LEARNING REPORT:
DCA and partners’ experiences working in the COVID-19 response
The COVID-19 pandemic fundamentally reshapes the way we live and how we work. Lockdowns, quarantine rules, and curfews are impacting freedom of movement and assembly. The pandemic has already led to a food crisis in many countries and may lead to a rise in armed violence and social unrest as people are faced with loss of jobs, income and limited social protection. The risk of deepening existing inequalities in already-fragile contexts is concrete and real, while civil society’s room for maneuvering may be further limited under the guise of crisis management. The footprint of the pandemic is likely to be long lasting. As stated by the UN in their global humanitarian response plan (GHRP) “Lockdowns and economic recession may mean a hunger pandemic ahead for millions.”

DanChurchAid (DCA) has responded both directly and through partners to COVID-19 since the start of the pandemic through a broad range of preventive measures, including water, sanitation and hygiene (WASH) activities, and other activities to counter stigmatisation, discrimination and gender-based violence (GBV), rights protection, and cash distribution. The main challenge remains to overcome the economic and social negative consequences of the lockdown. The Danish Ministry of Foreign Affairs allocated 20 million DKK through the flexible emergency funds (in DCA called - Danish Emergency Response Fund (DERF)) to DCA’s COVID-19 response. DCA has by the end of May distributed 12 million DKK from the DERF to following countries: Palestine, South Sudan, Iraq, Mali, Malawi, Kenya, CAR, Ethiopia, Myanmar, Uganda, Nepal, Zimbabwe, Cambodia, Thailand, and DR Congo.

This report compiles key learning from DCA’s and local partners’ response to the COVID-19 crisis from DCA’s operational areas. The learning was gathered at a virtual learning seminar in May 2020 on the COVID-19 response, in which five thematic areas were addressed:

1. the role of faith actors;
2. the humanitarian programming and learning from a food crisis;
3. livelihoods and value chains;
4. GBV mainstreaming response; and
5. conflict and access challenges.

All thematic areas focused on understanding the short- and long-term impact of COVID-19 on current programme activities as well as addressing the main barriers and opportunities for project progress during the crisis.
Local faith actors (LFAs) and other local actors generally have a critical role to play in humanitarian response. However, in the COVID-19 response, this role has been significantly reinforced as international actors are restricted from travel or unable to freely deploy to field operations. The GHRP and UN senior management have recognized the vital role of local civil society actors and LFAs in the response 1.

Following learning was presented by DCA’s Country Offices:

A paradigm shift towards more localisation
The LFAs that DCA works with are deeply rooted in the communities they serve and have played a crucial role to support communities, regulate behaviour and foster resilience before, during and after the COVID-19 crisis erupted. DCA has since the start of the crisis supported its local faith-based partners to respond to the humanitarian as well as long-term needs of their communities. The partners have shared credible information in communities to counter fake news, reduce stigmatization and protect people from discriminatory practices arising from prejudices, disinformation or hysteria due to the COVID-19. The LFAs have succeeded with this work as they are trusted by, accepted by and part of local communities. DCA staff report that faith actors have become role models and champions of human rights when government-imposed policies and regulations are restricting freedom of movement and assembly (e.g. Kenya). In Malawi, local faith-based actors propagate a message of prevention and hope while supporting community cohesion and trust. This makes LFAs influential voices in strengthening community inclusion and resilience and in protecting and reclaiming rights. In Zimbabwe, conflicts at a community level and at a national level are expected to rise as a result of a shortage of jobs, food, and social protection. Hence, DCA is supporting local faith-based organisations in strengthening peace programming in communities through trainings, empowerment activities, awareness raising and trust building. This also includes awareness raising on gender rights and mitigating the threat faced by women and girls in quarantine.

More funding needed to local actors
Moving beyond the public health crisis, LFAs have a key role in addressing the social and economic consequences of COVID-19. They are already in the frontline of the COVID-19 response. Yet international funding to support local actors’ efforts is slow or non-existing (0.1%). 2 This is far below the global Grand Bargain commitment by UN agencies, donors and INGOs to ensure that at least 25 percent of humanitarian funding reaches national and local actors as directly as possible. 3 DCA supports its faith-based partners to access international funding in the COVID-19 response (e.g. country-based pooled funds).

Key learning: A need to encourage and support unconventional, alternative and creative partnerships with local faith actors who are often left out in mainstream humanitarian processes but have the trust of communities and can adapt global guidance into terms that resonate for local communities.

2. Just 0.1 percent of total funding reported for Covid19 reaches local actors. Data downloaded from the OCHA Financial Tracking System at 17:15 on 06/05/2020
Lockdowns and travel restrictions are challenging DCA’s and partners’ access to beneficiaries. Meanwhile, humanitarian needs are rising due to COVID-19 as social distancing policies imposed by national authorities are undermining peoples’ coping strategies in communities already facing humanitarian crisis.

