

Is aid really changing?

What the Covid-19 response tells us about localisation, decolonisation and the humanitarian system



Authored by



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BritishRedCross

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Foreword

**Richard Blewitt, International Executive Director,
British Red Cross**

We are at a unique moment in time when courageous leadership could transform the humanitarian system and shift imbalances in power. Covid-19 is no exception in demonstrating that this is the only way forward.

This research is very timely, showing that current structures and priorities must be realigned with a greater focus on local actors' leadership, ownership, innovative approaches and expertise.

Local actors, including Red Cross and Red Crescent National Societies, have been at the forefront of responding to Covid-19 and saving lives. They demonstrate localisation in action and the value of volunteer networks to reach people in the most vulnerable situations.

This research purposefully sought the voices and perspectives of local actors and they are enlightening, particularly on power dynamics. The British Red Cross has engaged with the implications of the research findings and is committed to taking steps forward, based on the recommendations. This will build on our longstanding commitments on core funding

and partnerships with National Societies, from Bangladesh to Lebanon, as they design their own emergency responses and priorities. We hope that this report will stimulate important discussions across the humanitarian sector. We know that local decision-making must be at the heart of funding, partnerships and policies so that communities are safer during crises.

We have an opportunity for genuine change that the humanitarian system cannot afford to miss, including a deeper focus on decolonisation of aid and anti-racism.

We reject all forms of racism and we are focusing on creating meaningful change as an organisation, including evolving the way we operate and ensuring that everyone is treated with dignity and respect.

In the aid sector we have seen a shift in narrative on localisation and redesigning systems in line with the Grand Bargain commitments (made at the 2016 World Humanitarian Summit). Now we need to see it anchored in action through empowered local and national responders.



The support that the affected communities receive is determined and planned by themselves in collaboration with the technical experts

**Red Cross/Red Crescent Society
programme director**

Localisation increases the leadership and authority of affected people in determining how response resources are used within their communities to address their priorities

NGO programmes director



**Dr Halima Saado Abdillahi,
Head of Research and Learning,
International Centre for
Humanitarian Affairs,
Kenya Red Cross Society**

The Covid-19 pandemic has showcased the suitability of locally led humanitarian action and, more importantly, the strength of local humanitarian actors, the private sector and government entities.

The Kenya Red Cross Society leveraged its auxiliary role to be at the centre of the national response, capitalising on its good relationship with local government and its innovative approaches. The National Society was able to present knowledge from its experience and from being embedded in communities. This is a clear indication that locally led humanitarian action is the way to go.

Localisation is about complementarity – looking for a balance between local and international action in order to maximise the comparative advantages of both, and enhance the effectiveness and efficiencies of humanitarian responses. The representation and contribution of local actors in international coordination and technical structures is paramount. Collaboration is not only about fundraising, but greater investment in preparedness so that contextual processes can be agreed and understood, capacity can be built, and a sense of overall ownership can be created among local and international actors.

**Bal Krishna Sedai, Deputy
Director, Health Department,
Nepal Red Cross Society**

The Covid-19 pandemic has been an eye-opener for this generation. For the first time, we have seen a real-time assessment of our health system regardless of developed and developing countries.

Over the years in Nepal, there has been reasonable investment in building local capacities. For example, the basic health care system at the community level benefited from this. As the Nepal Red Cross Society, we have a strong volunteer base across the country. They are always in the community as first responders to support humanitarian crises together with over 50,000 female community health volunteers. They have been the backbone of meeting needs at this time. We have learned from models of other National Societies across the Red Cross and Red Crescent Movement. We have needed this to support the vulnerable sections of society, especially in a context where inequalities and wealth often determine how resources are allocated and who can access essential services.

When looking at the humanitarian crises that Nepal has been through in recent years – from major floods in 2008 to the earthquake in 2015 – there has been a clear case for the government to take the lead. For example, raising domestic resources, allocating them to local institutions, and mobilising them because there was no time to wait for international resources to come through. This meant that when the Covid-19 pandemic hit, Nepal had the systems, structures, and basic capabilities in place to respond effectively. As we all agree, the government is a key player in creating more equitable societies and protecting people from vulnerability by mobilising available resources.

I hope these research findings will be instrumental in giving special attention to the local level, including community-based organisations, local humanitarian actors, and local government institutions; and recognising the existing collective resources and capacities which may reduce the dependency on international resources.

What is localisation?

Local NGOs have the power to design, coordinate, implement and monitor the interventions with the support of international counterparts

NGO manager

86% of local actors believed that responses to Covid-19 were more locally led than earlier humanitarian responses.



To what extent have you participated in locally led responses during Covid-19?



46%
Always



24%
Often



24%
Sometimes



2%
Rarely



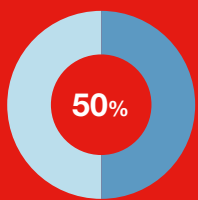
4%
Never

48% almost half of local actors said that there was an unequal relationship between their organisation and international actors.

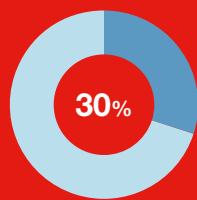
Unequal



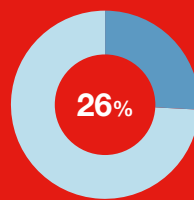
Would you describe the reason for this relational dynamic as any of the following?



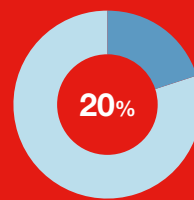
Asymmetric funding
(Unbalanced)



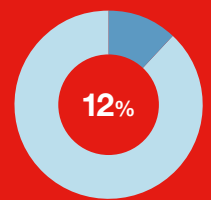
Colonial approaches



Unconscious bias



Structural racism



Microaggression



There is no significant change in power due to Covid-19. Overall, of course, it does need to change. It has already been agreed. The first responders should be given e.g. multiple year funding. It has been agreed but not translated. We are not in confusion – [localisation] has not been happening as it has been promised.”

Senior National Society representative

73% Almost 3/4 of survey respondents felt there was a common desire to see the current power dynamics change in the humanitarian sector.

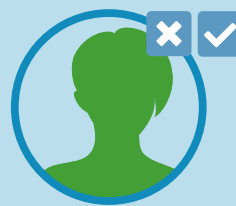
Desire for change



Has there been a shift to locally led humanitarian action since the 2016 World Humanitarian Summit and The Grand Bargain?



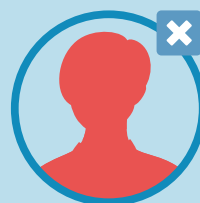
12%
Definitely



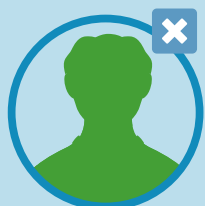
28%
Not sure



32%
Probably



32%
Probably not



10%
Not at all

Most common explanation: failure to allocate 25% of funding “as directly as possible” to local actors.

1.

Executive summary

This report explores the links between localisation and institutional or systemic racism in the Covid-19 humanitarian response. As widespread understanding and awareness of the prevalence of racism has increased, many have questioned the nature of humanitarian response and legacies of colonial control. At the same time, the Covid-19 pandemic has highlighted inequalities that cannot be ignored, and demanded rapid, locally led responses.

This research presents findings from: an online survey across 23 countries about localisation, Covid-19 and institutional racism in the aid sector; four country case studies (Kenya, Nepal, Yemen and Somalia); interviews with members of the Red Cross and Red Crescent Movement and non-governmental organisations (NGOs); and a literature review. To apply a decolonial approach from the outset, the research prioritised the perspectives of actors from the Global South over those of international actors from the Global North, including donors. It was conducted from December 2020 to April 2021.

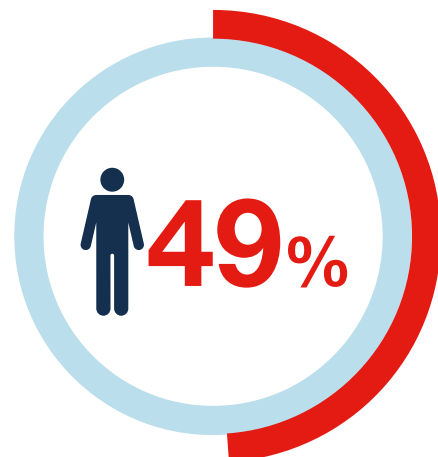
How much has really changed?

Covid-19 has provided an insight into what is possible when local actors are in the driving seat as first responders and taking the lead in humanitarian responses. The research found that, as a major 'shock' to the system, the pandemic enabled some progress towards localisation to occur quickly, organically and effectively. An increase in locally led Covid-19 responses meant support reached more communities faster.

However, during the Covid-19 humanitarian response there was very limited change in

the overall power dynamics and interaction between local actors and international agencies and donors. Local actors highlighted continued inequities in terms of power dynamics and decision-making authority as proof that localisation has not yet been delivered, despite the Grand Bargain commitments made in 2016.

Do you feel that you are able to make decisions about locally led action in your country?



Less than half surveyed felt they retained control over when, how and where international resources were engaged.

Persistent power imbalances

The pandemic has put a spotlight on the colonial structures and power imbalances inherent in the architecture of the humanitarian system. Many local actors see an aid sector that continues to be underpinned by an unequal distribution of power, rooted in colonial ways of working and based on negative assumptions being projected onto local actors. Participants from local NGOs asked what localisation aims to achieve if wider structures are not questioned or addressed.

The research revealed persistent challenges in achieving a genuine shift to locally led action, including: the power dynamics that underpin decision-making and partnerships, ingrained ideas about capacity deficits among local actors in the Global South, overbearing due diligence and compliance requirements, and a lack of equal representation in coordination mechanisms. The global survey identified further key barriers, including the difficulty of developing local leadership while international actors continue to dominate decision-making, international actors 'competing' with local actors for funding, a reported unwillingness of international actors to cede space and mandate to local actors, and doubts about whether locally led action would be sustained after Covid-19. The views expressed by research participants and the barriers they described must be better understood so we can more comprehensively address the slow progress of localisation. The overall findings demonstrate that there is still a difference in perspective – largely along Global North and Global South lines – around what locally led action and other key approaches mean in practice. This is deeply problematic because it is, on the whole, the voices of those in the Global North that are given visibility and power. These views are entrenched in the existing architecture

of the humanitarian aid framework, which perpetuates systemic racism in its structures and approaches. In the research locations examined, ideals such as 'locally led action' and 'complementarity'¹ are delivered in ways that still ultimately benefit and serve the interests of international actors – traditionally from the Global North – rather than national and local actors, particularly those in the Global South.

The research found that racism was understood and described differently in different contexts, often along colour, caste or class lines. Therefore, the study used proxy indicators around power and autonomy to infer whether racism was an issue of concern; these proxies included particular mindsets, the way resources were managed, and negative perceptions around the capacity of local actors. Based on these metrics, it was clear that racism and colonialism tended to remain unchanged during the pandemic. Since fundamental power structures have not changed, there has been no solid progress towards the decolonisation of aid. However, going forward, courageous leadership and action to address longstanding issues of structural racism could lead to lasting meaningful reform.

Progress to build on

While wider issues around decolonisation need to be urgently addressed, considering the growing frustrations and significant impetus for change at this current moment, the new ways of working resulting from Covid-19 offer important opportunities to expand and accelerate localisation efforts.

Ultimately, the pandemic appears to have led to the acceptance in many settings that locally led action is a sufficient and suitable way of delivering humanitarian responses. By extension, the obvious capacity of local

¹ The interaction and comparative advantages between local, national and international components of the Red Cross and Red Crescent Movement. For a more detailed definition, see Annex A.

actors as first responders in these contexts has prompted a realisation among some that international surge capacity does not need to be deployed as standard. In many contexts, the absence of international staff – who left or could not move freely due to their own safety protocols or government restrictions – meant that local actors had a greater sense of agency, even when international staff offered online technical assistance.

In addition, the mobilisation of local volunteers and the development of partnerships with the private sector and other local institutions have set up longer term capability. Red Cross and Red Crescent National Societies (referred to as ‘National Societies’ in this report) have also fulfilled their auxiliary role to public authorities and refined their contingency planning and multi-planning capabilities.

Case studies: Kenya and Nepal

Case studies from Kenya and Nepal show a local humanitarian sector that is strong and trusted, acting resourcefully and innovatively in responding to major crises.

The Kenya Red Cross Society played a leading role in the national Covid-19 response, with strong central coordination from the Government of Kenya and a new national taskforce, which served as a central command. Partnerships with other local actors allowed additional resources to be mobilised, and maximised the effective division of labour between the government, the Kenya Red Cross Society and the private sector.

In Nepal, several factors enabled a strong emphasis on locally led responses. These included new policies and guidelines that allowed local stakeholders and government structures to set priorities, make decisions and implement the response with a clear division of labour. There was greater trust from partners because local actors, including the Nepal Red Cross Society, had structures in place already from previous humanitarian responses, as well as track records demonstrating their capability. Finally, international NGOs put flexible funding arrangements in place, deploying up to 20% of funds from existing programme activities to cover Covid-19 needs.

The research also found that local and international actors are similarly united in their commitment to and belief in principled humanitarian action as a framework for behaviour and approaches that ensure consistency and high standards for all actors. There is also a belief that principled humanitarian action can help dismantle biases and adjust power balances in the global humanitarian architecture.

Moving forward

Amid the ongoing response to Covid-19, and as we work toward future recovery, now is an important moment to expand local leadership and humanitarian action. Moreover, genuine and more equal partnerships are needed to see a real shift in power and decision-making for a more inclusive and effective humanitarian sector.

There are opportunities to capitalise on good practice and innovative new approaches that have been implemented as a result of Covid-19. For example: flexible funding from donors, domestic resource mobilisation, transferring insurance protection to local actors, building on existing capabilities and trust between actors, and the reach of volunteer networks.

To enable change, the findings of this research will need to be addressed with a degree of openness and vulnerability. This will be an important first step in creating genuine pathways towards a more equitable future, not just for those the humanitarian system

seeks to help but also for those working within it at the local level. Anything less would be a disservice to both.

Recommendations

Systems-level change is required to address challenges that permeate the humanitarian system, including racism, and prevent effective action and equitable partnerships. To achieve permanent, meaningful change, power structures and dynamics within the sector need to be dismantled and rebalanced. However, as the world starts to emerge from the pandemic, there is a risk that the realisation of how far we really are from localisation in practice may be ignored.

This report recommends that donors, the UN, international, national and local actors, and the Red Cross and Red Crescent Movement adopt a range of actions that can change the humanitarian system as a whole and signal a commitment to being intentionally anti-racist. These include the following:

- **Reframe localisation within the need for equity and decolonisation:** redouble efforts to achieve genuine humanitarian system change and reframe localisation as a broader process of decolonisation, recognising prejudices and the need for more equitable partnerships.
- **Tackle donor funding exclusion:** change donor rules and barriers that currently exclude local actors from directly receiving funding.
- **Reform funding:** shift funding for local actors to be more flexible and long-term in order to support stability and innovation (including sufficient funding for indirect costs), including crisis prevention, preparedness and response.
- **Rethink frameworks, management and sharing of risk:** recognise the demonstrated capability of local actors as part of equitable partnerships and ensure that communities' voices and agency are effectively reflected in new metrics.
- **Monitor progress with cohesive measurement:** develop common standards and understandings of locally led delivery, to be measured annually against agreed criteria. For example, the percentage of surge deployments that are fulfilled by regional rather than international delegates.
- **Incentivise greater localisation:** reward international actors that have demonstrated commitment to and achievements in localisation, particularly considering that they can become less visible if they are localising effectively.

“

Localisation happens by:

- dismantling restrictive criteria for funding (which are currently making country pooled funds an elite club where due diligence is the entry card)
- amending coordination structures to include local responders at all levels of decision-making
- creating incentives for external actors to build equitable constructive partnerships with local responders or actors
- making localisation an actual priority of responsible aid and development
- having more Global South donors and contributors
- tackling corruption and unequal distribution of wealth, globally and in our individual countries
- having respect for local knowledge and expertise.

NGO country director

”



Photo: © IFRC/British Red Cross

IRCS volunteers organise a hand-washing activity at a school in India, April 2021.

1.1 The British Red Cross and locally led action

The British Red Cross is part of the world's largest humanitarian network, the International Red Cross and Red Crescent Movement ('the Movement'), which has around 14 million volunteers across 192 countries. The Movement has a unique ability to respond to humanitarian crises around the world and advance localisation. It has a local presence in almost every country, combined with a global network able to mobilise and coordinate responses to emergencies.

Red Cross and Red Crescent National Societies in each country are frontline responders. They are trusted to respond to the local needs of those affected by Covid-19 in their own countries and communities. National Societies also have a formal auxiliary role through which they provide humanitarian support to governments, which are also key national and local actors.²

The British Red Cross has long supported locally led action by directly funding the services and humanitarian responses of partner National Societies. Its approach has involved long-term investment in their development, including funding core costs, such as staff salaries, organisational structures and systems, resources for volunteer mobilisation, and leadership and management development. This support is based on the principle of locally led action as the most appropriate and sustainable model of humanitarian response.

In contexts including Kenya, Lebanon, Bangladesh, Sierra Leone and Palestine the British Red Cross has delivered programme support underpinned by an investment in National Societies' development. In each case, it has recognised that progress must be led and driven from within, and that the National Society's strength is as a national organisation with a community presence and a network of first responders at the local level who provide last-mile delivery of humanitarian assistance.

