

Colombia and Venezuela Earthquake Response

Mission Report and Call to Solidarity

Visit of the ACT Alliance General Secretary, 30 August–4 September 2026

Purpose of the mission

From 30 August to 1 September, I visited Colombia, followed by a mission to Venezuela from 1 to 4 September, to accompany ACT Alliance members and their local partners responding to the recent earthquakes in both countries. In Colombia, the programme included discussions with the ACT Colombia Forum, the ACT regional team, LWF, HEKS/EPER, Christian Aid and other partners.

The purpose was not only to express solidarity, but to understand how the response is unfolding in practice: where ACT members are adding value, where important gaps remain, and what these emergencies tell us about localization, community-led humanitarian action and the changing international humanitarian system.

My principal conclusion is clear: ACT members and their partners are doing important and distinctive humanitarian work, particularly by reaching communities that larger response mechanisms do not easily reach and by strengthening, rather than replacing, local capacity. But this work cannot be sustained at the scale required without substantially greater support from across the Alliance and from our ecumenical, faith-based and multi-religious partners.

The urgency is particularly acute because these disasters have not created vulnerability from nothing. In both Venezuela and Colombia, the earthquakes have struck communities already experiencing poverty, inadequate access to public services, displacement, conflict or other forms of humanitarian stress. The earthquake has magnified these pre-existing inequalities.

1. Two emergencies, with needs extending far beyond the earthquakes

Venezuela

More than two months after the two earthquakes of magnitude 7.2 and 7.5 struck north-central Venezuela on 24 June, the response is moving into early recovery while significant emergency needs continue. PAHO's latest update, issued on 4 September, stresses the continuing need for mental health services, rehabilitation, support to transitional camps, restoration of damaged facilities and continuity of essential health care.

By late July, Venezuelan authorities were reporting more than 5,300 deaths, around 16,700 injuries and approximately 18,000 people who had lost their homes. The UN and humanitarian partners had reached more than 117,000 people, but the humanitarian community was simultaneously responding to a much broader crisis: almost eight million people already required humanitarian assistance before the earthquakes. An additional US\$299 million was requested through an earthquake-related addendum to the Humanitarian Response Plan to assist 1.3 million people, bringing overall humanitarian requirements in the country to US\$931 million.

What I saw during the visit reinforced the importance of looking beyond earthquake damage alone. In several communities, people were already living with serious deficits in basic services before 24 June. The earthquake did not simply create a new humanitarian crisis; it exacerbated an existing one.

ACT's VEN261 appeal seeks approximately US\$6.1 million for a 12-month response led by LWF, Diakonie Katastrophenhilfe (DKH) and HEKS/EPER together with established Venezuelan partners. The response covers WASH, food, health, shelter and household items, protection, livelihoods, Mental Health and Psychosocial Support (MHPSS) and with Cash and Voucher Assistance envisaged where the regulatory and operational environment permits.

An important operational constraint raised during the mission concerns Cash and Voucher Assistance (CVA). ACT members reported that cash transfers are currently not authorized by the Venezuelan Government for the humanitarian response. This means that, even where markets are functioning and cash assistance could provide affected households with greater choice and flexibility, members must adapt their programmes to the modalities permitted in the country, including in-kind assistance, services and other forms of recovery support. The ACT appeal anticipated this possibility by making CVA conditional on the regulatory and operational environment and providing for resources to be redirected to in-kind assistance and recovery activities where cash programming is not feasible. This is another example of why humanitarian programming needs sufficient flexibility to respond to the actual operating context rather than applying standardized response modalities.

The latest ACT situation report made available to me before the mission recorded US\$1.408 million pledged, only 22.08% of the appeal at that point. While additional bilateral resources are being mobilized by some members, the funding uncertainty remains a serious operational concern.

Colombia

In Colombia, a magnitude 7.4 earthquake struck on 10 August with its epicentre in San José del Palmar, Chocó. The scale of the disaster remains difficult to quantify precisely because assessments continue and data from remote areas are incomplete. OCHA reported on 22 August at least 304 deaths, 4,548 injuries, extensive destruction of homes and serious damage to schools, health centres, water systems and roads. It specifically noted continuing information gaps in rural and hard-to-reach municipalities.

The ACT Colombia Forum has now launched COL261, a US\$2.5 million appeal led by LWF and HEKS/EPER, with a target of 31,640 people in Chocó. The response includes multipurpose cash assistance, shelter, WASH, MHPSS, livelihoods and early recovery, as well as rehabilitation of health facilities, schools and community infrastructure.

Chocó illustrates particularly clearly why humanitarian response cannot be designed around assumptions of easy access. Many affected communities can only be reached by river. The ACT appeal describes remote areas along the San Juan and other river systems where significant Afro-Colombian and Indigenous populations were already living with extremely limited access to essential services. Some communities remain difficult even to assess.

