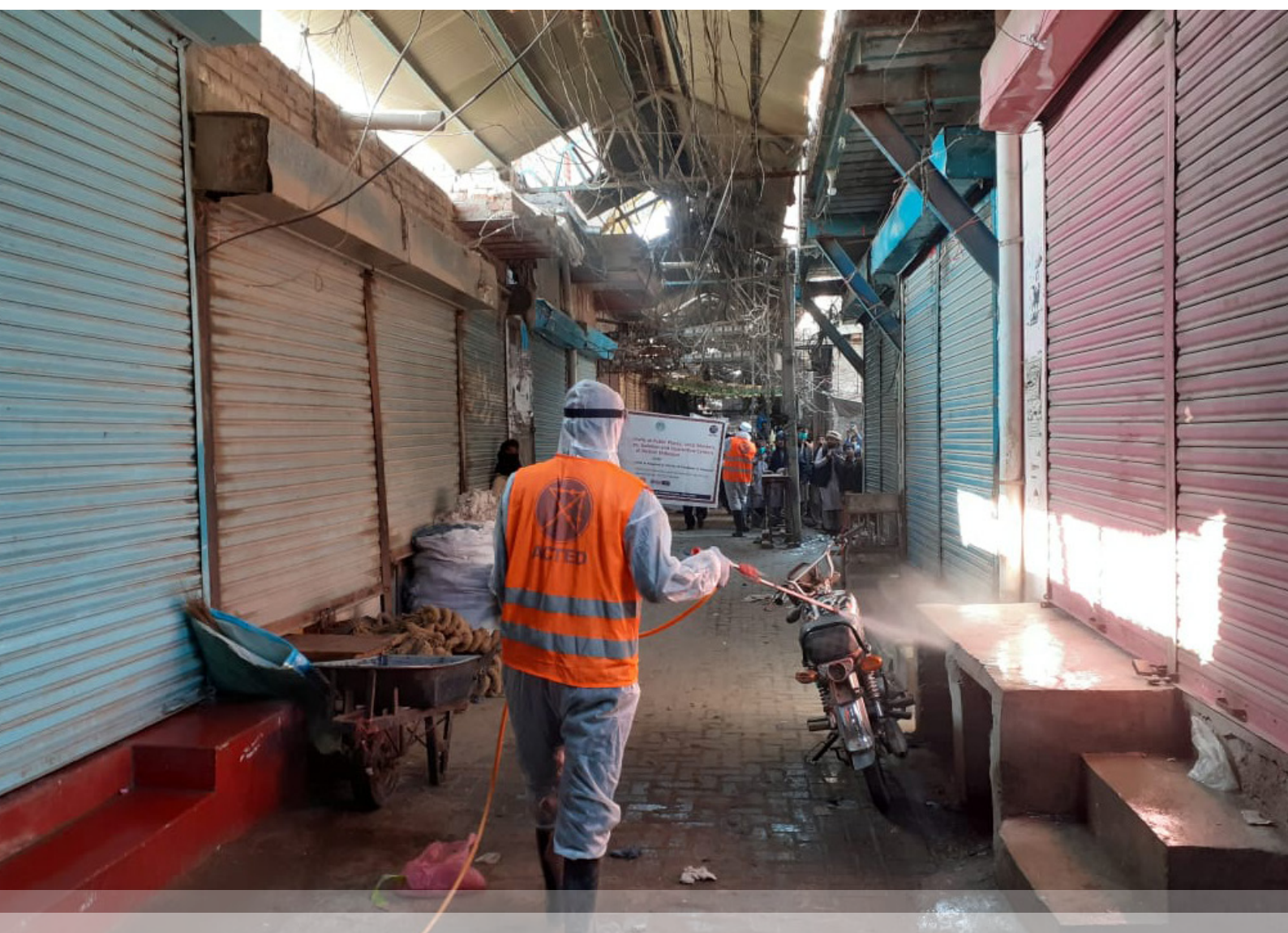**HPG working paper**

Covid-19: implications for localisation

A case study of Afghanistan and Pakistan

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ODI

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Cover photo: Covid-19 disinfection in Garhi Yaseen Market in District Shikarpur, Sindh, Pakistan. Credit: Syed Aatif Shah/ACTED

Acknowledgements

About this paper
As part of ongoing research on how Covid-19 has influenced the localisation of humanitarian aid, HPG partnered with HAG and GLOW Consultants, Pakistan to carry out this study across Afghanistan and Pakistan. The purpose of this study was to review the impact of Covid-19 on shifts towards more locally led humanitarian action in these countries and the potential broader implications for the sector as a whole.

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About GLOW Consultants (Private) Limited and Humanitarian Advisory Group
GLOW Consultants, based in Pakistan, is a leading national entity providing practice solutions and field implementation support to donors, their implementing partners and research institutions. GLOW has successfully completed more than 100 third-party monitoring and evaluation (M&E) assignments.

Humanitarian Advisory Group (HAG) was founded in 2012 to elevate the profile of humanitarian action in Asia and the Pacific. Set up as a social enterprise, HAG provides a unique space for thinking, research, technical advice and training that contributes to excellence in humanitarian practice.

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Acronyms

ACBAR	Agency Coordinating Body for Afghan Relief and Development
CBPF	Country-Based Pooled Fund
COAR	Citizens Organisations for Advocacy and Resilience
CSO	civil society organisation
HAG	Humanitarian Advisory Group
HCT	Humanitarian Country Team
IASC	Inter-Agency Standing Committee
IDP	internally displaced person
IOM	International Organisation for Migration
INGO	international non-governmental organisation
KII	key informant interview
LNO	local and/or national organisation
NALPER	Nigeria Afghanistan Localised Preparedness Emergency Response
NDMA	National Disaster Management Authority
NGO	non-governmental organisation
NHN	National Humanitarian Network
NIH	National Institute of Health, Pakistan
NNGO	national non-governmental organisation
NOC	No Objection Certificate
PHF	Pakistan Humanitarian Forum
PIANGO	Pacific Island Association of NGOs
PKR	Pakistani Rupee
PPE	personal protective equipment
SOP	standard operating procedures
UN	United Nations
UNOCHA	United Nations Office of Coordination of Humanitarian Affairs
UNDP	United Nations Development Programme
UNICEF	United Nations International Children's Emergency Fund
WASH	water, sanitation and hygiene
WHO	World Health Organization

Executive summary

Since the beginning of 2020, across the world, Covid-19 restrictions and risks have forced international actors to place greater focus on localisation, more from necessity than choice. In Afghanistan and Pakistan, the Covid-19 pandemic has the potential to deliver a timely boost for the localisation process, but to date the shift has been partial, rarely upending established power inequalities. During the pandemic, the ability to reach local communities in hard-to-access areas became a core asset – local and national organisations (LNOs) with the capacity to reach vulnerable communities achieved greater recognition and received more support. However, this came without structural change to reflect the centrality of LNOs in the response.

Covid-19 has forced the adoption of new working practices, highlighted the positive role of LNOs in handling the humanitarian response in Pakistan and Afghanistan and strengthening the locally led response. Crucially, increased funding was channelled to LNOs during the pandemic, but not at a scale that recognised their true contribution. Small local organisations rarely accessed increased funding; instead, international non-governmental organisations (INGOs) preferred partnerships with established or larger national organisations. While remote working created opportunities for increased participation, these gains were still affected by digital inequalities.

As the humanitarian sector works to respond to growing need and changing operational requirements, the pandemic presents a critical opportunity to transition to a more locally led response model in these countries. While significant challenges remain in both contexts, localisation has emerged as an important principle in the way forward, building on global momentum in this area. However, it remains to be seen if there is a willingness to make fundamental, system-wide changes that will lead to a context-relevant, locally led response model in the long run.

Key findings

Progress towards locally led humanitarian action in Afghanistan and Pakistan was evidenced in the Covid-19 context. However, the increased role of, and reliance on, local and national partners to deliver humanitarian assistance in these countries was not matched with appropriate levels of funding or transfer of leadership and responsibility for decision-making.

Recognition of humanitarian actor and civil society roles: The pandemic created greater recognition of the critical role played by humanitarian actors – especially civil society – in reaching and supporting affected communities. In both countries, where civic space has been shrinking, greater flexibility was provided by the governments for international and local/national actors to deliver Covid-19-related support, albeit on a temporary basis. This increased recognition also created opportunities for LNOs to partner with the private sector to support communities.

Greater reliance on local organisations and local staff: The pandemic considerably increased the role played by LNOs, as well as local staff in international organisations. As pandemic-mandated travel restrictions reduced international access to communities, LNOs became critical partners in providing humanitarian aid. LNOs were able to draw on the local roots and networks of their staff and volunteers for community access and mobilisation. In parallel, repatriation or remote working of international staff meant that local staff in international organisations were required to take on additional responsibilities, mostly on an interim basis. Greater effort will be required to formalise the transition of key roles and responsibilities to local staff and LNOs.

Local organisations and local staff taking on greater risks: Travel restrictions and Covid-19 safety practices of international organisations placed greater responsibility and risk on LNOs and local staff as they undertook field activities. While international actors had greater support from their global structures on Covid-19 risk management and adaptations, LNOs and their staff (most often) had to persevere with the limited resources available. As the frontline responders during Covid-19, providing humanitarian assistance on the ground, LNOs lacked sufficient resources to provide the required safety gear for their staff, and the increased risks were not adequately reflected in the funding they received. Especially in Afghanistan, this took place within an already challenging security environment.

