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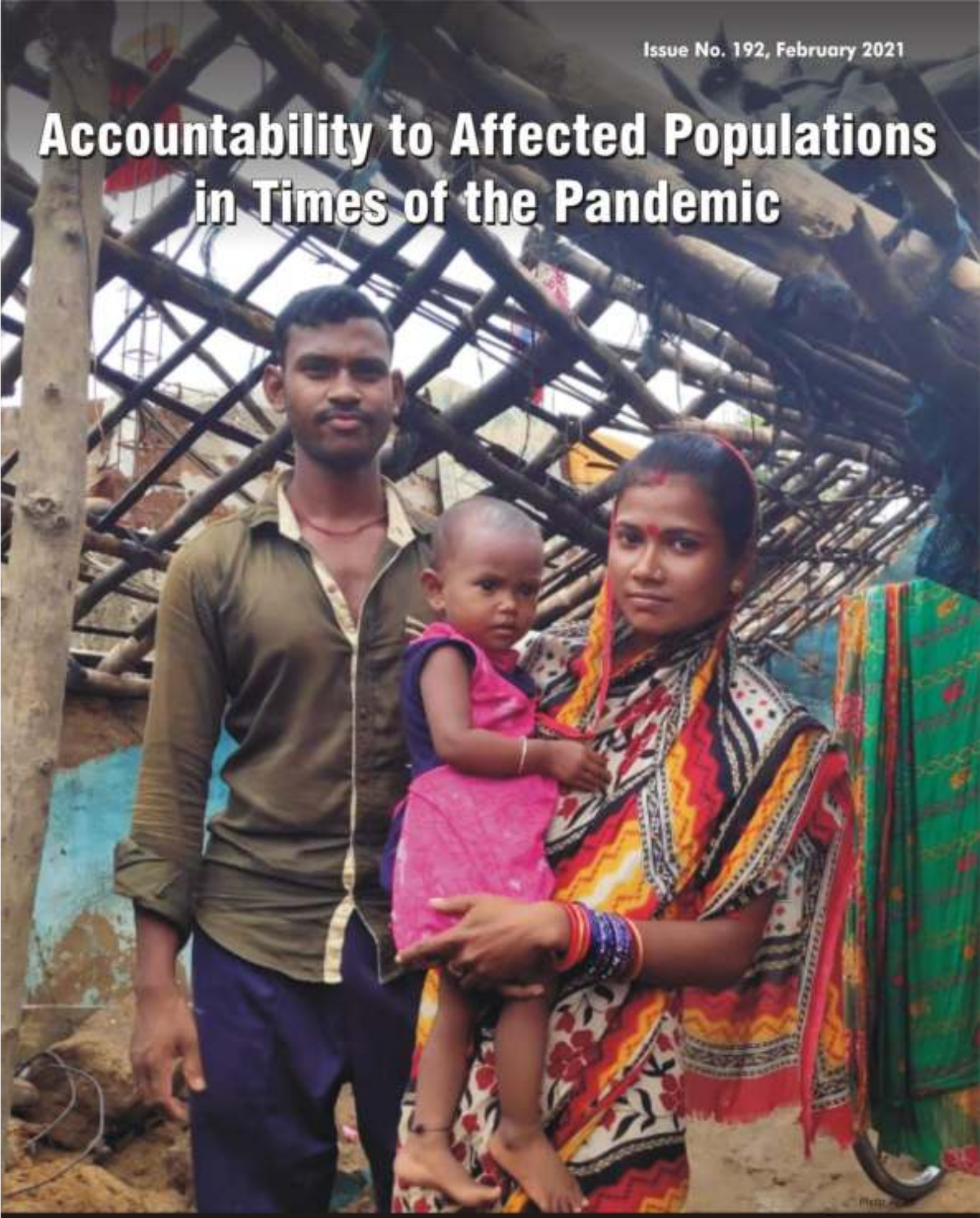
Accountability to Affected Populations in Times of the Pandemic



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INTRODUCTION

Rethinking Accountability

*By **Mihir R. Bhatt**, AIDMI, India*

Perhaps the pandemic has raised an alarm for all of us to re-think the idea and process of accountability in the humanitarian, disaster risk reduction, conflict, and development sectors.

The wide range of articles here, from the practitioners to researchers, UN officials to local leaders of CSOs, individuals to institutions, underline the fact that accountability cannot be understood as we did so far.

Having read the twenty-six articles in this issue of Southasiadisasters.net, and being aware of the accountability challenges and opportunities faced by Accountable Now Members and stakeholders, as a senior member of its Independent Review Panel, the following six ideas on rethinking accountability come to my mind.

One, there is an urgent need for renegotiating accountability. Such renegotiation must draw from the elements of governance planning and institutional theories and experience that we have now accumulated in the recent past, especially in the pandemic year, about limits and uses of accountability.

Two, we must have a closer and clearer look at the two conceptions of accountability. Our conception comes from the top-down and outside-in actions of humanitarian, risk, or resilience interventions. The second conception comes from the local, lateral, and bottom-up flexible and fluid, structures and institutions. Both conceptions must be revisited, at times de-limited and at times defined.

Third, we must soon pick up and recognize, and consolidate the signs of indigenization of accountability, especially in the key major development and humanitarian actions as well as in some of the flagship projects and institutions in civil society. Such indigenisation is taking place in two ways, one, as a break away from local and informal ways to being accountable, and two as a furtherance and transformation of existing ways of being accountable.

Four, we must look at typologies of accountability (as it is appearing in its many forms and functions) as well as their transformation into traditions, modernity, postmodern, and yet to be named or labeled accountability initiatives that are coming up due to social media and soon development such as Artificial Intelligence (AI).

Five, we must search for and locate accountability in community accountability and public accountability structures. These two structures are as important the other legal and organizational and professional structures.

Six, we must not be narrow or parochial in any way but seek out insights on emerging accountability from all and any sources of development, humanitarian, and resilience initiatives. We must especially focus on exchange of ideas and individuals and activities related to accountability between projects and institutions, as well authorities and markets. Such exchange is now far more faster, direct, and iterative with the help of social media and new technology.

The above six I have drawn from the exploratory short but insightful pieces in this issue of Southasiadisasters.net, my participation on IRP of Accountable Now, and my own work of evaluations and lessons learned in South Asia.

As an important note, I wish to suggest that the above mentioned contributors and their experience and ideas are a good way to start the re-visit of the idea and practice of accountability.

Let me end, at least for now, by suggesting that I have found that the culture of accountability, formal or informal, is most often a negotiated landscape between the structure and processes, individual and institutions, and the victim or beneficiary or citizen, the person, is the center of this re-negotiation that I am suggesting. This is a way ahead to be more accountable to the affected populations in the coming years. ■

About this issue

This issue of Southasiadisasters.net is titled *'Accountability to Affected Populations in Times of the Pandemic'* and focuses on how the COVID-19 pandemic has impacted accountability in the humanitarian, development and risk reduction sectors. The pandemic caused the global economy to slow down, which invariably led to a massive funding crunch for civil society organizations (CSOs). Moreover, given the scale of the pandemic, all CSOs have had to pivot their activities to respond to the challenges of COVID-19. All these factors have drastically changed the meaning and scope of accountability to affected populations (AAP) for donors, CSOs and governments. This issue of Southasiadisasters.net brings together a wide range of articles from practitioners, researchers and community leaders from across the world on how they have re-negotiated the meaning of accountability in this changing landscape. ■

IMPLICATIONS OF COVID-19 ON ACCOUNTABILITY

Advancing Accountability in Times of a Global Crisis

*By **Ilina Neshikj,** Accountable Now*

As we look back on 2020 and towards 2021, the COVID-19 pandemic has brought and will continue to bring enormous challenges for the civil society sector. We are facing economic repercussions with early predictions on donors' funding cuts, suggesting that organisation's are going to be enormously affected in the years to come. There have been increased struggles in expanding space for civic actions with restrictions of movement and rising safety concerns. At the same time, we have seen an escalation in the encroachment of civic freedoms, whilst, as the CIVICUS Monitor showcases, restrictions on the freedom of expression and access to information continues all over the world. States have been enacting broad emergency legislation that often limits human rights all the while violations of protest have been numerous.

Despite all these pressures and challenges ahead, the role of civil society is no less important and necessary. The pandemic is reshaping the relationship between states and societies and COVID-19 has intensified the importance of organized civil society action.

CSOs' direct work with people and local communities has been at the forefront of responses and there is no doubt that in this crisis, they have been actively responding to the needs of communities: we have seen how they are assisting those most in need and have contributed towards safeguarding democracy and human rights in times of state of emergencies. Civic activism has also gained force as CSOs have increased their watchdog role over state authorities. Yet, CSO legitimacy is still being questioned with the public having low trust in institutions, including organized CSOs.

The COVID-19 pandemic will be a wakeup call for people-centered action and civil society as a whole. The sector will surely come out of the pandemic looking very different and how we work to achieve our goals might be what will make the existential difference.

The Southasiadisasters.net journal and this special accountability issue in light of COVID-19, brings together examples on how the sector has responded to the pandemic, how community responses have strengthened, and how civil society has proved itself resilient in the face of crisis. We have gathered together the experiences and insights of organisations working around the world working in vastly different contexts - from INGOs, local-level CSOs, activists and donor organisations and networks, to showcase real-life examples of responses and adaptations that strengthen accountability towards the people civil society works for and with. ■

EMPOWERING COMMUNITIES THROUGH SOCIAL ACCOUNTABILITY

Social Accountability in a Pandemic: Collaborative Partnership and Adapting Citizen Monitoring

*By **Hannah Hudson** & **Isabelle Kermeen,** Integrity Action*

COVID-19 has changed the way that development organisations work. To react to the pandemic, INGOs have had to make quick decisions about how to adapt their programmes; impacting how these organisations are working in partnership with others.

At Integrity Action, we faced the challenging decision of whether to continue or pause our programme activities. Achieving impact through our work relies on citizens observing projects and meeting face to face with those responsible, such as local authorities, contractors or school management, to solve problems. Face to face meetings could be replaced with phone calls but observing projects could only be done in person. We had to think about how to react and adapt to COVID-19, and we had to consider how we meaningfully include the people we work with in these decisions.

Integrity Action works with citizens to monitor the delivery of vital projects and services where they live - and to solve the problems they find. Our goal is to provide citizens with practical ways of tackling these problems and actually getting results, in collaboration with the institutions that serve them. We do this with an approach that incorporates community monitoring, social accountability, problem solving, and a technology tool and mobile app called Development Check.

There is often an imbalance of power in partnerships between INGOs and local organisations in the countries where we work. INGOs traditionally lead grant relationships, and local organisations are required to comply with requests. Integrity Action's partnership approach aims to redress this imbalance and reacting to a crisis such as the COVID-19 pandemic presented an opportunity to rethink these power relationships: we involved partners and community monitors in the decision-making process as much as possible by discussing the options with them and checking in regularly. We also assured partners that funding would not be affected if activities paused, to reduce any undue pressure to continue if it was not safe.

'It was a participatory approach where every partner gave their own views. We all felt part and parcel of the Integrity Action family as everyone was involved in each and every step.'

Kwale Youth and Governance Consortium

On the VOICE community monitoring programme in Kwale, Kenya, the decision on whether to continue activities during the pandemic was made by local partners and the community monitors. Partners worked with the County Department of Health to assess the local risk, and decided it was safe to continue in rural areas. Community monitors shared that they felt safe to continue and did not want to stop monitoring because they were concerned it would present opportunities for corruption. They felt a responsibility and drive to continue their work.

It was decided that activities on the programme would continue in rural areas following government guidelines around COVID-19. Community monitors continued to monitor projects using appropriate safety measures, such as wearing masks and observing social distancing. Although we were concerned about the health risk, we trusted local partners to assess the risk appropriately. As a result, programme activities continued in Kwale in a cautious and safe way.

Our programme in Kenya: How can we ensure that local authorities receive and respond to community feedback on local services, and communities can understand and influence local decisions? We have embedded our accountability mechanism in the way citizens and government representatives interact in Kwale County, Kenya. Citizens act as community monitors and check services related to health, livelihoods, education, water and sanitation and report problems using the Development Check mobile app. They engage constructively with key stakeholders to get the issues addressed, and when problems are fixed, this goes live in the app too. We aim to improve how authorities and other duty bearers listen to and respond to citizens' concerns on services and infrastructure, with added focus on women's voices. This is implemented by partner organisations Kwale County Natural Resource Network and Kwale Youth and Governance Consortium

However, we were also reminded that in a time of crisis it is sometimes necessary for a lead partner to lead on decisions, for instance where a lead partner's duty of care may be greater than the need to enable its partners to decide. In our Afghanistan, DR Congo, Kenya, Nepal and Palestine initiative which involves monitors under 18, we worked with our partners to explore programmatic possibilities, but the young age of the monitors made it challenging to follow the same process of gathering their consent to continue. As we could not guarantee the safety of youth monitors, we took the decision that monitoring should be halted. The risk level varied across the different countries, but we decided to be consistent across the programme. We took the lead on this decision but consulted our partners and worked collaboratively with them to plan other activities that could safely be carried out while monitoring activities were paused.