This geography directly affects the cost of humanitarian action. Reaching some communities requires many hours of river travel. Transportation is not an administrative overhead that can simply be compressed to meet standardized donor expectations; it is an unavoidable part of reaching people who would otherwise remain outside the humanitarian response.

2. What distinguishes the ACT response - Working through local actors rather than replacing them

One of the strongest impressions from both countries was the contrast between the ACT approach and much international humanitarian implementation. ACT's international members are not simply establishing parallel delivery structures. They are deliberately working through churches, community organizations, national NGOs and other established local actors.

In Venezuela, DKH is working with organisations including Acción Campesina, AVESOC, CESAP and Acción Ecuánica; HEKS/EPER works with Maniapure and SEC; and LWF works through partners including Más Ciudadanos and PALUZ. The appeal explicitly describes localisation and partnership as a cornerstone of implementation, with local faith actors and community organizations contributing local knowledge, community acceptance, volunteer mobilization, targeting, distribution, psychosocial support and community engagement.

In Colombia, HEKS/EPER and LWF are working through local structures including the Diocese of Istmina-Tadó, IELCO and COCOMACIA. The appeal gives these partners substantive operational roles. IELCO, for example, leads community mobilization, outreach, beneficiary identification and aspects of shelter assistance; COCOMACIA brings local governance and protection structures into programme oversight; and the Diocese uses its parish network and community relationships to facilitate access, MHPSS and community protection. International members provide complementary technical assistance, systems, finance, compliance, logistics and capacity support.

This is localization in practice: international capacity backing local leadership, rather than international capacity displacing it. It is also highly relevant to the discussion ACT is planning with CEOs in December 2026 on the future role of international members in humanitarian response. Colombia and Venezuela could provide an important case study: international members remain valuable not because they need to become the principal implementers everywhere, but because they can use their resources, technical capacity, systems and access to international financing to enable effective locally led response.

3. Presence before the emergency matters

Another significant lesson is that the effectiveness of local actors is directly connected to their long-standing presence in affected communities.

Some of the Venezuelan churches and national NGOs involved had never responded to an emergency of this magnitude. Nevertheless, many had previously received humanitarian training and already had strong relationships with the communities. What I witnessed was remarkable: organizations without the scale or infrastructure of large international agencies were able to mobilize rapidly because they already knew the people, the territory and the local institutions.

This confirms a fundamental point about community-led humanitarian response: preparedness is not simply the pre-positioning of supplies. It also means investing in organizations, relationships, knowledge and leadership before an emergency occurs.

The Venezuelan appeal makes this same connection. It identifies long-standing faith and community structures as critical to acceptance and access, particularly among underserved and hard-to-reach populations.

In the communities we visited, churches repeatedly emerged as highly trusted institutions. Where local coordination structures had been disrupted by the earthquake, congregations and church networks were sometimes becoming practical points for information exchange, community organization, identification of vulnerable households and connection with outside humanitarian support.

Trust, therefore, should not be treated as an intangible supplementary quality. In these responses, trust is humanitarian infrastructure.

4. Reaching the communities others do not reach

The ACT approach in both countries has deliberately prioritized remote and underserved communities. This matters because large government and international responses understandably concentrate substantial resources where needs are most visible and access is easiest. But that can leave smaller rural, riverine and geographically isolated communities behind.

In Venezuela, ACT's appeal explicitly says members will concentrate on vulnerable communities that remain underserved or difficult to access. HEKS/EPER's intervention also specifically includes rural surrounding areas where humanitarian assistance is weak.

In Colombia, this approach is particularly significant in Chocó. ACT partners are working through Indigenous cabildos, Afro-Colombian community councils, churches and local organizations capable of reaching populations that external organizations may struggle to access. The appeal explicitly places strengthened local humanitarian leadership and coordination alongside shelter, WASH, MHPSS, cash and livelihoods as part of the response model.

There is an important humanitarian principle behind this choice. Impartiality does not mean distributing assistance equally across the easiest locations. It means allocating support according to need. Sometimes reaching the people with the greatest unmet needs is slower and more expensive. That does not make the response inefficient; it makes it impartial.

5. Mental Health and Psychosocial Support is an urgent gap

The appropriate humanitarian terminology is Mental Health and Psychosocial Support (MHPSS). This was one of the most striking unmet needs I observed, particularly in Venezuela.

Many responders are understandably still providing food, household items, hygiene materials and other immediate assistance. These remain essential. But communities are also living with bereavement, fear of aftershocks, displacement, uncertainty, loss of homes and livelihoods,

and in some cases the trauma of continuing to live close to destroyed buildings or areas where people died.