Funding distribution significantly skewed: While the pandemic saw an increase in overall funding, it was insufficient to meet mounting needs. Most funding was funnelled to United Nations (UN) and international organisations that, in turn, increased partnerships with large national organisations, which saw a growth in funding. A considerably smaller proportion of funding – 6% in Pakistan (of $150 million) and 2.3% in Afghanistan (of $704 million) – was directly, or as directly as possible, channelled to LNOs in 2020.

Smaller LNOs faced greater challenges: While LNOs more broadly faced greater challenges than their international counterparts, experiences were not homogenous across LNOs. Larger LNOs with greater financial stability, operational reach, government networks and pre-existing partnerships were noted to have expanded their roles with more project and funding opportunities. The smaller LNOs did not receive funding proportionate to the risks they took on at the ground level. Most funding received by smaller, local and community-based organisations was filtered through several layers, predominantly made up of international organisations.

Increases in remote working approaches: Covid-19 meant that remote approaches in coordination and monitoring were established as essential ways of working. This has increased participation opportunities, especially for LNOs. But the reduction of personal engagement remains a challenge for local actors, as this is an important part of how they build relationships and trust. Additionally, poor electricity supply and internet access (especially in rural areas and more so in Afghanistan) made it difficult for LNOs to fully embrace the advantages of online coordination. Remote monitoring approaches (such as third-party monitoring through local organisations) were considered cost-effective and more efficient, with local partners expected to play a larger role in this area in future.

International-heavy leadership: With the transition to online meetings, Covid-19 provided more opportunities for LNOs to participate in coordination forums, but leadership roles remained with international actors. International organisations continued to dominate the humanitarian coordination structures, and LNOs had minimal input in key decision-making within the sector. Nonetheless, non-governmental organisation (NGO) coordination forums in both countries continue to play a greater role in advocating for increased representation, improved coordination and greater information-sharing among all actors.

Capacity-strengthening approaches were inadequate: Local actors do not believe international partners adequately supported their capacity needs in transitioning to a locally led response model – a major concern, given the increased responsibility and risk LNOs have taken on. Trainings moving online have opened up more opportunities for local staff of international organisations and some LNOs to upskill.

Recommendations

Opportunities to advance locally led humanitarian response emerging as a result of the Covid-19 context, as well as more broadly, are presented below. These are aimed at supporting long-term system-wide change to create a more inclusive and locally led humanitarian model. The implementation of these actions will require leadership, investment and commitment from Humanitarian Country Teams (HCTs), international actors and donors, in close collaboration with LNOs.

To enable greater relevance and ownership, it is important that local actors are given the space to define contextualised and country-specific localisation priorities and commitments. This can be managed through a dedicated locally led mechanism (such as a working group) positioned within each country's humanitarian coordination structure (with committed resources). This body can also lead the implementation of activities, as well as monitor and report on progress to the HCT and other actors.

Diversified and quality partnerships

- International actors should diversify their implementing partner database to include more LNOs – especially smaller local organisations. This will enable more LNOs to remain active in this shrinking humanitarian space. Furthermore, it will create more trusted partners with greater access for immediate deployments in humanitarian response situations.
- International actors should take into account the power imbalances that currently exist and ensure that a principle-based approach to partnerships is applied (such as the Global Humanitarian Platform's Principles of Partnership (ICVA, n.d.)).

Diversified fund allocation

- Specific attention should be given to identifying and removing the blockages that prevent smaller local organisations from receiving quality funding.
- Donors should allocate a specific proportion of their funds directly to LNOs, such as earmarking their funding contributions to Country-Based Pooled Funds (CBPFs). This will ensure some funding goes directly to LNOs and reduce their dependency on international actors. This will also allow them more flexibility in designing projects to meet local needs.
- Donors should commit to extending to LNOs the un-earmarked and adaptable funding conditions that are provided to international actors, including when the funding goes through an intermediary. This will allow LNOs to cover their administrative costs.

Strengthened national/local leadership

- Develop an inclusive approach that ensures LNO representatives can take leadership roles in various humanitarian forums. This can be done by mandating coordination forums to reserve some leadership roles for LNOs. LNO representatives can be elected to these roles (for specified terms) by the member LNOs of that particular forum or LNO coordination forums.
- The increased roles given to LNOs and coordination platforms in the Covid-19 period (such as moving coordination meetings online and opening up meetings for a wider audience) should not be reversed, but expanded.

Inclusive coordination forums

- Introduce multilingual coordination mechanisms for discussions to encourage participants to speak in the local language. This will encourage participants from LNOs to more confidently share their views and contribute to decision-making.
- The increased use of digital technology due to Covid-19 should be continued and encouraged (where feasible) to minimise the time and cost required to participate in meetings.

Capacity-strengthening of LNOs

- International actors should commit to robust, long-term capacity-strengthening approaches for their LNO partners with the objective of enabling LNOs to design, implement and independently manage complex humanitarian projects. These approaches should be built on existing models (such as the Agency Coordinating Body for Afghan Relief and Development (ACBAR)'s twinning programme), and mutually developed with LNOs. Donors will need to play an important enabling role to support long-term planning.
- Provide capacity-strengthening for smaller local organisations on funding proposal development. This will give them greater ability to access funding independently.

1   Introduction

1.1   Background

The Covid-19 pandemic has stressed global health and humanitarian systems, with global infections numbering more than 130 million and deaths surpassing 2.9 million by early April 2021 (John Hopkins University, 2021). In Afghanistan and Pakistan, Covid-19 placed an additional burden on health systems already under pressure from insufficient funding and poor access to services (WHO, n.d., a; b). Both countries have also seen a drastic increase in humanitarian needs due to the economic and social impacts of the pandemic, beyond the immediate health concerns (further explored in Chapter 2).

Amid the growing humanitarian needs and operational challenges created by Covid-19, calls for the sector to shift to a more locally led approach have increased (globally and in Afghanistan and Pakistan). However, questions remain as to whether these calls will lead to a meaningful shift in power, because there has been little evidence to date of change in the policies and practices that govern how the system operates. Within the sector, there is increased interest in identifying whether and how the pandemic has affected the localisation process across country contexts.

1.2   Purpose of the study and key questions

The purpose of this study was to review the impact of Covid-19 on shifts towards more locally led humanitarian action in Afghanistan and Pakistan and the potential broader implications for the sector as a whole. The study aims to add to the growing body of research on this topic, including studies from the Pacific (HAG et al., 2020a) and Myanmar (HAG et al., 2020b).

As part of ongoing research on how the pandemic has influenced the localisation of humanitarian aid, the Humanitarian Policy Group (HPG) partnered with Humanitarian Advisory Group (HAG) and GLOW Consultants, Pakistan, to carry out this study across Afghanistan and Pakistan. These countries were selected to enable an assessment of how Covid-19 has affected localisation in countries within the same geographical region but with different operational contexts. Refer to Box 1 for the definition of localisation used in the context of this report.

The following key questions were explored during this research:

- How is Covid-19 affecting locally led humanitarian action in Afghanistan and Pakistan?
- What are its impacts on different actors, including local and national actors and NGOs, INGOs, UN agencies and donors? How are actors shifting their practices?
- What opportunities and challenges in relation to locally led humanitarian action have emerged as a result of the Covid-19 pandemic?
- How will these changes influence future responses?

Box 1   Defining localisation

While there is no global consensus on how localisation should be defined, the following definition was utilised for the purposes of this report:

> Localisation is a process of recognising, respecting and strengthening the independence of leadership and decision-making by national actors in humanitarian action in order to better address the needs of affected populations.

This definition is from *Going local: achieving a more appropriate and fit-for-purpose humanitarian ecosystem in the Pacific* (Centre for Humanitarian Leadership and HAG, 2017), by HAG and the Australian Red Cross. The definition was developed by Pacific leaders during consultations for the research, but it has relevance across other regions and contexts.

1.3   Study methodology

The research was primarily framed around the Measuring Localisation Framework developed by HAG and the Pacific Island Association of NGOs (PIANGO) (HAG and PIANGO, 2019) (see Box 2). The approach built on similar research carried out by HAG and local partners in Myanmar (HAG et al., 2020b) and Vanuatu (VANGO and HAG, 2020), in which the framework was adapted and applied to the Covid-19 context. The Measuring Localisation Framework has seven areas of measurement. For the purposes of this research, analysis was limited to five areas: coordination and complementarity; leadership; partnerships; capacity; and funding.

The study used a mixed methods approach. This included a review of relevant documents, 50 key informant interviews (KIIs) with national and international actors operating in Pakistan and Afghanistan, and a self-administered survey with 120 responses. Due to the Covid-19 pandemic, data collection was managed remotely, and all KIIs were conducted using phones and tools such as Skype, Zoom and WhatsApp.

Interviewees included representatives from LNOs, INGOs, UN, donors and coordination bodies (Table 1). KIIs were conducted in English, Urdu, Pashto and Dari to ensure participants could contribute meaningfully. Researchers from GLOW Consultants led the interviews with LNO participants and shifted between languages during discussions to enable participants to share their insights freely. All interview transcripts were translated into English for analysis purposes. MAXQDA was utilised for the assessment of qualitative data (see Appendix 1).

Box 2   Measuring Localisation Framework

The Measuring Localisation Framework and Tools (2019) were developed when PIANGO and HAG, together with national civil society organisation (CSO) umbrella bodies in the Pacific, collaborated to design and undertake a localisation baselining process in four Pacific countries.

The indicators and means of verification were drawn from the consultation process and previous work on localisation at regional and global levels, including HAG's 'Measuring localisation' paper (HAG and PIANGO, 2019), and work done by the START Network, the Active Learning Network for Accountability and Performance (ALNAP) and the Network for Empowered Aid Response (NEAR). This framework provides a method for actors to measure progress on localisation in a holistic way by contextualising it as needed.