² According to the Statutes of the Movement, National Societies are considered to be "auxiliary to the public authorities in the humanitarian field." (See: <http://www.ifrc.org/docs/idrl/1290EN.pdf>). This auxiliary role can be described as "a specific and distinctive partnership, entailing mutual responsibilities and benefits, based on international and national laws, in which the national public authorities and the National Society agree on the areas in which the National Society supplements or substitutes public humanitarian services". (Taken from Resolution 2, 30th International Conference of the Red Cross and Red Crescent (2007). See: <https://www.ifrc.org/Global/Governance/Meetings/International-Conference/2007/final-resolutions/ic-r2.pdf>). To be a recognised member of the International Red Cross and Red Crescent Movement, a National Society's auxiliary role must be recognised by the national legislation of its country. (See: <https://media.ifrc.org/ifrc/what-we-do/promoting-principles-and-values/policy-and-diplomacy/the-auxiliary-role>)

Case study: the Kenya Red Cross

The relationship between the British Red Cross and the Kenya Red Cross Society illustrates how this support can work. The British Red Cross provides direct funds to the Kenya Red Cross Society for all emergency responses. Since the start of the pandemic, it has supported the national Covid-19 response through flexible funding, with responses being entirely designed and led by the Kenya team, based on needs identified by them.

When the Kenya Red Cross Society highlighted that the pandemic was having adverse secondary health effects on vulnerable populations and requested support, the British Red Cross provided general and restricted funds to support two emergency responses. These aimed to strengthen local capacities to respond to the pandemic by training and equipping first responders, enhancing coordination at the county level and investing in community engagement to improve knowledge and practice.

The Kenya Red Cross Society also used conditional and unrestricted cash transfers to encourage vulnerable pregnant and lactating women, and mothers with children under five years, to attend health services, as well as to address the economic impacts of Covid-19. When the Kenya Red Cross Society saw that vaccine hesitancy was an issue, the response was extended to include Covid-19 vaccine sensitisation campaigns through various community engagement and accountability approaches.

The British Red Cross is now fundraising for a longer-term resilience programme, after the Kenya team highlighted a need to address other vulnerabilities that were seen during the assessments for these emergencies.

Because the Kenya Red Cross Society is best placed to share learning with neighbouring National Societies, the British Red Cross has also funded initiatives to enable the Kenya team to provide peer-support to others in the region. This has included the Kenya Red Cross supporting the Djibouti Red Crescent with a National Society Development Initiative (NSDI) and a governance strengthening project, and helping the Namibia Red Cross Society and the Baphalali Eswatini Red Cross Society to develop their organisational policies.

Research

The British Red Cross also recognises the important links between localisation and cash and voucher assistance (CVA). In 2021, the Movement's Cash Peer Working Group commissioned a piece of research conducted by the British Red Cross' Cash

Hub to look at this.³ The study examines how CVA and the Movement's Cash Preparedness for an Effective Response approach can help to strengthen National Societies' role and influence in the humanitarian response, and their potential to support and further the localisation agenda.

In addition, in 2018, the British Red Cross commissioned research to better understand approaches to Movement complementarity and how they may inform the localisation agenda in three country contexts, entitled *The case for complementarity*.⁴

Overseas branches

The British Red Cross also has nine overseas branches within the 14 British Overseas Territories around the world. The overseas branches include six in the Caribbean (Anguilla, Bermuda, British Virgin Islands, Cayman Islands, Montserrat and Turks and Caicos Islands), two in the South Atlantic Ocean Islands (St. Helena and the Falkland Islands), and one in Gibraltar.

One respondent from an overseas branch highlighted that for many years the overseas branches were thought of as a singular entity, especially for those that were geographically close to each other. However, as individual branches have evolved and strengthened locally, they have been able to assert their identities. They have pushed for a space where their individual context is recognised, celebrated and used to help advance the work of other branches with shared experiences and social or cultural similarities. Some branches that have strong structural frameworks with consistent staffing and long-term programming have also supported regional networks, been showcased as examples of best practices, and even been recognised as trailblazers in key areas of humanitarian response.

As the British Red Cross works to tackle racism, advocacy from overseas branches continues to challenge both the organisation and individuals. It is pushing people to face the colonial reality which the British Overseas Territories represent, and which remains ingrained in interactions between the British Red Cross and some of its branches, especially those in the Caribbean.

³ Lewis, J. (2021) Strengthening locally led humanitarian action through cash preparedness. British Red Cross Cash Hub. https://cash-hub.org/wp-content/uploads/sites/3/2021/09/CVAPreparednessLocalisationReport_31Aug21.pdf

⁴ Austin, L., & Chessex, S. (2018) *The case for complementarity*. British Red Cross supported by the International Committee of the Red Cross. <https://gblocalisation.ifrc.org/wp-content/uploads/2019/03/British-Red-Cross-The-Case-for-Complementarity.pdf>

⁵ Chapagain, J. & Mardini, R. (2020, July 1) *The International Red Cross and Red Crescent Movement statement on building an environment free from racism and discrimination*. IFRC. <https://media.ifrc.org/ifrc/2020/07/01/international-red-cross-red-crescent-movement-statement-building-environment-free-racism-discrimination>

⁶ Council of Delegates of the International Red Cross and Red Crescent Movement (2015, December 7). *Resolution 3 of the International Red Cross and Red Crescent Movement message to the World Humanitarian Summit*. http://rcrcconference.org/wp-content/uploads/2015/03/CD15-R3-message-to-WHS_EN.pdf

The Movement

The British Red Cross is committed to making progress on anti-racism. The Movement is dedicated to helping achieve the required changes to all systems that oppress people of colour. This commitment is set out in the International Federation of Red Cross and Red Crescent Societies' (IFRC) statement on building an environment that is free from racism and discrimination.⁵

The Movement is guided by seven Fundamental Principles: Humanity, Impartiality, Neutrality, Independence, Voluntary service, Unity and Universality. These ensure a commitment to put people first.

The Movement has been a strong voice in favour of localisation to transform the humanitarian ecosystem. During crises, National Societies support each other to be effective local humanitarian actors. For decades, the IFRC has used its seat as part of humanitarian bodies such as the Inter-Agency Standing Committee (IASC), the UN Economic and Social Council (ECOSOC) and others to argue for more support for local humanitarian action. In the lead-up to the World Humanitarian Summit and Grand Bargain in 2016, the Movement pressed for an international humanitarian ecosystem that is based much more firmly on local response, as shown in its statement.⁶

“ The international system still places an overwhelming emphasis on international actors, leaving local organizations insufficient influence over operational decision-making and humanitarian policy... There is not enough direct financing of affected governments and local humanitarian organizations.

This imbalance must be changed. More sustained investment in national response systems and basic services will deliver stronger partnerships between local and international actors. The capacity of principled local actors needs to be prioritized and improved. This includes ensuring that local actors, like Red Cross and Red Crescent volunteers who operate in dangerous conditions, are protected and insured...

The empowerment of government and local actors is central in our Movement... Local responders are often in the strongest position to deliver rapid, culturally appropriate and sustainable humanitarian assistance to their communities. For example, in West Africa, well before the world woke up to the true nature of the Ebola threat, local health workers and affected communities were treating and isolating the sick and burying the dead.

Extracts from the International Red Cross and Red Crescent Movement's message to the World Humanitarian Summit

Introduction

In 2020, the world faced multiple crises which exposed festering inequality that could no longer be ignored. Ignited by the murder of Mr George Floyd and so many others, at the hands of law enforcement officials in the US, the world's institutions were put on notice: structural racism and intersectional inequality cannot be ignored without consequence. Many people sought to hold policymakers accountable for failing to eradicate institutional and structural mechanisms that perpetuate and increase inequality. This led to questions being asked about the nature of humanitarian response and its colonial underpinnings, where knowledge and ways of working from the Global North are often viewed or presented as intrinsically more valuable than those of the Global South.⁷

The year 2020 presented a unique moment of reckoning for the humanitarian sector, which the British Red Cross has sought to explore further through this research. Awareness of racism became more prominent around the world, especially in the Global North, where legacies of colonial control via institutionalised racism have been increasingly challenged. At the same time, the onset of a global pandemic demanded rapid, locally led action.

This year, 2021, is the five-year anniversary of the World Humanitarian Summit and the Grand Bargain,⁸ which gave wider acknowledgement to the central role that local and national actors have always played in humanitarian response, particularly as first responders.

The aim of this report is to analyse the interplay of both localisation and institutional or systemic racism in the Covid-19 humanitarian response by exploring the following:

- 1. Opportunities and constraints posed by the Covid-19 context for national and local actors**, and the ways in which these have impacted or challenged systemic racism in the sector.
- 2. The shifts in action, funding, expertise sharing and ways of working by international partners as a result of Covid-19**, and the opportunities and constraints these pose for the shift to locally led humanitarian action.
- 3. The differences between actors' approaches to locally led humanitarian responses when included as part of institutional and sector commitments towards anti-racism**, as compared to localisation as a purely humanitarian response delivery mechanism.
- 4. The interplay of these experiences and trends for national and local actors, including Red Cross and Red Crescent National Societies**, and the roles and perspectives of the International Federation of Red Cross and Red Crescent Societies (IFRC) and the International Committee of the Red Cross (ICRC) as core Movement partners.

These points have been deliberately explored from the perspective of actors from the Global South rather than through the lens of international actors, including donors from the Global North.

⁷ Osofisan, W. (2020, November 20) Opinion: Why the Black Lives Matter movement should have us rethinking humanitarian aid. Devex. <https://www.devex.com/news/opinion-why-the-black-lives-matter-movement-should-have-us-rethinking-humanitarian-aid-98570>

⁸ The Grand Bargain – A Shared Commitment to Better Serve People in Need. (2016, May) <https://www.jips.org/uploads/2019/03/Grand-Bargain-final-22May2016.pdf>

2.1. Methodology

The research included a global survey with 51 respondents, predominantly senior level representatives from 23 countries across Africa (56%), the Middle East (21%), Asia (17%), Europe (2%), Latin America (2%) and North America (2%).⁹ Sixty-five per cent of respondents worked for humanitarian or development NGOs, 27% for Red Cross or Red Crescent National Societies, 6% for grassroots or informal organisations and 2% for advocacy-focused organisations.

Qualitative research included nine initial interviews with key informants from the Movement. Fifteen interviews and three focus group discussions were held with stakeholders from both the Movement and local NGOs in four countries: Nepal, Kenya, Somalia and Yemen. In these geographically and operationally diverse locations, deeper research was conducted on issues of localisation, the Covid-19 pandemic and humanitarian response. See Annex B for a detailed methodology.

This research project was also informed by a research steering group made up of stakeholders from across the British Red Cross and the Movement, and an advisory group of external experts.¹⁰

2.2. Limitations

This study was conducted from December 2020 to April 2021 at a time when the Covid-19 context was rapidly changing across the world. This meant that in many countries people were focused on delivery and meeting the immediate needs of people affected by the pandemic. The availability of humanitarian actors for interviews and focus group discussions was affected by the reality of the situation. Due to restrictions and border closures all interviews and focus group discussions were conducted remotely.

The scope of the research was limited to four case study countries (Kenya, Nepal, Somalia and Yemen) of which two only are conflict settings (Somalia and Yemen). The findings only speak to the issues in these settings and should not be generalised or inferred for other settings without undertaking similar or appropriate primary research.

The sample size of quantitative data gathered through the global survey (51) was insufficient to provide a robust disaggregated analysis (such as by organisation type or geographical location).

⁹ Those surveyed were from organisations based in the following countries: Afghanistan, Bangladesh, Burundi, Colombia, Democratic Republic of Congo, Djibouti, Ethiopia, India, Iraq, Lesotho, Malawi, Mali, Nepal, Pakistan, Rwanda, Somalia, South Sudan, Sudan, Syria, United Kingdom, United States of America, Yemen and Zimbabwe.

¹⁰ For details of steering group and advisory group members, see Acknowledgements.

Findings

It has been argued that despite good intentions, localisation presents a biased understanding of the local and its agency in transforming humanitarianism.¹¹ This line of thought contends that not only does localisation represent a failed attempt to reconfigure the international humanitarian system's power relations, which are dominated by actors from the Global North, but it glosses over the crucial role of the Global South in shaping norms for humanitarian action. It has also been argued that the current conversation is dominated by a problematic idea of the local being in binary opposition to the international, and this leads to a failure to see the full picture when analysing the humanitarian sector's exclusionary practices.¹² As such, literature suggests that the localisation agenda risks perpetuating the very issues it aims to redress.

The findings of this research make for sobering reading in terms of lack of progress to date. But they also offer optimistic thinking in terms of opportunities to be seized to create a more inclusive and effective future for the humanitarian aid sector and those it seeks to serve.

Overall, the literature review and research findings complement and mutually reinforce one another, providing a clear picture of current challenges. It is also evident that the challenges identified are generally felt more acutely in the two conflict settings examined in the research. This is often due to the fact that international humanitarian systems and bureaucracies display power asymmetries that

disadvantage local actors in those contexts.

The overall findings show there is an opportunity to connect – largely along Global North and Global South lines – what locally led action and other key approaches mean in practice. This is important since the views of the Global North, on the whole, are the ones who are given visibility and power because they are entrenched in the existing humanitarian aid framework, which perpetuates systemic racism in its structures and approaches. This means that in the research locations examined, ideals such as ‘locally led action’ and ‘complementarity’ are being delivered on in ways that still ultimately benefit and serve the interests of international actors – traditionally actors from the Global North – rather than national and local actors, particularly those in the Global South. Since this research covers a small sample of four country case studies and 23 countries represented by survey respondents, this is an important area for further investigation to understand whether these findings are borne out in other settings.

It is worth noting that an understanding of Critical Race Theory¹³ and how structural racism and inequality pervade the humanitarian sector is essential to truly appreciate both the enormity and the validity of the challenges expressed by local actors throughout the research, as well as the unique opportunities that exist to forge meaningful and constructive change in the long-term. The findings and recommendations have been written and developed with this important point in mind.

¹¹ Gómez, O. A. (2019) Localisation or deglobalisation? East Asia and the dismantling of liberal humanitarianism. *Third World Quarterly*. 42(6), 1347-1364.

¹² Roepstorff, K. (2020), A call for critical reflection on the localisation agenda in humanitarian action. *Third World Quarterly*. 41(2).

¹³ Critical Race Theory seeks to challenge mainstream liberal approaches to racial justice, which often see disparity between groups of different racial origin as related to individual effort and outcomes, or the culture of people from a marginalised background, rather than being due to a structural disadvantage that is hardwired in the capitalist framework. Critical Race Theory helps us to understand the processes that shape and sustain race inequality in society.

3.1. Decolonisation, anti-racism and the humanitarian system – how much has really changed?

3.1.1. There has been limited permanent change in existing unbalanced power dynamics

The pandemic has heightened the importance of localisation in different ways. Among respondents to the global survey, 86% believed that responses to Covid-19 were more locally led than earlier humanitarian responses.¹⁴ Responding to the pandemic offers a unique opportunity to capitalise on and reinforce these shifts. Respondents said localisation was about local leadership and agency, and locally led actions were seen as more context-appropriate and responsive to people's needs.

These observations reveal how central power is to localisation. But there is significant divergence between commitments to and belief in localisation, and an actual shift in power, which is severely lagging. A remarkable 73% of survey respondents felt there was a desire for change, but 48% also responded that the system still had problematic power imbalances, including significant issues of racism and colonial mindsets (see Figure 1). Perceptions of the progress of localisation since the Grand Bargain also showed frustration with how slow it had been (see Figure 2).

Respondents reported a willingness among humanitarian actors to coordinate and share resources and indicated a common acknowledgement that this was a more effective and efficient way of working. However, those that thought there was not a

common desire for power change linked this directly to unwillingness to relinquish control on the part of the UN, governments in the Global North, and other international actors and donors.

“

The power dynamics are too entrenched and beneficial for many (mostly UN, mostly Global North) actors who want to keep that to continue benefiting financially and at the level of geopolitics and economy. This takes the courage to relinquish some of the power and I have not seen any evidence of such willingness, especially not within the UN system.

NGO country director

”

“

Local actors unanimously feel exploited in many ways including salary disparities between the local staff, who do the bulk of the work, and the expatriate.

National Society operations manager

”

¹⁴ The survey included 51 responses from Africa (56%), the Middle East (21%), Asia (17%), Latin America (2%), Europe (2%) and North America (2%). In terms of experience, 66% of survey respondents had been in the sector for more than 10 years, while only 10% had under two years in the sector. Organisationally, 65% worked for humanitarian and/or development NGOs, 27% for Red Cross or Red Crescent National Societies, 6% for community-based organisations and 2% for advocacy organisations.

Figure 1: Global survey findings

Which of the following words, if any, describes the relationship between your organisation and non-local actors (e.g. Northern Government donors and international agencies)?



Would you describe the reason for this relational dynamic as any of the following?