COVID-19 has required everyone to adapt, and as guidelines continue to change, we will have to keep on adapting. When adapting programmes it is important to think about who is making the decisions, and to consider whether the people most affected by potential changes are involved. The people implementing the programmes, including local CSOs and communities, are invested in the work and understand the local situation better than INGOs. It is important to listen to how they feel about changing or pausing their activities. Social accountability aims to give power to communities to demand that what they are entitled to is delivered properly, which makes it even more important to meaningfully engage partners and community members in how any such programme is adapted.

Monitors 'feared this was the very moment contractors would take advantage of circumstance and do lots of shoddy work now that no one is ready to follow up with the oversight role'

Kwale Youth and Governance Consortium

We are always keen to hear feedback on our approach and also understand what others are doing in this field, so please get in touch if you have ideas or would like to hear more! info@integrityaction.org ■

Has COVID-19 Surfaced Opportunities for the Development Sector to Embrace a Localisation Approach?

By Danny Harvey, Keystone Accountability[1]

How can we best understand what the realities of COVID-19 are for constituents (those we work with and for), in order to better support them through this time?

We must ask them directly.

For an organisation to sustain trusting relationships with its partners, having further insight into the localised impact of COVID-19 and understanding how to better support partners is vital. Earlier this year, Keystone Accountability reached out with a free *COVID-19 Impact Survey* to our global network of which 280 local partners, mostly based in Sub-Saharan Africa, from eight international organisations responded.

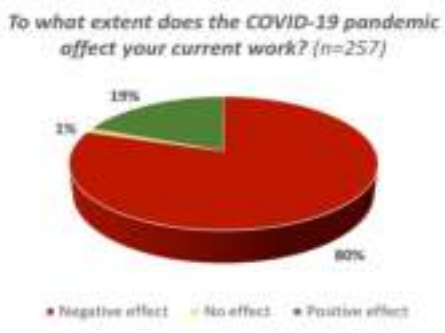
Our findings show that COVID-19 has had an adverse impact on the operations of 80% of respondents (*Figure 1*) due to an array of issues such as loss of income, lack of access to funding, and delays in programme initiatives. As a result, 97% of respondents have either fully or partially pivoted their programmes to adapt and respond to the difficulties and opportunities that COVID-19 has elevated.

Yet, by offering focused surveys, organisations can explore exactly how best to support partners and refocus where support is needed in the current context:

A significant ask from constituents is for organisations to continue financial support, and ***redirect programme funds*** to support COVID-19 related activities, where needed, while also understanding the potential inability of constituents to meet original funding requirements. This is important as ***local partners need to remain visible and proactive within the local community*** to harness trust and to endure high-quality programmes; this is proving difficult as most constituents have restricted access to their communities where programmes operate. There is recognition that support is needed in capacity building to ***adapt to operating remotely*** and partners are seeking ***further training and expertise in technical support and finding innovative solutions*** to community issues.

It is also apparent that at the crux of this COVID-19 response, there is a need for international organisations to ***adopt a localisation*** approach (*Figure 2*). 72% of constituents believe they have achieved more equal ways of working together with international organisations during COVID-19, and 73% suggest that the pandemic has made it more likely for the international aid sector to understand and respond to locally-led priorities.

So, what does this mean for the wider development sector? International organisations need to instil confidence in their partners and demonstrate that they are accountable by soliciting feedback and integrating dialogue with constituents to ensure local priorities are understood. Based on our survey feedback, we know effective approaches include: (1) understanding current operations through surveys, (2) planning regular meetings on COVID-19 emergency responses, and (3) collaboratively designing contingency plans to refocus work priorities. This pandemic has revealed an opportunity to improve current practices and more effectively focus on the contextually relevant needs of those organisations you seek to support. ■



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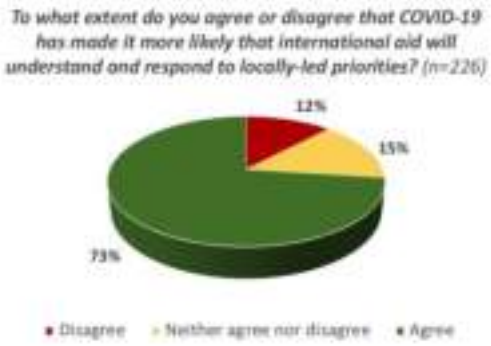

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[1] Keystone Accountability is a not-for-profit organisation that helps social change organisations understand and improve their performance by harnessing feedback from partners and populations they serve.

Donor Listening and Responding in the Time of COVID-19

By Megan Campbell and Elizabeth O'Malley, Feedback Labs

Communities around the world are struggling in the face of the COVID-19 pandemic. International donors are seeking ways to respond to the rapidly changing needs of non-profit partners and the communities they seek to serve. Their task is difficult and urgent: context is shifting quickly, social systems are strained to the breaking point, and travel restrictions and the need for social distancing often mean donor staff can't be on the frontlines. Listening to the voices of communities and non-profit partners is an important tool to help donors understand changing needs, and leading donors increasingly recognize that they need to invest in listening well.

As COVID-19 case numbers climbed worldwide this year, grantmakers at the Rockefeller Foundation looked for ways to understand how the pandemic was affecting the most vulnerable people they seek to serve. Over the course of five months they listened to 90,000 rural electricity customers in India, Myanmar, Nigeria, Tanzania, Sierra Leone and Uganda, to find out how their lives and needs were changing because of COVID-19. From the feedback they received, they heard that many customers were struggling to pay their electricity bills and almost half were eating less because of the pandemic. The Rockefeller Foundation used that information to create a vulnerability index to share with respective governments and electricity companies. Thanks to this collaboration, plans have been developed to make sure people can afford to keep the lights on and get enough food.

Almost 800 US-based philanthropic organizations, including many global foundations, have signed a pledge to act with 'fierce urgency' to "support [their] non-profit partners as well as the people and communities hit hardest by the impacts of COVID-19." One of eight commitments in the pledge focuses on listening to non-profit partners and communities. Pledge signatories "recognize that the best solutions to the manifold crises caused by COVID-19 are not found within foundations," but found within the partners and communities with whom they work.

Donors are implementing listening and responding to practices by using different feedback tools to safely engage with communities and partners during the pandemic. Feedback tools that reach partners and community members through email, text message or phone calls are particularly useful in this era of social distancing.

The recognition that listening is an essential tool in confronting the pandemic is not only confined to foundations. The UK Department for International Development, now part of the UK's Foreign, Commonwealth and Development Office, has highlighted to staff that during the COVID-19 pandemic, listening to constituents is a particularly important way to understand rapidly changing on-the-ground needs.

Donors are implementing listening and responding to practices by using different feedback tools to safely engage with communities and partners during the pandemic. Feedback tools that reach partners and community members through email, text message or phone calls are particularly useful in this era of social distancing. In the case of the Rockefeller Foundation's outreach to rural electricity customers, program staff worked with feedback tool provider 60 decibels. They used phone surveying to listen remotely to almost 90,000 off-grid electricity customers across six countries in Asia and Sub-Saharan Africa.

In this moment of crisis, leading donors are recognizing that the people who are most affected by a crisis have the knowledge and insight to create the best solutions. As the pandemic progresses, donor focus has moved from relief to recovery and resiliency. Drawing on the lessons learned directly from constituents will inform a more accountable and transparent path forward for grantmakers and their grantees. ■

ALIGNING FUNDER AND GRANTEE PRIORITIES

Adapting Grantmaking Practices during the COVID-19 Pandemic and Beyond

*By **Alison Miranda** and **Zoya Belmesova**, Transparency and Accountability Initiative*

The coronavirus has disrupted the work of social change actors in the civic and philanthropic sectors. As a funder collaborative, Transparency and Accountability Initiative (TAI) conducted a qualitative analysis to learn more about funder voices and responses to the pandemic.[2] Many funders have quickly adapted their financial and non-financial practices to support grantee partners around the world. We highlight practices below that demonstrate promising steps towards funder accountability.

New Funds and Funding Practices

Crises often surface new and deeper financial needs, as has been the case with the pandemic. Funder responses have revealed new funds, often with other funders or rapid relief funding, and new philanthropic financial models, such as issuing bonds.[3] Many funders have also adjusted how they provide financial support to grantee partners. From converting project grants to core support, to modifying grant requirements, and hastening grant dispersals -- all are crucial examples of responsive funder practices. Looking ahead, civil society organizations and funders alike can use this experience to prioritize needs and explore resilient financial models.

Funder Practices Beyond Funding

Relationships are a critical resource for funders to work with one of their primary stakeholders: grantee partners. The past year has shown how funders can continue to engage grantee partners through listening activities to understand their needs. They are sharing and facilitating information that helps grantees to navigate the global turmoil and building networks with other funder and social sector communities to foster partnerships. These near-term changes have promising implications for funding relationships and how funders themselves learn and adapt their work with grantee partner feedback.

Accountability During and Beyond the Pandemic

Funder mobilization of resources and commitments to solidarity and action are laudable. Indeed, funders have demonstrated that flexibility and responsiveness are possible and within short timeframes. Yet shifting funder priorities can also be destabilizing for grantee partner planning and budgets. Therefore, this is an opportune time for funders to move towards dynamic accountability in their partner engagement -- committing to transparency around strategic changes, sustaining positive practices adopted during the pandemic, and ensuring communication and cyclical feedback between funders and grantees is ongoing.[4]

The pandemic has made the need for systemic change even more visible. The importance of accountable governance and empowered civic participation cannot be underestimated both in responding to public health crises and addressing deeply rooted injustices.

Mutual Accountability for Systemic Change

The pandemic has made the need for systemic change even more visible. The importance of accountable governance and empowered civic participation cannot be underestimated both in responding to public health crises and addressing deeply rooted injustices. Deeper connection between funders and grantee partners is critical in advancing these aims.

Civil society can draw confidence from recent funder adaptations and use their voices to reinforce effective grantmaker practice.[5] Funders, in turn, can deepen collaboration with peers and sustain meaningful engagement with grantee partners to advance inclusive and transparent development around the world. The 2020 crisis created many challenges, but it has also created new opportunities for all civil society stakeholders to explore. ■

[2] See TAI's COVID-19 Monitor Issue 2.

[3] See, for example, Will Philanthropy's Flexible Funding Outlast the Pandemic or Five Foundations Commit $1.7+ Billion to Nonprofits.

[4] Read more about Dynamic Accountability.

[5] Explore TAI's Smarter Grantmaking for Grantee Organizations guide.

Young and Bold: How Youth Initiatives in Bangladesh Responded to COVID-19

*By **Aurona Sarker,** Restless Development*

Home to 160 million people, Bangladesh is a country where nearly one-third of the population belongs to the age group of 10-24.[6] To respond to the unprecedented crisis brought forth by the pandemic, youth in Bangladesh have organized to found timely initiatives focused on spreading awareness, distributing supplies and supporting low-income groups. With their innovative, inclusive and impact-focused approach, young people have risen to the challenges of the pandemic while acting with accountability and solidarity.

Although young people account for a large percentage of population, there is a significant gap in youth engagement and empowerment in Bangladesh. Only 0.29% of Bangladesh's parliamentarians are below 30 years of age, which is the lowest among South Asian countries.[7] Even though the National Youth Policy- 2017 stated the need for youth involvement in decision making process at all levels, there has been no action plan for ensuring youth representation. Lack of proper platforms is one of the key reasons why youth voice is frequently left out from decision-making scenes. Besides, a high youth unemployment rate of 11.9% remains a major obstacle to a more robust youth civic engagement.[8]

Yet, at the time of COVID-19 crisis, young people have proactively shouldered the responsibility of helping communities in need. During lockdown when hunger became a more prominent threat than the virus, youth CSOs focused on food distribution among the poor and marginalized. From volunteers of 'Ek Takay Ahar' initiative coming forward with pots and pans to distribute cooked meals, to members of 'Alokito Shishu' carrying heavy sacks of food items to sex workers, Bede (river gypsies), and Harijan (sweepers and cleaners), young people made sure that assistance packages were reaching to those in dire need. Demonstrating true inclusivity, youth initiatives such as '12 Vaja' and 'Shobuj Kham' ensured that even communities that are heavily discriminated against- such as transgenders and indigenous tribes- are not left behind from aid efforts.