Figure source: adapted from VANGO et al. (2019)

Table 1   Details of interviews conducted

Respondent's organisation type	Country		Total
	Pakistan	**Afghanistan**	
International	6	8	14
Local	10	26	36
Total			**50**

The quantitative questionnaire was distributed to national and international actors operating in Pakistan and Afghanistan through direct contact and circulation through coordination networks. It was completed by 120 people, most of whom represented local organisations (Table 2). To ensure the participation of diverse respondents, the questionnaire was made available in English, Urdu and Dari. Researchers at GLOW Consultants reached out to respondents using landlines, mobile phones, Skype, Zoom and WhatsApp to support the completion of the questionnaires.

Table 2   Details of survey respondents

Respondent's organisation type	Country		Total
	Pakistan	**Afghanistan**	
International	7	24	31
Local	38	51	89
Total			**120**

1.3.1   Limitations

- **Interpretation bias:** The data may have been influenced by differing interpretations of key terms used during the data collection process, including translation between languages.
- **Participant engagement:** Remote data collection necessitated by Covid-19 may also have influenced participant engagement and openness.
- **Representation:** Most of the stakeholders involved in the research were from national and international NGOs. Input from government representatives and community members was not captured as part of the primary data collection process.
- **Scope of evidence:** It is important to note that this was a rapid high-level analysis, so not all activities were captured. This research cannot be considered a comprehensive review of the Covid-19 response in Afghanistan and Pakistan, which remains ongoing.

1.4   The humanitarian and Covid-19 context in Afghanistan and Pakistan

1.4.1   Afghanistan

Afghanistan faces several ongoing humanitarian crises after decades of insecurity, conflict and natural hazards (see Box 3). The United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA) estimates 18.4 million people in Afghanistan (of a population of 40.4 million) will need humanitarian assistance in 2021 (UNOCHA, 2020a). In 2021, drought conditions have already set in, which will further exacerbate humanitarian needs and increase vulnerabilities (UNOCHA, 2021a). As the US continues the withdrawal of its armed forces, and peace talks between the Afghan government and Taliban continue in Qatar, the situation for Afghanistan's population remains precarious (Gannon, 2021).

Over the past four decades, various conflicts have led to Afghans becoming one of the biggest protracted refugee populations in the world, with more than 2.6 million registered refugees globally and millions more unregistered (Amnesty International, 2019). In addition to ongoing conflict, Afghanistan frequently experiences natural hazards such as flooding, drought and landslides. In 2020 alone, more than 108,000 people were affected by natural hazards (Humanitarian Response, 2021). The many national and international organisations providing humanitarian assistance in Afghanistan often face access and registration issues associated with government or non-state actors' control (or lack thereof) (ACAPS, 2021a).

As of 25 March 2021, Afghanistan had reported 56,226 confirmed cases of Covid-19 across its 34 provinces, and more than 49,800 people had recovered from the virus (UNOCHA and WHO, 2021). The number of deaths from Covid-19 stood at 2,467, including 91 healthcare staff, with only 335,965 Covid-19 tests undertaken (ibid.). The country's low testing numbers may mask the true spread of the virus, given the high Covid-19 positivity rate, which was estimated to be at 31.5%, with the rate in Kabul at 53% (Afghanistan Ministry of Public Health, 2020). Conflict-affected areas struggle to maintain adequate health services, and few pandemic-related services exist (UNOCHA and WHO, 2021). Healthcare staff constitute 8% of the reported cases of Covid-19 in the country; this and a shortage of suitable medical equipment further complicate the health response (UNOCHA, 2021b).

Box 3   The changing humanitarian operational context in Afghanistan

Afghanistan has a complex history as a twentieth-century theatre of international aid (Nunan, 2016). In the twenty-first century, as the reconstruction phase began after the US-led military intervention to overthrow the Taliban in October 2001, there was an increase in the number of (Western-origin) NGOs and UN agencies operating in Afghanistan. This was in part due to the improved security context and mounting needs on the ground – increased by large numbers of returning refugees (primarily from Pakistan and Iran) (ACBAR, 2014). More significantly, increased funding (some long-term), and the desire of international actors to position their work more visibly in a crisis receiving global attention, contributed to this growth (HPG, 2003). During this period, almost a third of the Afghan population lived either as refugees in other countries or as internally displaced people (IDPs) within Afghanistan. NGOs were involved in assisting the IDPs and returnees, as well as supporting the government in the education and health sectors (Bryer, 2004).

According to a study of NGOs in Afghanistan, 158 NGOs, including 53 INGOs (34%), were operating in the country in 2000. Their number grew considerably to 397 (including 215 INGOs – 54%) only three years later. As of 2014, the number had increased to 617, with 263 (43%) of them INGOs (Mitchell, 2017: 5). However, the number of organisations registered to operate within the humanitarian response space was much higher than the number of registered NGOs, with many local contractors or for-profit entities also working in this area. This occurred in response to increased need for local support for the implementation of activities of international actors as funding and humanitarian work increased.

Government and non-state actors have both sought to manage aid organisations; in general, local and national NGOs with established networks and experience mobilised across the country, while international actors have focused their work on areas with more secure access. The government currently has a centralised process of registration for NGOs and CSOs, but many line ministries also require their direct NGO partners to register with them. In Afghanistan, projects worth more than $8 million also require cabinet approval.[i] Working within Taliban-controlled areas poses ethical, political and operational challenges for LNOs and INGOs to navigate, as they seek to support people in need and remain neutral while abiding by strict donor and Afghan government regulations on interactions with the Taliban. Since the Taliban began to formalise its operational process in late 2009, NGOs have had to establish ways of working with them to maintain their access and safety (Bowden and Siddiqui, 2020). These interactions often took place at the community level through working with community leaders. Cooperation of the Taliban (as well as other militias operating across the country) has also been an important factor in the Covid-19 response process and will continue to be so as vaccine rollout progresses (Glinski, 2021).

i Interview 33. Afghanistan – international organisation interviewee.

1.4.2   Pakistan

Pakistan was already facing multiple humanitarian emergency crises and had well-established response mechanisms when Covid-19 hit (see Box 4). Pakistan is prone to natural hazards and has a history of low-intensity conflict, especially in border areas with Afghanistan, in the Balochistan province, and Azad Jammu and Kashmir. Pakistan primarily receives humanitarian assistance in response to large-scale floods, earthquakes and droughts. It is estimated that more than 3 million people in Pakistan are affected by natural hazards annually, with 5 million people affected by the 2018–2019 drought in Balochistan and Sindh (ACAPS, 2021b). Access to reliable health services remains a key development issue in Pakistan, with an average of only 1.45 health staff and 0.6 hospital beds for every 1,000 people (UNDP, 2020).

The situation has worsened due to armed conflict in parts of Pakistan over the last decade, resulting in considerable forced displacement (more than 5 million people displaced since 2009) (IOM, 2019). Humanitarian assistance often faces delays due to government-mandated NGO registration and complicated approval processes for humanitarian actors (ACAPS, 2020). Pakistan also houses the second-highest number of Afghan refugees in the world (1.5 million documented and up to an estimated 500,000 undocumented), adding another layer of needs and complexity to the humanitarian context in the country (IOM, 2019).

Pakistan reported its first Covid-19 case on 26 February 2020 (Shahid, 2020). A national lockdown was imposed in March 2020 to control virus transmission, but the country transitioned to 'smart lockdowns' that targeted identified hotspots as a way to minimise the economic impact. As of 11 April 2021, Pakistan had reported 721,018 confirmed cases and 15,443 Covid-related deaths (John Hopkins University, 2021). In order to reduce the financial hardships of the population, the Pakistan Social Protection programme (Ehsaas) distributed cash assistance of $80–82 per month to more than 10 million families (UNOCHA, 2020b). Pakistan also designated 25 tertiary hospitals for Covid-19 (NIH, 2021b) and set up 155 Covid-19 testing laboratories (NIH, 2021a). Vaccine rollout in Pakistan is underway, with more than 800,000 doses administered as of April 2021 (Government of Pakistan, 2021; John Hopkins University, 2021).

Box 4   The changing humanitarian operational context in Pakistan

Following many years as a host of refugees and mujahideen from the Soviet–Afghan war, Pakistan saw a greater flow of funding and foreign aid during the decade following the US-led military intervention in 2001, as it became one of the most important partners for the US and its allies in the military offensive in Afghanistan (HPG, 2003). However, in the decade since, the Government of Pakistan reshaped its NGO operational policy, putting restrictions in place to manage INGOs. This included a more stringent visa policy for international aid workers, and mandating a no objection certificate (NOC) for staff from international organisations to travel to areas designated by the government as restricted.[i] All humanitarian actors are required to obtain project NOCs to implement activities in Khyber Pakhtunkhwa, Balochistan and Punjab (UNOCHA, n.d.).

Additionally, the NGO policy stipulated that Pakistani citizens should be preferred for key positions (with foreign national staff to be capped at 10%), and limited administrative expenses (to below 30%). Complicated registration requirements and layered approvals for each new project created additional hurdles for INGOs and donor operations, which led to international staff departures as well as closures of international organisations. Some INGOs shifted to operating with national staff only.

This NGO policy reduced INGO operations in Pakistan, but provided an opportunity for local staff and organisations to come forward. The Pakistan Ministry of Interior and Narcotics Control's page for INGOs carries the notice 'Attention all INGOs! You must register with the Ministry of Interior within 10 days, or you will be stopped from operating in Pakistan' (Pakistan Ministry of Interior and Narcotics Control, 2021). Controversially, the registration process has been used on several occasions to ask INGOs to close down their operations in the country (Khan, 2018). While the requirements for LNOs are less stringent than for INGOs, LNOs which receive international funding face greater regulation.