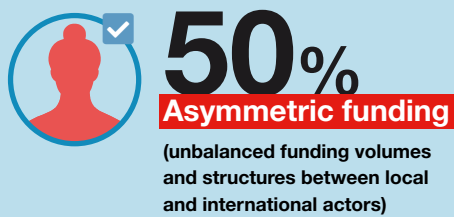
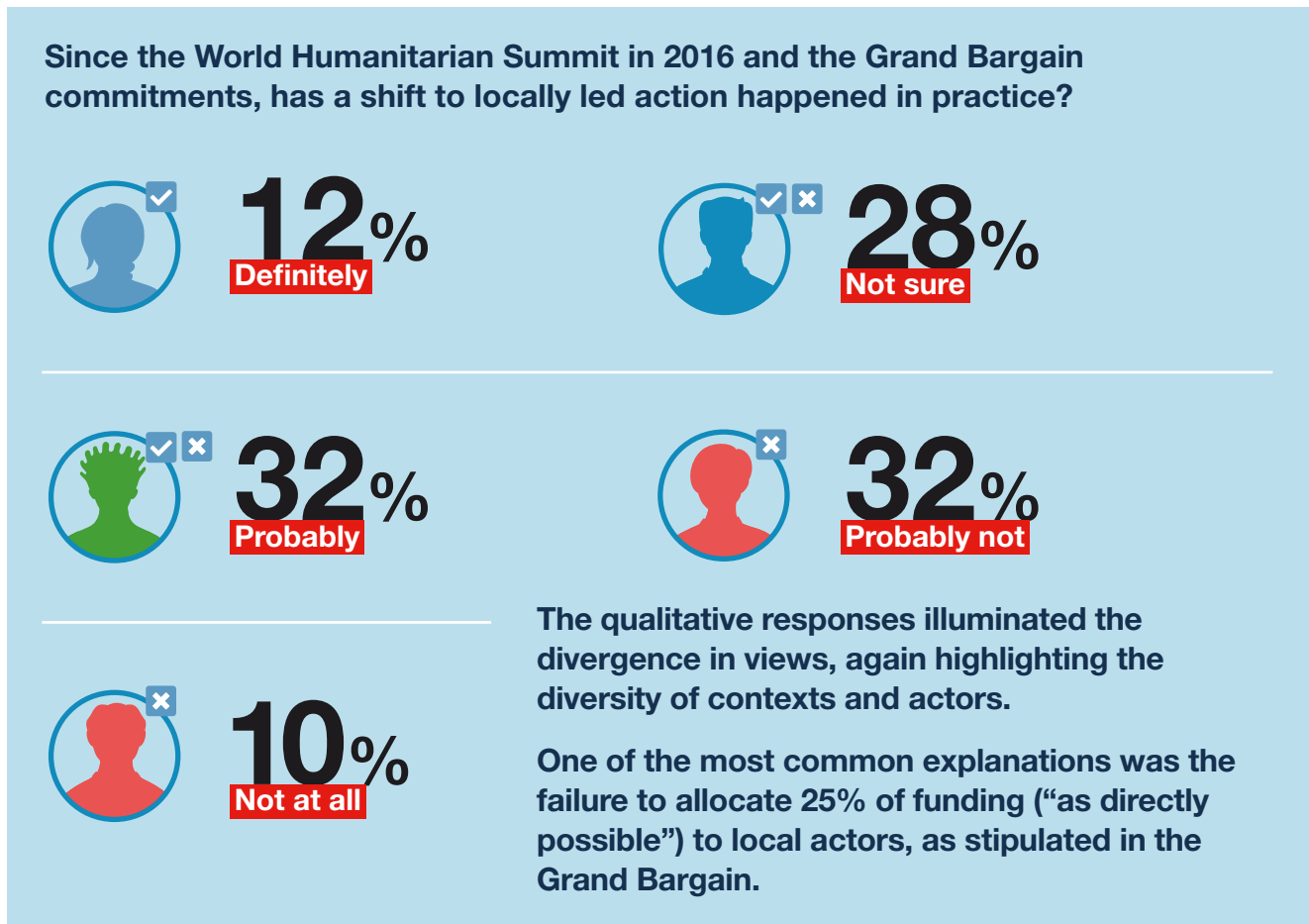


Figure 2: Global survey findings



“...the commitment was there but we have not seen the flow of resources to support the localisation agenda.”

Red Cross/Red Crescent Society secretary general

“From 2016 until now, I don’t see any progress made from the Grand Bargain commitments on localisation. We see international organisations and donors still dictating what the local people and NGOs do without giving a chance to be consulted about what and how.”

NGO CEO



Globally, the percentage [of funding] is still way below 10% to local responders. The Red Cross Red Crescent probably account for most of that funding, followed by other local responders that do not have such a structure. Local actors are taking on a lot more, but [the] Grand Bargain is falling substantially short of its commitment.

NGO country director



Overall, both the literature review and research findings suggest that the shift towards locally led action has not led to systemic change in the architecture of humanitarian response to date. Traditional power dynamics remain unchanged, with local partners feeling subordinate to international partners. This is particularly true in terms of funding and strategic management, as illustrated in work commissioned by Coordination SUD on the local experience of French NGOs' work on aid localisation in 2018.¹⁵

The literature review highlighted that these power dynamics remain largely along colonial or neo-colonial North-South lines and suggest a passive assumption of an inherent efficiency in Western ways of managing operations or addressing problems.

If there is not an active commitment to grapple with these challenges, there is a risk that the locally led agenda will ultimately

fail to reconfigure power relations within the international humanitarian system. Currently, this system remains dominated by actors from the Global North and glosses over the crucial role of the Global South in moulding the humanitarian action norm.

This finding is supported by the research (and illustrated in the graphs below), which reveals that the strongest descriptor of the relationship between local and non-local actors was one of unequal power. Nonetheless, the fact that there were more responses categorising these relationships as 'respectful' and 'trusting' rather than 'distrusting' provides a constructive and important starting point to resolve enduring power inequality (see graph 1).

When asked about ways in which the international humanitarian system continues to undermine its own commitments to locally led action and decolonisation, survey respondents cited two main factors. Regardless of organisation or type of actor, the majority of respondents (43 out of 51 in total) pointed to either asymmetric funding that is imbalanced in terms of decisions made about its allocation and usage (26 out of 51 respondents), or colonial approaches (17 out of 51 respondents). (See graph 2).

It is striking how strongly asymmetric funding was seen as the cause, while other dimensions around colonialism and racist dynamics were also prevalent. This is significant cause to focus on both funding and institutional culture and values when seeking to improve relationships between international and local humanitarian actors.

Some of the most positive responses in terms of power relations were focused on the support for localisation.

¹⁵ Coordination SUD (2020) Localisation of Aid: Lessons from partnerships between French NGOs and local actors. https://www.forus-international.org/en/extra/hub/resources-publications?modal_page=pdf-detail&modal_detail_id=75866-localisation-of-aid-lessons-from-partnerships-between-french-ngos-and-local-actors-resource-of-coordination-sud-french-member-of-forus

Figure 3: Global survey findings

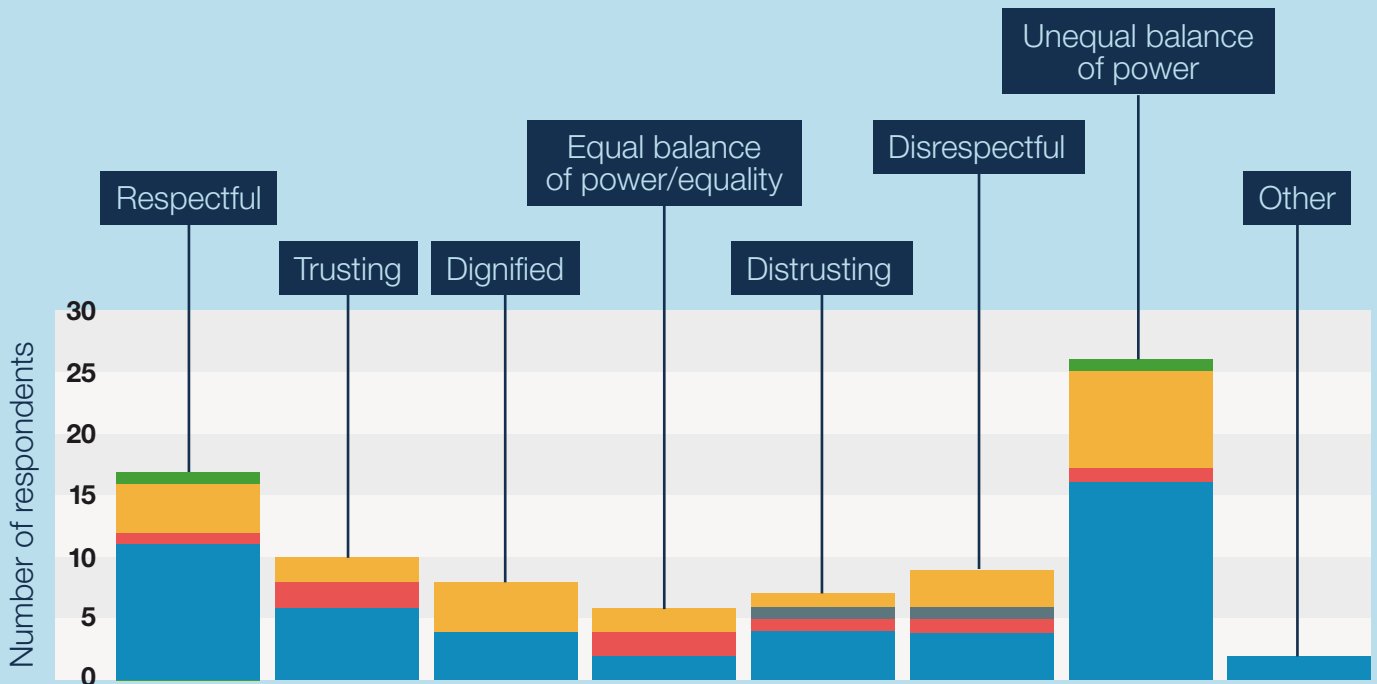


Those results are indicative of power shifts lagging behind rhetoric, where there is a belief in and some effort to support localisation, but the process of localisation in reality remains slow, even if two-thirds of respondents agreed there had been progress. Looking more deeply into decolonisation, this disconnect between rhetoric and tangible change is likely to be even more pronounced, whereby rhetoric is supportive, but broader decolonisation is not yet apparent in the humanitarian system.



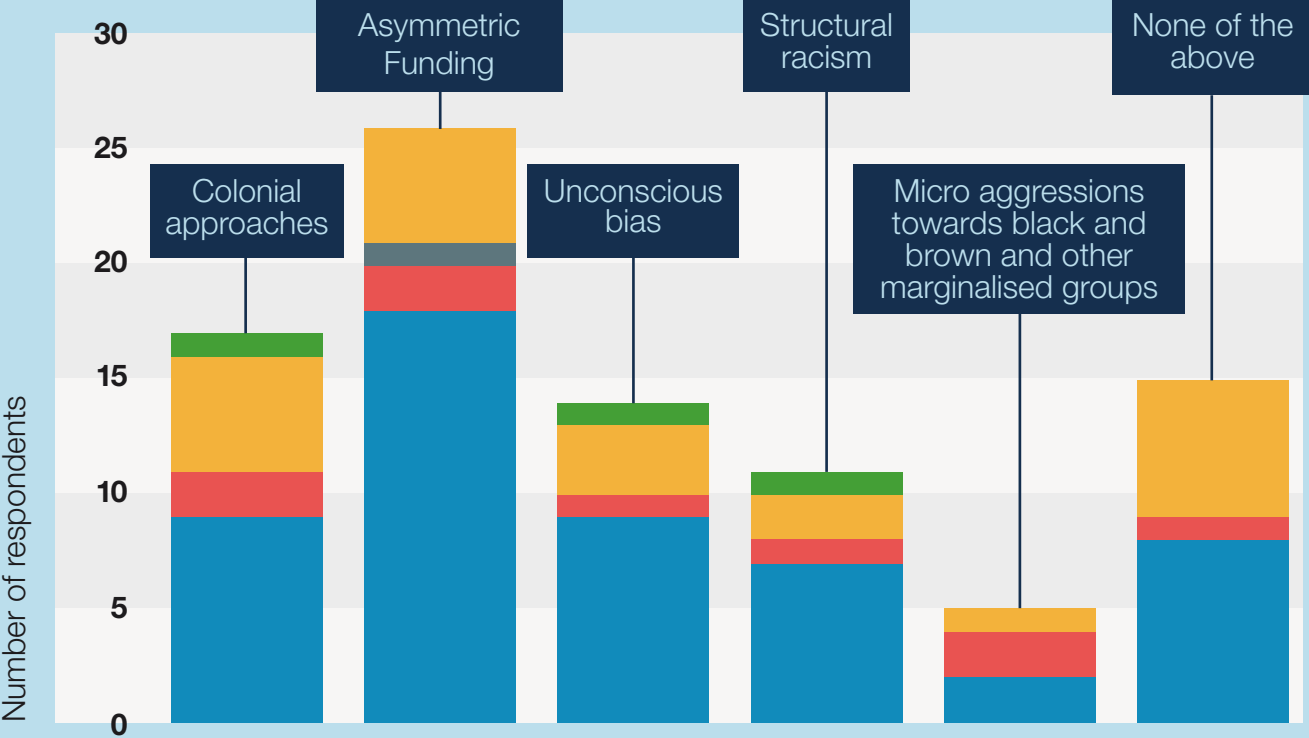
A cash transfer and survey programme is conducted in Balkh province, northern Afghanistan, July 2021.

Graph 1
Relationship between local organisations and non-local actors



- Humanitarian and/or development NGO delivering services
- Organisation focusing on advocacy and campaigns
- Informal community based organisation/grassroots activism
- Red Cross or Red Crescent Society
- Government Agency (other)

Graph 2
Reasons for relational dynamics



- Humanitarian and/or development NGO delivering services
- Organisation focusing on advocacy and campaigns
- Informal community based organisation/grassroots activism
- Red Cross or Red Crescent Society
- Government Agency (other)



Photo: © Nepal Red Cross Society

Volunteers from the Nepal Red Cross Society support Covid-19 vaccination programmes in Dadeldhura District, March 2021.

Local actors across all geographies and participant groups openly questioned negative assumptions and preconceptions embedded in the behaviour of international actors. Concerning the Movement, National Societies' participation at international events and meetings gave the impression that stakeholders from the Global South were treated the same as those employed in 'headquarter bases' or in National Societies from the Global North. However, respondents said that these spaces still felt exclusionary, implying that there was a 'them and us' experience to taking part in international meetings.

“

Whether it is with the UN, whether it is with INGOs, whether it's with the government, it's the same. There's clear racism in all this for sure. Hundred percent, the entire ecosystem.

INGO activist

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“

We go to these international conferences and meetings you know, we're supposed to be at par, you know, but we're not equal. I mean, there are some that are more equal than the others because... they are from the 'developed world' and, you know, they have resources and they give us [them]. But yeah of course there is always the racism in everything in that sense, for sure, they will not accept it, but what is it then?

Senior National Society representative

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By design the [humanitarian] system is not pro decisions at the local level – one way we see this is on the issue of funding. The [way the system operates] has been normalised, but continues to glorify itself. It's infallible, one cannot question it, and [it] deflects criticism of it as related to 'operational flaws', not structural. This is neo-colonial racism, global politics continue to have a racist undertone.

Senior National Society representative

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Photo: © Adeso

Somalia, Adeso staff training hand wash facilities.

Strong sentiments were relayed from a number of experienced stakeholders across the different research settings about widespread racism within the structures of humanitarian delivery, hence this finding is triangulated from views from different contexts. This critique against the overall system was longer-term and not just in reaction to the events of 2020. It seems that there is a parallel universe in which the extent of systemic racism in the sector is clear, known and experienced, yet it is not acknowledged where it needs to be, in managerial structures.

These findings make it clear that the inequity of power in relationships experienced by local actors is also not enabling locally led action. Without a much more intentional shift of power, the current use of structures in decision-making, resource allocation and funding will maintain the humanitarian sector's colonial status quo. The literature reviewed

for this study highlighted power as a proxy for racism, and it is clear to see how systemic racism will endure in the longer term if power dynamics are not addressed.



One of my experiences: people are dismissed in white spaces, dismissed with a smile, and find actions that are labelled 'unrealistic'. Sometimes I understand their predicament, they also have another master (INGOs are getting donor funding).

LNGO member



“

The trauma is in how people in the Global South have to deal with all of this. You can see it in people's faces. They are never asked to speak or chair these events. It is kind of like the processes, systems and structures have not been humanised. The architecture of our system really needs to be looked at. There needs to be conversations at multiple levels. We need to bring our values to the table and walk the talk. In busy donor work around Covid-19, we still need to think about how we progress on these issues. When there is a lack of trust, we have to ask, is it a case of racism? Trust and the expression of racism are not well known publicly but this is how it manifests.

INGO activist

”



Photo: © Adeso

A Community Health Volunteer introduces new hand-washing facilities to a community representative in Armo, Somalia, October 2020.

From a Red Cross and Red Crescent perspective, all components of the Movement have naturally grown and developed alongside the political and social realities of the day, which have of course included eras of empires and colonisation. Research respondents expressed frustration with the unconscious ways in which this history continues to influence the structures, processes, actions and power dynamics of the Movement. It applies to both the Movement as a whole and as individual components, including some National Societies around the world where representation in leadership is a problem, for example gender balance.

A different view among a couple of respondents was that although colonially derived inequality exists in the world today, it was incorrect to assume that there is structural racism that is specific to the humanitarian sector. These respondents argued that structural racism is everywhere, and it is not just a problem for the Movement or the broader humanitarian sector.

What is clear is that it remains impossible to ignore the deep intertwining of the sector's colonial roots and history with the systemic racism that underpinned the notion of empire, and the way that this still permeates decision-making structures today.

“

In so many countries there are problems – for example in Liberia, there is a huge issue of racism from the Congo-returned slaves who were taken to the US and came back and became a dominant group... When local actors get together, however, there is always a role for external action in that context too. For example, if you think of a couple who have a dispute, there is always a role for a therapist. Locally led action can be helped with this kind of input.

Senior Movement leader

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“

In Ethiopia, racism is very present in the society between different ethnic nationals of different communities. You can also see it in the ICRC delegation, but it exists everywhere. I do not know if it is structural in the humanitarian space. It is more about power between the West and the rest.

Senior Movement leader

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Photo: © Adeso

A hygiene kit distribution in Cuun, Somalia.