Putting their creative minds into action, young people have catered to the emerging, specific needs of communities. With economic activities suspended during the lockdown, farmers and small business owners faced sharp decline in their income. To help these people to get back on their feet, some youth-led organizations came up with innovative solutions. For example, 'Biddyanondo Foundation' sourced agricultural products from areas where farmers had a surplus and coordinated sales in places where there was a demand. An initiative called 'Pashe Achi' ran an online platform to sell books from street-market based book sellers and handicraft items from local artisans.

Leveraging the power of social media, Bangladeshi youth have provided transparency in the scope and impact of their work, thus earning trust of stakeholders and communities. Through actions such as posting pictures from food distribution, doing live video during distribution process, disclosing the financials of donations and expenses, mapping the assisted areas etc., youth have demonstrated transparency while delivering impact. The credibility gained from public is one of the main reasons why many youth leaders have been able to successfully crowdfund their initiatives for long period of pandemic.

Responding to COVID-19 has enhanced Bangladeshi youth's capacity to counter future challenges with deeper knowledge of community needs and strengthened motivation to drive positive changes through collective action. It is important that governments and other institutions leverage the experience which youth civil society actors drew from their community leadership and crisis management at grassroots level.

Policymakers should ensure that knowledge and experience of youth go beyond dialogue and discussions, into the sphere of policy making. Young people must be given seats at the table, as well as the opportunities to set agenda, especially on issues that youth population will be directly impacted by. Youth's ideas need to be channeled into action plans instead of simply using their energy for legwork. Youth is no longer the driver for future change only; they can, and should be allowed to, shape their present, too. ■

[6] National Youth Policy 2017

[7] IPU Data on Youth

[8] World Bank Data

Application-based Early Detection of COVID-19 Suspected Cases, Surveillance, and Knowledge Sharing in Densely Populated Slums and Low-income Communities in Bangladesh

By ***ASM Nurullah Awal, S Mahmud Hasan, Hasin Jahan***

COVID-19 in Bangladesh

The first case of COVID-19 in Bangladesh was recorded on 8th March 2020. As of 30th November 2020, with 2,772,701 tests made, the total number of cases identified was at 464,932 and total deaths 6,644. Since April 2020, it has been observed that there has either been a lower number of cases or tests in slums and low-income communities largely due to there being no mechanism of collecting data from these areas. Epidemiologists continually stress that adequate tests need to be made in order to understand the infection trend of slums. Yet slum-dwellers lack both awareness and ability to access the tests while suffering from COVID symptoms. In May, WaterAid began developing a mobile-based App (COVID screening App for slum dwellers) to capture suspected cases and establish an in-built referral system for COVID-19 test, which won an award in a nationwide software competition, 'Call for Nation,' organized by the Ministry of ICT.

Using app-based technology to reduce the spread of COVID-19 in slums

This app aims to identify suspected COVID cases to then arrange tests by the Institute of Epidemiology, Disease Control and Research (IEDCR), free of cost. It will ensure the IEDCR has the data to explore infections, trends and reduce the risk of further spread. The app aims to 'connect the unconnected' and envisions to serve millions of slum dwellers across greater Dhaka city. Advice for preventive approaches for COVID-19 is also made available in the App which can be shared by volunteers from local NGOs or which can be accessed by slum-dwellers directly if they have a smartphone.

WaterAid and its partner NGOs in Bangladesh have been working in slums for several decades by providing access to safe water, sanitation and hygiene promotion. Through this, they have developed a good understanding of the people, their values, practices and needs. Through its partner, NGO (ESDO), WaterAid deployed trained volunteers in slums to collect information on suspected cases of COVID-19 symptoms. Volunteers visited households and if they come across any health complaints, they would collect detailed information in the app. The app has an in-built triage system to categorize red, amber and green cases based on severity and symptoms. Red category cases are displayed in an IEDCR dashboard and through IEDCR's helpline, doctors can provide online-consultation and confirm whether tests are required. Tests are then deployed by IEDCR, which collects the samples. All data is captured in real-time and protected through a two-level security check to ensure only legitimate users can log in.

The results so far

WaterAid has collected and stored 6,110 peoples' data through this app from every household in two slums (Borhanpur and Tekerbari), where this project was piloted. By the end of November, only eighteen red and five amber cases were identified and referred to IEDCR, and one case was positive. The rest were either tested negative or the person was unavailable for testing, which gave another insight for further research.

From the very beginning since the COVID-19 outbreak in Bangladesh, the testing and overall support system were demand-driven, and access availed through pro-active attempts by the patients to get tested and from hospitals to perform tests. Those living in slums, even though they may have had symptoms, did not have the ability to pay the fee or transport; nor did they have the societal support to break the taboo to approach from health centers. For the first time, through this project, those living in slums had the possibility to get screened and tested for free at home and availed the preventive health information too.

UNDP and BRAC showed interest in this project to scale-up in their working slums. WaterAid signed an agreement with the National Urban Poverty Reduction Programme (NUPRP) of UNDP and trained staff and 107 community mobilizers to roll out this initiative further. ■

Stories of Civil Society Resilience in Times of COVID 19: New Challenges, Strengthened Response

*By **Marija Vishinova,** BCSDN*

The COVID-19 crisis has brought about **notable challenges for democracy and civil society in the Balkans.** The state of emergency proclaimed in many countries at the beginning of the pandemic, provided a chance for governments to impose restrictive measures on citizens' fundamental human rights, which have been used as a justification for shortcomings in good governance, transparency, and accountability and the lack of CSO involvement in crisis response mechanisms. As governments in the Balkans failed to protect their citizens, the role of civil society organisations (CSOs) has been reaffirmed by the need to monitor governments' responses to the COVID-19 crisis, and advocating for more government transparency and accountability. Despite the challenging circumstances, CSOs have oriented their operations towards assisting the most vulnerable groups in the communities they serve.

Global Accountability Week 2020

A particular example of how the civil society sector has continued advocating for and raising awareness of accountability despite these challenging times, is through the **Global Accountability Week (GAW)**. Usually an event that combines the virtual with the physical, 2020's GAW was entirely virtual. The impact and commitment, mutual goodwill, and signs of international partnership have created a new momentum. The week demonstrated how the civil society sector can continue to strengthen relationships across the sector and spread the word that amid the COVID- 19 crisis, civil society worldwide, **remains committed to strengthening its accountability, legitimacy, transparency, and representation.**

The Balkan Civil Society Development Network (BCSDN), a network of 14 CSOs from the Balkans, celebrated the Global Accountability Week by promoting the concept of dynamic accountability. BCSDN led a session on CSO Accountability in times of COVID 19. The event gathered more than 30 participants to discuss the stories of resilience amid the crisis by sharing examples from India, Argentina, and the Balkans , together with four keynote speakers: Clarisa Piccione, Membership Area and Projects Coordinator at **RACI Argentina**, Harsh Jaitli, Chief Executive Officer at **VANI India**, Klotilda Tavani Kosta, Director of Programmes, **Partners Albania for Change and Development**, and Aleksandra Savevska, Project Officer at **Macedonian Center for International Cooperation (MCIC)**.

What we learnt during these GAW events is that CSOs across the world have been faced with **similar challenges during the pandemic**, such as: the adjustment to the new circumstances, and the breaches of basic human rights; how to continue providing services to their beneficiaries and most vulnerable categories in the society, etc. Additionally, during this crisis, CSOs have been challenged to establish **new relations with donors**, and to positively respond to peoples' needs, and manifest themselves as **trustworthy and reliable partners.**

Key reflections on CSOs' roles and concerns amid COVID-19

After a lockdown was announced in **India** to prevent the spread of the virus, the measures created an unprecedented humanitarian crisis, particularly for migrant workers. By disseminating information and access to services, CSOs stepped up their efforts and provided economic and psychological support to migrants and households and collected resources facilitating rural communities' access to food security. Advocacy efforts were carried out with the government about CSOs' laws and legislations. During COVID 19, the **Argentinian CSOs** continued promoting the fulfilment of the most vulnerable groups' economic and social rights, contributing to the country's overall level of democracy.

Many CSOs in **Albania** have continued their activities in the scope of the response to the COVID-19 crisis by providing services and direct products to the groups they serve. These CSOs continued to monitor legal framework's developments online and they have been vocal to the government authorities, calling for a higher level of responsibility on the part of state institutions. Within the project of the Swiss Agency for Development and Cooperation, implemented by a consortium of three organizations, including BCSDN member **Partners Albania for Change and Development, LevizAlbania** launched a call for fast reaction on how to respond to the situation created by COVID- 19. Additionally, Partners Albania has offered one-year access to the Zoom platform, and online training for the use of a series of online platforms and creative tools, as two packages of rapid support for managing the COVID-19 situation in Albania.

In **North Macedonia,** the pandemic has intensified the need for psycho-social support for vulnerable groups. The ad hoc grants, provided by the **Civica Mobilitas programme of the Macedonian Centre for International Cooperation (MCIC)** intended for overcoming the extraordinary situation caused by COVID-19 enabled a rapid response for CSOs' target groups. For example, CSOs such as One Can, *Romalitico, HOPS,* worked on mapping needs, coordination and distribution of humanitarian aid to single parent families, Roma families, people who use drugs, sex workers, children who use drugs and their families. Similarly, the CSO *Interactive and Wake Up* have implemented activities for access of the young and other citizens of support via digital tools.

In the end, following the examples provided, CSOs worldwide, have demonstrated that they are able to remain committed to implementing their missions. The crisis and state of emergency have flagged the need for CSOs to be more actively involved as democratic actors in their respective countries. In this way, CSOs will play a crucial role in preserving the rule of law and democracy during crisis periods. By relying on **accountability narratives**, the overall situation will contribute towards **civil society resilience and positive public image** in the long run and civil society worldwide will be able to create robust pathways to resolve entrenched social problems with full inclusion of the citizens, strengthening their voice. Even in a period of a more significant crisis, CSOs should not forget their founding values and the purpose of their existence and operations. ■

CASE STUDY IN ACCOUNTABILITY

The Cooperation Committee for Cambodia's Approach to Stakeholder Engagement during Covid-19

*By **Chea Vibol,** Cooperation Committee for Cambodia (CCC)*[9]

In March 2020, as Covid-19 rapidly spread throughout the world, the Royal Government of Cambodia (RGC) decided to close down all private and public schools, as well as large gatherings within both city and rural areas of Cambodia, to prevent an escalation of the pandemic. This decision immediately affected the work of CCC and our members and it was imperative for CCC to maintain and rethink ways of maintaining accountability to our stakeholders: donors, members, staff, and the Global Standard Executive Committee (Excom), to ensure that we would fulfil our obligations, offer support where needed and respond effectively to the situation. The need to reassess and pivot accountability activities was an experience felt by many CSOs around the world and the learnings made throughout 2020 have given CCC, and the sector as a whole, a chance to understand the role accountability plays during moments of crisis.

Accountability towards stakeholders needs communication. For CCC, this meant we had to communicate on the situation in Cambodia and the implications upon the civil society sector. As we rely on continual funding to complete projects, ensuring development partners and donors understand the context in which CCC is working was key. CCC submitted an open letter to its development partners to inform them on how the organisation was affected by the lockdown implemented by the RGC. Several suggestions on how continued support to CCC could be adapted were made, including: 1) revision of budget plans in light of new needs and different context; 2) extension of projects for six months, and 3) requests for increased budgets to help CCC and its members work with and fight covid-19.

After a successful communication with donors, CCC was able to secure enough funding to provide emergency relief. As a result, 10,000 posters showing informative messages on the COVID-19 outbreak were distributed across different communities. 10,000 masks and 5,000 hand wash sanitizing tubes were produced and shared to Cambodian people across 24 provinces/cities by utilising CCC's member network.