ACT members are already providing MHPSS. Earlier situation reports documented psychosocial activities with children and adults, while the Venezuela appeal incorporates MHPSS as an explicit programme area. By 23 July, ACT assessments were already identifying psychosocial support and livelihood recovery among the most frequently reported secondary needs.

PAHO's latest assessment confirms that this need remains significant more than two months after the earthquakes and identifies MHPSS as a priority for affected communities, families, health workers and first responders.

This area therefore deserves greater attention from donors. MHPSS cannot be treated as something to be considered only after food, water and shelter have been addressed. It is an integral part of protection, recovery and community resilience.

6. Coordination: progress, but significant weaknesses remain

Venezuela

Venezuela has a substantial humanitarian architecture. OCHA continues to coordinate humanitarian partners and works with national authorities, and the Equipo Humanitario de País (EHP) provides an important coordination framework. International NGOs also coordinate through their own forum.

National organizations have created another important space, the Plataforma de Acción Humanitaria Nacional (PAHNAL). PAHNAL currently brings together 50 Venezuelan civil-society organizations operating across the country's 24 states and explicitly seeks greater participation of national and local actors in the humanitarian architecture.

Nevertheless, the field reality remains considerably more complex than the formal coordination architecture suggests. The governmental response involves different ministries and authorities, and arrangements vary considerably between locations. Coordination between national, regional and municipal institutions is uneven, and cooperation at local level can depend heavily on personal relationships.

We encountered examples in which organizations had obtained written authorization to operate in government-established temporary settlements, only for another official with greater authority subsequently to instruct them to stop. Such experiences make consistent programming extremely difficult.

Coordination between UN agencies and government institutions also faced challenges before the earthquakes. There have been improvements since the emergency, but the response still demonstrates the importance of coordination mechanisms that connect national structures with the actual operational realities at municipal and community level.

ACT's own response has been stronger where members coordinate with one another. DKH, LWF and HEKS/EPER are sharing information and planning beyond the activities formally financed through the ACT appeal. Earlier ACT situation reports already showed joint operational coordination among the three members. That collaboration needs to continue.

7. The localization gap is still visible in humanitarian financing

Discussions with national actors in Venezuela also highlighted continuing frustration with the distribution of international humanitarian financing.

PAHNAL representatives raised concerns about the imbalance between resources available to international organizations and those reaching national organizations. These concerns should be taken seriously. They reflect a much wider humanitarian debate about whether commitments to localization are being translated into financing practices.

There were also questions about access to emergency funding provided by bilateral donors and about the conditions attached to some funding. Some interlocutors expressed perceptions that organizations with particular relationships to donor countries had received easier access to some resources. These were perceptions reported during the mission and should not be presented as independently verified findings, but they illustrate the level of concern among national actors about transparency and equitable access to humanitarian financing.

Similarly, international pooled financing can remain structurally distant from local organizations. CERF resources, for example, are channelled through eligible UN recipient agencies, with NGOs generally participating through implementing or sub-granting arrangements. The important question from a localization perspective is therefore not simply how much funding has been mobilized, but how much decision-making authority and how many resources ultimately reach national and local responders.

The contrast with ACT's implementation model is significant. The ACT response deliberately starts with established local organizations and communities and asks how international members can reinforce their capacity.

8. The humanitarian “reset” still has a long way to go

Meetings with donor representatives also raised broader questions about the direction of humanitarian reform. Despite the extensive discussions taking place internationally around the humanitarian reset, localization and initiatives such as the ODI/NEAR work on the future of humanitarian action, some financing and monitoring practices I encountered remain highly technocratic.

The focus can still be on physical outputs, expenditure rates and deadlines, without sufficient attention to context, access, community relationships or the realities of delivering humanitarian assistance in remote areas.

A community reachable only after six hours by river cannot be assessed using the same assumptions about cost and delivery time as a community beside a major road. An organization

navigating changing government authorizations cannot always deliver against a linear implementation schedule. A local organization responding for the first time at this scale may require accompaniment and flexibility rather than another layer of compliance requirements.

None of this diminishes the importance of accountability. On the contrary, ACT members must continue to demonstrate strong financial management, safeguarding, quality and accountability. But accountability should ultimately be accountability for an effective response to people, not simply compliance with administrative processes.

The humanitarian system needs to become better at recognizing context, trust, subsidiarity and local leadership as dimensions of effectiveness.

9. Colombia: a strong illustration of international members supporting local leadership

The Colombia response provides a particularly useful model. LWF and HEKS/EPER bring humanitarian expertise, systems, financing capacity, technical specialists and organizational infrastructure. Local churches, community structures, ethnic authorities and Colombian organizations bring access, legitimacy, contextual knowledge and long-term relationships.