3.1.2. Shocks such as Covid-19 provide a glimpse of what positive change could be possible

Major 'shocks' to the system, such as Covid-19, allow some positive change to occur quickly, organically and effectively. The literature review suggests that during the pandemic there has been a commitment to strengthening National Societies through establishing a remit for their leadership to "guide priorities and all international support".¹⁶

The qualitative research findings also reflect this, though perhaps not quite so unequivocally. Participants in the online survey reported an increase in locally led humanitarian action during the pandemic, showing that responding to Covid-19 has been far more locally led than earlier humanitarian action (see Figure 4). Investigation as to why this was the case is warranted, particularly considering that the global push for local leadership is not a new phenomenon. Did the increase in local leadership happen because local actors were perceived as better suited to respond to Covid-19, or was it because they were

willing to take more risks than international actors? Further research should seek to understand not just why the extent of locally led responses increased, but also how this could be capitalised on for more far-reaching humanitarian system change.

In the qualitative findings, respondents claimed that a positive result of locally led Covid-19 responses was greater reach and faster support to local communities (see Figure 5) especially in the absence of international actors who had left or could not move freely due to their own safety protocols. This dynamic was commonly reported, such as in relation to international actors being more likely to adopt work-from-home policies, while local actors continued with more face-to-face activities. Volunteers and volunteer networks were cited as having greatly facilitated access and expanded community engagement, including door-to-door awareness sessions, which were a necessary component for containment of the virus. Respondents also highlighted increased humanitarian action and involvement from non-traditional actors, such as the private sector.



Photo: © Meer Abdullah Rasikh / Afghan Red Crescent Society

A cash transfer and survey programme is conducted in Balkh province, northern Afghanistan, July 2021.

¹⁶ IFRC (2021) Covid-19 Outbreak: 12 Month Update. Automatic download: <https://adore.ifrc.org/Download.aspx?FileId=390029>

Figure 4: Global survey findings

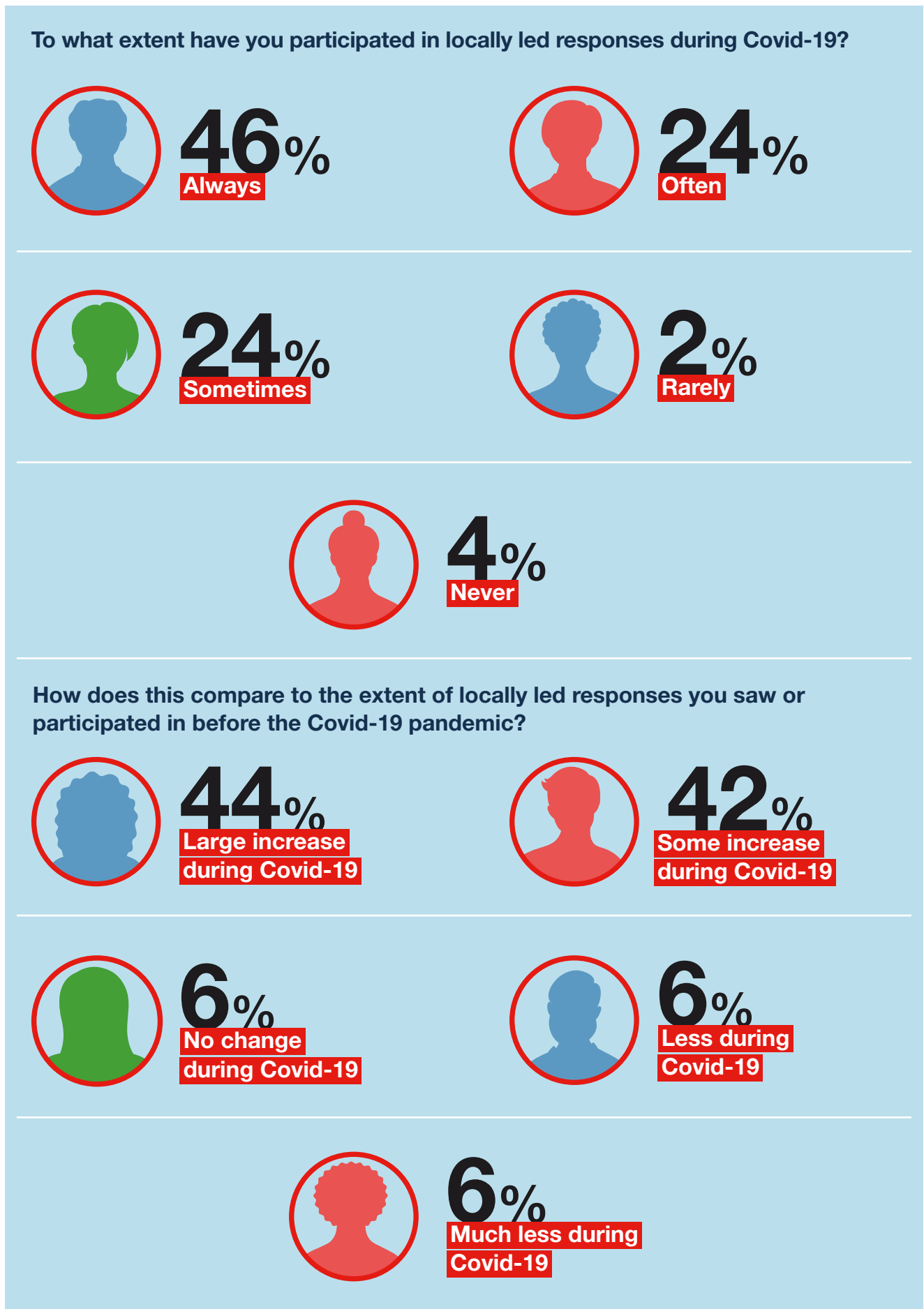


Figure 5: Global survey findings

Enablers of greater locally led Covid-19 responses were identified as:	Barriers to locally led Covid-19 responses were identified as:
<ul style="list-style-type: none"> ✓ local actors having greater reach and providing faster support to local communities ✓ reduced presence of international actors ✓ volunteers and volunteer networks expanding community engagement, including door-to-door awareness sessions ✓ increased and improved local resource mobilisation and involvement of non-traditional actors such as the private sector ✓ better tailoring of the response to local cultures (particularly relevant considering misinformation around Covid-19 and prevention). 	<ul style="list-style-type: none"> ✗ international dominance of decision-making as a barrier to the continued growth of local leadership ✗ international control over programming (top-down relationships) ✗ international actors ‘competing’ with local actors for funding and focusing on bureaucracy rather than the crisis itself ✗ perceived unwillingness of international actors to cede space and mandate to local actors ✗ doubts on whether locally led action would be sustained after Covid-19.

Local actors as first responders

While some international staff remained in the countries they were posted to, many enjoyed the privilege of being able to leave crisis contexts due to the pandemic while still managing and overseeing funds and activities remotely. Research participants viewed this as another indication that the power of international NGOs and the Global North remained intact.

Overall, changing the default model of flying international experts into a crisis has been a symbolic and active dismantling of a colonial way of working. This resulted in local actors and NGOs taking on a greater role as first responders during the Covid-19 pandemic,

offering an insight into what could or may happen when local actors are mandated to lead.

In Kenya, international actors adjusted their technical assistance to offer more flexible online engagement and communication. Although this was not common prior to Covid-19, case study respondents said it was a more effective and efficient way of providing technical support to local and national actors. In Nepal, the access restrictions for international staff resulted in a transfer of insurance protection mechanisms from international to local actors. Previously, local actors worked without any insurance in place.

In some of the country contexts in this study there was clearly greater recognition of local actors as implementers and their added value in being able to directly interact with affected populations. Some National Societies were able to mobilise extensive volunteer networks and access flexible funding, facilitated by the IFRC and ICRC, to meet immediate needs.

Online survey respondents noted that in several countries, including Nepal, Kenya, Sudan, Ethiopia and Lesotho, the local branches of the National Societies and other local NGOs were important as primary responders and enabled local governments to access extensive outreach networks. These networks were often mobilised around public awareness of Covid-19 and preventative measures, hygiene practices, and other activities that helped to curb the spread of the virus, often in the absence of robust testing, health monitoring and services.

Local NGO stakeholders reported that local NGOs' interventions were successful because they understood local dynamics and had more power to 'push back' on what would work due to their continued access to local populations. For example, local NGOs across several contexts reported that international organisations asked them to distribute masks without considering that this would be ineffective without a proper understanding of public perceptions around Covid-19 and the use of masks in their areas. Local NGOs had to push back on what they considered copy-paste Covid-19 interventions, to ensure efficiency and responsiveness.

“

One cannot distribute masks in a context where people believe if one is wearing a mask, they have Covid-19.

Local NGO worker

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The space for Movement and local NGOs was only made possible by the Covid-19 response. Otherwise, internationals would have been in country rather than coaching and supporting from a distance. They helped fill technical gaps in a different way due to their inability to travel.

INGO senior leader

”

The response of local and national governments was also considered positive in that they were able to manage data and collaborate with local NGOs and National Societies to secure needed facilities and services for effective response. While this may not be a new phenomenon, respondents highlighted its importance during the Covid-19 crisis.

Local mobilisation and coordination

Respondents reported that there was an increase in coordination and engagement with other local actors during the Covid-19 response, namely the private sector. This allowed for domestic resource mobilisation to meet needs, such as the production of personal protective equipment (PPE) for communities, as well as the design and implementation of food or cash assistance schemes. In the absence of international actors across certain contexts, local NGOs worked to achieve positive outcomes and increased their ownership of the activities. It was felt that this provided overdue confirmation that local actors had capacity to manage local responses and did not require the heavy costs often incurred by international organisations.

While some local NGOs said having access to more flexible financing and support from international and UN agencies was a key element enabling them to implement their interventions, community and local resource mobilisation emerged as the most positive discovery. Support among community members and the mobilisation of local actors facilitated more effective locally designed initiatives, such as action to boost awareness of Covid-19, secure equipment and services, and ensure that needs continued to be met.

“

If local actors are involved, the greater part of society can be benefited as compared to the international organisation, through much lesser resources and [the] most vulnerable one will be benefited.

NGO programme manager

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National and local NGOs in Bangladesh worked from the beginning of Covid-19 pandemic with the grassroots people. INGOs maintained work from home to ensure health security of their staff.

NGO director

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The Nepal Red Cross Society supports a Covid-19 vaccination programme in Dadeldhura District, Nepal, March 2021.

3.1.3. Case studies from Kenya and Nepal

Effective coordination: Kenya

The response to Covid-19 in Kenya reinforced the reputation of the Kenya Red Cross Society as a strong emergency responder. The National Society played a leading role in emergency response thanks to strong central coordination from the government, which convened a taskforce through the Ministry of Health that served as central command for the Covid-19 response. With the Kenya Red Cross Society fulfilling a longstanding humanitarian auxiliary role to support the Government of Kenya, the taskforce provided the necessary guidance for effective response and delivery. For example, it identified areas of service gaps and vulnerability, created scenario modelling and improved the overall response capacity. The Kenya Red Cross Society was also provided with essential financial resources to support the taskforce, which represented key funding for locally led action in the country. In addition, partnerships with the private sector made extra resources available nationally, secured required materials, and maximised the effective division of labour between the government, the Kenya Red Cross Society and private sector actors.

Some participants noted that there was slight confusion at the start of the pandemic around how to manage needs and address gaps. However, the establishment of the taskforce and the supportive role of the Kenya Red Cross Society enabled centralised and inclusive planning, coordination, strategising and division of tasks among stakeholders. This included the Kenya Red Cross Society also receiving funding of over three million Swiss francs (CHF) through the consolidated IFRC network appeal for Covid-19 in 2020.¹⁷

In a country where the public sector had long been perceived as subpar, respondents suggested that the management of the Covid-19 response by the central government facilitated greater faith and trust in public sector capacity. Overall, respondents in Kenya suggested that the pandemic had been a significant learning curve for all in building faith that local actors can deliver when needed, and that government actors should be engaged as reliable national and local actors and partners.

However, this enhanced role for the Kenya Red Cross Society does not appear to have translated into change for local NGOs, which continued to struggle to secure resources.

¹⁷ IFRC (2021) Covid-19 Outbreak: 12 Month Update. Automatic download: <https://adore.ifrc.org/Download.aspx?FileId=390029>

“

Covid-19 presented an opportunity to engage with other Kenyans. We have to be more assertive in saying we can do this, we cannot do this, set our limits and speak back to funding conditions. Unless the local partners come together, convene themselves, they will remain disengaged. It has to be both international and local actors who participate in this process.

Local NGO worker

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“

We needed to step up – instead of importing PPE, we had local companies designing and manufacturing. We actualised capacities by tapping into local resources because we had to. We used this to build ventilators, the government was engaged and provided needed resources... Our internal capacity came to light – we had good ideas and we can do what we were normally importing.

Red Cross Society member

”

Government management of various resources, including government and Kenya Red Cross Society funds, meant that local Kenyan NGOs felt excluded from decision-making and planning spaces, with only 7% of funding allocated to Kenyan NGOs. According to the UN Office for the Coordination of Humanitarian Affairs (OCHA) Financial Tracking Service, only one local NGO in Kenya received funding through the Covid-19 response plan¹⁸. While a community engagement platform was an attempt to bring in more local actors, Kenyan NGOs felt the mechanism was not genuine and that they were being used

¹⁸ Financial Tracking Service (2020) Kenya 2020. OCHA Services.
https://fts.unocha.org/countries/116/flows/2020?order=directional_property&sort=asc&f%5B0%5D=destinationOrganizationAllTypeIdName%3A131%3ALocal

primarily as a source of information in meetings, rather than as actors with planning or service delivery capacity. As a result, they stopped participating. With the same 'restrictive criteria' in place for funding, local NGOs indicated they were aware that they worked well in local communities and had the credibility to put plans into action, but often felt they were asked to implement or facilitate someone else's idea.

Nepal: A case study in enablers

In Nepal, several factors enabled a strong emphasis on locally led delivery during the Covid-19 response. Firstly, clarity on the division of labour was possible due to a restructuring process involving new policies and guidelines that allowed local government structures to be aligned with local programming. This allowed different local stakeholders and the local government to come together to analyse the situation, set priorities, make decisions and implement them. In addition, the Nepal Red Cross was part of the Disaster Preparedness and Response Committee across the three tiers of the government (now supported by the new Disaster Risk Reduction/ Management Act and Policy), which led to comprehensive planning and implementation.

Secondly, responders highlighted that there was a real-time assessment of the health system for the first time in Nepal. This resulted in greater clarity on capacity gaps within the public health system that could then be resolved by increasing resource allocation and support at a local level.

Thirdly, Nepal already had strong local actors, including the National Society, that had substantial experience and networks – including volunteers – from previous humanitarian crises. As a result, structures and capabilities for a local response were already in place, and partners were able to trust in them from the outset. This track record also meant people were more comfortable with flexibility to ensure an efficient and effective local response when formal decision-making processes could not be followed due to the pandemic.

Finally, some international NGOs in Nepal were responsive and put flexible funding arrangements in place, deploying up to 20% of funds from existing programmes to Covid-19 activities. From a Movement perspective, over 500,000 CHF (Swiss francs) was provided to the Nepal Red Cross Society flexibly through the IFRC network appeal in 2020.¹⁹

¹⁹ IFRC (2021) Covid-19 Outbreak: 12 Month Update. Automatic download: <https://adore.ifrc.org/Download.aspx?FileId=390029>

While significant progress has been achieved in locally led delivery as a result of these changes, there is further to go. The next step to embedding localisation in Nepal would be to learn collaboratively from activities undertaken during Covid-19, and understand what local actors view as priorities to achieve more sustained local approaches going forward.



Photo: © Nepal Red Cross Society

The Nepal Red Cross Society supports a Covid-19 vaccination programme in Jhapa District, Nepal, March 2021.

3.1.4. Final reflections: localisation has not yet been delivered

Overall, the research findings show that greater locally led action was clearly established as a reaction to the circumstances of the pandemic. However, because fundamental power structures have not changed, there has been no solid progress towards the decolonisation of aid.

Although racism was described, experienced and understood very differently in different country settings, it was clear that the proxies for racism and colonialism discussed earlier as two sides of the same coin are a problem in the humanitarian sector. Proxies for racism experienced by local actors include particular mindsets, the way resources are managed, negative perceptions around capacity, having limited agency to make operational decisions, and not being allowed the autonomy to deliver and design responses. These issues tended to remain unchanged during the pandemic in the research settings we explored.

While power has not fundamentally shifted, decolonised approaches have nonetheless become more commonplace throughout non-profit and philanthropic sectors. Ultimately, research participants highlighted that there had been positive shifts in power and towards locally led action during Covid-19, but that continued inequities in overall power dynamics throughout the pandemic were proof that 'localisation' has not yet been delivered.

The pandemic appears to have led to a realisation and acceptance in many settings that locally led action is a sufficient and suitable way of delivering humanitarian support. By extension, the obvious capacity of local actors in these contexts has led to the realisation among some that international surge capacity is not needed as a standard part of responses.

In many contexts, international staff were absent because of restrictions and safety



There is no significant change in power due to Covid-19. Overall, of course, it does need to change. It has already been agreed. The first responders should be given – e.g. multiple year funding. It has been agreed but not translated. We are not in confusion – [localisation] has not been happening as it has been promised.

Senior National Society representative



protocols in response to Covid-19. This gave local teams a greater sense of agency, even when international staff continued to offer online technical assistance. In addition, the mobilisation of local volunteers and partnerships with the private sector and other local institutions has set up longer term capability. In terms of the Movement, the research findings show that National Societies in Kenya and Nepal have fulfilled their auxiliary roles and refined their contingency planning and multi-planning capabilities.

As one interviewee commented:



Localisation was going out of fashion and then Covid-19 came.