To maintain and strengthen accountability with staff and members, CCC developed an Interim Guidance policy to ensure CCC could effectively plan and respond to the pandemic. The policy mainly

[9] The Cooperation Committee for Cambodia (CCC) is the one of the oldest membership-based civil society organisations in Cambodia. It provides a wide range of services to its members - 170 local and international NGOs based in Cambodia - such as learning forums on human resource management, information & communication technology, financial management, and monitoring & evaluation.

aimed to prevent workplace exposure to COVID-19 by providing guidance for protection of health at the individual and institutional level. In addition, the policy sets provisions for support to staff and their family if they contract COVID-19. To promote accountability to Cambodian citizens, this policy aimed to draw attention to the needs of the public and the CCC and Coalition for Partnership in Democratic Development (CPDD) worked together to issue a joint statement that promotes and urges the RGC to:

- Scale up testing for COVID-19
- Engage and inform the public in regular updates on the status of the COVID-19 in the respective communities, and measures being taken to combat it.
- Call for stricter measures such as enforcement of mandatory cancellation or postponement of all large gatherings such as religious ceremonies and weddings, in order to reduce the spread of the virus.
- Ensure that frontline healthcare workers who are caring for those being treated in public hospital, especially health centers and referral hospitals have sufficient personal protective equipment so that their risk of contracting the virus is reduced
- Provide educational outreach to all communities, on a nationwide basis by for example using Facebook messaging, TV spots, mobile community campaigns, so that community members are fully aware of and participating in protecting themselves from COVID-19 infection especially the most vulnerable ones including disabled persons of both gender and ages.
- Provide any necessary support for daily basic foods and medicines to those infected with COVID-19, and to their family members, and those being held in quarantine. Also ensure that health care services are continuously provided to those who are infected by TB, HIV, and malaria without any disruptions.
- Request banks and microfinance institutions to consider supporting their clients who are infected, and directly or indirectly affected by the COVID-19 by lowering interest rates and delaying collection of principle/interest for certain periods of time during and after the crisis period.
- Consider developing an economic stimulus package which would include social assistance in the form of a living allowance to those who have lost their jobs and income as a result of the crisis. This includes but not limited to those working in the tourism industry, factory workers, tuk-tuk drivers and those without direct social protection.

CCC plays a crucial role in communicating these policies and join statements to staff, members and provincial NGO networks and we have prioritised accessibility to information by sharing links to messaging app conversations that members could use to access resources.

As we reflect on the past year and look towards the new year coming, the spirit of solidarity, mutual conversation, and communication with different stakeholders with a common voice and understanding will ensure the civil society sector can address the ongoing and upcoming challenges effectively. ■

ACCOUNTABILITY TO AFFECTED STUDENTS

Schools are Shut, but Learning is On!

*By **Reinaldo Plasencia, Mauricio Otasevic** and **Laura Cantle,** Educo*

When Lucia (16 years old, La Paz, Bolivia) received a request in May to participate in Educo's survey about how she felt during the Covid-19 pandemic, she didn't think twice about suggesting to her ten year old brother, Santiago, that he respond too. While she was not happy with Bolivia's social distancing measures, which meant that they couldn't go to school or do any of their usual activities, she knew very well that Santiago was having a worse time than she was, and this was an opportunity for him to express how he felt.

Lucia and Santiago live with their mother, who sells fruit in a market near their home in La Paz. They are two of the participants in a local government project, supported by Educo, which promotes children's integral development, including life skills such as recognising and expressing emotions and improving math skills.

Educo's survey would allow them to give their opinion about what they were missing, what their biggest concerns were, if they felt there was anything positive about the situation, what they thought the future would look like after the pandemic and (Lucia's favourite

part!) would give them the opportunity to send their own message to other children around the world. Like the other participants in the survey, Lucia and Santiago responded via an online form, since this was the only viable option that guaranteed the safety of participants and staff. The advantages and limitations of using this channel are discussed in the survey, but there is no doubt that the Covid-19 restrictions have been an opportunity for Educo to reassess the options for engagement with children, teenagers and young people when face to face contact is not possible.

Three months after responding to the survey, Lucia receives the results. She goes to discuss them with Santiago.

- Santiagoooo! ... The results of the survey we answered are in, I've got the link to read them.
- And did they put in what we said, Lucia?
- Yes, they even put in the message I sent, but let's read slowly.
- Why is Bolivia the first country they mention?
- Because we were the country that sent in the most replies. Great, huh?
- Sure, and there are answers from places I don't know much about… Where are Mali and Bangladesh?
- We can look for them later on the Internet, let's carry on reading the results. There are slightly more responses from girls than boys, and those your age were the ones who responded most. See how important it was that you took part?
- Yeh, I didn't know that my opinion was so important, people don't often ask what we think.
- The responses show that children miss going to school, just like us. It looks like schools closed in other places too, but the children had online classes, which we couldn't do here in Bolivia.
- I want to go back to school, we used to play football there too!
- All the children in the survey miss being able to leave the house, play outside, go to church or to the mosque, they're also worried about getting sick with Covid and about their families not having enough money...
- It's a good thing Mum was able to go back to selling things in the market before the money from the government ran out.
- But it's too bad they won't let us go to help her, and it's too bad not all families have had help in this situation…
- Lucia, the worst thing would be for us to get sick.
- Yes, it says here that boys are the most worried about getting sick, but let's see what was said about the positive side of this situation. In other places they also think that it has been good to be able to spend more time at home and with family.
- But I want to be able to go out again like I used to.
- I'm not sure if that will happen anytime soon, and that's what most of the children in the survey think too.
- But there are also a lot of children who think that their life will be better in the future, although I'm not so sure about that.
- Let's read some of the messages they've sent! It's like it says in the report, when you read them you realise that not everything is so bad.
- And here's your message! "Protect yourselves from coronavirus. Whilst coronavirus is around, children shouldn't leave the house. I want them to take care of the planet and the animals because they're afraid too."
- This boy from Bolivia said that he learned to cook. See how nice it is to know how to cook, and that's how we help mom?
- This message is the title of the report: "Schools are shut, but learning is on!" The boy from Bangladesh who sent it must be happy! I want to see where Bangladesh is, do you think they play football too?
- Okay Santiago, let's leave the report and look for information about Bangladesh. Do you realise why that boy said that learning is still on? Hopefully it's still on for adults too, and they're learning how important it is to take our opinions into account so that things can be better in the future!

At Educo, we know that this fictional dialogue could have taken place in any of the thousands of communities we work in, in America, Africa, Europe and Asia. Conversations like this one demonstrate the importance of always listening to and taking into account children's opinions on all aspects that affect their lives, and show that, in times of crisis, it is crucial to continue to do so.

Lucia and Santiago's words encourage us to continue to prioritise our commitment to listening to children, not only their opinions about things that can or should be improved, but also their feelings, desires, and aspirations, and their positive outlook and energy, which we can capitalise on in such difficult times. All of this must help us to improve our programmatic practice and continue to realise our mission to work with children and their communities to promote just and equitable societies that guarantee their rights and well-being. ■

Message from ALNAP Director

*By **John Mitchell**, ALNAP, UK*

One, when you look back at the work you have done with ALNAP for all these years, are there any countries or any humanitarian actions that have been of special significance to you?

My first experience of humanitarian work was in Ethiopia where as a young man my job was to monitor UN food aid deliveries from the port of Assab on the Red Sea to the worst affected famine regions in the north of the country. This experience shaped my understanding and views about the nature of humanitarian action many of which I still hold today. It was here that I experienced first-hand how bad politics causes famine and how devastating it can be when early action is not taken. Above all I remember the resilience of the people, the beauty and mystery of their ancient culture and that humanitarian assistance can only be really effective when it is delivered and managed with a good understanding of the local context and with the active participation of the affected populations.

I was delighted to return to Ethiopia in 2014 for an ALNAP Annual Meeting on 'engagement of affected people in crises situations' with Robert Chambers as a special guest speaker. I was also so pleased to see how far Ethiopia has progressed since I had lived there. I hope now that the security situation in Tigray does not slide back into a similar conflict in which I witnessed during the mid 1980s.

Again, from a personal point of view, the humanitarian action that has had special significance for me is the rise of cash-based responses which I believe has made a positive difference to the lives of so many people in crises. When I worked at the British Red Cross back in the 1997, I set up a research programme to look at how cash had been used in the past and we published the first paper on cash summarizing experiences to date. We found very few examples partly, I think, due to an unconscious bias inherent in the system that poor people could not be trusted to spend wisely. It is very good to see now how cash responses have been mainstreamed over the past decade.

Of importance for ALNAP is the development and roll-out of 4 editions of the ALNAP State of the Humanitarian System Report, which monitors and report on humanitarian performance. Any professional enterprise needs to know how well it is doing and this reports helps hold up a mirror to the humanitarian community to reflect how well assistance is working and identify areas for improvement. I hope that we can use our experience to help local researchers write a version of their own report. Maybe in India?

Two, as you see our current context, what do you think of the interplay (unexpected) of humanitarian action, the pandemic, the economic slowdown, and the rapidly changing climate?

I think it will be really challenging and we can already see the consequences playing out in many countries including N.E Nigeria, Yemen, Southern Sudan, Somalia and Syria where we have a horribly complicated nexus of deepening poverty caused by global economic and political forces; ongoing conflict; lack of humanitarian access; and food insecurity stresses exacerbated by climate change. I have been alarmed at the figures that are being quoted at the moment, most notably that there will be doubling of people at risk of starvation this year. This requires immediate short-term emergency relief but also medium/longer term interventions involving high level diplomacy and economic stimulus. Humanitarian action will be just one element of a broader response that will depend on a strong United Nations, well-funded NGOs and civil society organisations, a genuine multi-lateral approach grounded in global political stability of the kind we don't have at the moment.

On the positive side, the pandemic (and other forces) have forced the humanitarian system to work in a different way and this may have benefits. International staff have been grounded and the budgets of international agencies have been affected. This has created space for fresh local initiatives and newly emerging local leaders. Allied to the massive multiplication of on-line platforms we are now hearing so many voices calling for a change in the way that the current humanitarian business model is working. The central tenet of course is for more control at a local level (which chimes with my own informative experience in Ethiopia I spoke about earlier) and it is up to the international humanitarian community to help facilitate and promote these changes wherever possible. There seem to be innovative funding models emerging which is good news, and I hope we will see a rebalancing of humanitarian assistance towards natural disasters and more emphasis on preparedness and mitigation, especially in the wake of more climatic extremes.

Third, as you see ahead, what do you see as new, emerging humanitarian ethics for all of us to think about?

An ethical approach, as already embodied in Humanitarian Principles, the Red Cross/Crescent Code of Conduct and the Good Humanitarian Donorship Initiative (to name a few) is central to the way we go about our work and has provided an ethical road map. A rights-based approach has been a positive development as well and I get the sense that over the years we have become almost over-stocked with principles and rights. What we do need perhaps is an ethical rebalancing towards obligations over rights. Rights refer to what we gain whilst obligations refer to what we do, and this involves respect for others, cooperation and participation. And again, this brings me back to my first point in the interview about understanding and respecting cultures and working alongside affected people. For me this lies at the heart of our enterprise and I hope that the next generation of humanitarians inherit these tenets and deepen their application. ■

ACCOUNTABILITY TO THE MOST VULNERABLE

Accountability to Affected Populations in the Time of COVID: A View from Design Community

*By **Elizabeth Dean Hermann**, Professor of Urbanism and Landscape, Rhode Island School of Design*

Photos: The Tribune India; ABC 7News; BBC News; NY Times; FreedomNews.TV

It's early on a warm spring evening when high above cavernous city streets, as if on command, windows are thrown open and pot-banging chanting dwellers spill onto balconies sending a monsoon of cacophonous gratitude onto front-line health workers and first responders caught in the endless battle against the dreaded COVID-19. So goes the surreal urban existence of 2020.

The restrictions imposed by the public health response to the Coronavirus global pandemic have put all of our lives on hold. In so doing, it has created seemingly unbounded space and time for critical reflection on where we live and how we engage with space and place. Moreover, this suspended state of existence has asked us to reconsider our relations to each other, our human need for connectivity and, from the perspective of our imposed isolation, our interconnectedness with all components of our living and non-living world. Within the disciplines of planning and design there has been a profound sense of affirmation with the now broadly shared understanding that public open space is essential to maintaining public health in urban populations. Streets have been closed to traffic to allow for outdoor dining, shopping, and socially distanced walking and cycling. Windows are open; balconies are occupied. Parks have become primary destinations with their offerings of oxygen-producing and sensorially rich nature, their possibility of traffic and noise-free activity, and their joyous array of individuals engaging in a spatially separated but emotionally close public expression of community. Fewer cars means cleaner air. Physical activity and abundant

sunshine promote better mental and physical health. Knowing we are all in this together fosters patience, compassion, and generosity which spills forth from our homes and families into the streets, parks and plazas of the public realm.

Yet, as is now widely recognized, COVID-19, once called "the great equalizer" due to the presumed vulnerability of all humankind, has not impacted all populations the same. As stated in the international journal *Public Health* (Patel et al. 2020) "This, is a dangerous myth, sidelining the increased vulnerability of those most socially and economically deprived." Age, income, location, population density, household size and composition, lifestyle, profession, immigration status, and pre-existing health disparities are all contributing factors in an individual's or community's vulnerability. Moreover, these very same urban strategies and amenities being celebrated as primary actors in ensuring public health, inclusivity and environmental resilience may have long-term impacts that serve to further disenfranchise the very same people most vulnerable to the virus.