Following learning was presented by DCA’s Country Offices:

Access is shrinking due to COVID-19 restrictions
Lack of clear direction by national governments on how to respond to the crisis is severely hampering the access of DCA and its partners to support people in need. For example, in some countries (e.g. Ethiopia, Nepal, Kenya and Zimbabwe), governments are still in a process of adjusting and processing policies and regulations to address the new situation. This is leaving humanitarian actors to operate without clarity and with delay - even 6 weeks into the crisis. Delivery of supplies and program materials are slow due to restrictions, and often more costly. As reported by one DCA staff, “one of the biggest barriers has been panic - also by national authorities. It’s important getting it right before people are starving”. Hence, DCA and partners are working to reach a common understanding with authorities on the needs and critical actions required to respond to people’s needs timely and effectively. DCA is trying to mitigate the risks related to access by reaching out to partners, armed groups, local governments and supporting local coordination mechanisms who are better placed to surmount these obstacles.

Flexible funding
While donors have been showing some degree of flexibility in terms of reallocating resources for COVID-19 response, there is concern among DCA staff and partners that long-term development funding will be less-resourced in the future as global economies are likely to face recession.

In several countries, new grants have been announced by donors to complement COVID-19 activities, and crisis modifiers have been deployed to ensure greater flexibility and mainstreaming of COVID-19 in existing programmes. Cooperation with donors on COVID-19 activities are working well in most countries. This has facilitated a dialogue on increasing nexus funding to link emergency response with mitigation of the social and economic consequences of COVID-19.

Key learning: A crisis like the COVID-19 pandemic, adding additional complexity to existing crises, requires a new dimension of flexible programming to accommodate both short- and long-term needs. This asks for donors and governments to support the COVID-19 response with multi-year funding that allows for flexibility and sustainability in the long-term.
Livelihood and value chains during COVID-19 – learning and future impact from Uganda and Cambodia

Government imposed lockdowns, social distancing and movement regulations have torn apart peoples’ economic foundation. As many as 4 out of every 5 jobs are likely to be affected and cause a global recession\(^4\). This hits hard in countries where up to 80% of the population works in the informal sector. This requires humanitarian actors like DCA to quickly adapt programming and refocus interventions to accommodate the long-term economic disruption of the crisis.

Following learning was presented by DCA’s Country Offices:

Adapting programming to the high-risk consequences of COVID-19

A growing number of DCA’s target groups is at risk of becoming food insecure as the crisis unfolds. Small businesses are closing, of which many will have lost the ability to reopen, and workers have been sent home without income. Markets are closed and producers are unable to access farm inputs and financial services. In Cambodia, small producers are at risk of increased indebtedness with Financial Service Providers as repayment of loans have not been put on hold. This requires DCA to adapt existing programmes towards more basic livelihood activities such as distribution of farm input or cash vouchers but also to refocus the way we support small-holder farmers and producers.

Under normal circumstances, i.e. where markets function (relatively) well, DCA’s and partners’ main priority is to facilitate market linkages and ensure that producers have relevant support and capacity development to engage and negotiate with buyers. However, in a situation of crisis and shock, like the COVID-19 crisis, DCA must take on a more direct intervening role in order to boost demand and supply to the local markets. In Cambodia, for example, DCA has supported bulk sales organised via farmers’ organisations (cooperatives) enabling buyers and producers to meet in one place and for buyers to access large quantities of farm produce. Digital marketing and communication between producer and buyer, or even directly between producer and consumer, have also served to solve the problem. Prior to COVID-19, DCA has supported producers in settling contracts and agreements with buyers which enable them during COVID-19 to better sell their produce.

Working across the humanitarian-development nexus

DCA and partners’ experience in operationalising nexus approaches will serve as an advantage when refocusing interventions. In Northern Uganda, DCA has worked across the humanitarian-development nexus for several years targeting both refugee and host populations and addressing both their short- and long-term needs. These approaches can be transferred to countries where DCA normally works from a long-term development perspective and where communities are now faced with both acute and long-term needs as a result of the COVID-19 crisis.

Key learning: adapted programming and reorientation of programmes are likely to benefit small-holder farmers and producers in a second phase of the COVID-19 response. The response requires an increased focus on short value chains, i.e. value chains with minimal distance between producer and end-consumer (as opposed to ‘long value chains’ which involve export and long-distance transportation), and the need to stimulate local production and boost demand/supply to local/national markets. Donors need to acknowledge the high-risk consequences on peoples’ livelihood and reorient programmes to focus on livelihoods. An increased focus on gender equality, community-led, people-centred and pro-poor value chains to markets and financing is essential.