Recognising the challenges of Covid-19, the government eased the NOC requirements and documentation processes for already-registered INGOs involved in response activities in 2020 (Mukhtar, 2020). However, these activities were restricted to specified areas and subject to the collaboration of and/or approval by national and provincial disaster management authorities. LNOs were also given more flexibility to operate during this period as they responded to Covid-19 needs.

i The travel-related NOCs are specifically required for international organisations, both for their national and international staff. However, getting travel NOCs for international staff is noted to be more difficult.

2   Impact of Covid-19 on the humanitarian sectors in Afghanistan and Pakistan

As the Covid-19 pandemic took hold globally, humanitarian actors faced the challenge of responding to the health crisis as well as delivering ongoing programming, all while seeking to maintain the safety of their own staff and volunteers. Government-mandated closures and lockdowns in response to the first wave of Covid-19, including in Pakistan and Afghanistan, complicated the implementation of humanitarian activities and disrupted typical approaches. The situation compelled organisations to adapt and reshape their working approaches quickly, while also building staff capacity.

While the humanitarian sectors in Afghanistan and Pakistan were as a whole underprepared to operate in the new context created by the pandemic, international organisations were able to adjust relatively quickly, in part due to greater resource availability but also the support they received from their global networks.

> We [international organisation] were lucky because our headquarters was really fast in planning and organising – probably because Europe was impacted so badly [by Covid-19]. We brought down PPE [personal protective equipment] way in advance even before the government were able to.[1]

This section outlines the key impacts of Covid-19 in terms of increased need and funding, reduced access, increased focus on remote programming approaches, and shifts in monitoring and evaluation.

2.1   Increase in needs and funding

The overall funding received in both countries has increased gradually over the years, and did so substantially during 2020 (explored further in section 3.4). In 2020, OCHA funding (both the CBPF and Central Emergency Response Fund (CERF) allocations) for Pakistan and Afghanistan increased by 13% and 28% respectively from 2019 (UNOCHA, 2021c).

However, it is important to note that, while there was some increase in funding in 2020, humanitarian needs in both countries have increased markedly due to Covid-19 (Figure 1). For example, a mid-year adjustment to Afghanistan's Humanitarian Response Plan to enable the response to Covid-19 saw the number of people estimated as needing humanitarian assistance increase by around 5.6 million (to a total of 13.9 million) – 48% greater than projected at the beginning of the year. This number increased to 18.4 million for 2021 (UNOCHA, 2020a). Similarly, in Pakistan, the number of people in need in 2020 (in the Covid-19 response plan) increased by 32% from 2019, and the 2021 figures were 59% above the 2020 estimates.

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1   Afghanistan – international organisation interviewee

Figure 1   Trends in humanitarian needs in Afghanistan and Pakistan
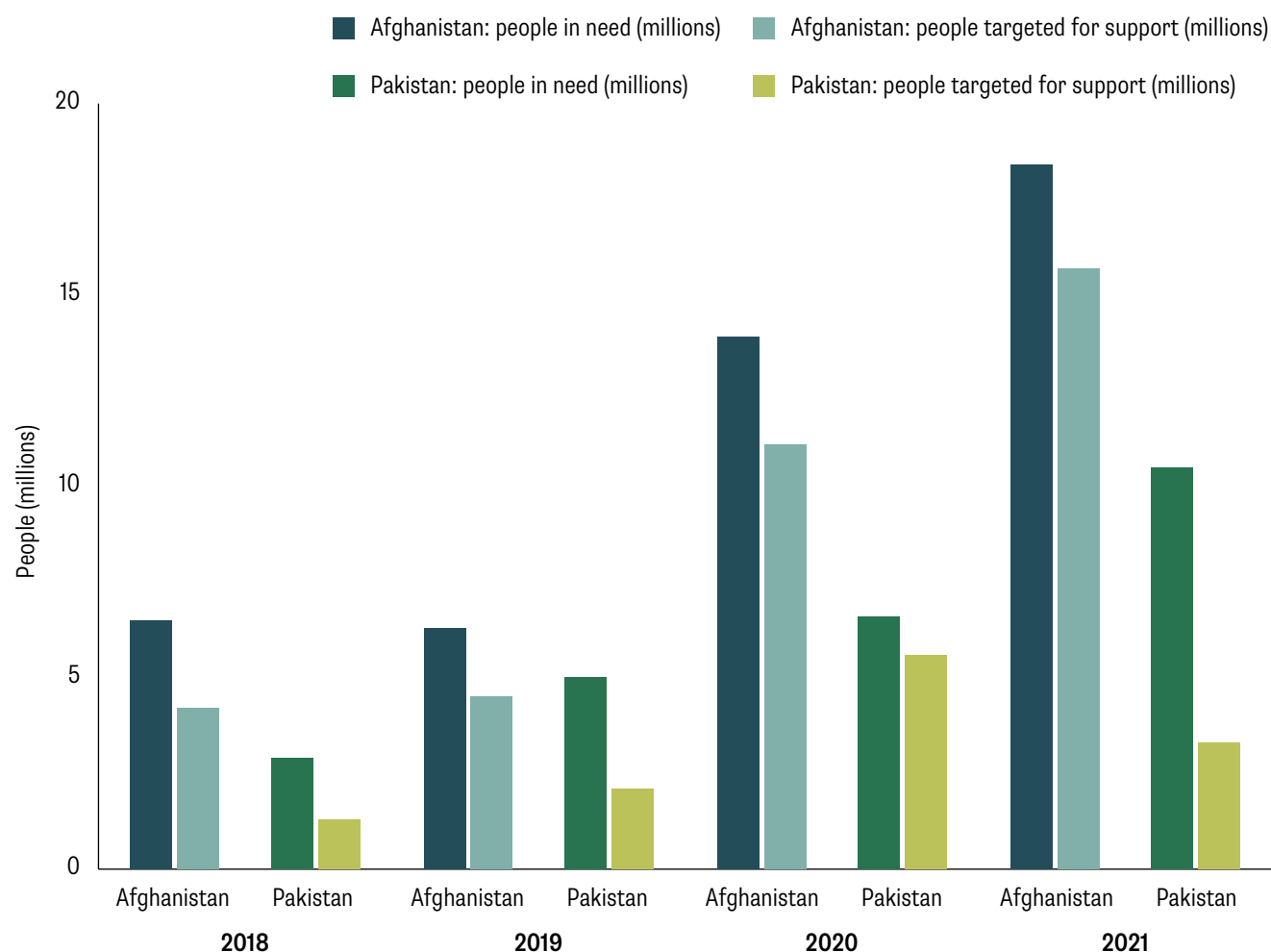
Source: UNOCHA Humanitarian InSight (2021a; b)

2.1.1   Shifting access dynamics

International and local/national organisations faced specific enablers and barriers in working within the Covid-19 context. As most international organisation offices are located in Islamabad or Kabul, they were better placed to shift to remote working approaches due to greater logistical, funding and technological capacities in these cities. However, their community access and operational capacity on the ground was limited by the restrictions put in place due to Covid-19. This reduced their ability to respond in a timely way with interventions such as food distributions and health services.[2] This led to a greater reliance on community volunteers and LNO staff undertaking fieldwork, increasing their risk of contracting Covid-19 because many of them did not have the necessary PPE and training.

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2   Interview 10. Pakistan – local organisation interviewee.

> Lack of mobility and risk of contracting Covid-19 increased the importance of the local implementing partners because international organisations stopped engaging in field operations.[3]

Local and national organisations, particularly those based in more inaccessible areas, faced greater and more complex challenges in shifting to a remote working model than their international counterparts. Problems LNOs faced in Pakistan and Afghanistan included electricity breakdowns, difficulty accessing the internet and mobile networks, poor technological resources, little physical space in their homes to operate remotely, and funding constraints that discouraged and slowed the process of adaptation to remote working.

In some ways, the pandemic response has encouraged more openness to non-government actor contributions. Prior to Covid-19, the humanitarian sector in both Afghanistan and Pakistan had been experiencing shrinking space to operate freely along with the broader civil society (Tappa, 2018; CIVICUS, 2019). For a limited time, governments eased restrictions on NGOs working on Covid-19 response and, in a special provision, the Government of Pakistan exempted NGOs from obtaining NOCs for 2020, which were previously essential for operating (see Box 4). These were important steps in terms of improving access.

Despite some of these positive policy steps, cultural constraints (see Box 5), combined with Covid-19 restrictions, continued to limit the access and effectiveness of Covid-19 response work – especially in more remote communities. A lack of access to communication technologies, such as television and the internet, further affected the dissemination of public health information and related humanitarian messages. Within the broader impact on humanitarian support, interventions related to marginalised groups such as women and girls were adversely affected. A UN Women rapid assessment in April 2020 indicated that 71% of women's CSOs in the Asia Pacific region (including Afghanistan and Pakistan) were already hampered by the effects of Covid-19, with 12% forced to temporarily suspend operations. The issues faced by these organisations included the need to minimise staff presence, funding shortages, the need to close down offices, and inability to provide full support to survivors of violence (UN Women, 2020).

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3   Pakistan – local organisation interviewee.

Box 5   Cultural challenges in responding to Covid-19

Multiple cultural constraints prevent community access and NGOs from working effectively on Covid-19 response. While these often stem from ongoing challenges humanitarian actors face, challenges specific to Covid-19 also emerged. Some of these are outlined below.