In his widely heralded book *Introducing Just Sustainabilities* (2013), Tufts University planning professor Julian Agyeman speaks of the current urban greening projects being carried out in the name of sustainability and asks who they actually benefit. He writes that social justice, environmental justice and food justice intersect in the city in critical and not always anticipated ways. The multitude of new and large parks being promoted in the name of sustainability and resilience are to be lauded at one scale for their role in mitigating urban flooding, protect coastal cities from storm surges and erosion, and providing opportunities for local food production. But when seeing the unequitable distribution of such investments in public infrastructure and the failure to recognize the ripple effects and long term impacts of locational and programmatic open space decisions, it is hard to blindly believe that "green" is always good. Speaking in the context of the global climate crisis, Agyeman warns that our current striving toward sustainable and resilient cities will ultimately fail if the most vulnerable and marginalized members of society are not central to the conversation. Most importantly, he says, sustainability cannot continue to put the emphasis on the next generation. Rather, we must be working for today as if we continue to fail the needs of those living now, especially those whose circumstances don't allow for the possibility of delayed action and accountability, the future we envision will have no possibility of emergence, having been built of weakened columns atop a rotting foundation.

Supporting Agyeman's position are more recent discussions around "green gentrification." Here the argument is made that much of the public debate and good intentions around building greener cities ignore the fact that greener cities almost automatically mean greater marginalization and displacement of the most vulnerable members of society. Cities with tree-lined streets, grand parks, plazas, public-facing gardens, and balconies overlooking public streets and squares are more desirable cities, which leads toward higher land values, more costly construction, and higher occupancy by those with greater economic bargaining power. The greening of our cities and the increased presence of well-planned public open space must be distributed equitably and accompanied by policy ensuring oversight, maintenance, and that those with less political voice and economic leverage are active participants in the process and can remain in place with the same rights and opportunities as others. If not, then the urban planning and design responses to COVID-19 may ultimately be the most unjust actions we take toward those most vulnerable to the disease – many of whom we have been celebrating with our evening chanting and pot banging. As the current crisis becomes the new norm, the fear is very real that well-intentioned solutions to urban life in a COVID and post-COVID world will foster ever greater inequity as their purpose, urgency and intended inclusivity are reconfigured by opportunistic forces who see "greening the city" in the name of "public health" as one more means to extract power and profit from this large-scale human tragedy.

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NEED FOR ACCOUNTABILITY TO RACIAL MINORITIES

Accountability to COVID-19 Affected Populations in Canada: A View

*By **Paola Jani**, MA, BA, Canada*

Canada has always compared itself to its Southern neighbour, both for good and ill. It is tempting to look at the results that COVID-19 has had in the United States and proclaim that Canada has weathered this well, but the truth is that while Canada has fared better, this is no great claim when viewing through an egalitarian and equity lens.

Similar to other countries around the world, the spread of COVID-19 in Canada has disproportionately impacted the poor (including working poor), seniors, essential workers, racialized populations, people living with disabilities, and women, exposing the deep-seated inequalities that "liberal" nations like Canada have often sought to bury under good public relations. Canada is, perhaps uncritically, known for its universal health care system, however the system is equally rooted within the anti-Black and anti-Indigenous racism upon which our country was built. This system is precarious, as consecutive governments have weakened the public benefit year-over-year as a cost-cutting measure through cuts or by deliberately not keeping pace to inflationary pressures, particularly in those areas inhabited by the most disenfranchised. Institutionalized racism is a pervasive, but not often discussed, aspect of our society, with many impacts including the collection and application of health data which needs to be addressed for greater accountability to marginalized populations adversely impacted by the pandemic. As the University of Ottawa Institute for Science, Society and Policy indicated, "one of the first steps in repairing the damages of systemic racism in the context of public health involves the collection and presentation of race-based data during health crises and the recognition of the underrepresentation of racialized groups in Canada, such as Black Canadians, in health research." Race-based data is a powerful tool as it aims to address and identify how and what create systems of racism, holding public health officials accountable to mobilize needed change; and at the same time it also enables governments to prioritize the health needs of the marginalized utilizing an equity lens. Without such data health disparities will continue to widen, however with such data inclusion barriers of systemic racism can begin to be dismantled within Canadian health care practice. ■

Institutionalized racism is a pervasive, but not often discussed, aspect of our society, with many impacts including the collection and application of health data which needs to be addressed for greater accountability to marginalized populations adversely impacted by the pandemic.

Lessons in Accountability Towards Affected Communities During COVID-19

*By **Shama Mall**, Community World Service Asia, Pakistan*

At the onset of COVID-19, guidance put forth by Sphere and the CHS Alliance reminded us about the importance of ensuring human dignity, rights of affected people, as well as principled and people-centered approaches in our response and adaptation to COVID-19[10]. There are many lessons to be learnt from experiences of organisations during COVID-19 in this respect.

Localised approaches and ownership are crucial in shaping the degree of access, inclusion and relevance of assistance. Some of the operational challenges of COVID-19 could not have been addressed without the engagement of local and community level structures (village groups, steering committees, community leadership, local govt. line departments, etc.). Their involvement in decision making processes and implementation is helping to ensure assistance is relevant to the needs of and access to some of the most vulnerable groups - such as people with disabilities, women, children, the elderly and minorities.

Supporting local capacity and engaging community structures, including trust-building is essential to accountability and must be a long-term approach, not only during a pandemic. Organisations that have invested in such processes over the past many years are relying on such structures and continue programming to meet the needs of affected communities. There needs to be a more consistent effort to strengthen and scale up localised approaches and make such processes more meaningful.

Community level capacity must be strengthened to hold each other to account in order to avoid conflict of interest and exploitation of any kind. Remote management has resulted in an increased level of responsibilities and reliance placed upon the community level structures, without necessarily involving a due process or factoring in power-imbalances within such

[10] https://www.chsalliance.org/get-support/article/covid-19-and-the-chs/ https://spherestandards.org/wp-content/uploads/Coronavirus-guidance-2020.pdf

structures. It has increased prospects of individual interests taking precedence and even financial exploitation of affected communities by some individuals in community structures, causing negative consequences. Besides discourse on such issues with community level structures, organisations must support affected communities with strong remote monitoring, verification and complaints processes to ensure that they are not misled in any way, especially when assistance is in the form of any resource transfer.

The risks organisations perceive for affected communities and those communities perceive for themselves vary, so the engagement process must include sufficient dialogue to develop mutual understanding. For affected communities, risks are often defined by context, needs and day to day challenges. For instance, the health implications of COVID-19 for many are relatively insignificant compared to loss of livelihoods, providing for their families or meeting other immediate/long-term healthcare needs. This is affecting social and behavioral changes to limit the spread. Community engagement needs to involve listening to as well as addressing the concerns and on-going needs of communities, whilst supporting them in making informed choices and decisions in risk mitigation. Local organisations and community level structures are best positioned to achieve this.

COVID-19 has exposed the in-ward looking bureaucratic systems of funding partners/Governments. Some local organisations are left in a difficult position owing to immediate suspension of on-going projects by funding partners re-directing funds for their own needs. This is depriving local communities of life-saving services at a time when they need it most. Such action undermines the principles of partnership - by putting own needs before the needs of affected people without due consultation or a dignified exit process.

Though some funding partners are demonstrating flexibility by allowing their partners to adapt existing projects or use reserved funds to meet the needs of people affected by COVID-19.

Conclusion

The current operating context is going to be the new normal, experts predicting more global pandemics, increasing in size and impact. The humanitarian and development sector must take concrete actions based on the learnings of COVID-19 and scale up people-centred and localised approaches to be truly accountable to those most affected. ■

PROMOTING GRASSROOT INNOVATIONS FOR GREATER ACCOUNTABILITY

Accountability to Affected Populations in COVID Times: A View from Grand Challenges Canada

*By **Dr. Karlee Silver** and **Jocelyn Mackie**, Co-Chief Executive Officers, Grand Challenges Canada*

South Asian innovators are not only weathering the challenges of operating during the COVD-19 reality, but are actively adapting to the complex needs of communities where they work.

Since the beginning of the crisis, Grand Challenges Canada has been supporting innovators as they focus on the pandemic. Notably, the organization is mobilizing new funding for proven COVID-19-relevant innovations from its existing pipeline, which are adapting or pivoting their projects to be responsive to local priorities.

Since its creation 10 years ago, Grand Challenges Canada's unique approach has been to prioritize funding for local innovators. Whether in emergency situations or in times of relative stability, the innovators are best positioned to deliver programming that meets the complex needs of their communities.

To date, Grand Challenges Canada has invested a total of nearly $19 million CAD (including new supplementary funding) in 25 COVID-19-relevant innovations. Integral to this portfolio is the implementation of five innovations in South Asia (three in India, two in Bangladesh). Highlights include:

Saral Design Solutions Private Ltd. (India)

Saral's Swachh machine is the world's first fully automatic compact machine designed to produce low-cost, ultra-thin disposable sanitary pads through a decentralized manufacturing set-up. The company sells machines to local entrepreneurs and NGOs, and supports those unit holders to operate their Swachh machines as "businesses in a box". To date with funding from Grand Challenges Canada, Saral has served more than 27,000 unique customers of sanitary products.

In response to the COVID-19 pandemic, Saral has modified its

Swacch automatic sanitary napkin-making machine at Saral Design's factory. Photo credit: Sharanya Hariharan.

Swachh 4.0 machine to create three-ply disposable surgical masks. The company has adapted its ultrasonic sealing technology for non-woven materials to produce masks at a rate of 50-70 units per minute and at a cost of less than CAD $0.09 CAD per mask. Saral's model supports local supply chains in the production of essential supplies during emergencies. It plans to manufacture more machines and support existing sanitary pad machine customers in local mask production.

Friendship Bangladesh (Bangladesh)

Friendship Bangladesh provides comprehensive healthcare to isolated river-based and coastal communities of northern and southern Bangladesh with a structured three-tier delivery model. Their system of community health workers ("Friendship Community Medic Aides"), satellite clinics and hospital ships is designed to reach those living in complex, remote environments.

The isolated populations that Friendship Bangladesh serves are particularly vulnerable to rapid spread of infection, and lack access to robust health infrastructure equipped to handle a potential COVID-19 outbreak. Supplementary funding from Grand Challenges Canada is being used to establish a COVID-19 helpline across 12 districts where Friendship Bangladesh works; provide SMS-based education to its community health workers; and ensure supply of medical supplies and essential maternal, newborn and child health services at satellite clinics across 220 sites.

Innovators' responses to the COVID-19 pandemic in the communities where they work have reinforced Grand Challenges Canada's commitment to finding, funding and supporting those closest to the grand challenges they seek to solve. What is more, sourcing, funding and building capacity among local innovators is an investment in pandemic preparedness.

Grand Challenges Canada is dedicated to supporting Bold Ideas with Big Impact®. Funded by the Government of Canada and other partners, Grand Challenges Canada funds innovators in low- and middle-income countries and Canada. The bold ideas Grand Challenges Canada supports integrate science and technology, social and business innovation – known as Integrated Innovation®.

One of the largest impact-first investors in Canada, Grand Challenges Canada has supported a pipeline of over 1,300 innovations in 106 countries. Grand Challenges Canada estimates that these innovations have the potential to save up to 1.78 million lives and improve up to 64 million lives by 2030. ■

Friendship Community Medic-Aides / satellite clinics in action. Photo credit: Friendship NGO, 2020.

Accountability to Affected Populations in COVID Times: A View from HAG

*By **Beth Eggleston**, Director, Humanitarian Advisory Group (HAG), Australia*

Will the current global pandemic force the international humanitarian system, and even domestic emergency management structures, to really put communities at the centre of their operations? For a long time now, the buzz word of 'accountability' has been used to describe how agencies responding to crises should interact and follow the priorities of those whom they seek to assist. Perhaps the COVID-19 pandemic will force a new level of accountability as affected populations the world over demand information, access to services, and leadership to address an emergency on a scale rarely seen.

The pandemic is a crisis in itself, but what now happens when we need to respond to large scale, rapid on-set emergencies in the midst of COVID-19? Our research in collaboration with the Vanuatu Association of NGOs (VANGO) into the response to Tropical Cyclone Harold, 'No Turning Back', shows that there may have actually been some improvements in accountability due to the lack of international actors flooding into the country to respond. As Vanuatu had no cases of COVID-19 in April 2020, there were very strict regulations around humanitarian supplies coming into the country and where they were distributed, in order to maintain the COVID-19 free status. This in turn provided the government *'greater visibility and control over response activities than in previous responses, supporting its efforts to improve coordination, tracking and accountability'*.

But the question remains, are affected populations finding their leaders accountable during this time of crisis and are the agencies who seek to support communities engaging in a way that encourages joint decision making, inclusion of all types of vulnerability and nurturing local leadership? It could be that the communication channels in some communities have been strengthened as authorities seek the active participation of the public in testing regimes, physical distancing practices and adhering to lockdown orders. But what about the communication back from communities into the offices of decision makers? This depends on connectivity, social capital and the appetite on behalf of duty bearers to listen.