In a time of lockdown and movement restrictions, women and girls who already live in a situation of violence or are at risk of violence are adversely impacted by isolation. In some countries, DCA’s regular GBV activities have been suspended due to government policies, while in others, programmes are impacted by movement restrictions with limited remote support, diminishing the oversight of gender and protection mainstreaming in field-level project delivery.

Following learning was presented by DCA’s Country Offices:

Protection services are closing down
In DCA’s operational areas, protection services are scaled down, including child-friendly spaces and safe spaces for women providing psychosocial support and vocational training. This means that DCA and partners have to reconsider how to respond to the impact on women who are confined with their abusers and how to mitigate harmful practices such as early and forced marriage that are likely to increase. In several countries where DCA works, case management and individual psychosocial support is now conducted one to one and remotely by committed, trained staff. Phone hotlines are established, and volunteers are increasingly mobilised to disseminate messages on COVID-19 and GBV risk mitigation to their peers at camp/community level.

Engaging communities in GBV and protection work
Among DCA’s partner staff, local authorities and community focal points, of whom many tend to be men, there is a general gender equality awareness gap. To address this, DCA in Cox’s Bazar has successfully engaged community volunteers, both male and female, to carry on some of the activities in the current setting, now that staff have limited access to the camps. Even before the crisis erupted, DCA applied the EMAP approach, Engagement of Men in Accountable Practices, in its GBV programming to address root causes of GBV from the community level. During the current crisis, this approach has proven effective as community workers, including men, are able to reach out to communities with key GBV messaging. Likewise, in South Sudan DCA and partners have worked with community-level protection committees for improved outreach and awareness raising.

Key learning: Already established networks and engagement with local communities and partners have proven critical to reach communities with timely protection services and awareness activities. This requires a transformative and consistent approach to capacity strengthening (equality champions) on gender understanding and awareness long before a crisis erupts. Similarly, by raising awareness at all levels, and particularly at community level, women and girls will also feel comfortable in communicating their needs and claiming their rights, and the burden added to women will likely be reduced due to a redistribution of responsibilities between men and women.
COVID-19 adds another layer of complexity to the operational reality in conflict settings, risking fuelling conflict and exacerbating the root causes of conflict. While the UN secretary general has initiated a call for a global ceasefire, it has received little global support and has yet to trickle down to country-level, with few exceptions. In some countries, there has been a decrease in tensions, while in other places, armed actors have taken the opportunity to reorganise and mobilise (e.g. Mali, Libya). Youth in Libya for example, frustrated over lack of income as a result of the crisis, are drawn into the military that is still paying a salary.

Following learning was presented by DCA’s Country Offices:

Trust building and local network
Access and community isolation are already a challenge in conflict areas and it is further complicated during COVID-19. Access barriers related to money transfers (when banks close), limited communications, hospitals closing (not enough trauma hospital facilities to support ongoing mine action activities), and military in control of power and excessive use of force all greatly limit DCA’s ability to respond on the ground.

Two key enablers of access are trust and local networks. In most places, national staff and partner staff are better positioned to cross borders and access communities. DCA works with local volunteers, local staff and partner staff who are key for program implementation. These partnerships must be nurtured and established before the crisis hits as trust is otherwise very difficult to build. Relationships with local actors, even the smallest networks, gives access to information and an opportunity to continue meaningful support. Relevance of the support DCA provides will determine trust and quality relationship. The role of and established acceptance by non-state actors becomes critical in contested spaces.

Adapting activities to COVID-19
All activities implemented by DCA and partners in conflict settings are adapted and redesigned to be relevant to the new needs on the ground. Country offices are strengthening conflict sensitivity to ensure that they Do No Harm, and instead Do Some Good and where possible Support Peace. In Syria, for example, psychological first aid (PFA) activities have gone online. Cash for work schemes are spraying disinfectant in IDP camps, NFIs have been adapted and turned into COVID-19 NFI kits. In Iraq, WASH and CASH activities, neither of which DCA was doing before COVID-19, are now standard activities to meet needs on the ground. In Libya, as schools have closed and large gatherings are prohibited, explosive ordnance risk education materials that are normally used in face-to-face sessions are now being distributed in traditional and new media campaigns, combined with COVID-19 messaging. This allows for the continuation of programming but in an adjusted way.

Key learning: DCA’s multi-sector approach and working across nexus in conflict settings has proven effective during COVID-19. Working with a broad range of response sectors, local communities and partners and traditionally being good at coordinating has helped DCA to manoeuvre with a high level of flexibility and adaptability.