INGO representative





Hygiene kits are prepared for distribution in Qoton, Somalia.

3.2. The deep philosophical divides entrenched in existing power structures are pervasive

As work by Cornish, Howe, Slim and other humanitarian thought leaders has referenced, at the heart of understanding localisation is the acknowledgement of entrenched power dynamics within the humanitarian sector.^{20, 21, 22} For many actors, promoting the localisation agenda is an implicit, if not explicit, acknowledgment of the power dynamics that have traditionally excluded local actors from the decision-making space. However, fundamental differences exist in the ways in which concepts such as localisation are understood and/or practically used by international and local organisations. As highlighted above, power dynamics within the humanitarian sector impact on the way in which these philosophical differences on key concepts play out in

practice. When assumptions of an inherent efficiency in Western ways of managing operations or addressing problems are held by those who are favoured in existing power dynamics, the challenges of actually shifting this are complex.

The challenges that emerged from the research were even more striking in the two conflict settings that were analysed. Like local actors in other contexts, those in Yemen and Somalia expressed frustration with a seemingly obstinate humanitarian sector that is either unwilling or unable to adjust its current way of working to accommodate international commitments on the localisation agenda. While respondents in other contexts also expressed similar sentiments around a complicated journey to locally led action, the picture emerging from conflict settings was of much less agency for local organisations and a stronger sense of negative assumptions being projected onto them.

²⁰ Cornish, L. (2020, June 3) Is it finally time for the Localisation agenda to take off? Devex. <https://www.devex.com/news/is-it-finally-time-for-the-localization-agenda-to-take-off-97323>

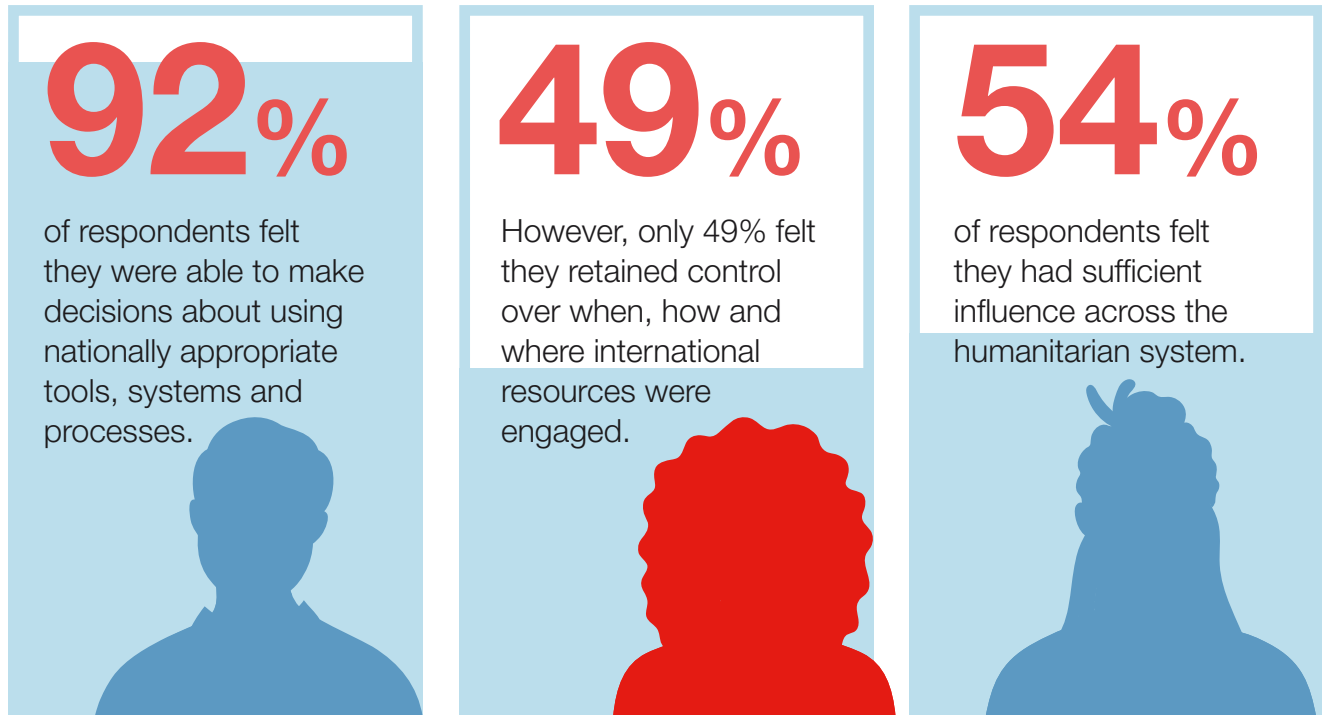
²¹ Howe, K., Munive, J., & Rosenstock, K. (2019) Views from the Ground: Perspectives on Localisation in the Horn of Africa. Tufts University. <https://fic.tufts.edu/publication-item/perspectives-on-localization-in-the-horn-of-africa>

²² Slim, H. (2020) Is racism part of our reluctance to localise humanitarian action? [Blog]. Humanitarian Practice Network. <https://odihpn.org/blog/is-racism-part-of-our-reluctance-to-localise-humanitarian-action>

3.2.1. Locally led action

Figure 6: Global survey findings

Do you feel that you are able to make decisions about locally led action in your country, in regards to the following?



Photo, © IFRC/British Red Cross

Indian Red Cross Society staff and volunteers support Covid-19 response efforts within Indian communities, May 2021.

The literature review revealed that there are a range of definitions of ‘localisation’ and an absence of clear, qualifiable indicators to measure the progress of locally led commitments. This means it is hard to measure and infer when locally led action has meaningfully occurred, including in the context of Covid-19. Equally, the binary discourse between what is considered local and international risks being reductive and does not take into account the vastness of the humanitarian response community and the nuances within it.

The dominant definition and understanding of localisation among local actors participating in this research revolved around “the exercise of agency and initiative”. In this sense, local actors see themselves as belonging in the driving seat: setting priorities, developing approaches and identifying and securing

the types of resources necessary to meet their needs. This is reflected in the research finding whereby partnership approaches such as complementarity were considered to still represent continued external power, monitoring and control, for example in programme design and review. The majority of case study participants viewed success as the power to secure, manage and allocate resources and shift decision-making from funded, international actors to local organisations providing services on the ground. One respondent commented that 'locally led' also implied curbing dependency on external resources.

Localisation also emerged as a model that humanitarian work must apply to maximise responsiveness, efficiency and effectiveness. Among research participants, an NGO manager defined localisation as **the power to design, coordinate, implement and monitor the interventions with the support of international counterparts.**

It is marked by thinking and planning being done by and with affected communities, which increases their ownership and authority to decide how resources are managed to match priorities.

How do you define localisation?

“

Shifting the power to local stakeholders to lead or meaningfully participate in humanitarian actions.

NGO deputy director general

”

“

Community based and participatory, not dependent on external aid.

NGO communications head

”

“

Localisation... increases the leadership and authority of affected people in determining how response resources are used within their communities to address their priorities.

NGO programme director

”

“

The support that the affected communities receive is determined and planned by themselves, in collaboration with the technical experts.

Red Cross Red Crescent Society programme director

”

Interview data highlighted that power dynamics are perceptible in every meeting, from who can participate and who can get online, to who gets to speak and the privilege afforded to English speakers. Research participants also said that rather than building capacity to euro-centric or Global North norms, it is important to move away from traditional project management approaches. Participating local NGOs, in particular, viewed increasing fundability as a diversion from a more difficult discussion on shifting power and addressing more structural challenges. Sensitive to these points, actors from local NGOs asked what localisation aims to achieve if power dynamics are not questioned or addressed.

It should be noted that from the point of view of many local NGOs participating in the research, both national and international actors are hindering the localisation transformation. Clusters and humanitarian country teams, two key coordination structures in humanitarian settings, are dominated by the UN and international NGOs. Even if they are given a seat at the table, local actors are not able to effectively engage in these coordination mechanisms. This is because capacity issues such as limited staff time, language barriers and the jargon of the sector make it hard for them to fully participate in the discourse. Also, these Western-dominated coordination mechanisms focus on scale and rapid response rather than the deep indigenous knowledge of the context and strong networks that all local actors have. Because value is placed on scale in this way, priority and funding are given to the UN and international NGOs that are able to open multiple offices in a country and rapidly deploy staff through their own internal funding as they fundraise.

In Kenya, the Kenya Red Cross Society re-established the dormant Cash Working Group (CWG) and later ensured that the government took a leadership role. This eventually led to the

National Society becoming permanent co-lead of the CWG. Similarly, the Nepal Red Cross Society was co-chair of the country's CWG from 2019 to 2020, and was instrumental in initiating discussions with the government to better support local and national governments' use of cash and vouchers in the humanitarian response. While these examples are positive, the chairs and co-chairs of the primary clusters, such as health, education and food security, continue to be dominated by the UN and international NGOs.

Given international funding dynamics and how they impact countries like Nepal, both actors from local NGOs and National Society respondents said that there should be more locally led government-supported mobilisation, including general coordination, to foster greater national collaboration. However, participatory styles of collaboration were still not seen as the norm, and factors such as education level, remoteness and poverty meant there were not enough local actors in decision-making structures to make domestic resource mobilisation a reality.

Respondents expressed the hope that, moving forward, local actors would convene discussions rather than simply participating in them, and design initiatives rather than only implementing them. While there are many co-leadership models for local actors, the practicalities often make it difficult for people to take up such roles – for example, the requirement that postholders work full time. These are the challenges inherent in the humanitarian system which need to be addressed.

3.2.2. Complementarity and partnership

Research participants from the Movement recognised that the British Red Cross and other Movement actors had worked hard in recent years to reassess how they work with other National Societies, and that a core

philosophy of empowering local communities has underpinned this work. For example, National Societies develop their own National Society development plans based on self-assessment and their own priorities. Using this method, the Somali Red Crescent Society produced a progress report around its eight key priorities, which Movement partners support.

That said, research participants identified that Global North concepts of complementarity can become an impediment to true power shifts. Or they can be an excuse to maintain what are seen as existing neo-colonial structures, such as decision-making structures or processes of evaluation and accountability (and their roots in systemically racist systems). Research participants from the Global South identified the need to begin any work related to ‘complementarity’ with a horizontal approach that gives equal value to all participants in any initiative in a tangible way. Participants reported that this kind of democratic model would be more likely to lead to humanitarian response systems where Global South actors (local NGOs and National Societies) have power and agency and can be drivers of local responses. This approach, coupled with international involvement when and where necessary as set out in the Grand Bargain, would lead to complementarity as a force for authentic, genuine, locally led outcomes that also challenge the systemic racism that underpins those structures.

The majority of research participants who were local actors acknowledged that while technical guidance, like surge support and funding, forms a critical nexus of interaction with international actors, the concept of complementarity should drive international actors into a supportive, secondary role. While funding and financing are a key function of power, the majority of country case study respondents and many of the participants

in key informant interviews (KIIs) agreed it was not enough to simply transfer funds from international organisations to local organisations. Assumptions and dynamics that perpetuate these power imbalances must also be constantly challenged.²³



The sector continues being obsessed with funding instead of making the response architecture efficient and making it win-win by giving space to local actors.

NGO CEO



Roughly a third of survey respondents indicated that the sustainability of the locally led responses that emerged during the pandemic depends on the decisions of those who currently hold power. These respondents pointed out that it is power structures that currently sustain international dominance in the humanitarian system. Those wielding power in terms of funding are organisations that represent ex-colonial powers and/or, generally, countries in the Global North and their institutional representatives.

Many respondents in the country case studies and KIIs described a frustrating reality for local actors who felt that international actors continued to be protective of their ‘complementary’ role and were unwilling to cede space and mandate to local actors. There was a sense that localisation will not be achieved until power has changed hands and there is more genuine partnership, including respect and trust towards local actors, moving away from the current institutionalised colonialism.

²³ Similar issues on funding and relationships are highlighted in: Austin, L., & Chessex, S. (2018) The Case for Complementarity. British Red Cross & International Committee of the Red Cross <https://glocalisation.ifrc.org/wp-content/uploads/2019/03/British-Red-Cross-The-Case-for-Complementarity.pdf>

“

This could only happen if the INGO let go of their insecurity of losing power, invest in the capacity, development of the [national] NGOs, build in their system and establish a true partnership that is based on respect and equal funding access.

NGO programme director

”

This is further complicated by a trend among international agencies in establishing local franchises that compete directly with local organisations for resources and funding as ‘local’ actors. As far as local actors are concerned, this is disingenuous and a clear threat to the localisation agenda.

There is recognition that a different type of investment is needed to achieve a greater transition towards more equitable partnership

and locally led action.²⁴ Respondents highlighted particular contexts as examples of progress made in the Movement, such as in the Australian Red Cross, which moved away from having staff based overseas in favour of core funding as a key component of localisation. However, the inherent contradiction in the idea that complementarity can be mandated when specific inputs are often needed from a British Red Cross overseas branch was mentioned:

“

We always operated as our own National Society and we’re often left to our own devices. This generally changes when something happens and we need to react, fundraise, and we are asked to coordinate, communicate and here we feel less heard or understood.

National Society leader

”



Photo: © Nepal Red Cross Society

The Nepal Red Cross Society supports a Covid-19 vaccination programme in Baitadi District, Nepal, in March 2021.

²⁴ Recommendations along similar lines were made in: Austin, L., & Chessex, S. (2018) The Case for Complementarity. British Red Cross and International Committee of the Red Cross. <https://gblocalisation.ifrc.org/wp-content/uploads/2019/03/British-Red-Cross-The-Case-for-Complementarity.pdf>

3.2.3. Funding

In the survey, 62% of respondents agreed that funding and ways of working had shifted to support localisation during the Covid-19 pandemic, while 66% respondents agreed that Northern donors supported localisation more generally (see Figure 3).

In Nepal, USAID localised its funding instruments by disbursing directly to local partners and resourcing local ideas during the pandemic. In interviews, this example was cited as significant and it was argued that this shift represented a radical change in approach. However, it was recognised that many other powerful donor agencies still needed to evolve and change their mindsets in similar ways.

In terms of Movement funding to the Covid-19 response, the IFRC's revised Covid two-year appeal in May 2020 was for CHF 1.9 billion, of which 78% (CHF 1.55 billion) was requested to be channelled directly to National Societies and CHF 450 million to be channelled (at least in the first instance) to the IFRC.²⁵ Of the latter amount, approximately half of funds received in 2020 were passed on to National Societies for their own spending and another 20% was spent on cash transfer or procurement of relief and other items distributed by National Societies.

Where international agencies provided more flexible core funding – such as in the Pacific with the support of the Australian Red Cross and New Zealand Red Cross – local actors were able to respond better while also building future capability with the confidence of having long-term core funding commitments.

These examples of localising funding and moving beyond immediate and short-term approaches are practical illustrations of how

to start implementing and embedding locally led humanitarian action. As such, they also represent commitments to decolonisation and anti-racism. Such a transition obviously needs a multi-year commitment to change by all partners, as well as a clear transition schedule and pathway so that local actors have enough time to create strong and independent organisations.

However, overall, the literature revealed that despite commitments in the humanitarian aid sector to supporting locally led action during the pandemic, the majority of funding flows continue to privilege international actors. From the beginning of the crisis until October 2020, 66% of humanitarian funding was channelled through multilateral organisations such as UN agencies, with significantly smaller levels channelled directly to NGOs, civil society organisations, the Red Cross and Red Crescent Movement and the public sector.²⁶ NGOs had received 12% (US\$645 million) of total humanitarian funding for the Covid-19 pandemic response. Further, outside of the Global Humanitarian Response Programme (GHRP), only a very small proportion of funding for responding to the humanitarian need associated with the Covid-19 pandemic (4.0%, or US\$498 million) had been received directly by NGOs. Multilateral organisations had received 52% (US\$1.3 billion) of this funding outside of the GHRP, the public sector received 19% (US\$456 million) and the International Red Cross and Red Crescent Movement received 12% (US\$285 million).

²⁵ International Federation of Red Cross and Red Crescent Societies (IFRC) (2020) Emergency Appeal COVID-19 Pandemic: Revised Appeal MDRCOVID19. <https://reliefweb.int/sites/reliefweb.int/files/resources/MDR00005REA3%20%20%281%29.pdf>

²⁶ Development Initiatives (2020) Financing humanitarian needs amid the Covid-19 pandemic [Factsheet]. <https://devinit.org/resources/financing-humanitarian-needs-amid-the-covid-19-pandemic>



There are so many INGOs working – they are in the communities. They have maintained their influence. Their relevance. Money is power, no? The INGOs say what is right. With strong national organisations, these funders might have less bargaining capacity but will small agencies, the funders have a lot of influence.

INGO senior leader



Despite many changes in how work was organised and implemented during the pandemic, research participants reported that there had been virtually no significant, meaningful, authentic shifts in power or decision-making in relation to funding and allocation of resources. While respondents reported that communities' needs had been more or less met during the pandemic, they also highlighted that this was likely to not be sustained due to the wider ethos underpinning humanitarian action. For example, one respondent in Kenya pointed out that the humanitarian sector was still based on the concept of charity and an entitlement to decide when "I want to give or when I do not want to give", and this had an impact on how responses were designed. In Nepal, respondents suggested that there remained an attachment to the status quo because of the power and the overall relationship between local actors and bigger international NGOs.

This was confirmed in the online survey feedback. Out of 51 respondents, 15 indicated that greater cultural or structural changes were still needed among international donors and agencies for them to relinquish control and provide 'buy-in' to the localisation agenda. Without this, the view was that donors and international agencies would be unable to build the skills and capacity they

themselves need to be good partners and/or invest effectively in the mechanisms needed to sustain locally led action.