Photo credit: Kersom Richard (Ni-Van Photography).

The focus on accountable data has been central during the pandemic. Misinformation, rumours and conspiracy theories have run rife - amplified by social media, fed by fear. Having trust in data is central in building relationships to foster accountability with the affected populations. Translating data into meaningful policy decisions and communicating these decisions to different communities has proved difficult in many contexts. Intersectional vulnerabilities need to be understood in order to design effective communication – in both directions.

At the time of writing the Global Humanitarian Response Plan to COVID-19 required USD$6.71 billion, with just USD$923 committed. With this lack of multilateral commitment to shape the global response it is hard to see how we will see large shifts towards accountability. This in turn has an impact on the hard questions the humanitarian sector has started to ask itself: how do we decolonise aid, how can structural racism in the sector be addressed, and can, or should, the sector survive in its current form. With the magnitude of the current humanitarian challenges in front of us, we will soon find out. ■

Accountability and Pandemics: Lessons from COVID-19

*By **Qingrui Huang**, Deputy Regional Representative for Asia and the Pacific, International Council of Voluntary Agencies (ICVA), Thailand*

As we approach the one-year mark of the COVID-19 Outbreak, it has become clearer that the global health, social and economic crises caused by COVID-19 will have significant and long-lasting impact on the way civil society organizations (CSOs)[11] operate, including in the humanitarian sector. Positively, the pandemic is ushering in more local forms of humanitarian action, innovation, and greater complementarity between local and international actors. However, it has stretched already tight funding and increased pressure for CSOs to respond to a wider range of societal needs, amongst a shrinking civil space, accelerated by the emergency pandemic policies imposed in many parts of the world. This will consequently have significant implications in the way justice, equality and inclusion can be achieved for people in need, and ultimately accountability.

It is very much evident that COVID-19 has reinforced the important role local and national level CSOs play in addressing the needs of the most vulnerable and providing last-mile services delivery to the most needed. Many of them have been the first to reconfigure themselves and to push for innovative approaches to respond to the immediate needs. They have also been at the forefront in the absence of external assistance, to partnering with one another to channel donations, providing healthcare assistance and humanitarian aid, and to protect people and communities.

Ongoing research, discussions and data collection has focused around the role that CSOs have been playing in COVID-19, — often through the lens of localization, few analyses though capture how accountability to communities is being addressed (or not) in the evolving situation. The responses to COVID-19, have highlighted greater appetite for collective approaches between UN agencies, INGOs and local/national organizations as well as across heath, humanitarian and development sectors; lots of good practices have also been observed in terms of CSOs'own adaption towards localized leadership and expertise, bringing innovative ideas that could increase rapid mobilization and outreach. These developments have not happened in a silo, but rather amidst a complex structure of power dynamics and a wide range of actors. There is still a lot more to unfold in terms of how relationships, power structures and incentives are playing out behind these developments, if the positive changes trigged by COVID-19 are to be maintained beyond the crisis.

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COVID-19 has also unveiled deep cracks in economic and social systems, widening inequality, and shrinking civic space. These tendencies could challenge the environment in which CSOs rely on to uphold their accountability to people in need, particularly in terms of transparency in decision-making as well as people-driven processes. At this juncture, more collective efforts are needed to ensure accountability to communities is held in place, and there are checks and balances on the responsible use of power.

The new reality of a post-COVID world, will require CSOs to adapt leadership and management internally, and work collectively with governments and partners to ensure an enabling environment and fair partnerships, to support truly accountable assistance for people in need. Careful analysis of these different factors will be an important step at this stage to help ensure a more meaningful contribution to effective and accountable responses in the future. ■

[11] For the purpose of this article, CSOs here refers to a diverse set of non-profit, non-government organizations, ranging from small, informal, community-based organizations to the large, high-profile, INGOs working through local partners across the world.

Accountability to Affected Populations in COVID Times: A View from ARDD

*By **Zina Darwish** and **Ramsey Mansur**, Arab Renaissance for Democracy and Development (ARDD), Jordan*

Accountability to Affected Populations (AAP) has always been essential in the humanitarian sector, but with the advent of the COVID-19 Pandemic its importance has increased. The Pandemic has brought forth an unprecedented crisis that has necessitated multi-faceted responses. Furthermore, it has led to many organizations who have previously not engaged in basic needs provision to shift their operations to meet the demand for it while still maintaining their operations in their specific fields. Both the above reasons have led to many organizations and humanitarian actors embarking on steep learning curves. This was further emphasized by the wide range of groups that were affected by the Pandemic. While each group was affected by the Pandemic, the needs of each group were different as the Pandemic affected each of these groups differently. Even among broad groups, such as refugees and low income families, the effect varied and therefore the response for each must vary. Consequently, AAP and the learning it provides to humanitarian service providers is essential for the formulation and implementation of effective responses.

The Arab Renaissance for Democracy and Development (ARDD), through its work with the Jordan National NGO Forum (JONAF), has found that the most effective method of tailoring its response activities and of those of its partners has been through engaging beneficiaries of the response activities throughout implementation and at its end. Through its own eight offices on the ground and JONAF partners, ARDD was able to engage with members of

the communities in order for them to have a hand in identifying their needs. This allowed for efficient use of limited funds, effective needs-based responses and interventions, and the identification of those most vulnerable to the effects of the Pandemic. Furthermore, through feedback mechanisms included in the design of the response (post distribution mechanisms, etc.), ARDD was able to tailor delivery mechanisms to suit the beneficiaries and their respective situations. Thereby, improving the effectiveness of service provision both while carrying out interventions, and with each new intervention.

Moreover, the nature of certain issues, such as S/GBV and child protection issues, and their dynamics have changed. This has entailed a re-learning of how to address these issues. This has enhanced the importance of AAP as beneficiary inputs pre, during, and post implementation are essential in adapting to these new dynamics. Learning how to provide these beneficiaries with services in light of changes in the operating environment would have taken much longer if it was not for beneficiary and community member inputs; and there would have been a delay in the provision of certain life-saving services. For instance, intermittent lockdowns have complicated accessing and service provision for S/GBV survivors, necessitating the quick adaptation of service delivery mechanisms, and the piloting of new ones. This adaptation would not have been possible or as effective without the inputs of those whom they are targeting.

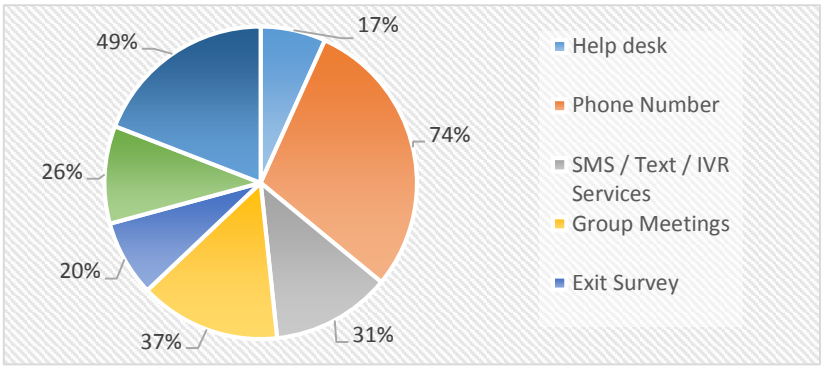
AAP facilitates and accelerates the learning process during the COVID-19 era, and provides direction in adapting activities to address the differing needs of various vulnerable peoples. This acceleration of the learning process allows for quicker adaptation of service providers and thereby increasing the efficiency of humanitarian response in terms of both time and resources; as well as increasing the effectiveness of interventions through participatory design and implementation during a time of increased instability, shifting dynamics, and ever changing parameters. COVID-19 has created a new context, and AAP is the most suitable approach to streamline the adaptation process. ■

Accountability to Populations At-Risk or Affected by COVID-19: A view from Start Network

*By **Start Network's Monitoring, Evaluation, Accountability and Learning (MEAL) Team**, Start Network, UK*

After Start Network launched Start Fund COVID-19 in April 2020, it soon became apparent that traditional and standard methods of ensuring accountability to people through humanitarian programmes would need to be adapted.

Although dependent on the contextual level of restrictions in place to maintain social distancing and the possibilities to switch to remote means, most Start Network members have implemented project required adaptations. For some members, this meant no access to communities at all and the need to entirely switch to remote means. For others, a balance between remote and face-to-face options were possible while for some, in-person options remained the norm. Various members acknowledged that remote methods have clear limitations, especially when working with communities with limited access to phone networks and internet connection.



Generally, feedback and complaints response mechanisms shifted to remote options to minimise interaction with communities and risk of transmission.

Phone lines, email and social media were established and/or promoted to share feedback and complaints with members. Some 74% of the first financed projects used phone lines, 49% asked target populations to talk directly to staff, and 37% held group meetings as the major means of feedback and complaint.

A range of projects also utilised SMS/Text/IVR Services, suggestion boxes, exit surveys, and help desks as feedback and complaint mechanisms. Members have also made use of post-distribution monitoring (PDM) to actively gather feedback from the communities they supported. Where in-person interaction was possible, protective measures were implemented. Various projects also worked with community-based volunteers who helped gather feedback in-person that then shared with project teams via phone.

Start Network (Alert CV19 029 Sudan) - Save the Children.

Feedback and complaint mechanisms used by projects

In Haiti, a hotline platform operated by Viamo in support of risk communication and community engagement (RCCE), not only helped share information, but also allowed callers to share feedback about the key messages they received. The platform also allowed for easy analysis of feedback to feed into the design of messages.

In South Sudan, implementing members put in place feedback desks and feedback boxes at distributions, whilst ensuring physical distancing and enforcing mandatory handwashing on site. Regular

feedback and details about how this was addressed were shared during radio programmes that were broadcasted by Catholic Radio Network, one of the implementing partners.

In Bosnia and Herzegovina, implementing agencies relied on remote feedback channels such as phone lines and a dedicated email address. Catholic Relief Services specifically targeted older people with food support and ensured each food package had a paper-based feedback survey.

In Laos, Care International and Plan International had very limited access to remote communities, which the project intended to reach. They switched their satisfaction surveys to remote ones over the phone, in order to be able to gather feedback on the information materials they developed and broadcasted. The members also stayed in touch with community volunteers who would informally gather feedback. However, it must be noted that organisations' limited ability to engage with communities may have impacted information sharing about the available feedback and complaint mechanisms. In various post-distribution monitoring reports, data showed that levels of awareness of the right to share feedback and complaints, and of available feedback and complaints channels, varied significantly across contexts but were generally relatively low. This ranged from 2% in Burkina Faso to 95% in Palestine.

Information sharing is an essential component of being accountable to affected populations, in particular information related to feedback and complaints. Gaps in awareness of the right to share feedback and complaints can ultimately hinder identification of areas for improvement and serious concerns. ■

CASE STUDY ON AAP

Accountability to Affected Populations in COVID Times: A View from REBHI

*By **Fatima Shehu Imam**, Nigeria Founder, Executive Director, Rehabilitation Empowerment and better Health Initiative (REBHI), Nigeria*

Rehabilitation Empowerment and Better Health Initiative (REBHI) is a national non-profit and non-Governmental organization which since its inception has focused on issues of employment and rights of vulnerable and marginalized groups such as women and girls. The organization works with both Government and civil society actors to design and implement transformative and sustainable humanitarian and development interventions which protect the most vulnerable populations. The COVID-19 pandemic is a public health emergency of global concern; with over 1.4 million deaths the pandemic has affected developed and likewise developing countries in devastating ways. Although Government and humanitarian organizations have intervened highly towards containing the spread; preventive measures like personal hygiene and personal protective equipment (PPE) are economically tasking hence leaving the vulnerable and financially weak groups such as internally displaced persons (IDPs) at a heightened risk of exposure and death.

Nigeria is a country with over 2.4 million IDPs who are vulnerable and in need of humanitarian assistance. The resultant crisis leading to Government imposed lockdowns has affected the economy and crashed small scale businesses further exacerbating already existing inequalities, thus putting vulnerable populations at even greater risk for poverty, suffering and infection.

As we have recognized the negative impact of COVID-19 and the challenges caused by the pandemic on vulnerable populations in Nigeria; REBHI is working with communities to provide humanitarian aid through various frameworks such as the "accountability to affected populations framework" in program design and implementation. First we mapped high-risk areas for the spread of COVID-19 such as IDP camps that are densely populated with poor access to WASH or health facilities. REBHI then conducted a community mapping exercise to identify the different key opinion leaders within communities who served as entry points for Behavior Change Communication (BCC) messaging (such as community, women, religious and traditional leaders, elders, youth representatives and those with disabilities). This was followed by a risk assessment of existing community engagement platforms such as interactions that involved large gatherings; from this we revised our information and

communication channels with adoption of digital media as a preferred means of community engagement. BCC through digital media was then complemented with interpersonal communication through capacity building of identified key opinion leaders we worked with to develop culturally sensitive and appropriate BCC messages on digital as well as print media in the local language of target communities.