- **Gender roles:** In Pakistan and Afghanistan (especially in rural areas), the roles of women and young girls are often constrained compared to male family members. In such circumstances, even at home, women and young girls are often dependent on men for accessing the internet and mobile facilities, reducing their access to important information including Covid-19-related health communications. The closure of social institutions (such as schools) and limits on community gatherings during Covid-19 lockdowns also curtailed opportunities and platforms regularly used by NGOs to engage women and girls to share such information.
- **Covid-19 misconceptions:** In Pakistan and Afghanistan, denial and misunderstanding of Covid-19 are common. Comparison of the virus to a normal flu and information about Covid-19 being foreign propaganda and the pandemic being another means for the rich to oppress the poor are some of the major misconceptions that hindered access and response effectiveness.
- **Religious conservatism (Covid-19-specific):** Religion (primarily Islam) and associated cultural practices are critical components of daily life in Pakistan and Afghanistan. Government-imposed restrictions on religious activities due to Covid-19, especially on congregational prayers on Fridays and Eid festivals, and even burial protocols, met with opposition.
- **Social aspects:** In both countries, it is common practice to hug and shake hands in social interactions. Therefore, communities found it difficult to avoid these practices in order to remain Covid-19-safe.

2.1.2   Increased focus on remote approaches to programming and monitoring

To meet the challenges created by the pandemic context, LNOs – with the support of international organisations – initiated programmes through remote delivery to reach vulnerable communities. In one instance, a national organisation in Pakistan used radio to disseminate messages against violence against women, as well as Covid-19 awareness, as an alternative to an in-person approach. The main purpose of using radio was to reach those with no or limited access to the internet and television. In one instance, a national organisation in Pakistan used radio to disseminate messages against violence against women, as well as Covid-19 awareness messages, as an alternative to an in-person approach (see Box 6). These new approaches improved geographic and demographic coverage (Wood and Majumdar, 2020). Similarly, in Afghanistan, a direct partnership between UK Aid and local organisations used radio to continue their support activities for pregnant and lactating women.

The move to more remote coordination, programming and monitoring was encouraged and supported by international actors more broadly. This was partly because it became a necessity for them due to local restrictions but also organisational protocols. They also benefitted from resources and skills that made this transition easier. For LNOs, this was more challenging, as organisations and individual staff faced practical issues of inadequate resources, skills and even physical space. Donors and international partners were noted to support LNOs in this process, including providing more flexible approaches.

> We have a very active WhatsApp group, and whenever an emergency happens, we first hear it on the group from a local team on the ground who usually shares the news with images … WhatsApp was heavily used to monitor or provide updates.[4]

For accountability, organisations adopted remote monitoring and evaluation approaches, which donors and international organisations often implemented through third-party monitoring, engaging local partners. Both national and international actors described these approaches as cost-effective and in accordance with the operational requirements of Covid-19, while enabling them to ensure accountability and transparency.

> We experienced for the first time [a] remote monitoring approach during the distribution of food packages. In the same fashion, the donor did third-party monitoring of us through telephone. Interestingly, donors and we ourselves found it [a] time and cost-effective approach with similar results.[5]

Box 6   Insights: utilising radio as a tool to support hard-to-reach communities in Afghanistan

Citizens Organisation for Advocacy and Resilience (COAR) disseminated messaging approved by the Ministry of Public Health of Afghanistan and the World Health Organization (WHO) regarding Covid-19 in the capital, and targeted the provinces of Parwan, Takhar, Nangarhar, Paktika, Daikundi, Kandahar and Helmand. The messages were delivered daily for two hours in local languages (Dari and Pashto) through a local radio channel (Gorbat) and were included information on recognising and combatting symptoms of Covid-19. Local language and usage of radio proved to be effective in curtailing the spread of Covid-19 in the targeted provinces (Charter for Change, 2020).

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4   Pakistan – international organisation interviewee.

5   Pakistan – local organisation interviewee.

# 3   Impact of Covid-19 on localisation in Afghanistan and Pakistan

This section covers five areas of localisation and the related impacts of Covid-19 in both countries.

3.1   Coordination

Covid-19 had mixed impacts on LNOs' participation and influence on decision-making as a result of the digitalisation of coordination meetings.

Coordination between stakeholders is important in developing quality partnerships, inclusive decision-making and transparency. While humanitarian coordination structures strive to create inclusive forums for increased engagement, the models do not provide a platform for equal representation and voice (Hoppe, 2013). Generally, humanitarian sector coordination forums are led by INGOs and the UN, creating power imbalances between local and international staff. As such, these coordination mechanisms can be viewed negatively by LNOs because of power imbalances and non-inclusiveness in membership and leadership roles (Barbelet, 2019). In Afghanistan and Pakistan, interviewees identified how these power imbalances manifest in national coordination forums and committees, where larger national NGOs have more prominence and influence. These larger national organisations are also those that join the international forums. This places smaller LNOs – with their relatively modest resources and reach – at a distinct disadvantage in international as well national forums. Box 7 outlines the main coordination forums in both countries.

The established coordination structures in both countries include LNOs, although there are considerable differences between forums, with reduced representation in international-led structures such as clusters and humanitarian-specific coordination spaces (versus NGO coordination forums). Lower representation of LNOs places the power and decision-making roles with international actors. Perceptions of representation in these forums differed substantially between international and national or local actors that participated in the research, with international actors much more likely to feel that there is an adequate representation of local NGOs in forums and meetings than the local NGO actors themselves.

48% of **international actors** felt there was adequate representation of local and national organisations in international–national coordination forums and meetings

28% of **national and local actors** felt there was adequate representation of local and national organisations in international–national coordination forums and meetings
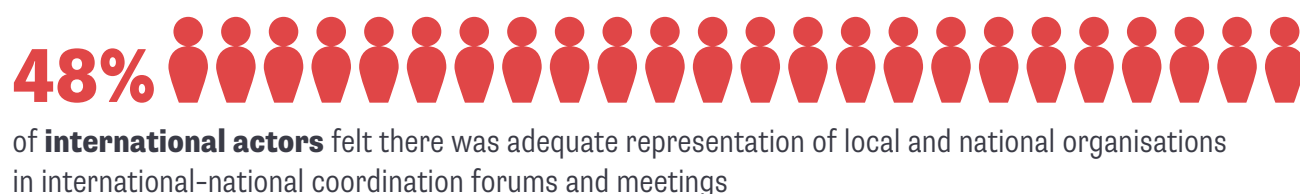
Box 7   Coordination forums in Afghanistan and Pakistan

In both countries, the main humanitarian coordination forums are humanitarian clusters, Humanitarian Country Teams (HCTs), and national and international NGOs' coordination platforms.

Coordination forum	Country	Description
Pakistan Humanitarian Forum (PHF)	Pakistan	PHF is an independent coordination forum of INGOs formed in 2003. It supports and facilitates the work of INGOs in effectively delivering humanitarian assistance
National Humanitarian Network (NHN)	Pakistan	The NHN was established in 2010 as an independent national coordination forum with more than 140 members (LNOs only)
Agency Coordinating Body for Afghan Relief and Development (ACBAR)	Afghanistan	ACBAR is an independent NGO that provides a platform for information-sharing, coordination, advocacy and networking for both international and national organisations in Afghanistan
Humanitarian clusters	Pakistan and Afghanistan	These are Inter-Agency Standing Committee (IASC) coordination forums for various humanitarian sectors such as health, logistics, nutrition and water, sanitation and hygiene (WASH) clusters, including international and national organisations in both countries
Humanitarian Country Team (HCT)	Pakistan and Afghanistan	The HCT is a strategic and operational decision-making forum established and led by the Humanitarian Coordinator. It is composed of representatives from the UN, the International Organisation of Migration (IOM), INGOs and the Red Cross/Red Crescent Movement

In addition, in Pakistan, the government has a designated body, the National Disaster Management Authority (NDMA), which has provincial- and district-level chapters mandated with carrying out coordination. The government of Pakistan also set up the National Command and Operation Centre (NCOC) to coordinate all government efforts related to Covid-19. In Afghanistan, a consolidated coordination structure included LNOs in processes to increase transparency and decision-making, such as having two LNOs as permanent members of the HCT.[i]

i Interview 33. Afghanistan – international organisation interviewee.

Clusters and other humanitarian coordination forums are led or co-led by international actors, and LNOs from both countries felt these coordination systems were driven by international organisations with little input from LNOs. Some LNOs may not be fully aware of the mandate of coordination forums (e.g. IASC humanitarian clusters), which impacts interest and engagement in their activities.[6]

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6   Interview 10. Pakistan – local organisation interviewee.

Despite these inherent challenges in the coordination system and difference in perceptions, there was agreement across actors that the Covid-19 pandemic has created an opportunity for LNOs to have greater representation and participation in coordination forums.

65% of survey respondents agreed that local and national organisations' representation in the coordination forums had increased since the onset of Covid-19

One key reason for LNOs' increased participation in forums was the adoption of remote or hybrid (mix of in-person and remote) coordination approaches, which provided an alternative model to the traditional in-person approach. For example, NHN established technical working groups that have helped to strengthen connectivity between international actors and LNOs, and increase the collective voice and participation of LNOs.[7] Before Covid-19, attending these meetings was more difficult because it would often require travel (and associated cost and time) to major cities, where LNOs were not necessarily present.[8] The use of online forums was noted to make a difference, particularly for local partners, enabling them to join and contribute to conversations online (see Box 8).[9] The tech-based approaches used by international actors before Covid-19, considered only as a supplementary add-on to the traditional approaches, have now become a critical part of the operating model (Book, 2020).

The shift to more online coordination also presented financial, technological and infrastructure challenges, such as the inability to connect due to electricity breakdowns, mobile network interruptions and lack of internet in some regions. Some research participants also felt that the online format reduced the person-to-person interaction that is useful for problem-solving and interpersonal relations.

