa region.
October 2020	Caritas Africa survey on humanitarian programming in sub-Saharan Africa region	Semi-structured interviews Key informant interviews	Assess institutional capacities in humanitarian programming, response to COVID-19 and develop evidence for advocacy and capacity initiatives
November 2020	2-hour reflective workshop on research findings	Online session	Present research findings to Caritas Africa Member Organisations and collect any additional qualitative data
November	Interviews with National Caritas members in Nigeria,	Semi-structured	Review dimensions of Localisation in countries

2020	Democratic Republic of Congo, Central African Republic, Ethiopia and South Sudan.	interviews with the National Director and Humanitarian Coordinator	receiving UN OCHA country based pooled funds
November 2020	Interview with Caritas Uganda	Individual discussions.	Based on Caritas Uganda's experience in the Localisation debate at the CI humanitarian policy taskforce and engagements with Charter 4 Change in Uganda
December 2020	Interviews with Caritas Internationalis member organisations	Semi-structured interviews with CIMOs	Perspectives on UN funding mechanisms, bilateral and institutional donors

5.1.1 Constraints of the inquiry on humanitarian localisation:

- Barrier measures to curb the spread of COVID-19 and financial limitations meant that Caritas Africa and CAFOD staff could not travel to the field and feed into this inquiry through observation.

- Considering the number of interview respondents, **this study is indicative and will not claim to address all the fundamental issues on localisation in sub-Saharan Africa region**.

5.2 Findings

The section below summarizes highlights from the inquiry with specific reference to **funding and financing, participation in humanitarian coordination and decision-making processes, partnerships and relationship quality, and humanitarian capacity strengthening.**

5.2.1 Funding and Financing for Humanitarian Work

- Member organizations interviewed reported they had received funding for humanitarian work from UN bodies such as UN FAO, UNHCR and UNICEF, private entities and Caritas Internationalis Member Organizations. Funds from bilateral and multilateral agencies were channeled through intermediaries. They further observed that direct financing facilitates timely, quality and efficient humanitarian response.

- Respondents accepted that the funds were relevant and supported efforts to save lives, building community resilience during and after a crisis and for engaging in policy dialogue around humanitarian policy advocacy. They however observed that the funding was not adequate to address the humanitarian needs within their local contexts, as such their reach was limited.

> ***"It would be great to access funding directly from EU governments. But they prefer to go through intermediaries in their countries. If we were in a position to receive direct funding from the back donor, possible direct costs will be covered..."***

Respondents highlighted that in most cases they had to tailor their proposals in reference to donor priorities. In some cases, the local context analysis and needs assessments were not taken into consideration.

Challenges in humanitarian funding and financing

- **Earmarked funds** reduce the ability for Caritas Organizations to respond to the most urgent needs of the affected people, and affects capacities adapt to the rapidly changing humanitarian priorities. Local and Caritas actors would **appreciate donor flexibility** and **unearmarked funding** to allow them to internally prioritize urgent life-saving interventions.

- **Length of Humanitarian grants:** Short-term grants for humanitarian projects translate to additional administrative work and affect the quality of projects being implemented. The Local and National Caritas Organizations called for: **Harmonization of reporting requirements** in cases where projects are co-financed by different donors, exploring alternative and brief reporting requirements for short-term grants and a critical review of no-cost extensions and the impact on organizations that have lean staff and need support to cover overhead costs.

- **Delayed disbursements and lack of pre-financing options**: Most organizations indicated that they did not have pre-financing options for urgent humanitarian needs. In some cases, the fundraising and contracting process consumed a considerable amount of time. As a result, the response was delayed or the organization could not respond to a particular disaster. They called on donors to fast-track disbursements and to reduce the number of tranches especially for small organizations that lack contingency funds for emergencies.

- **In some cases, Caritas Organizations are required to pre-finance the project**, this consumes their reserves and as a result these organizations are unable to cover administrative costs such as staff salaries.

- **Administration and overhead costs**: Sometimes, the administration costs were not adequate because they were pegged to what the donors can give or were willing to donate and note what organizations require. In other cases, different UN agencies and international donors adopt different approaches to covering these costs, and sometimes do not support them. Most organizations reported a high rate of staff turnover as a result of some of these donor restrictions.