These messages were developed with special consideration for information needs of different groups within communities in mind. The messages included the concept of social distancing, different risk groups within communities (such as the elderly, those with underlying health problems, and women and girls who may also be exposed to GBV due to lockdowns). Communities were also educated on safe access to and utilizing existing services such as WASH and using locally available materials for PPEs such as face masks. Key opinion leaders were also enlightened on tackling myths and misconceptions associated with the spread of COVID-19 within communities. The messages were pre-tested with

feedback from community members was sought before dissemination.

Community participation was also fostered through two-way communication and community feedback mechanisms with representation from all groups while adhering to all recommended preventive measures. In these forums, communities provided their own solutions and needs as regards reducing the spread of the pandemic. These inputs are documented, incorporated into implementation plans and communicated back to communities on a regular basis. REBHI is also accountable to affected populations through coordination, collaboration and advocacy where communities are linked to other available services from Government as well NGOs. We also report community feedback to NGO & Government forums to strengthen overall community response with consideration for requests from affected populations. ■

AGENDA ON ACCOUNTABILITY

Accountability to Affected Populations in COVID Times: ICRC Agenda

*By **ICRC Regional Delegation**, New Delhi, India*

With a commitment to put affected communities at the centre of its activities, the International Committee of the Red Cross (ICRC) prioritises the most pressing needs of the people in response to a crisis. Since the outbreak of the COVID-19 pandemic at the beginning of this year, the organisation has been on the frontline of the response worldwide joining forces with governments, national and international organisations, private sector, civil society and healthcare facilities. While the organisation's activities across geographies have been affected, by remaining agile and adaptive the ICRC is doing everything to provide humanitarian aid despite the many challenges owing to disruption in the supply chains, working remotely and other attendant restrictions necessary to slow the spread of the disease.

Yahia Alibi, Head of the ICRC New Delhi Regional Delegation, says, *"COVID-19 and its aftershocks are deepening fragility, increasing humanitarian needs, accentuating the*

impact of violence, leading to further stigmatization, heightening instability, and reversing hard-won development gains." As part of the Red Cross Movement – the largest humanitarian network in the world – the ICRC has continued proximity to vulnerable communities. It allows the organisation to regularly engage with people, listen to their needs and seek new ways of providing protection and assistance to those living in fragile contexts. In the Asia Pacific region, as many as 39 National Red Cross and Red Crescent Societies are working on the grassroots to ensure those who were already marginalized before this crisis began are not left further behind.

In India, the ICRC through an effective partnership with its primary partner – the Indian Red Cross Society (IRCS) – has been working to support and safeguard communities across the country. During the lockdown period, more than 40,000 Red Cross volunteers tirelessly carried out relief work across 550 districts of the country – delivering health and sanitary resources, and essential food items. The ICRC provided personal protective equipment (PPE) and hygiene material, along with technical support, to boost the response. The ICRC also provided guidance and shared best practices

with the authorities and partner organisations on the planning, preparation and management of the last rites during COVID-19[12] -- which plays a key role in not only preventing further spread of the disease, but also ensuring dignity of the dead.

Whether it is connecting people to their families, sharing best practices on prison management in times of the pandemic, or working with persons with disabilities – the ICRC's efforts are directed towards safeguarding human dignity. In the face of several unforeseen challenges, persons with disabilities have been disproportionately impacted by the pandemic. The ICRC has scaled up and massively adjusted its existing programmes, where required, to support national authorities and its long-standing local partners.

In addition to this, the ICRC strives to foreground the vital need to ensure the safety and protection of healthcare workers and healthcare infrastructure during the pandemic[13]. The ICRC endeavours to ensure that healthcare and death care workers are safe and able to carry out their jobs. It is crucial for their protection and to keep the lifelines running to ensure the continuing care of communities affected by the disease.

Some countries face an already compromised public healthcare system, overcrowded detention facilities, densely populated camps of displaced populations and informal settlements – all of which are adding layers of vulnerability for populations already facing immense challenges. In what is arguably one of the most defining periods in modern times, finding solutions to mitigate the long-term humanitarian consequences of the pandemic remains the single biggest priority. In doing so, the need for global solidarity and collective action cannot be over emphasised. ■

[12] https://www.icrc.org/en/publication/covid-19-general-guidance-management-dead

[13] https://blogs.icrc.org/new-delhi/2020/08/18/icrc-600-violent-incidents-recorded-against-healthcare-providers-patients-due-to-covid-19/

CASE STUDY ON ACCOUNTABILITY

COVID-19 Crisis in Bangladesh and COAST-Equity BD Role and Effort

*By **Aminul Hoque**, Director-M & E, COAST Trust, Bangladesh*

1. COVID crisis in Bangladesh and update scenario

Bangladesh is part of the worldwide pandemic of coronavirus disease (COVID-19) caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The virus was confirmed to have spread to Bangladesh in March 2020. The first three known cases were reported on 08 March 2020 by the country's epidemiology institute, IEDCR [Institute of Epidemiology Disease Control and Research]. Even since then, the pandemic has spread day by day over the whole nation and the number of affected people has been increasing. Since the spread started, there are 4,99,560 COVID-19 cases are detected where 4, 35,601 are recovered and 7,242 cases reported in death [Worldometer update on 10th December 2020].

2. COAST-Equity BD activities preventing COVID-19 pandemic

EquityBD (www.equitybd.net) is a networking platform of COAST Trust (www.coastbd.net). This networking platform basically contributes to develop network, advocacy platform of CSOs/NGOs at local, national and international level to strengthening campaign and advocacy on selected advocacy issues. So that we can focus COAST Trust role especially on preventing Covid-19 activities in Bangladesh.

Since inception, COAST Trust was serious on Covid-19 crisis, especially to protect and prevention issue. COAST Trust has taken three strategic approach on Covid-19 management, those are

COAST humanitarian action for poor and COVID vulnerable community.

i. Protect organizational staff which was the first line of action for next process start,
ii. Support to strengthen structural facilities of local medical services to expedite Covid affected patients and their treatment, and
iii. Start an awareness campaign among communities to prevent the COVID-19 pandemic. The following activities have been implemented under the three strategic approach on COVID-19 prevention;

2.a. Activities to protect organizational staff [Strategic approach 01]

i. COAST Trust has set up structural arrangement to its 90 branch offices in its working areas, 03 MTCs [Management Training Center] and project offices [Implement donor funded projects] to exercise health rules prevent Covid-19. The structural arrangements were included in providing Thermo Scanner, Oximeter, set up a complete hand washing system, foot bath, disinfectant sprayer, gloves, Mask, PPE and hand sanitizer etc.
ii. District and Upazilla [sub-district] wise hospitals were listed where COVID-19 treatment facilities are available. Also identified the ICU facilities, Ambulance to ensure emergency support if needed for any staff are COVID-19 affected.
iii. Established 03 quarantine center with own resources for COAST staff those are identified as COVID-19 symptomatic.
iv. Ensure daily health checkup of staff while they enter into the offices and reporting. Process included to check temperature and COVID-19 symptoms.
v. Follow up, monitor and discuss with staff who have been affected with COVID-19. Ensure their support to contact with doctors, admission in government Isolation centers, COVID-19

testing followed by a short time, Home quarantine and treatment & food management etc.

vi. Conduct 63 regular and weekly online meeting and orientation with all field staff to equip them with the recent updates on Covid-19, and its preventive measures especially health rules practice and preventive treatment, those identified in both nationally and internationally.

vii. COAST Trust has followed up with 122 staff under quarantine process. Among them 52 staff found COVID-19 positive. COAST has ensured necessary support for these staff to recover and succeeded.

2.b. Activities to support and strengthen structural facilities of local medical services to expedite COVID-19 affected patients and treatment [Strategic approach 02]

i. COAST Trust has contributed an amount of BDT 5.6 million [US$ 65,800] to "Government Coronavirus Relief Fund [GCRF]" in 37 upazilla [sub district] and 8 districts administrations [District Commissioner-DC] under COAST working areas. This contribution supported local government to kick off necessary initiatives on COVID-19 crisis management instantly.

ii. Distributed 7500 PPE & gloves, nebulizers and adequate sanitizing materials to local health complexes. Established and trained up community funeral management committee to dismantle superstition on COVID-19 affected death management.

2.c. Campaign and awareness among communities to prevent COVID-19 pandemic [Strategic approach 03]

i. COAST has started campaign and awareness activities among communities on COVID-19 prevention since August 2020 and still continue. Campaign activities included miking, community radio broadcasting, court yard meeting with women, banner, poster and leaflet distribution in growth centre and regular meeting with government local "COVID-19 Prevention Committee" to coordinate the campaign. COAST has been able to reach out to around six million community people through this awareness campaign in its working areas.

3. Our Lesson Learned on COVID-19 pandemic crisis management

Any working and implementation of program, COAST Trust has obligatory mandate to show its accountability to its community, organizational staff and also showing accountability to government. COVID-19 is such a crisis, which needed an all-out effort to mitigate. COAST has included and engaged community members, CSO, youth representatives and directly worked with the government too. that was and unique approach to implement and achieve the desire objective those were inevitable and still required. ■

Cheque handover to DC for govt. GCRF.

Courtyard meeting with community on COVID-19 awareness and prevention.

Accountability to Affected Populations in COVID Times: A View from Telangana

*By **Prithvi Ram Bommaraboyina**, South Asia Consortium for Interdisciplinary Water Resources Studies (SaciWATERs), Hyderabad, India*

Telangana State is well known for its capital city of Hyderabad as the hub of the information technology sector in India. Leading IT Companies have witnessed significant progress in the state.

In the times of COVID-19, The State has been appreciated for the various people-centric initiatives to flatten the curve. Currently recorded with 2,69,816 cases with 95.74 % of recovery rate & 0.54% of fatality rate as of 30/11/2020)[14]. The state has been fighting the pandemic by harnessing the digital interface for Strategic surveillance, sustainable Rapid antigen test, responsive control rooms, risk communication through strong community engagement and psychosocial redressal of positive cases by Telemedicine to monitor the isolated affected populations.

The Rapid Antigen Test

Rapid Antigen Test (RAT'S), the state has yielded better control of the pandemic which is evident by decreasing cases declining Case Fatality Rate (CFR). The Telangana Model of RAT's in Containing Covid-19 Pandemic is fundamentally different from the clinical tests currently being used globally. The test is based in the strategy of quickly conducting as many tests as possible & initiates the isolation & treatment at the earliest by communicating the required information along with the isolation kits followed by the timely monitoring of the affected by the mobile-based application.

The state government confidently stated the methodology to be scientifically précised as cited in the recent research article "Rethinking COVID-19 test sensitivity a strategy for containment" to buffer this strategy.

Isolation Kits

The State government has decided to supply kits containing basic medicines and safety equipment, including masks, for all patients who are under home isolation. The isolation kits come with medicine, masks, liquid hand wash, sanitizer, gloves along with IEC material through QR code, upon scanning which through mobile, suggestions and guidance issued by the union government for guiding the patient.[15]

Introduction of HITAM app

Telangana state developed mobile-based HITAM app that connects COVID-19 patients with medical doctors and as part of integrating technology with Covid-19 control activities. The government launched the Health Isolation Tele-medicine and Monitoring (HITAM) app to help the users to test themselves and clear their doubts about their health conditions. Thus enabling the users to understand their medical condition so that they can be re-assured about their health. Protocols instructed by WHO concerning diagnosis, testing, and treatment of the disease are featured in the app. Mobile phone applications (apps) have been shown to successfully facilitate the self-management of chronic disease. Besides this, there is a need to prioritize the required data privacy measures and safeguard against data privacy concerns. ■

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[14] https://covid19.telangana.gov.in/wp-content/uploads/2020/11/Media-Bulletin-30-11-2020.pdf
[15] https://covid19.telangana.gov.in/resources/posters/posters-for-citizens/

Accountability to Affected Populations in COVID Times: Kudumbashree Response to COVID-19

*By **Anishkumar M.S.**, State Programme Manager, Kudumbashree - State Poverty Eradication Mission, Government of Kerala, India*

State Poverty Eradication Mission popular as Kudumbashree was formed with the objective of eliminating absolute poverty in the State of Kerala. Unlike other poverty eradication movements, Kudumbashree has adopted a strategy of fostering organized bargaining capacity by bringing together poor families. Kudumbashree implements poverty elimination projects through community based three tier organizational setup led by local self-governments. Neighborhood groups (NHG) are the basic unit in this three-tier community level system. Each Neighborhood group consists of 10 to 20 female members aged 18 and above representing each family. These Neighborhoods are federated into Area Development Societies (ADS) at the ward level and Community Development Societies (CDS) at the Municipal/Panchayat levels. Thus, Kudumbashree has got a total of 2,87,723 NHGs, 19,489 ADSs and 1065 CDSs. These NHGs have brought to Kudumbashree total of 45,11,834 families. This means, over 60% of the families in Kerala are part of Kudumbashree NHGs.