> Online coordination and communication approaches saved operational costs but reduced interactive interactions between the participants.[10]

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7   Interview 10. Pakistan – local organisation interviewee.

8   Interviews 2 and 3. Pakistan – local organisation interviewee.

9   Interview 15. Pakistan – international organisation interviewee.

10   Pakistan – local organisation interviewee.

Box 8   Attendance versus participation in digital coordination forums

While most informants believed that remote coordination had increased representation of LNOs, there was mixed feedback about the extent to which it had strengthened their voice and participation. For example, when the HCT in Afghanistan explored a new model of remote coordination, different levels of familiarity with the technologies were apparent in the meetings. With time, the participants' understanding of technology improved. 'We have three NGOs in the HCT; they all speak and participate'.[i]

Some participants believed that digitisation enabled NGOs to contribute more in coordination forums. For example, custom deters Afghan citizens from raising their hands in face-to-face meetings. 'It is somehow easier than raising a hand which is much harder for an Afghan as it's not culturally acceptable to interrupt.'[ii] Because of the digitisation of coordination forums, participants could contribute actively to the meetings.

> Virtual modes of coordination are easier to follow and have a direct positive impact on the participation. Local organisations with limited resources have now a chance to attend the meetings virtually. Technology plays a key [role] in greater participation of local organisations in the coordination meetings.[iii]

Conversely, some participants believed that the increased representation rate of LNOs at various forums did not create room for greater participation in decision-making. One of the barriers is language, with respondents identifying that international–national coordination meetings were conducted in English and reports or minutes were rarely written in local languages. The foreign language created hurdles in the form of understandings and participation in interactive discussions, although these are not the result of using online platforms (Street Child, 2020). In contrast, local coordination forum meetings were conducted in local languages.

i   Afghanistan – international organisation interviewee.
ii Ibid.
iii Pakistan – international organisation interviewee.

3.2   Leadership

The operational context created by Covid-19 necessitated greater local leadership, which was partially achieved. There were increased opportunities for local staff and some LNOs to be more actively involved in or to contribute towards decision-making. Nonetheless, international actors still held the key decision-making powers within the sector in both countries, although there was more effort to engage local and national actors and integrate their input.

> The influence of local organisations in decision-making with respect to previous years increased.[11]

Approximately 66% of survey respondents perceived that the Covid-19 context helped to strengthen the leadership roles of LNOs. This was facilitated in part by the increased participation rate of LNOs in coordination forums and greater cooperation between internationally led and nationally led forums. The main coordination forums (ACBAR in Afghanistan, PHF and NHN in Pakistan) acted as an important bridge between INGOs and LNOs. In Pakistan, collaboration was stronger between the two major coordination forums, PHF (a coordination forum of international NGOs) and NHN (a coordination forum of LNOs), supporting the Pakistan government's efforts in responding to Covid-19.

> This year, Pakistan Humanitarian Forum (PHF) and National Humanitarian Network (NHN) have done a lot more together, for instance [carried out] joint statements and joint advocacy.[12]

In a joint statement, the PHF and NHN together recognised the Pakistan government's commitment to ensure quality and timely medical care support to Covid-19 patients, as well as decisions made by the Ministry of Interior of Pakistan to allow NGOs to support government authorities like the NDMA and Provincial Disaster Management Authorities. At the same time, they advocated for a clear humanitarian response plan and waiving taxes for NGOs.

A long-term trend, further augmented by the Covid-19 context, is the emergence of local leadership in international organisations (Mokdad, 2020). Expatriate staff were limited in their movements due to border restrictions, including the closure of border crossing points and grounding of flights, meaning international organisations increased their recruitment of national staff.[13] When in-country mobility restrictions like lockdowns and closures of businesses were eased, international organisations maintained their own more stringent internal restrictions and guidelines for their staff.[14]

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11   Interview 10. Pakistan – local organisation interviewee.

12   Interview 15. Pakistan – international organisation interviewee.

13   Interview 16. Afghanistan – local organisation interviewee.

14   Interview 15. Pakistan – international organisation interviewee.

With some international staff travelling to alternative or home duty stations as precautionary measures, national staff were given the opportunity to play a more significant role within their organisations, even though international staff remained connected remotely. This included some national staff taking on interim leadership roles and playing a greater role in managing stakeholder relationships.

Although participation opportunities for LNOs increased and interim leadership opportunities were assigned to local staff, more work needs to be done to enable a long-term transfer of leadership roles and responsibilities. Similarly, the increased responsibilities of LNOs and local staff internally and at the field level are not reflected in greater roles at strategic levels. By revealing this situation, the Covid-19 pandemic may encourage international actors to initiate a transition of power in their own organisations and more broadly within the sector.

> Sector lead rests with United Nations and INGOs, as local organisations are only for field activities, not for decision-making.[15]

Opportunities for LNOs to provide input and influence decision-making in strategic platforms such as pooled funds remain insufficient. An international respondent stated that:

> the representation on the board … is insufficient. Only one INGO and one NNGO, and even on that, it is very difficult for the NNGO representative to raise their voices in a crowd where they are outnumbered, and in a situation where the international organisations are their funders.[16]

Examples such as the Myanmar Humanitarian Fund show how platforms can be managed more effectively to reduce power imbalances and create more targeted engagement with local organisation representatives (HAG et al., 2020b).

3.3   Partnerships

The partnership picture during 2020 was mixed. While the Covid-19 context opened the door for some new collaborations between national and international actors, smaller local NGOs were largely left behind. Although the context forced international organisations to reach out and work with national organisations in order to gain access to communities, there was little evidence that the quality of partnerships improved considerably in favour of national and local actors.

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15   Pakistan – local organisation interviewee.

16   Pakistan – international organisation interviewee.

The pandemic saw the return of some lapsed partnerships. For example, due to a greater demand for hygiene-related activities, the United Nations Children's Fund (UNICEF) engaged multiple local organisations in the Covid-19 response, which included partnerships with some local organisations that had been dormant since 2010.[17]

Another important aspect related to partnerships was for-profit/private sector engagement with LNOs during the Covid-19 response (see Box 9). These partnerships were established with major private sector companies who sought to meet their corporate social responsibility by partnering with LNOs. This enabled the LNOs to access an additional resource, increasing the number of channels for facilitating relief to affected communities.

The instances in which local NGOs were invited to partner with international organisations were due to reduced international access to affected populations. The adherence to Covid-19 standard operating procedures (SOPs) such as avoiding gatherings, maintaining physical distancing and working from home decreased INGO staff mobility in particular. Lack of access left international organisations with no choice but to trust local actors to implement humanitarian action. Therefore, as seen elsewhere, remote working became an essential driver of new partnerships with LNOs (ICVA, 2020).

Covid-19 pushed international organisations to find trustworthy local organisations as they were moving towards [a] remote working model.[18]

Box 9   New partnerships – corporate sector

As part of an overall commitment of PKR 100 million, Nestlé Pakistan supported vulnerable communities during Covid-19 by partnering in relief activities with leading local NGOs like the Shahid Afridi Foundation and Salman Sufi Foundation (Nestlé Pakistan, 2020). The assistance included milk, iron-fortified dairy products, baby cereals, water and juices.

Other multinational companies explored and established new partnerships with local organisations in the Covid-19 response. For example, a multinational telecommunications company operating in Pakistan pledged PKR 1.2 billion in support of the Covid-19 response. To meet its corporate social responsibility, the company partnered with non-profit welfare groups to provide PPE and testing kits.

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17   Interview 1. Pakistan – local organisation interviewee.

18   Afghanistan – local organisation interviewee.

One area where partnerships between international and national actors grew was local partners providing monitoring services. Due to their access and the increased openness to remote monitoring tools, such as photographic evidence of projects and documented interviews with recipients of assistance, local organisations were able to perform this role successfully.

> [We] deployed third-party monitoring through a local organisation contractor in 2020 who had access to all the areas – including hard-to-reach areas. We could get pictures, meet beneficiaries, initiate video calls and be part of it. We didn't expect it to be that effective.[19]

The economic fallout from Covid-19 reduced the global funding pool and resulted in insufficient funds for the health response and fewer opportunities for new partnerships or projects (while the absolute value of funding increased, it was not proportional to the increase in needs). The lack of new projects significantly reduced openings for new partnerships. Only 35% of survey respondents stated that partnership opportunities had increased during Covid-19; 21% felt there had been no change; and 42% stated that partnership opportunities had reduced.

18% 🧍🧍🧍🧍🧍🧍🧍🧍🧍

of **international actors** felt the impact of Covid-19 led to a reduction in partnership opportunities

50% 🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍🧍

of **national and local actors** felt the impact of Covid-19 led to a reduction in partnership opportunities

The interview data suggest that smaller local organisations felt the reduction in partnership opportunities most powerfully. The preference of donors and other intermediary actors to rely primarily on previous partnerships and existing relationships put smaller local organisations at a disadvantage. Local partner consultations in 2018 also highlighted that direct funding for local organisations often went to national organisations that are 'quite big (in terms of the portfolio) and old in this sector' while smaller organisations were ignored (Global Protection Cluster, 2018). Despite the commitment under the Grand Bargain to engage local organisations, the compliance requirements of donors mostly benefitted international partners and occasionally larger national organisations (Executive Committee of the High Commissioner's Programme Standing Committee, 2020).