Some research participants said that more flexible and multi-year committed funding streams would help deliver far more strongly on commitments to localisation. With more long-term funding in place, there could be greater investment in local structures, and locally delivered initiatives could be intentionally designed rather than reactive to immediate needs. Such an approach to equity was seen as essential for a decolonised approach to become the norm.

Ultimately, 100% of respondents in country case study settings cited funding as one of the main mechanisms fuelling existing power imbalances. They felt that any reliance on any kind of international support inherently brought with it issues of power and control. In Kenya, local NGOs highlighted that these structural barriers did not change during Covid-19 regardless of commitments to locally led action or progress on locally led activities. Funding modalities and requirements remained mostly the same and access to unrestricted funding was just as hard to get as before. This was further exacerbated by the reality that local organisations did not have the capacity and know-how to raise international funds, so even if mandated to do so, they could not operate within the wider funding environment.

The research leads to the conclusion that decisions and funding continue to be in the hands of the Global North and ex-colonial powers. This perpetuates existing systemic imbalance between the Global South and Global North, with funding decisions in particular being implicated in concerns about fiduciary and operational risks and compliance.

Some respondents from the key informant interviews commented that the funding made available during Covid-19 was landing somewhere between relief and resilience – essentially, meeting immediate needs, without shifting into longer-term development funding. This hampered the development of any preventative capacity for any future disasters. Some National Societies reported that investment in disaster risk management was not supported by funders and that this meant resources continued to be spent on short-term responses at the expense of longer-term prevention.

In Nepal, it was recognised that in a highly competitive funding landscape, where much funding in the last decade has been re-allocated across Africa, some local agencies would accept funds on any terms they could. It was argued that funding came and went but failed to build locally-owned capacity, only “glossy reports” for funder communications. For example, local evaluation capabilities were cited as weak and as a result, before Covid-19, this had been used to justify representatives of big funders staying in communities in an auditing and oversight capacity until projects were completed.

“

But then they leave and nothing is sustained. The big funders come – they are experts. The experts are not from the community. Low chances of sustainability. When you empower local organisation[s], more chance of sustainability. Why do they do this? Maybe they want to prove their relevancy, prove their existence and they can produce good glossy reports, but this doesn't change much in the community.

INGO senior leader

”

The research identified that immense needs brought on by conflict exacerbated the lack of access to decision-making by most local actors/respondents. While in some contexts there was a reported relaxation of funding mechanisms to ensure access for local actors during the Covid-19 pandemic, in the two conflict settings analysed in this research, respondents reported no such change. In fact, respondents felt the everyday difficulty they faced in organising and directing funding became more palpable during the pandemic, which was an impediment to the localisation agenda. Some local NGOs in both Somalia and Yemen felt that they – and the local authorities they coordinated with – only had the ability to refuse funding that was being offered by various donors or modalities, rather than directly securing funds for identified priorities. A programmes manager working in a local NGO expressed a similar sentiment:

“

We could not express this to donors – we need support, so we say yes, it's up to you, donor. Emergency response, fine, that's what you want. We do not have ability to negotiate our needs. The decision maker in the situation is the donor. We are not empowered, and sometimes funding goes in areas that are not really needed.

NGO Programmes manager

”

“

Funding is earmarked and conditional for Covid-19, this is not matching our priority. There needs to also be flexibility in the funding. We need to present our needs. If we present assessed needs and we say this is our issue, this is ignored. Other projects are pushed that are completely irrelevant and bound to fail.

LNGO worker

”

While other countries reported greater cooperation with the private sector, actors in the two conflict contexts did not highlight this as part of the response in Yemen or Somalia. In the end, this left them feeling that they had “not been left in the right place to do better” by international actors. In Yemen, this was further complicated by an overall decrease in funding in the country, irrespective of the Covid-19 response. This point was not disputed by Movement actors in Yemen, but was explained as potentially exaggerated local frustration with international priorities due to an overall decrease in funding in Yemen, set against increasing needs.

All local actors reported that they did not require the heavy administrative and overhead costs incurred by international actors for any response. If efficiency was the priority, support for local actors was seen as a more efficient approach for meeting needs.

3.2.4. Capacity building and accountability

Three key issues emerged in relation to capacity building for local NGOs.

First, capacity building as a concept is usually seen as something that local actors need to work towards, and this is often used by international actors to avoid relinquishing any power. It is also important to note that capacity building is an ongoing, essential part of any organisation but the assumption is often that only local actors need to do it. Further, capacity building is seen as something to be done to local actors by international organisations, rather than something that all sides need in different ways.

For example, respondents in Nepal questioned the lack of trust shown by international agencies and donors even before the pandemic. Despite having previously demonstrated a high capacity for



The prevalent perception, negative attitude and lack of trust towards national and local NGOs will remain unchanged under the pretext of low capacity, funds mismanagement and many other reasons known to them. The rigid eligibility criteria set against national and local NGOs by big donors.

NGO national director



effective humanitarian responses, a remote management approach was still being used. These observations were echoed in the global survey, with respondents reporting that low capacity issues were used as an excuse for not letting go of power.

Within this dynamic, there is also often a particular emphasis on financial due diligence as a priority over community capacity and local knowledge. Not ignoring the need for financial transparency and compliance, this dynamic can be interpreted as racist, and the triangulation of the data and the literature in other sections of this report confirm this. As long as two different contradictory standards of capacity exist – where local actors are perceived to have limited capacity and always need capacity development, while international actors are considered to have technical capacity and a better ability to manage funds with detailed requirements – then structural power imbalances within the sector will continue to be enforced. This will continue until funding dynamics change and power is no longer predominantly situated in the Global North.

In terms of the Movement, however, this is also balanced with the fact that in some National

Societies there are capacity development areas that do need to be addressed. This analysis does not mean that capacity building requests, often made by National Societies themselves, are wrong and should not be made or considered in pursuit of an anti-racist agenda at British Red Cross. This work is about dialogue and understanding why particular National Societies depend on external resources to develop strength and resilience according to their own context, and how colonially derived this dependence is.

Second, capacity building can become overly focused on the needs of the international partner over those of the local partner if it is conducted without due consideration and a meaningful partnership ethos. When this happens, it is often led by a desire to establish required international or Global North standards or approaches which may be at odds with the priorities of local organisations – and as such can be seen as reinforcing cultural dominance and colonial approaches. Recognising this dynamic should force the system to interrogate and acknowledge the colonial underpinnings of ‘capacity building’ as both a goal and a concept.

Third, both the literature review and case studies explain and infer, respectively, the use of ‘capacity-building’ – as both a concept and a goal. Literature suggests it is often seen as a way to exert soft power by international actors over local actors and it is often felt that humanitarian and development actors collude to advance foreign policy goals. This is further substantiated by literature regarding power, colonised humanitarian practice, and systemic or institutional racism.

This is not to say that the need for additional ‘capacity’ was not expressed in the contexts researched and there are, in fact, a range of views about capacity building in the findings. In Kenya, for example, capacity development was seen by local actors as a priority to ensure a timely Covid-19 response in the absence of international agencies.

While accountability to donors and, where relevant, their taxpayers is important, there is a need to recognise the damaging impact the narrative that local actors lack capacity has on truly decolonising the sector and making it anti-racist. Rather, it is important to engage in a discussion on how to mutually strengthen capacity. Local actors also face a barrier to developing compliance systems that meet the standard of international NGOs without unrestricted funding, something that is almost unheard of for local actors. The reality is that international organisations have developed sophisticated compliance systems over the past 50 years through investment by donors either through indirect cost rates (e.g. the USAID NICRA rate for some US international NGOs can be as high as 30%) or through partnership framework agreements that provide multi-year flexible funding. These luxuries are rarely provided to local actors.

The findings suggest that, moving forward, there should be a focus on demonstrated, measured shifts to long-term, flexible core funding for local actors. A measurement matrix needs to be developed that the Movement and wider humanitarian aid sector uses each year to test progress and transparency on who is shifting funding and who is not. There also needs to be work done to explore the cultural and mindset shifts needed on all sides.

3.2.5. Principled humanitarian action

The Fundamental Principles of the Movement and subsequent humanitarian principles adopted by the broader humanitarian sector, bear universal relevance. Local actors passionately highlighted the importance and relevance of the humanitarian principles in facets of their work. In the findings, 44 out of 47 respondents said humanitarian principles guided a framework of behaviour and approach which ensured consistency and

high standards for all humanitarian actors. The majority of respondents emphasised that the humanitarian principles were a critical and central part of their work – guiding their programme approach, staff development and overall philosophy.

It is also worth bearing in mind that respondents often conflated the humanitarian principles and the Fundamental Principles when sharing their perspectives around the practical implementation of principled humanitarian action.²⁷

However, the Fundamental Principles and humanitarian principles are at the heart of an international humanitarian system that was built on and still upholds structures that, as discussed above, enable the Global North to wield significant power over the Global South. This is reflected in the research, which shows that these principles, as a bedrock of the humanitarian system, are often used by Global North institutions in ways that reinforce or support the colonial dynamics still prevalent in the structures and operations of the sector.



All the key humanitarian principles can support locally led humanitarian action if INGOs change their mindset of being the experts in the local context.

NGO programme director



²⁷ This section primarily explores the humanitarian principles adhered to within the wider humanitarian sector, namely: Humanity, Neutrality, Impartiality and Independence.

““

All the list of principles will support anti-racism when applied by all the concerned parties and partnerships. It at times depends on the commitment of the concerned actors in all shared responsibilities.

NGO CEO

””

Principled humanitarian action as a force for positive change

Principled humanitarian action can and should play a major role in supporting the agendas of locally led action and anti-racism. There was a clear majority view from research respondents that the application of the Fundamental Principles and humanitarian principles by all enabled greater trust, influence and humanitarian action at the local level, with 90% of respondents reporting that the principles were key enablers of locally led action. Local actors were asked about why they had more access locally than international players. Most said it was because of their implementation of the humanitarian principles and Fundamental Principles, along with deep local knowledge, an awareness of historical context, a local volunteer base and an understanding of and connection with those experiencing most vulnerability.

When asked whether the Fundamental Principles and humanitarian principles might support or hinder locally led action and/or efforts to support anti-racism, 44 of the 47 respondents reported that they believed they supported both outcomes. Overall, most respondents felt they were positive, but that it depended on how well they were applied by all actors, the mindset with which they were applied and the continued existence of power imbalances.

““

Impartiality is an enabler or it should be – let the best proposal win, let us not look at who the people are, deliver equitably to all. That can also enable our anti-racism efforts, if practiced authentically.

NGO country director

””

““

Humanity should be an enabler of locally led action and support to anti-racism. If people declare they subscribe to this principle, then their actions should follow that.

NGO country director

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At a more macro level, there is a significant opportunity for the humanitarian and the Fundamental Principles to be a force for positive structural change within humanitarian organisations and the Movement. They can support the dismantling of the colonial nature of the sector and the move towards a more locally led approach. For example, the definitions of the principles of Humanity, Impartiality and Neutrality, are inherently non-discriminatory in their intent and meaning, and can help to drive a broader anti-racism agenda. In this sense, for the Movement specifically, the Fundamental Principles could also be a useful lens and tool through which to better understand and find solutions to some of the key challenges raised by respondents, such as funding mechanisms and capacity building. For example, the principle of Independence broadly supports a spirit of autonomy and agency of National Societies. Consideration of how this principle is currently applied in practice alongside Unity and Universality could provide genuine pathways towards mobilising the Movement in a far more locally led way by critically examining existing systems, processes, mindsets and behaviours.

Challenges

Two key challenges relating to the Fundamental Principles and the humanitarian principles emerged from the research. In both cases, the principle of Neutrality was noted as particularly contentious.

First, international organisations can require an unequal application of the principles, allowing themselves a degree of flexibility and pragmatism they do not afford to local actors. Many local actors felt international organisations required them to show that they operated within the strictest possible application of principles such as Neutrality, Independence and Impartiality in order to be considered 'trustworthy' and have a seat at the table.



So when I said I want to be the lead as an organisation within the Movement, the point was, I had to prove beyond reasonable doubt, I'll be neutral, I'll be impartial, I'll be able to provide services on all sides of the conflict. Because that's always the perception that you, as a small developing society in an African country, you can't do that. So we have to bring the white folks to come with a flag to say, they're the ones who will be impartial or neutral and whatever.

Red Cross Society worker



Second, the vast majority of respondents reported that a shift to locally led action was entirely possible, but that Neutrality, Impartiality and Independence were all used by international actors to defend the status quo and justify why a range of actions that would assist in enabling greater local participation, autonomy and leadership would not be appropriate. The findings suggest that this dynamic impacts many areas of humanitarian operations controlled by international agencies, including access to decision-making, information and planning. One third of respondents had heard donors or international agencies saying that locally led response was not possible because local organisations were not neutral or impartial.

““

So when people talk about impartiality, it's also skewed in this way, they don't trust you, or that you'll be impartial.

NGO representative

””

““

Neutrality has almost [become a proxy for] the rationale for internationalism. We need critical conversations around this.

National Society leader

””

““

Even the kind of English you need to speak to access these spaces is biased to Northern contexts. It's very hard for people from the Global South to be leaders in these decision-making settings, which is what is needed. The principles are used to [maintain] advantages. People interpret them for their own benefit.

INGO senior leader

””

““

Neutrality can be a hindrance if international actors see themselves as 'more neutral' than local actors... we should not be neutral as humanitarians when it comes to defending rights and lives of people. We are neutral in the sense we do not participate in a conflict as an interested party or take sides.

NGO country director

””

There was a sense that the view of a local actor not being able to be neutral in a humanitarian context was itself rooted in colonial and racist sentiment, and this idea has flourished in the postcolonial humanitarian and development sectors. This sense of questionable neutrality emerged as a repeated theme across participants, geographies, roles and organisations.

Local organisations' awareness of negative assumptions about them by international actors appears to be more acute in conflict settings. For example, in Yemen, local organisations reported that their desire and requests to negotiate space for their projects tended to result in them being perceived as an extension of local authorities or conflict actors. This kept international agencies at a distance in engaging local organisations, as explained below:

“

Local actors engage with national actors to move their projects, they are the ones negotiating space. Local NGOs are impartial and use Sphere standards, but because we are so local then [they assume] we must be 'in bed' with local actors. This is [the] international perception of LNGOs.

NGO worker

”

“

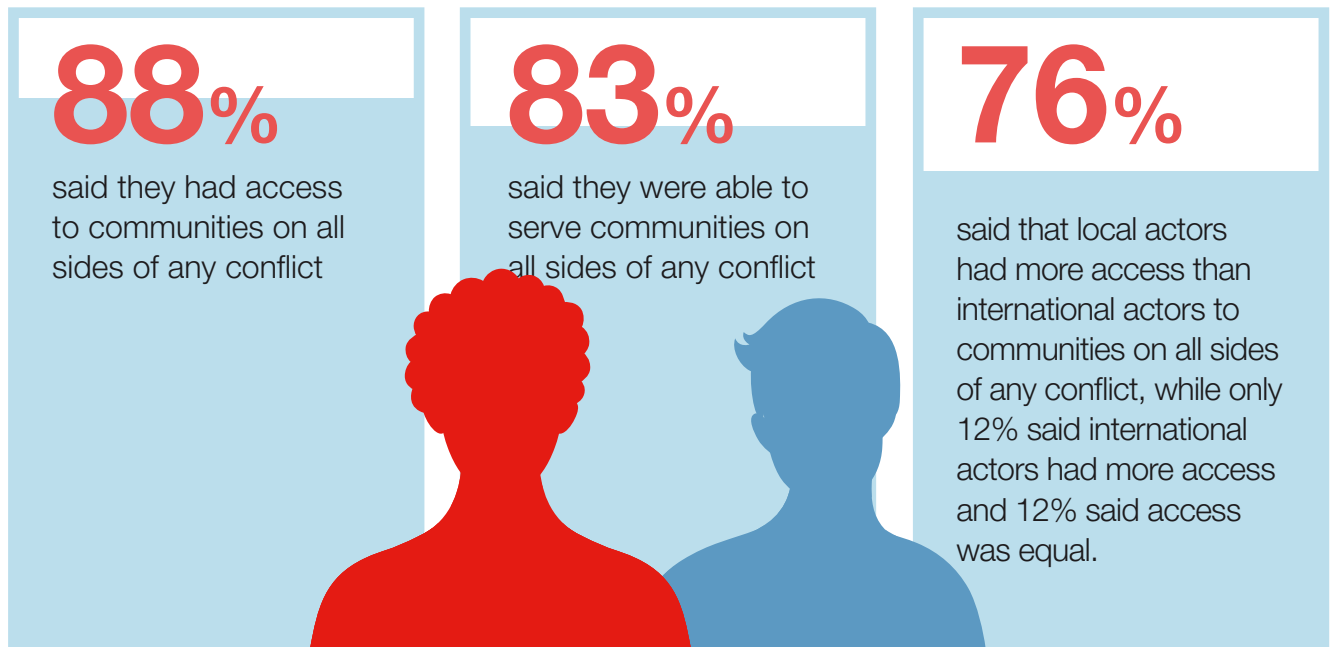
Local organisations are neutral, and the international organisations are not. As an example [we] have access to all parts of Yemen, if [we] did not [we] would not be able to implement any projects – it's the local organisations that are able to build these relationships. It is the international organisations that have biases towards where the money goes, and who gets support... Local NGOs have a strong role but are challenged constantly by international organisations.

NGO worker

”

This is extraordinary, given the strength of confidence respondents to the global survey showed in their own neutrality:

Figure 7: Global survey findings



The research project also looked at issues around humanitarian access in conflict settings, where local actors are often better situated than international actors to navigate complex armed conflict contexts. The findings reinforced this idea, with respondents expressing very positive views about local actors' ability to access and serve all populations affected by armed conflict.