Kudumbashree programmes are realized at Grama Panchayat/Municipality level through Kudumbashree CDSs that are independent-voluntary-three tier- women organizations. Each CDS is possessed with government approved bylaw and registration to provide a democratic way of functioning in line with the guidelines issued by the State Poverty Eradication Mission. But a CDS is not a subsidiary of the Mission. Today, Kudumbashree remains to be an organized system for fetching various supports available in various government systems. Kudumbashree could gain such capacity through a unique approach in implementation, persistent educational training programmes and creating an ambience of being at par in status and ideas with local self-government in transactions.

Community Kitchen.

Kudumbashree CDS is also an agency that assists Panchayat/Municipal councils in poverty eradication and activities related to natural calamities. Hence Kudumbashree is playing a pertinent role in Covid-19 mitigation activities of local self-governments. A number of activities and projects are being implemented through Kudumbashree to stop the spread of Corona virus and to mitigate the sufferings of people due to the lockdown declared in the wake of Covid spread. A few among such notable activities are enlisted below.

1. Sensitization

During the initial period, when the Covid pandemic was first reported in Kerala, the biggest challenge was the gross ignorance among the public about the virus and the necessary preventive measures. To solve this problem Kudumbashree NHGs were brought into action at Panchayat/Municipal levels. Well before the lockdown was brought to effect, special NHG meetings were convened to provide sensitization to 45,11,834 families on the importance of **'Break the Chain' campaign** as well as the importance for all, especially senior citizens to remain alert. WhatsApp groups were formed to establish constant communication among members of NHGs so as to make important government decisions and announcements reach people promptly. Today there are 1,94,539 such groups operational with 22,53,564 NHG members.

Kudumbashree also provides special sensitization for families in quarantine, but having primary contacts aged above 60. In order to meet the requirements of such families, appropriate coordination is being made between local self-governments and health department through specially trained Kudumbashree Resource Persons who keep a constant contact with the families. In this way, from April 5th onwards, 786 resource persons established contacts with about 5,000 persons. Until 20th April, 1,185 people were provided food and essential medicines to 305 persons.

2. Mask, Sanitizer, Face shied

In order to overcome the unavailability of enough numbers of masks in the market, September 30th, 71,55,301 masks were produced by 306 Kudumbashree tailoring units. Whereas, 9,322.65 litres of sanitizer were produced by 21 Kudumbashree entrepreneurial units. The unit in Thiruvananthapuram alone produced and distributed 96,200 face shields. All these activities are continuing. This not only supported the Covid prevention, but also ensured an income for Kudumbashree entrepreneurs who otherwise got their revenue ceased due to lockdown.

3. Voluntary service and Cloth bag production for Civil Supplies

State government has decided to distribute free food kits through Civil Supplies to ease the difficulties faced by people due to the restrictions of lockdown. Kudumbashree was entrusted with the responsibility of supporting government in this regard. Consequently, 20,90,353 clothe bags for the purpose of food kit distribution were produced by 802 tailoring units of Kudumbashree. At least 1,000 Kudumbashree members in each district were engaged on a daily basis in the preparation of these food kits.

Mask production.

4. Community Kitchens, Budget Hotels (Janakeeya Hotels) and Take Away Counters

To open community kitchens led by Kudumbashree and supported by local self-governments was one of the relief measures announced by Hon. Chief Minister of Kerala for helping people overcome the difficulties of stringent lockdown. About 800 community kitchens in Panchayat level and another 215 in municipal areas were soon created as joint venture of Kudumbashree and local self-governments in the State to provide noon meal for 500 to 1,000 persons every day. These community kitchens were of great solace for the poor and those who stayed alone or found it difficult to cook food at home during the lockdown period.

People's Hotel ('Janakeeya Hotel') is another venture of Kudumbashree launched under government's Hunger Free project to provide noon meal at a minimal cost of ₹20 for those who make a living out of meager income. All over the State, 841 such hotels were begun under Kudumbashree. These hotels served 1,25,69,465 packets of food until 30th September 2020.

Kudumbashree units also started Take Away counters at 13 Check Post areas where difficulties were reported by commuters in getting food. Besides these, 66,811 packets of food were distributed by Kudumbashree Canteens/Catering Units for different Corona Care Centres in the State.

5. Chief Minister's Helping Hand Loan Scheme

In order to support those families that faced income loss during Covid 19 crisis, a relief project titled, 'Chief Minister's Helping Hand Loan Scheme' was formulated by the Government and incepted through Kudumbashree. Under this scheme, ₹1,906.90 crores were distributed as loan for the NHGs until 30th September 2020. A total of 23,98,429 NHG members received this benefit.

6. Grand Care

Grand Care is a project launched by Kudumbashree in association with department of health for assuring care and safety for senior citizens. Major objective of this mission is to exert extra vigil to avoid any chance of aged people with low resistance and existing ailments getting infected with Covid-19. A note for discussion on this subject was distributed and 2,87,723 NHGs had productive discussions on the issue.

7. Counseling Service

As part of Kudumbashree's gender development programmes, 360 community counselors are functioning under local self-governments. Department of health in association and with the district administrations makes use of these counselors for providing counseling and mental support for those who are in need. Depending on the district's need, the community counselors also offer services like distribution of food and medicine. Mental support and counseling services were provided for 1,15,000 persons during March 23 to May 3.

8. Online competitions for NHG members for overcoming the boredom due to lockdown

During the Covid-19 lockdown period, Kudumbashree could organize unique online competitions for women members of NHGs. Different types of contests were organized for elderly people, children and women by each district mission rightly making use of the communication possibilities. Special campaign for the elderly, cooking competition on local recipes, Cyber Stage, WhatsApp Stage, Bio Platform (Jaivanganam), contest for kitchen gardens, Vegetable Challenge, Micro Green Cookery Contest, Terrace Farming Competition, Tik Tok skit through WhatsApp, Quiz Competition, Singing competition etc. were organized to invigorate artistic and farming skills of members. Ultimate objective of these online competitions was to eradicate mental stress and monotony among members of NHGs.

Thus, Kerala's initiatives to resist Covid-19 were community-based ably led by local self-governments, particularly Panchayats, Municipalities and Municipal Corporations. Kudumbashree has got a very important role in this. Most conspicuously, the local self-governments have been able to effectively mobilize Kudumbashree support for their COVID prevention activities. ■

CASE STUDY ON ACCOUNTABILITY

Accountability to Affected Populations in COVID Times: A View from Work of NEADS in Assam

*By **Tirtha Prasad Saikia**, NEADS, Assam, India*

In humanitarian assistance, adopting a systemic approach to accountability to affected populations (AAP) certainly generates opportunities for aid organisations to build a people-centric and a rights-based framework in their operations. The idea is basically concerned with protecting and respecting the rights and dignity of people affected by any disaster or adversity. Since people receiving humanitarian assistance are the primary stakeholders of any humanitarian response, therefore they have the basic right to participate in the decisions that affect their lives, receive information they need to get and to complain if they feel the aid they receive is not right, adequate or timely.

The Pandemic COVID-19 and NEADS Strategic Intervention

Due to the COVID-19 pandemic, we all are living through an unprecedented crisis. The impact of the deadly virus has been felt across the world. The Indian state of Assam has also been severely affected, where the poor and marginalized have been the hardest hit. NEADS has been working closely with the poor and vulnerable communities in Assam to respond to their needs during this pandemic. As a frontline aid organisation, NEADS took the initiative to come up with its rapid response team in order to carry out all vital services to every extent possible amid the crisis. It has also been working in close coordination with the local administration to address the immediate needs of the affected communities.

As quoted in the 'Global Humanitarian Response Plan for COVID-19', accountability to affected populations was an essential part of NEADS wider response strategy to the pandemic. The core pillars of NEADS in this regard were the strengthening effective information management, community engagement or people's participation and establishing a sound complaints and feedback mechanism on the ground.

The information management and pre-existing investments in communities

While generic information abounds on COVID-19, NEADS ensured that at risk populations receive the most relevant information they can act on, and in the most appropriate format through the relevant channels. NEADS established and promoted community level tracking system through our task forces & volunteers in the high risk prone villages where large number of young people are returning back from their respective workplaces from other parts of country. Also disseminated data &

information, IEC materials and related news to the community focal members through mobile based application and media. Such proactive measures enabled the affected people to meet their different needs, address their vulnerabilities and build on their pre -existing capacities.

Affected or at-risk people's engagement

While responding to the pandemic from the front, NEADS facilitated the affected communities so that they get involved in needs assessment, response planning, identification of aid beneficiaries as well as in the process of distribution. This was seen to be a very helpful engagement of the community in the pandemic response. The targeted people of the pandemic response were also the key informants for the process of primary data gathering with regard to the impact of COVID-19 at their level. This enabled faster tracking of worse affected areas on the ground. The affected people had also extended their support in managing the local level logistics such as transportation of relief aid with the help of their country boats to reach the unreached areas, bearing the loading and off-loading of goods and other assistance in the distribution process. All these are very significant in terms of engagement of at-risk people in the COVID response.

Establishing a complaints and feedback mechanism on aid

Complaints and feedback mechanisms proved to be powerful tools during the COVID response to track perceptions, rumours, misinformation and information gaps, as well as overall satisfaction of the people from the response. NEADS installs complaint/feedback boxes in all its aid distribution points and in the community in the targeted villages. Information were passed to the affected people that they can write complaints / feedback and drop in that box. Response team and its functionaries' contact numbers were given to the village level institutions and the key members who preferred to share feedback & suggestions verbally or were unable to write. Besides, the team encouraged the affected community to reach out to our front line workers such as community mobilizers and field level associates immediately in case if they had any grievances. ■

INDIVIDUAL VS INSTITUTIONAL ACCOUNTABILITY

Accountability to Affected Populations in COVID Times: A Personal View

*By **Neelima Khetan,** Visiting Fellow, Centre for Social and Economic Progress, New Delhi, India*

"My daughter and her friends are raising money to feed the migrants in Bangalore ... can you please contribute to her fundraiser?" ... wrote a college friend on our batch-mates' whatsapp group. While a part of me wondered about the minuteness of the response in the face of this enormous human tragedy that was unfolding before our eyes, but unlike at other times, I did not dwell much on the effectiveness of the effort. It was a friend's daughter and I wanted to stand by her side.

A few days later, I heard from another friend whose two young nephews were doing something similar. Again I contributed, with more or less the same questions and answers in my mind. And so on … I do not even recall the number of such efforts that one kept hearing about from within one's immediate circle, and of course supporting as much as one could.

And looking back, it was in this fundamental way (for me) that this disaster was different from so many others in the past. Maybe this was the first time that I felt I was part of the disaster … this was not a cyclone or a tsunami that had happened somewhere far away. This was a disaster all around me. And maybe for the first time, I understood deeply the meaning of not abdicating and not intellectualising. All around me, and every day, just as I was seeing the disaster unfold, I was also seeing people stepping forward to do something about it. And each day I learnt again the value of just doing something – howsoever small – that one could.

As that visible disaster ebbs away from sight, I hope I will never forget this lesson ... of not worrying about the seeming inadequacy of your efforts … but to do something. Even if you are able to provide one meal for one person, it makes a difference. But even as I write this, I am aware that the thought appears rather trite and commonplace. After all, many people do act like that only ... just as my friend's daughter did. And yet, for every person who does act like that, there are many more who talk of the insufficiency of such little drops in the ocean.

Accountability to affected populations is not about accountability to a third person. To me, it is about oneself. As someone had once said, **'accountability is not just about what you do, but also about what you don't do'**. Maybe I can explain this through the story of another friend. During the pandemic he was living in Mumbai. This friend is not very young, and given that his elderly mother-in-law stays with him, he would have been doing the right thing in staying at home. But almost every other day, he was out with a team that was distributing food to migrants, till the day a fellow worker tested COVID positive and my friend also had to self-isolate. When I asked him why he took the risk of going out, he said that someday his grand-children would ask him what was he doing when this human tragedy was unfolding, and he said that he did not want to tell them he was sitting at home.

And so, let me end this piece with this quote from Oscar Wilde, which I think sums up everything that I have tried to say in this article – **"The smallest act of kindness is worth more than the grandest intention".** ■

Accountable Now

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