When asked about the extent to which international organisations respect and work with LNOs, 89% of respondents from international organisations stated that this was the case all or most of the time (Figure 2). Most, but significantly fewer, survey respondents from LNOs shared this view (54%). This

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19   Afghanistan – international organisation interviewee.

difference demonstrates how international, local and national actors experience and view the quality of their relationships differently, highlighting the need for partnerships to be managed as a two-way process with space for open and honest discussion and reflection around challenges.

Figure 2   To what extent are international organisations respecting and working with local/national organisations? (Survey responses according to type of organisation represented)
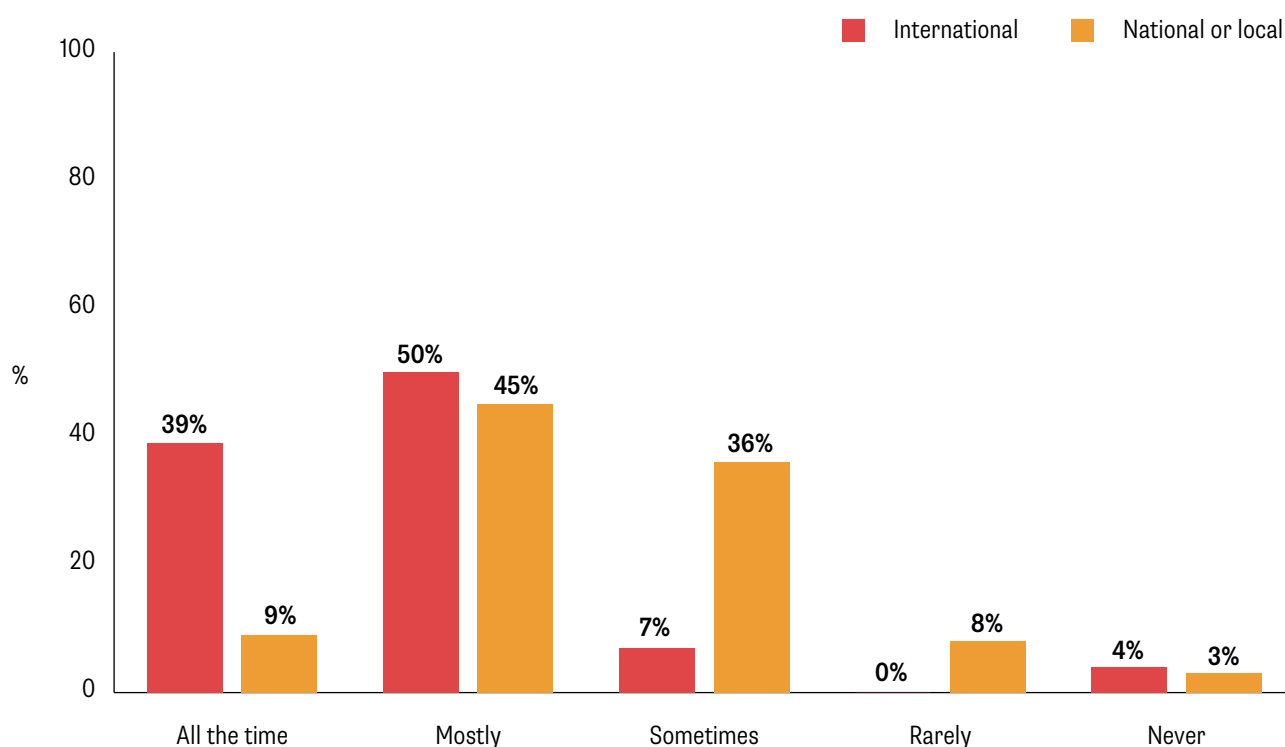
3.4   Funding

Covid-19 has produced a substantial increase in need, but the increase in funding has not been proportional (UNOCHA, 2020c; see Table 3). This significant level of unmet need is expected to have serious consequences in 2021 (UNOCHA, 2020a). The long-term economic impacts of the pandemic will only continue to increase the number of vulnerable people who require humanitarian support.

Table 3   Humanitarian funding needs and contributions in Afghanistan and Pakistan

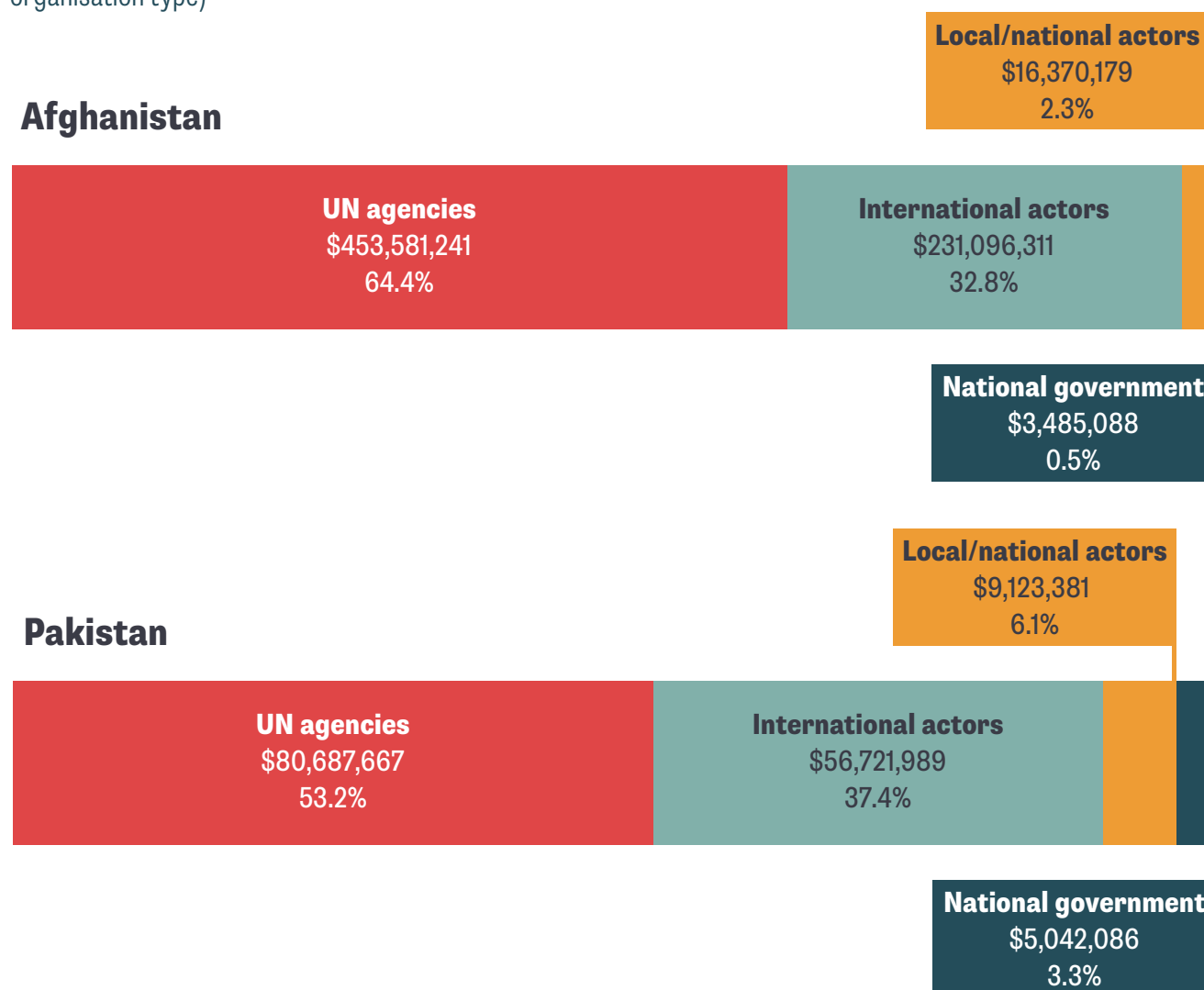|	Afghanistan		Pakistan	
	Funds requested in main appeal/plan($ million)	Amount funded in appeal/plan ($ million)	Funds requested in main appeal/plan ($ million)	Amount funded in appeal/plan ($ million)
2018	599	468	123	77
2019	612	466	202	58
2020	1,131	565	146	90
2021	1,282	–	285	–

Sources: UNOCHA Financial Tracking Service (2021a; b); UNOCHA Humanitarian InSight (2021a; b)

Globally, with calls to support a more locally led response during the pandemic, donors were also seen as (in principle) more supportive of funding LNOs. However, the rhetoric has not been matched in practice. The distribution of humanitarian funding in Afghanistan and Pakistan in 2020 illustrates that international organisations continue to receive the bulk of financial aid. UN agencies in both countries received the biggest portion of direct funding and, together with other INGOs and international foundations, they account for more than 90% and 87% of direct humanitarian funding in Afghanistan and Pakistan, respectively. In Pakistan 6% of the total funding is directed to LNOs, local foundations and the Red Cross/Red Crescent National Society. This is higher than in Afghanistan, where the corresponding figure is only 2.3% (although Afghanistan's absolute funding is higher due to much greater overall funding). As shown in Figure 3 and commented on by representatives of LNOs interviewed for this study, donors preferred to fund the UN and national governments (mainly via multilateral banks) to help fight the pandemic, inadequately recognising the role of LNOs who work with communities on the ground.

Obstacles to in-country procurement are a partial explanation: the Pakistan CBPF sought to purchase PPE to support the country's response efforts, but globally-set donor conditions required that PPE could only be purchased by the UN and from suppliers outside the country.

> [The donor] had a global decision that the UN had to purchase the PPE – from partners outside the country. This was when the rest of the world was running short of PPE, but Pakistan had high-quality PPE, including masks that matched [our international organisation's] and other global standards available. It's the practical aspects that restrict the localisation work.[20]

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20   Pakistan – international organisation interviewee.