  It was however observed that it would be important for donors and implementing partners to have clear definitions of what administration and overhead costs would include, before starting the contracting process discussion should be held on staffing costs.

> ***"From my experience based on the number of years that I have been in this industry, I have seen some donors at the UN and, including some within the Caritas family who do not support these overheads, but still they want work to be done. They insist that they will not support staffing costs because it may be too expensive for them. How do you deliver a quality program if you do not have capacities to employ and retain staff? "***

5.2.2 Collaboration and Partnership in Humanitarian Action

The mutual goal of partnerships in humanitarian action is meeting the needs of crisis-affected populations in timely, relevant, coherent, efficient and sustainable ways. The signatories of the 2016 Grand Bargain committed to make aid as local as possible and as international as necessary.

In 2021, it is evident that international actors still have greater access to funds and influence over decisions on humanitarian funding. According to the OCHA Financial Tracking System (FTS), as at 6th May 2020, only 0.1%[1] of funding was channelled to local and National actors for COVID19 response. Although, one of the global localisation commitments is to ensure that, as directly as possible, 25% of humanitarian funding is channelled to local and national actors. Findings from the survey suggest that the

[1] https://reliefweb.int/report/world/charter-change-statement-revised-un-global-humanitarian-response-plan-covid19

localisation debate is high on the agenda of humanitarian actors but its realisation remains work in progress

> ***"The partnership approach is top-down, we do not feel like partners, we are sub-contractors. Some donors assume that Local NGOS should be in a position to assume any form of risk once anything happens. This is not always the case. They need to understand the realities that we face when implementing projects on the ground, the current arrangement creates room for mistrust and this affects partnership and relationship quality…"***

Good Practices in Partnerships

- Caritas Norway and Caritas Germany provide the required technical support during proposal development. They also facilitate the translation of documents to their National Language. This eases engagements with bilateral agencies.
- UN OCHA's current leadership is keen to collaborate with Local NGOS in-country. The Membership of CAMOs in UN Humanitarian Cluster Coordination forums facilitates access to trainings for Caritas staff.

> ***Catholic Relief Services has been actively facilitating linkages for us to access funds from UN Agencies. We went with CRS to the offices of UN OCHA and we were able to access funding for humanitarian work, this was during the conflict in the Southern part of our country that had led to internal displacements.***

- Caritas Germany encourages their local and national Caritas Partners to take part in national level cluster meetings. They however recognize the challenges that would be faced by actors based in remote areas; they counter this by training them on the frameworks for accountability in humanitarian and development imperatives. They also support their local partners to actively engage in projects, processes and initiatives within the UN OCHA Country Based Pooled Funds.
- CAFOD supports its partners to revise policies in reference to the global standards' requirements. They deploy staff to accompany Institutional Development and Capacity Strengthening actions such as financial management, budget tracking and accountability and facilitate training on narrative and financial reporting.

- Caritas Norway's approach is *"learning by doing."* They prefer to prepare proposals jointly with the partner as they exchange on the local context, results-based programming and risk-analysis.

Partnerships Challenges

- Caritas Africa Member Organizations are required to be compliant with **nuanced donor requirements** in contracting processes, required organization policies, procurement procedures financial procedures and reporting. There is a need for international actors to harmonize all these processes.

- **A top-down approach** by donors and international humanitarian agencies to risk management.

> "Localisation is not about transferring funds to a national organisation to do projects. It is much more than that and it will take a while for us to achieve this agenda. There are issues to do with risks, compliance issues that even if we are desirous to pass them on to our local and national partners, they still do not have the capacities. The consequences of not handling risks properly are bigger than the short-term concerns, we need to get to a point where funders are confident that partners are ready to learn and are able to take certain responsibilities in terms of managing risks and compliance issues…"

- **Inadequate support towards humanitarian capacity strengthening**. Local and National actors propose that project budgets should consider running costs, vital assets required in project implementation, safety and security of field staff, financial sustainability and institutional development and capacity strengthening. It was suggested that the leadership at the local and the Africa regional level should convene discussions to get a buy in and advocate for a continent-wide framework for humanitarian capacity strengthening.