The qualitative responses to the global survey on power and racism provided very logical explanations for why this was the case. The following quotes are indicative of respondents' views, reinforcing the importance of local actors in conflict settings.

“ [Local organisations] appreciate the contexts and historical influences that led to the current situation. ”

RCRC programme director

“ We have more access to conflict areas as staff are signed from these areas and we have access to information and [can] assess the needs of affected people. In addition, we can deliver assistance to people in different areas as staff are more familiar with the area, climate and context. ”

NGO programmes manager

““

[It is] better you understand the context of the conflict [to] better your chance to find the solution. We as local actors know more than international organisations about the value[s] and cultures of the local people and how to deal with them in response, and [how to] mobilise the community to help the organisation reach vulnerable communities at different areas under conflict, while keeping the neutrality and impartiality, as well as abiding to local and international anti-money laundering or countering terrorist financing laws.

NGO M&E Manager

””

““

The NGOs' local knowledge in the context, community dynamics and familiarity with local cultures will enable us to respond effectively.

NGO national director

””

In addition, national NGOs are subject to restrictions by donor governments, particularly in a conflict setting. Local organisations in conflict contexts stated that when donors stop funding in parts of the country due to political decisions related to conflict actors, they see needs increase. These needs then go unmet due to either partiality, lack of independence or a flexible interpretation of neutrality (or a combination of all three) by their international counterparts.

While the potential failure of local organisations to apply the principles of Neutrality, Independence or Impartiality sufficiently strongly is absolutely a risk for international actors that should be taken seriously, the opposite is also equally true. International actors that are less consistent with their application of Neutrality and Independence in particular can jeopardise

long-term and carefully built relationships by local organisations that have Neutrality at their foundation. Yet many local organisations do not hear this inverse risk discussed in the same way or to the same degree as the risk posed by local actors to their international counterparts.

These challenges highlight significant unconscious bias and the pervasive power imbalances within the humanitarian architecture.²⁸ Some local actors felt the principles were applied in a way that enabled international actors to avoid handing over power, autonomy or agency to local organisations. If commitments to anti-racism within the sector are to be taken forward, the intrinsic link between how the principles are applied and the preservation of the status quo must be acknowledged and addressed.

3.3. Specific challenges in conflict settings

While many of the same dynamics existed in Yemen and Somalia, they were more acutely difficult to overcome due to the specific challenges and contexts facing conflict countries. Issues articulated under finding one of this research – the overall unequal power dynamics and persistent structural racism within the humanitarian sector – were also factors. However, there were three specific challenges that were particular to local actors operating in these two protracted conflict settings.

3.3.1. Priorities are different

Both Yemen and Somalia have been dealing with severe long-term consequences of armed conflict. It is therefore not altogether surprising that in Yemen, some respondents expressed disappointment about the prioritisation of Covid-19 among donors, at the expense of other critical needs facing the country.

“ Covid-19 is not the main risk, war is the main risk. **NGO worker** ”

This international ‘panic’ meant that available resources were driven by donors to address the pandemic while actual and broader risks identified by communities themselves went unfunded. For example, since 2015 Yemen has been battling malnutrition, food insecurity, limited access to clean water and a series of epidemics, including cholera, malaria, dengue fever and chikungunya. In addition, according to the Yemen Health Cluster, a failing health sector has reduced facilities to a capacity of 50%, with over 70% of health professionals not collecting a salary through the public sector.

Local respondents explained that what was needed – but not forthcoming – was a clear shift to investment in local capacity, rather than continued ‘response’ funding focused on soap and hand sanitisers.



DRC Red Cross volunteers go door-to-door talking to the community in Beni about safe health practices

²⁸ Martins, A. (2020) Reimagining equity: redressing power imbalances between the global North and the global South. Gender and Development. 10 March 2020.

“

Shifting funding from food baskets to more sustainable actions to allow us to help ourselves. This is not about money – we need to work for balance between need and funding. Covid-19 funding is not enough because we already have structural challenges in dealing with Covid-19. You have to take a step back and work on the overall sectoral capacity. A ‘response’ is what you plan when you have existing infrastructure. Germany plans a ‘response’, we’re trying to build our basic capacity.

NGO worker

”

3.3.2. Colonial decision-making structures are impermeable

The structures operating in conflict countries rely on the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) as a convening space, along with the traditional cluster system. The more optimistic respondents reported that decision-making spaces were becoming more inclusive. In Somalia, two local actors are now participants in the Humanitarian Country Team meetings. However, while change is observable, Yemeni actors reported that there continued to be a

strong imbalance in planning forums, which were slanted towards international actors. According to Movement actors, local NGOs are visibly absent.

In both Yemen and Somalia, local NGO staff who were interviewed expressed frustration with the overall response to Covid-19 on the grounds that it did not reflect or meet the needs of the context in either country. One member of a local NGO remarked:

“

[The Covid-19] response plan was a ‘box tick’ for most international actors, there was no real thinking. For example, one organisation secured and brought in thousands of PPE [items] without any plan for distributing them, where to distribute, to whom. It was a complete waste of resources.

NGO worker

”

In Somalia, local NGOs highlighted Oxfam's noteworthy efforts in moving towards meeting localisation commitments – for example, by providing two million Euros in funding to a consortium of nine local actors and offering technical guidance and capacity development to ensure a smooth transition from one phase to another. Other international organisations, however, did not make similar commitments. In fact, local NGOs identified that international agencies were actively and directly competing for space, funding and mandates with local organisations.

These structural challenges remain pervasive. As such, interventions are sporadic and do not take a centralised approach, largely due to funding mechanisms and decisions taken by donors and international actors. One current issue is the absence of local structures that link to the government and the private sector, compounded by a lack of international appetite to engage within a locally led paradigm. Overall, it is clear that local actors feel less engaged and less supported to exercise agency due to their potential proximity to conflict, but also due to broader political interests that influence donor and international funding, engagement and the design of interventions.

Local organisations in Yemen have begun to organise a union as a collective body

to engage international agencies through maximising local voices. The union also aims to be a space that streamlines governance, accountability measures and capacity among local actors to make them “acceptable to international funders”.

3.3.3. There is an increased burden on local actors to mitigate community concerns

Finally, local actors noted they have the additional burden of managing community expectations. In response to the Covid-19 pandemic, as per their safety protocols, international and national staff of the UN and international NGOs either left the country and/or did not leave their homes. Local communities could see this happening, and it only fuelled panic around the disease which local actors then had to mitigate. Local organisations also often had to explain why international organisations were not able to sustain their activities, and local actors felt they were put in a position where they had to justify faults in international programming. Local organisations in Yemen noted that a clear advantage of locally managing programmes is that they are better able to manage expectations and can implement interventions on a lower budget and without raising unrealistic hopes or needing to fund the high salaries offered through international agencies.



A Nepal Red Cross volunteer provides support at a point of entry post adjoining India, as part of the Covid-19 preparedness and response operation

Conclusions and recommendations

4.1. Conclusions

Greater locally led action has clearly been established as a reaction to the circumstances of the Covid-19 pandemic. However, overall, the lack of change in power structures has meant there has been little change in the underlying issues that shape the current aid structure and framework. The research findings confirm that local actors see a humanitarian aid sector that continues to be underpinned by power imbalances rooted in colonial ways of working and based on negative assumptions being projected onto local actors.

In the range of contexts examined here, it is clear that an increase in locally led action was a significant and notable feature of the global Covid-19 response. It is not easy to assess precisely how much more localisation occurred, but it appears to have been significant given that international staff and agency operations departed from many contexts, or were not able to move freely, due to adjustments to national and local government restrictions and organisational safety protocols. This gave local organisations an opportunity to take on the first and medium-term responses to Covid-19, though not without the continued remote involvement of international actors. As a result, national and local actors were able to showcase their capacity to address needs emerging as a result of the pandemic. Local organisations took on responsibilities such as: increasing communities' awareness of Covid-19 to reduce the spread of the virus, trying to secure necessary equipment, improving the tracking of where public information had

been communicated, and coordinating the meeting of immediate need and improving service delivery.

However, looking at the case study countries (Kenya, Nepal, Yemen and Somalia), the findings show that during the Covid-19 response there was hardly any change to the overall dynamic and interaction between local actors and international agencies and donors. For example, the research found that local actors are often seen to have limited capacity and require capacity development, while international actors are considered to have technical capacity and the ability to manage funds with strict and detailed requirements.

At the same time, within the Movement, National Societies have recognised areas in which they would like to develop capacity. So, the pursuit of an anti-racist agenda at the British Red Cross should not stop National Society development requests being made or considered. Rather, this work is about dialogue and understanding why particular National Societies depend on external resources to develop strength and resilience according to their own context, and how colonially derived this dependence is.

This perceived dynamic suggests that structural power imbalances within the sector will continue. While in some contexts funding mechanisms reportedly relaxed during the pandemic to ensure access for local actors, no such change was reported in the two conflict settings studied in this research (Yemen and Somalia). Local actors felt that there was competition for funding between local and international NGOs, which led to the creation of 'local branches' of international organisations. This was viewed

as the continuation of an emerging trend that has seen some international NGOs ‘nationalising’ by transforming a country office to have all national staff and leadership, and an all national board, to then claim that this revamped branch is a ‘local NGO’.

The research also showed an overwhelming belief that the Fundamental Principles and humanitarian principles supported rather than hindered locally led action. Principled humanitarian action will play a major role in supporting the agendas of locally led action and anti-racism, and can help dismantle the biases and power imbalances that are currently inherent in the global humanitarian architecture. Yet there are clear challenges in terms of how the principles are followed in practice, and their ability to exacerbate deeply held asymmetrical power dynamics across the Movement and the wider humanitarian sector. The research found that often the culture, mindset and behaviours with which the principles are applied overrides the

intention of the principles themselves. It will be important to resolve these tensions. In doing so, consideration could be given to how the humanitarian principles and the Fundamental Principles of the Movement could be applied from a locally led, anti-racist and equitable perspective. This would need to be done in a way which gives voice and agency to local actors throughout the process, and engenders constructive and open dialogue.

The findings shine a light on the difference in views between international and local actors around what locally led action can and should mean in practice. But there are many glimpses of a brighter future if some of the examples of locally led action from the Covid-19 response become usual practice for the sector. Finally, it is worth restating that local actors operating in Yemen and Somalia experienced specific issues, due to the ways in which common challenges were felt more acutely in conflict settings.



Photo: © Bangladesh Red Crescent Society

Volunteers of Bangladesh Red Crescent work alongside authorities to curb Covid-19 infections in Bangladesh.

4.2. General recommendations

We have provided some indicative specific recommendations, however they are by no means exhaustive. Indeed, we encourage the British Red Cross, the Movement, the broader humanitarian sector and donors to think creatively and boldly about activities that could be undertaken to address the research findings.

It is vitally important that the following three general approaches are considered when taking forward any specific recommendations listed below, or any other activities that readers may initiate themselves in response to this research:

Whole systems change is necessary

The literature review and research clearly show that the challenges identified here are deeply interconnected and permeate all levels of the humanitarian system. As such, any response to the findings should tackle these challenges at all levels – both organisationally and in relation to the lived experiences of people experiencing and working within the humanitarian system.

Seize the opportunity

There are many examples of good practice, innovative new approaches and creative ideas that have been successfully rolled out across a range of contexts during the Covid-19 response. A considerable opportunity exists to shine a light on these and build on their success to promote a more locally led approach more generally in the sector.

Seize the challenge

This report contains passionate, thoughtful and difficult reflections from an unapologetically Global South perspective. Some of the findings and views from research respondents are uncomfortable and disheartening. They show a humanitarian aid system that is still overwhelmingly colonial in its architecture, racist in its underpinnings and disempowering in its approach. A big part of this problem is that powerful and influential actors in the sector do not recognise that they are the cause of such power dynamics, or acknowledge why they remain in place. Responding effectively to the findings of this research means recognising and seizing the challenge they represent.

While the research shows that some progress has been made on various fronts, it is clear that there needs to be an overall dismantling and rebalancing of power structures and dynamics within the sector to achieve permanent, meaningful change. Steps can be taken, including building on innovative approaches to achieve significant and much needed transformation.

Approaching these findings with a degree of openness and vulnerability will be an important first step in finding genuine pathways towards a more equitable future, not just for those whom the humanitarian system seeks to help, but also for people working within it at the local level. Anything less would be a disservice to both.

4.3. Specific recommendations

This section contains a range of suggestions and ideas for activities that could tackle some of the challenges and build on some of the successes that have been highlighted through this research. There are recommendations for the British Red Cross and the Movement, as well as some specific recommendations for the wider humanitarian sector and donors. Importantly, there are a range of suggestions that cover micro, meso and macro level actions to ensure that resources and energy are spent in ways that are most likely to effect change.

Recommendations for the Movement

Working towards structural change

- Become a leading advocate not just for localisation, but for broader decolonisation of the aid architecture with all actors, and particularly donors, UN agencies and international NGOs. This could include seeking out and forming alliances with other advocates for localisation – both from the Global South and the Global North – to reinforce and broaden influencing efforts. It could also involve ensuring discussions and actions to advance localisation are not disproportionately focused on funding arrangements, but also focus on genuinely shifting power.
- Reframe localisation to be a broader process of decolonisation and advocate for this shift in local and international settings.
- Highlight examples of good practice within the Movement to advocate for broader humanitarian system change – such as the Kenya Red Cross Society’s leadership or the Australian Red Cross’ efforts to devolve power and financing to National Societies in the Pacific.
- Replicate and expand the efforts of National Societies to develop their own National Society Development (NSD) plans and use these as a basis for NSD support, including funding.
- Examine and address other dynamics that intersect with localisation. These include the representation of women in male-dominated National Societies, and equity for marginalised and racialised groups, particularly those who are direct descendants of transatlantic slavery and colonialism.
- Explore the possibility of the Movement’s Council of Delegates commissioning an appropriate study on how the Fundamental Principles can be applied to help build an environment free from racism and discrimination.

Recommendations for donors

Working towards structural change

- Mandate high minimum levels of localisation for any funding that goes to international actors (given the current reality), as well as implementing mandates on equitable sharing of indirect and overhead costs between international and local actors, and decision-making and leadership.
- Recognising that local actors perceive limited changes in funding shifts and power dynamics since the Grand Bargain commitments in 2016, redouble efforts to achieve genuine humanitarian system change. This should include a deeper focus on decolonisation beyond localisation, acknowledging prejudices and the need for more equitable partnerships.
- Reward international actors that have demonstrated commitment to and achievements in localisation, particularly considering they can become less visible if they are localising effectively.

Addressing specific structural problems

- Change donor rules and barriers so that they do not exclude local actors from directly receiving funding.
- Dramatically reduce or remove co-financing requirements on the provision that international actors can demonstrate that long-term, flexible funding is being deployed directly to local actors.
- Use instances of success, such as some OCHA-run humanitarian funds, to create new funding mechanisms that better directly support local humanitarian actors.
- Along with its signatories, champion the priorities and outcomes in the Grand Bargain 2.0 framework and ensure concrete progress towards them to create an effective humanitarian system. Particular attention should be paid to the leadership of local responses, common values and flexible funding for local responders to reach the people made most vulnerable.
- As part of frameworks for monitoring and evaluation and due diligence, take risk-sharing approaches that are designed with proportionality of risk in mind. Recognise the demonstrated capability and strengths of local actors as part of equitable partnerships, and ensure that communities' voices and agency are effectively reflected in new metrics.

Recommendations for the UN and international NGOs

Working towards structural change

- Revisit existing commitments, such as the Grand Bargain and Charter for Change. Look at how they can be restructured for more systemic change and also used to hold international actors to account.
- Stop creating local branches or chapters since this exacerbates competition for resources and undermines broader localisation efforts.
- Commit to equitable inclusion and foregrounding of local actors, whether that is in donor meetings, coordination mechanisms or other settings.

Recommendations for the Movement, donors, UN and international NGOs

Addressing specific structural problems

- Shift funding to be more flexible and long-term (including making sufficient funding available for indirect costs) to support stability and innovation, and a greater focus on mitigating rather than responding to crises.
- Develop common standards and understandings of locally led delivery, to be measured annually against agreed criteria – for example:
 - percentage of surge deployments that are fulfilled by regional rather than international delegates
 - number of small to medium operations (from appeals) delivered by local actors without external support
 - ratio of local to international staff in any given country
 - number of local actors that play a coordinating role within the humanitarian sector in their country, especially as part of the cluster system
 - number of local actors that are set up to process institutional donor funds directly (e.g. the Turkish Red Crescent Society and Kenya Red Cross Society are both set up to receive ECHO funds).
- Integrate localisation outputs into all relevant job descriptions, such as the percentage of funding going to local actors and the quality of relationships with local actors.
- Consider the biases and agendas of international actors in open discussions, as well as ways to manage these. For example, sometimes funding constraints from donors (flowing from geopolitics, security concerns and national political priorities) mean that international actors are unable to fulfil their impartiality obligations.
- Seek to encourage feedback mechanisms and the shaping of research agendas to understand the trust deficit between local and international actors (including donors), and make it easier to measure, as this is a key barrier to localisation.
- Consult local actors on pathways to establish locally led coordination mechanisms and support them to be realised, as has occurred with the Kenya Red Cross Society.
- Change the discourse on capacity building and work with local actors to develop the most appropriate ways to overcome related barriers to localisation.
- Develop a strategy for increasing representation from the Global South in leadership and decision-making roles and ensure accountability for strategy delivery.
- Develop training and tools that establish real practical models for what a decolonised and locally led partnership should look like across programme design and implementation, monitoring and evaluation, and communications, marketing and fundraising.
- Ensure that actors in the Global South can play a key role in high level dialogues, for example as co-chair of the Grand Bargain 2.0 implementation.