The COL261 strategy explicitly states that ethnic governance structures, including *Consejos Comunitarios* and *Cabildos*, will participate in beneficiary selection, programme implementation and community monitoring. Local churches and the Diocese of Istmina-Tadó provide community trust, physical spaces and access.

Christian Aid is also supporting the response and informed us of resources being mobilized through the Start Fund to support the work of LWF and HEKS/EPER. The Start Fund forms part of the NGO-led rapid humanitarian financing architecture and is currently supported by the UK Foreign, Commonwealth & Development Office through its Swift, Humanitarian, Anticipatory & Responsive Pooled-fund (SHARP) – Start Fund & First Response Fund programme.

The Colombia appeal itself records coordination between LWF, HEKS/EPER, Christian Aid, CWS, UN agencies, national authorities and other humanitarian actors. This is an encouraging example of international ACT members acting collectively and using their different capacities and funding relationships to reinforce a locally rooted response.

An additional strength of the response is the cross-country cooperation among ACT members. The teams in Colombia and Venezuela are not working as isolated country operations but are actively sharing experience, technical knowledge and practical lessons. In particular, colleagues involved in the earlier Venezuela response have been able to share lessons learned on coordination, access, partnerships and community engagement with those developing the response in Colombia. At the same time, members operating across both contexts are helping connect expertise, systems and local partnerships. This kind of peer-to-peer support demonstrates an important added value of ACT Alliance: experience gained in one emergency can quickly strengthen the quality and effectiveness of the response in another.

10. Funding uncertainty is itself affecting the quality of humanitarian response

One of the strongest messages from both countries was concern about funding. Local churches and organizations have devoted substantial time to community consultations, assessments, proposal development, planning and budgeting. They have mobilized volunteers and raised community expectations. Yet they still do not know whether adequate funding will ultimately become available.

This uncertainty has consequences beyond organizational budgets. It prevents partners from making realistic commitments. It makes it harder to recruit or retain appropriate staff. It limits the ability to plan with communities beyond very short periods. And it can damage trust when communities participate in assessments and planning processes that are not followed by sufficiently resourced interventions.

The Venezuela appeal was still significantly underfunded according to the most recent ACT SitRep available during preparation of this report. The Colombia appeal, at US\$2.5 million, has only just been launched.

Meanwhile, the international humanitarian response as a whole is also under financial pressure. In Venezuela, the UN reported that only 41% of overall humanitarian requirements had been funded by late July.

There was a clear perception in both countries that the international community's attention to these emergencies is not commensurate with the needs.

11. A call to the ACT Alliance and our wider faith community

What I saw in Colombia and Venezuela gives me confidence in the quality and direction of the ACT response.

Our members are cooperating.

They are working with national organizations rather than bypassing them.

They are drawing on the trust of churches and established community structures.

They are reaching rural, riverine and underserved communities that might otherwise receive little assistance.

They are investing in MHPSS, protection, livelihoods and recovery alongside immediate relief. And international ACT members are increasingly demonstrating what their future role can be: bringing resources, expertise, accompaniment and international connections in support of locally led humanitarian action.

But this model needs funding.

I therefore strongly encourage ACT members, churches, ecumenical partners, faith-based and multi-religious organizations, foundations and other partners to urgently support the Colombia COL261 and Venezuela VEN261 Appeals.

Where members can mobilize bilateral resources, these should complement the collective ACT response and be coordinated with the requesting members and the relevant ACT Forums. Flexible and minimally earmarked contributions are particularly valuable because they allow members and communities to adapt the response as needs change.

I also encourage members with relationships to institutional donors to advocate for funding approaches that recognize the real costs of reaching remote communities, adequately finance national and local partners, and allow sufficient flexibility for community-led planning.

The two appeals together seek approximately **US\$8.6 million**. In the context of the scale of these emergencies, this is a modest amount. Yet it can make an enormous difference precisely because it will be used through actors already present in the communities and able to reach people who risk remaining outside the larger response.

Conclusion

My visits to Colombia and Venezuela reinforced a conviction that has become increasingly important for ACT Alliance: localization is not primarily about transferring activities from international organizations to national organizations. It is about shifting leadership, agency and decision-making closer to affected people.

The earthquake responses in these two countries demonstrate what this can look like. The churches, community organizations and national NGOs we met are not simply implementing partners at the end of an international delivery chain. They are humanitarian actors in their own right. They possess knowledge, relationships and trust that cannot be rapidly imported after an emergency.

International ACT members, meanwhile, have an essential role when they use their global capacities to reinforce these local strengths. The humanitarian system frequently speaks about community-led response, localization and reform. In Colombia and Venezuela, ACT members have an opportunity to demonstrate that these commitments can be translated into practice.

The approach is working. The communities are ready to lead. Our members and partners are present. What is urgently needed now is the solidarity and financial support that will allow them to scale up and sustain the response.



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General Secretary

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