- Implementing **partners are treated as sub-contractors**, this does not respect the principles of partnership which call for fraternal cooperation, trust and mutual accountability.

5.2.3 Humanitarian Capacity Strengthening

> "Caritas Nigeria occasionally conducts salary surveys within similar sectors to ensure that our salaries are competitive…"

The negotiators of the Grand Bargain committed to increase support towards institutional capacities of national and local responders through multi-year investments in preparedness, response and coordination capacities, taking into consideration communities living in fragile contexts such as armed conflict and climate-related disasters.

The inquiry established that:

- Members had received support from funders to improve their financial management systems and develop safeguarding policies.

> "As part of our response to COVID-19 Caritas Denmark allowed us to revise the budget to purchase some Personal Protective Equipment (PPE) for frontline staff. They also allow us to use at least 2% of the total budget for capacity building based on the commitments of the Caritas Internationalis localisation agenda…"

- The Caritas Internationalis Management Standards have served as a reference point for Institutional Development and Capacity Strengthening.
- Caritas Internationalis Member Organizations such as CRS, CAFOD, Trocaire, Caritas Denmark, Caritas Japan and Caritas Korea, amongst others, fund initiatives for staff training. It was also noted that these partnerships have been consisted over the years.

"One of the obstacles we continue to have is inability to retain professionals. We have spent funds on training staff and along the line because of the short-term length of humanitarian grants, we have to terminate contracts because we lack private funds to retain these professionals. Once we acquire a new grant, we have to start the recruitment and capacity building process over again. It would be much easier if we had the capacities to maintain these professionals..."

Challenges in Humanitarian Capacity Strengthening

"Assets are vital in Humanitarian Capacity Strengthening. Our Caritas does not own quality vehicles, as a result, we exhaust some budget lines because we have to constantly repair our vehicles. Maintenance of second-hand vehicles is quite costly..."

- Inability to retain competent staff due to the short-term nature of emergency projects.
- Lack of emergency preparedness and response plans

5.2.4 Participation in humanitarian coordination and decision making



Charter for Change working group meeting- dialogue on localization of humanitarian aid in Uganda (Source: Caritas Uganda) 27/10/2020)

The inquiry established that:

- ✓ There were various sectoral/thematic cluster forums which sometimes meet at same time and at different venues and due to lean staffing organizations could not attend all of them especially Caritas Ethiopia.
- ✓ CAMOs participate in the humanitarian coordination forums, but it was observed that there are limited national and local NGOs participation, as the forums were mostly UN/INGOs led.

> *"The international humanitarian system has taken up a top-down approach, most of the discussions are dominated by International agencies and UN agencies. Field level staff working with marginalised communities are not really present in some of these discussions. Some of the local organisations we work with have said time and again that they feel like sub-contractors, they are not part of the decision-making processes..."*

- ✓ In some cases, decision in the coordination forums were mostly made in hurry and there were strict timelines for activation of responses. As a result, National NGOs faced challenges with complying within specified timelines due to poor internet connectivity and other infrastructure such a poor road network, as reported by Caritas South Sudan.

5.3 Recommendations: Towards the Realization of Humanitarian Localisation in Africa Region

Findings emerging from our inquiry, demonstrate that localisation may be achieved through various policy shifts in the humanitarian system, these include: *channelling direct assistance to the global south*, *reciprocal and mutual transparency among actors, facilitating adequate administrative support to cover operational and administrative costs* and finally, *taking into consideration the capacities of local organisations, local communities and religious institutions.*

Conclusions from the survey and review of existing literature on aid localisation point towards the following general recommendations for Caritas internal and external stakeholders, Institutional (mainly government) donors and multilateral agencies:

Funding and Financing	• Support national and local actors to receive **direct and adequate funding to attract, retain and maintain human resources**. Grants should cover overhead/ indirect costs. • Recognise safeguarding, financial management and ethical risks on all sides and work towards a "risk-sharing" approach.
Partnerships and relationship quality	• Partnerships should promote principles of fraternal cooperation, subsidiarity and autonomy. This calls for a shift from a top-down approach to a bottom-up approach. • Due diligence assessments should avoid if necessary long and tedious processes. The processes should be harmonised. • Funders should take into consideration the amount of time and resources, spent by local and national actors in responding to call for proposals by filling in lengthy, complex proposal formats and numerous forms .
Participation in Humanitarian coordination and decision making Processes	• Increase the number of seats allocated to local organisations in humanitarian cluster coordination forums and decision making processes. • Support initiatives to train local organisations on humanitarian policy advocacy to increase awareness on opportunities for engagements in policy debates.
Humanitarian Capacity Strengthening	• Shift from short term project-based capacity strengthening approaches to long term approaches that strengthen operational and institutional capacities of Local and National Non- Governmental Organisations (LNNGOs) and actors. • Shift towards a "Capacity-Sharing" approach by strengthening existing organisational systems and financial reporting procedures, where possible, avoid introducting new systems and reporting formats with each grant. • In multi-country programme contexts within Caritas Africa; support initiatives to facilitate local to local learning and information sharing.

5.4 Recommendations for Caritas Africa

Regional actors play an important role in catalysing action, information mapping and evidence gathering and developing common positions with members to advance this agenda. For the realisation of the localisation agenda in the Africa Region: **we recommend the following actions**:

- In collaboration with SECAM, join civil society working groups at the African Union level to further policy dialogue on the Africa Regional Strategy for Disaster Risk Reduction and Common Africa Position on Humanitarian Effectiveness that was launched by the African Union in 2016.
- Convene regular Zonal meetings with Bishops President calling for the allocation of institutional funding to support sub-national and national Caritas Organisations as essential humanitarian actors in their specific contexts. This will promote staff retention even after short-term projects are phased out.
- Facilitate awareness sharing among member organisations on the Disaster management, localisation commitments and the Caritas Internationalis Commitments. This should inform future engagements when members apply for Institutional, Multilateral and Catholic supported funding.
- Facilitate local-local knowledge exchanges and information sharing among Africa members and civil society to encourage learning from countries with promising best practices.
- Considering the role of local and National actors as frontline responders during emergencies, Caritas Africa should collaborate with National Caritas Organisations in the Caritas Network to conduct advocacy on access to safe vaccines and highlighting preferential option for the poor: (SABC Position Statement on vaccines- 18th June 2021).

Recommendations for Caritas Africa Member Organisations

- Caritas Africa Member Organisations should increase pastoral collaboration with Bishops conferences in-country to strengthen the Catholic voice in the in-country Inter-faith consultation forums.

- Caritas Africa Member Organisations should promote the integration of volunteerism in Development and Humanitarian Programming.
- Prioritise Institutional Development and Humanitarian Capacity Strengthening, and explore measures to ensure staff retention for the quality and effectiveness of program work.

5.5 Recommendations for Caritas internal stakeholders

- Caritas Internationalis should encourage reporting by CI MOs on % allocated to indirect costs administrative support and overhead costs. Members may also interact with the Caritas Internationalis indirect cost recovery policy. Within the policy, indirect costs/ ***overhead or structural costs*** are defined as those costs that are incurred for a common or joint purpose and therefore cannot (without making disproportionate efforts) be identified specifically with a particular funded project, programme or special activity.
- Caritas Internationalis should encourage reporting on % allocated to humanitarian capacity strengthening.
- Capacity strengthening to increase participation of Caritas Africa Member Organisations in humanitarian cluster forums.
- Support the roll out of the Disaster Risk Reduction Advocacy training guide recently developed by Caritas Africa with support from Caritas Australia

5.6 Recommendations to Institutional Donors and Multilateral agencies

- Encourage direct contact with Local and national actors, in an effort to increase understanding of their contexts, challenges and the need for flexibility in financing.
- Increase collaboration with Faith Actors and Inter-religious forums and strengthen their capacity, to conduct policy dialogue with Governments, Institutional and Multilateral donors on humanitarian preparedness and response.