Recommendations for local humanitarian actors

Working towards structural change

- Local actors should collectively demand humanitarian system change, paying heed to tireless previous endeavours that provide much rich learning. This could include documenting best practice examples that demonstrate the efficacy of locally led responses to support advocacy efforts. It could also involve exploring innovative ways to shift the conversation, such as creating scorecards on working with international actors that hold them accountable.

Addressing specific structural problems

- Demand equitable participation in donor meetings, coordination mechanisms and related systems, including minimum standards on the use of local languages to enhance accessibility, so as to build trust and recognition with donors.
- Refuse to work with international actors that are unwilling to equitably share indirect or overhead costs.



Photo: © Nisreen Ahmed, Yemeni RC

Yemen Red Crescent Society staff and volunteers carry out awareness-raising activities in public spaces.

Annex A: definitions

The following is a list of working definitions used in this research:²⁹

Agency: The capacity of individuals to act independently and to make their own free choices. Factors of influence (such as social class, race, religion, gender and ethnicity), may limit an individual and the decisions they are able to make.

Colonialism: The policy or practice of acquiring full or partial political control over another country, occupying it with settlers and exploiting it economically. The term also refers to how policies and practices may exert control over groups of people. Decolonisation of aid is the process of undoing colonialism. In the context of humanitarian action, it relates to the decolonisation of practice, approaches, power dynamics and aid.

Complementarity: As used in this report, the term refers to the interaction and comparative advantages between local, national and international components of the International Red Cross and Red Crescent Movement, taking into account their respective mandates, the Movement's Fundamental Principles and the operational settings in which they are working. Complementarity can be defined as the combination of strengths that each component can bring in a complementary way that ensures the ability of each individual component, as well as the Movement as a whole, to respond to the humanitarian needs of those affected by conflict. Complementarity can also of course apply to the range of actors within the broader humanitarian sector as well.

Global South/Global North: The term Global South is used here to refer to peoples dominated by globalisation policies that are

unfavourable to them. This generally – but not only – refers to countries classified by the World Bank as low or middle income and mostly located in Africa, Asia, the Pacific, Latin America and the Caribbean. The term, as used here, also draws on the work of scholars and activists within the Global South to have their struggles, knowledge and experiences recognised, and to challenge the structures and processes that generate poverty and global inequalities. The term Global North is used here to denote spaces and people that generally set the terms of discussion and power within the global system, usually but not uniquely located in countries classified by the World Bank as upper middle and high income.

Internationalism: When different countries or nations work together to promote similar causes or interests. They work together because all the nations benefit in some way. Often these causes or interests are promoted by international organisations, such as the UN.

Localisation: Although there is no agreed single definition, at a broad level, large institutions and their Northern-based actors appear to define localisation in capacity and funding terms. Many other definitions, particularly from academics and practitioners, discuss localisation as a transfer of power. For the purposes of this study, localisation is defined as local organisations taking a primary role in how and what decisions are made and the form that humanitarian response takes.

Local actors: Stakeholders working to interpret the commitment to localise humanitarian aid according to their own interests and agendas. This can include national non-governmental organisations

²⁹ Definitions are drawn from a combination of accepted academic and humanitarian literature, participants' own working definitions and experiences, and terms in use across the Red Cross and Red Crescent Movement.

(NGOs) and civil society organisations (CSOs), local NGOs and CSOs, Red Cross and Red Crescent National Societies, national governments, local governments, and local and national private sector entities. However, the NEAR Network does not equate local actors with international NGOs that have created national NGO branches. NEAR is a movement of local and national civil society organisations from the Global South with a bold ambition – to reshape the top-down humanitarian and development aid system to one that is locally driven and owned.

Locally led action: The resulting work and initiative of local actors working to localise humanitarian aid according to their own local realities and in the wider construct of ‘going local’, which is about a fundamental shift so that the Global South determines the future of humanitarian work.

National Society: There are 192 Red Cross and Red Crescent National Societies in countries around the world. Their activities are supported, coordinated and represented by the International Federation of Red Cross and

Red Crescent Societies (IFRC). Each National Society is an independent organisation dedicated to saving lives and supporting vulnerable people. They also have a formal auxiliary role through which they provide humanitarian support to the government in their country.

Racism: Prejudice, discrimination or antagonism by an individual, community or institution against a person or people on the basis of their membership of a particular racial or ethnic group, typically one that is a minority or marginalised. Systemic racism is when systems and processes are in place to subvert racial equality by keeping disparities in place. Related to this is institutional racism, which is where whole organisations are hardwired to ensure white privilege and other forms of elitism prevail, often intersecting with other markers of oppression. Anti-racism is the expression of any form or resistance to racism.

Unconscious bias: Unconscious bias is defined as prejudice or unsupported judgments in favour of or against one person, or group as compared to another, in a way that is usually considered unfair.



Qoton, Somalia, hygiene kit distribution.

Acronyms

CAFOD: Catholic Agency for Overseas Development

CARE: Cooperation for Assistance and Relief Everywhere

CHF: Swiss francs

Coordination SUD: Coordination Solidarité Urgence et Développement

Covid-19: Coronavirus disease of 2019

CVA: Cash and voucher assistance

CWG: Cash working group

ECHO: European Civil Protection and Humanitarian Aid Operations

ICRC: International Committee of the Red Cross

IFRC: International Federation of Red Cross and Red Crescent Societies

INGO: International non-governmental organisation

KII: Key informant interviews

LNGO: Local non-governmental organisation

NGO: Non-governmental organisation

NICRA: Negotiated indirect cost rate agreement

OCHA: UN Office for the Coordination of Humanitarian Affairs

OECD: Organisation for Economic Cooperation and Development

PPE: Personal protective equipment

RCRC: Red Cross and/or Red Crescent

UN: United Nations

US: United States

USAID: United States Agency for International Development

WHS: World Humanitarian Summit

Annex B: methodology

The British Red Cross set up a steering group to accompany the project's development, with input from stakeholders across the Movement and National Societies. In addition, DA Global set up an advisory group to draw in external expertise, which met periodically throughout the project. It consisted of: Isabella Jean from Brandeis Heller School, Patrick Saez from Center for Global Development, Hugo Slim and Andrew Thompson from Oxford University, and Sala Toganivalu Lesuma from Fiji Red Cross Society. In February 2021, a joint meeting of the steering group and advisory group was held to confirm the methodology and input into plans for fieldwork.

DA Global used a mixed methodology approach to examine the three research questions. This was agreed by the project team and is set out as follows below.

6.1. Research locations

The research included interviews and focus group discussions (FGDs) with stakeholders from both local NGOs and the Movement in four countries: Nepal, Kenya, Somalia and Yemen. In these locations we researched more deeply the issues of localisation, the pandemic and humanitarian response. Kenya and Nepal were selected based on the interest and capacity of the National Societies, and on advice from British Red Cross regional staff. Research in Somalia and Yemen was built into this stage so that we could report on pandemic delivery issues in at least two conflict settings. In Nepal, we conducted seven key informant interviews (KIIs) and one FGD. In Kenya, we conducted five KIIs and one FGD, and across Somalia and Yemen we conducted three KIIs and one FGD. Due to

Covid-19 travel restrictions, all interviews and FGDs were conducted remotely.

6.2. Qualitative research

Secondary data review: DA Global reviewed a range of literature provided by the British Red Cross which related to the interplay between Covid-19 responses and locally led action, as well as to locally led action and anti-racism and decolonisation. This included several national level case studies as well as material that set out the strategic framework for the Fundamental Principles guiding the Red Cross and Red Crescent Movement. Signposting for relevant literature also came from advisory group contributions. This included current thinking from think tanks and NGOs.

Initial key informant interviews (KIIs):

In addition to the four case study locations, in the initial stages of the research we carried out a selection of semi-structured interviews with nine key stakeholders on their experiences of localisation and locally led action during the Covid-19 pandemic and the potential interplay with institutional racism. The sample of interviewees was selected with the following criteria:

- Global South representation
- British Red Cross staff from headquarters, national contexts, ICRC and IFRC headquarters
- National Society members
- local organisations
- people with on-the-ground experience of responding to Covid-19 and involvement with localisation activities.

Although the interviews were broadly balanced, there was a limited set of views that fed in from the Global South in this phase due to sample construction across the above criteria. From this very early stage, we

described localisation as ‘locally led action’ so that people who may not be familiar with the phrase could understand its relevance for their own context and define what it meant on their terms. The results of these KIIs were used to develop the research tools for the remainder of the research.

Case studies: The DA Global research team completed case studies to analyse stakeholders’ experiences with localisation during the pandemic in the four research locations. In designing the research tools for this stage, we reflected carefully on how to

conduct research appropriately in different settings. Racism means different things in different contexts and this was debated widely with both the steering group and the advisory group for the project. In a majority Black or Brown setting, or where a marginalised group is in the majority, clear lines of racial disparity are not as obvious. Power and oppression may be experienced in a sense of ‘them and us’ or an othering along the lines of race, colour, caste, ethnicity, markers of class and any intersection of these alongside other equality characteristics. We therefore used a range of



Nepal Red Cross Society volunteers provide support in a vaccine centre in Bhaktapur, May 2021.

proxy indicators around power and autonomy to infer if racism was an issue of concern.

Through the case studies, we explored whether the Fundamental Principles and Code of Conduct were conduits or otherwise to any observed changes, rather than examining them in themselves. In doing this, we took advice from the British Red Cross' legal experts and our advisory group.

Overall, we balanced looking at each set of issues in a context-specific way and adapted tools accordingly, while maintaining comparability too. Due to time constraints and delays in the research timeline, it was not possible to conduct additional interviews at the end of the research stage, to stress test the findings. To ensure co-creation and sense-making, the steering group members were presented with the emergent themes on 19 March 2021.

6.3. Quantitative research

Online survey: A tailored online survey on localisation, Covid-19 and institutional racism in the aid sector was launched mid-way through the project. This was distributed to senior executives through the Network for Empowered Aid Response (NEAR) collective of 277 local organisations, as well as through DA Global's organisational network, the British Red Cross and National Societies. The aim was to collect at least 50 completed surveys across a balanced geographical spread,

recognising that many respondents were responding to Covid-19 at this time. At the close of the survey, 51 responses had been received. Of these, 59% of respondents worked in Africa, 37% in Asia, 2% in North America and 2% in Latin America. Sixty-five per cent of respondents delivered services for humanitarian and/or development NGOs, 6% worked at informal community-based organisations or in grassroots activism, 2% worked at organisations focusing on advocacy and campaigns, and 27% came from within the Movement.

Not every respondent answered all the questions posed by the survey. Explanations were sometimes provided for this, and included the respondent not understanding the question, or not being familiar with the specific issue being asked about. Some respondents indicated that they did not have sufficient information to offer comments on the progress of international commitments and frameworks for localisation. Questions were not compulsory because it was understood that participants may not be prepared, willing or able to answer some questions posed on racism due to wide-ranging issues, including fear of recrimination, trauma and triggering effects. Bearing this in mind, the analysis provides insights on recurrent themes, but the quantification of responses through percentages is provided with caution. Where such figures are cited, the actual response for each question is provided.

Box 1: Research methodology

Global survey	Focus group discussions (FGDs)	Key informant interviews (KIIs)
51 respondents	3 FGDs in 4 countries	7 in Nepal
23 countries	5 NGOs represented in the Nepal FGD	5 in Kenya
32 respondents worked with local development or humanitarian organisations	3 NGOs represented in the Kenya FGD	3 across Somalia and Yemen
13 worked for the Movement	2 NGOs represented in the Somalia FGD	9 conducted in the initial stages of the research



Photo: © IFRD/British Red Cross

Indian Red Cross Society volunteers distribute food and essentials to people in poorer areas suffering the impacts of Covid-19, May 2021.

6.4. Conceptual framework

The terms of reference set out by the British Red Cross requested that the methodology use “an appropriate approach to capture the voices and perceptions of the people whom the localisation agenda is principally concerned with and who are involved in the response to Covid-19.” DA Global’s research was rooted in approaches that sought to provide the British Red Cross and Red Cross and Red Crescent National Societies with the data they needed to understand the interplay between the Covid-19 response, localisation and institutional or systemic racism in the humanitarian sector. The remit of this research is explained in further detail below.

The International Red Cross and Red Crescent Movement (‘the Movement’) is the world’s largest humanitarian network. It is set up to be neutral and impartial, and it provides protection and assistance to people affected by humanitarian crises, including disasters and conflicts. It has three main components: the International Committee of the Red Cross (ICRC), the International Federation of Red Cross and Red Crescent Societies (IFRC), and 192 National Societies. The Movement’s work is supported by around 14 million volunteers worldwide.

The International Committee of the Red Cross (ICRC) is an impartial, neutral and independent organisation with an exclusively humanitarian mission. Its objective is to protect the lives and dignity of victims of armed conflict and other situations of violence, and to provide them with assistance. Established in 1863, the ICRC is at the origin of the International Red Cross and Red Crescent Movement. It directs and coordinates the international activities conducted by the Movement in armed conflicts and other situations of violence. The four Geneva Conventions and Additional Protocol (I) confer on the ICRC a specific mandate to act in the event of international

armed conflict. In non-international armed conflicts, the ICRC has a right of humanitarian initiative that is recognised by the international community and enshrined in Article 3 common to the four Geneva Conventions. In the event of internal disturbances and tensions, and in any other situation that warrants humanitarian action, the ICRC enjoys a right of initiative, which is recognised in the statutes of the International Red Cross and Red Crescent Movement. The ICRC employs almost 19,000 staff who operate in more than 80 country delegations and has its headquarters in Geneva, Switzerland. The vast majority of staff are resident in the countries where they are based.

The International Federation of Red Cross and Red Crescent Societies (IFRC) is a membership organisation consisting of the world’s 192 National Red Cross and Red Crescent Societies, which collectively have around 14 million community-based volunteers associated with more than 160,000 local branches or offices. The IFRC Secretariat works to support, coordinate and represent the action of National Red Cross and Red Crescent Societies worldwide. Together, the members and their Secretariat are known as the ‘IFRC network’.

Each **National Red Cross and Red Crescent Society** is an independent organisation dedicated to saving lives, promoting community health, resilience and wellbeing, and building inclusive societies. As auxiliaries to the public authorities in the humanitarian field, National Societies support the governments in their countries to reduce risks, protect human dignity, deliver humanitarian assistance and improve the lives of vulnerable people, always acting in line with the Fundamental Principles of the Red Cross and Red Crescent Movement.

The National Societies’ unparalleled local presence – combined with the IFRC Secretariat’s role in global coordination and response, brokering knowledge, strengthening

capacities, mobilising resources and representation – makes them the world’s largest and most effective humanitarian network. The IFRC network is diverse, inclusive and uniquely placed to deliver life-saving services before, during and after disasters, health emergencies, perilous migration journeys and other crises. It also delivers the long-term programming that is critical to building sustainable community resilience, adapting to climate change and promoting public health.

The IFRC network is neutral, impartial and independent. It is a trusted partner both in emergency response and in individual, community and institutional resilience. It is a leader in planning for, preventing and responding to disasters, health emergencies and other crises.



Photo: © Nepal Red Cross Society

The Nepal Red Cross Society supports Covid-19 vaccination programmes in Kathmandu district, March 2021.

The Fundamental Principles

The seven **Fundamental Principles** of the Red Cross and Red Crescent Movement provide an ethical, operational and institutional framework for the work of the Red Cross and Red Crescent Movement around the world. They are at the core of the Movement’s approach to helping people in need during armed conflict, natural disasters and other emergencies. The research focused particularly on the principles of Humanity, Impartiality, Neutrality and Independence. All seven of the Fundamental Principles are set out in Box 2.

While the Movement is often credited as the origin of modern-day humanitarian principles, similar broad concepts date back centuries. These principles are often championed as essential for effective humanitarian response, but anthropologists have found evidence that as far back as prehistoric times, societal concepts of ‘charity’ were derived from motives of collective survival rather than altruism. Today, many international and local humanitarian organisations report that humanitarian principles are fundamental to their ability to operate in a range of complex environments.

The seven Fundamental Principles are at the heart of the International Red Cross and Red Crescent Movement, and are recognised in international legal frameworks. Similarly, the first four principles – Humanity, Impartiality, Independence and Neutrality – are recognised by states and humanitarian organisations as being central components of the broader humanitarian system.

Box 2: Fundamental Principles

Humanity: The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

Impartiality: It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

Neutrality: In order to continue to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

Independence: The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

Voluntary service: It is a voluntary relief movement not prompted in any manner by desire for gain.

Unity: There can be only one Red Cross or one Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

Universality: The International Red Cross and Red Crescent Movement, in which all Societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.

In addition to the Fundamental Principles, the Movement has adopted many standards. The **Code of Conduct** for the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief sets out standards of behaviour. It seeks to maintain the high standards of independence, effectiveness and impact to which disaster response NGOs and the International Red Cross and Red

Crescent Movement aspire. It is a voluntary code, enforced by the will of the organisation accepting it to maintain the standards. In the event of armed conflict, the present Code of Conduct will be interpreted and applied in conformity with international humanitarian law. Race and respect for culture and customs, along with a commitment to build local capacities, are all set out in the Code of Conduct.

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Cover photo: © Somali Red Crescent Society (SRCS)

A pregnant mother of four, seeks antenatal care services at the Aihabo Mobile Clinic. The IFRC is supporting the Somali Red Crescent in an integrated health care programme, which includes mobile clinics and nutrition programmes.



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