Caritas Africa is the socio-pastoral arm of the Catholic Church and one of the seven regions of the Caritas Internationalis Confederation. We represent a network of 46 National Caritas Organizations in sub-Saharan Africa, including islands in the Atlantic and Indian Oceans. Our role is to promote cooperation and harmonize the work of Caritas members in our region, in line with the priorities determined by the General Assembly of *Caritas Internationalis*. Our purpose is to assist the Church in Africa in carrying out its social-pastoral ministry of; *the service of charity* and *promoting justice* by*;* assisting the poor and the most excluded, responding to humanitarian emergencies and promoting Integral Human Development.

Caritas Australia has been working and supporting communities in Africa since 1964. The programs supported range from Food security, Health, Shelter, Water, Sanitation and Hygiene (WASH), Education, Protection, Livelihood and Emergency Response Relief. They currently partner with 19 MOs in countries such as DRC, Malawi, Tanzania, Mozambique and Zimbabwe. In DRC Caritas Australia provide support for the re-integration of ex-combatants in the DRC. In Malawi, the program focused on supporting communities to access clean water and sanitation, improve food security, increase awareness of HIV/AIDS, and reduce the impact of droughts and floods. While in Mozambique the focus is on supporting programs that improve income, wellbeing and relationships for vulnerable and marginalized communities. In Tanzania they support programs that provide clean water and sanitation, increase awareness of HIV and AIDS, improve food security, and reduce the impact of droughts and floods and similarly in Zimbabwe the target programs range from water and sanitation, food security, health and education, and also raising awareness about HIV/AIDS.

CAFOD is an international development charity and the official aid agency of the Catholic Church in England and Wales.The Charity organization reaches out to people living in poverty with practical help, whatever their religion or culture. Through its global Church network, one of the largest in the world, it has the potential to reach everyone. CAFOD is a founding signatory of Charter for Change which outlines 8 commitments of International Non-Governmental Organizations to change the ways in which they work with are relate with National NGOs partners. CAFOD is also a member of the IASC Humanitarian Financing Task team.

6. Background documents

African Union Commission Programme of Action on DRR

https://au.int/sites/default/files/documents/33005-doc-sendai_framework_for_drr_2015-2030-en.pdf

First Africa's Biennial report on Disaster Risk Reduction

https://au.int/sites/default/files/documents/38982-doc-1st_africas_biennial_report_on_disaster_risk_reduction_full_report_english.pdf

Disaster Risk Reduction and Climate Change Adaptation: Pathways for policy coherence in Sub-Saharan Africa

https://reliefweb.int/report/world/disaster-risk-reduction-and-climate-change-adaptation-pathways-policy-coherence-sub

Caritas Internationalis Localisation commitments and position paper on localisation and partnership in humanitarian action

https://www.caritas.eu/wordpress/wp-content/uploads/2019/06/CI-Position-paper-on-Localisation-_EN.pdf

CAFOD: Localisation of Humanitarian Financing: Policy options for the Grand Bargain for bilateral donors

https://cafod.org.uk/content/download/28979/327361/version/1/file/Localisation+of+humanitarian+financing+CAFOD+proposals+for+the+Grand+Bargain+March+2016.pdf

Charter For Change: Towards Risk Sharing – Risk Management and Localisation in the Covid19 response and beyond'

https://charter4change.org/2020/06/23/towards-risk-sharing-risk-management-and-localisation-in-the-covid19-response-and-beyond/

Charter For Change: Joint agency report: Humanitarian Funding, Partnerships and Coordination in the COVID-19 crisis: Perspectives from local women-led organisations and women's rights organisations

https://charter4change.org/2020/07/16/perspectives-from-local-women-led-organisations-and-womens-rights-organisations/

Global Mentoring Initiative: Localisation in Practice: Emerging Indicators and practical recommendations

https://reliefweb.int/sites/reliefweb.int/files/resources/Localisation-In-Practice-Full-Report-v4.pdf

Trocaire: More than the money- Localisation in practice

https://www.trocaire.org/sites/default/files/resources/policy/more-than-the-money-localisation-in-practice.pdf

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