Figure 3 Humanitarian funding distribution in Afghanistan and Pakistan in 2020 (by funding recipient organisation type)

Afghanistan

Local/national actors $16,370,179 2.3%		
UN agencies $453,581,241 64.4%	**International actors** $231,096,311 32.8%	
	National government $3,485,088 0.5%	

Pakistan

Local/national actors $9,123,381 6.1%		
UN agencies $80,687,667 53.2%	**International actors** $56,721,989 37.4%	
	National government $5,042,086 3.3%	

Note: international actors: international NGOs, foundations, Red Cross/Red Crescent. Local/national actors: local/national NGOs, foundations, Red Cross/Red Crescent.

More broadly, donors continued to fund their existing international partners, who in turn relied more on their local partners to deliver the work within Covid-19 restrictions. But some donors also utilised international organisations to channel more funding to local partners working within their stringent compliance regulations. This was often done through mechanisms such as the CBPF or dedicated programmes. For example, UK Aid funding was awarded to three Afghan LNOs through the Christian Aid-managed Nigeria Afghanistan Localised Preparedness Emergency Response (C19 NALPER) programme, specifically implemented in 2020 to support Covid-19 prevention activities among IDP and vulnerable households (Christian Aid, 2020).

Table 4 Total Country-Based Pooled Fund direct funding allocation to local and national organisations
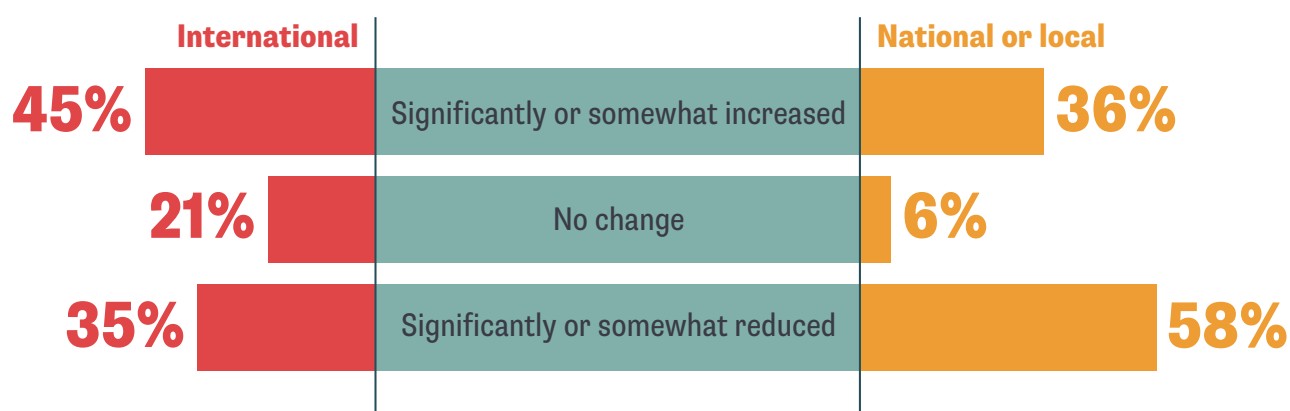
Year	Pakistan		Afghanistan	
	Total CBPF allocation ($)	Direct allocation to national NGOs – $ amount (% of total)	Total CBPF allocation ($)	Direct allocation to national NGOs – $ amount (% of total)
2017	5.8 million	4.7 million (82%)	44.9 million	8.0 million (18%)
2018	5.3 million	3.8 million (70%)	62.6 million	9.4 million (15%)
2019	8.9 million	3.3 million (37%)	63.8 million	3.4 million (5%)
2020	9.7 million	7.1 million (73%)	74.3 million	6.1 million (8%)

Note: Some of the UN's and INGOs' direct Country-Based Pooled Fund (CBPF) funding was later allocated to LNOs in the form of partnerships between LNOs and INGOs or the UN.
Source: UNOCHA (2021c)

A major component of the direct funding provided to LNOs in Pakistan comes from the OCHA-managed CBPF. In 2020, LNOs in both Pakistan and Afghanistan received an increased amount and proportion of CBPF direct funding. However, as can be observed in Table 4, this increase in proportion comes after the amount of funding that was passed on directly to LNOs in both countries dropped considerably in 2019. Notably, the percentage of funding that goes to LNOs from the Pakistan CBPF is significantly higher than in Afghanistan. This difference relates to the operational context and LNO experience in the two countries. See Box 10 for an instance where equitable use of CBPF funding has been questioned by partners.

Confirming the increase in overall funding during 2020 and that Covid-19 restrictions necessitated more partnerships with LNOs to deliver work or access communities, 53% of survey respondents agreed that Covid-19 resulted in increased funding for LNOs. However, when asked about how Covid-19 affected funding availability within their own organisation, 58% of LNO survey respondents (Figure 4) reported a reduction – indicating that the funding provided for Covid-19 response was primarily focused on project activities and did not lead to an improvement in the quality of funding.

Figure 4 What has been Covid-19's impact on the funding available to organisations? (Survey responses according to type of organisation represented)
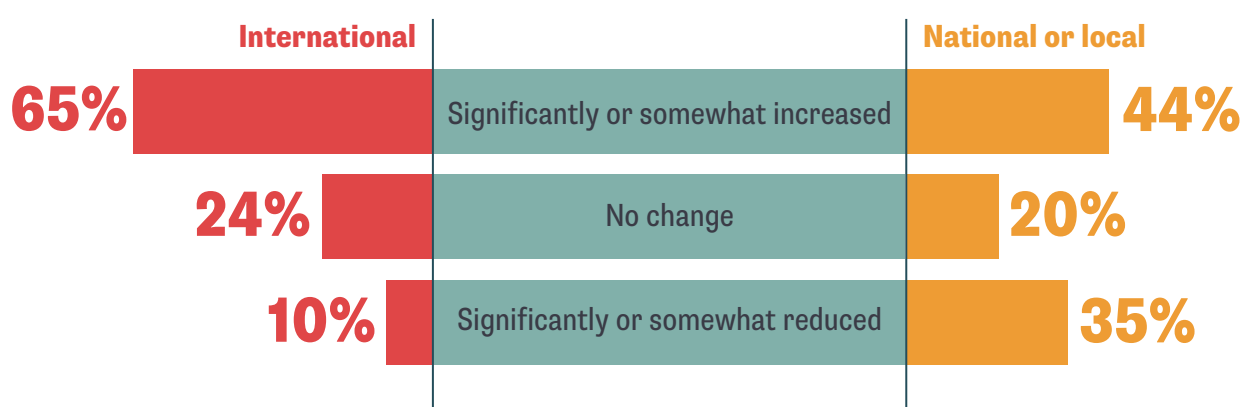

International		National or local
45%	Significantly or somewhat increased	**36%**
21%	No change	**6%**
35%	Significantly or somewhat reduced	**58%**

Box 10   Determining equitable use of pooled fund resources

Afghanistan remains a challenging country for humanitarian operations. The lack of adequate health facilities is a particular problem exacerbated by Covid-19. In February 2020, the Afghanistan Humanitarian Fund (CBPF) approved funding for a five-bed intensive care unit to 'provide Covid-19 intensive medical care for the international NGO, diplomatic and United Nations communities – so that they can continue to deliver vital humanitarian aid' (UNOPS, 2021). A UN organisation was funded to manage development and quality assurance; as of February 2021, the facility was yet to open. When the risk of contracting Covid-19 in a setting with inadequate health structure is faced by all humanitarian staff – and even more so by local staff, who are often in the field or have little or no space or resources to physically distance – setting up a facility that is only for international and diplomatic staff contradicts the humanitarian principles of impartiality and non-discrimination. Some donors raising this concern had opted out of this process.

> The fact that pooled fund money was used for this – and local staff and communities can't use it – when the CBPF is committed for localisation is quite contradictory. Using pooled humanitarian fund money – with no clear way to show that it will help to increase/benefit the humanitarian response was a problem.[i]

i   Afghanistan – international organisation interviewee.

Figure 5   Has Covid-19 resulted in increased flexibility in the available funding? (Survey responses according to type of organisation represented)

International		National or local
65%	Significantly or somewhat increased	44%
24%	No change	20%
10%	Significantly or somewhat reduced	35%

The survey data also show a clear difference of opinion between LNOs and international actors about the flexibility of funding use after Covid-19 (see Figure 5). Respondents from international organisations felt strongly that there was more flexibility in funds allocation for administration-related costs. Respondents from international organisations believed they also eased the rules and regulations for funding approval and provided online support to facilitate LNOs' access to funds. However, a large proportion (35%) of LNOs did not agree that funding had become more flexible.

> Donor flexibility resided with international organisations as [the] vast majority of funding went to international organisations. Additional funding was provided to realign existing projects to Covid-19. Ultimately, some organisations shared flexibility but not major ones.[21]

Interviewees noted that, as projects related to health and hygiene were prioritised (given the pandemic context), some NGOs experienced funds being diverted from their regular projects to the health sector or temporary halts to ongoing projects in areas such as education. The long-term implications of these diversions are not yet known, but respondents generally agreed that funds should be increased for all sectors to ensure projects are carried out successfully in areas other than health.[22] This also provides some insight into how donors had to adapt their aid strategies to meet the increasing demands of the pandemic response. This diversion of existing funding was supplemented with additional funding (mobilised in response to country-specific appeals and a global Covid-19 appeal), although, as evident above, the funding has not been sufficient to meet all needs.

Larger, national-level LNOs were better placed to cope with pandemic-induced changes than smaller or local NGOs due to their stronger networks and connections with key stakeholders, including governments, INGOs and the UN. These advantages enabled them to obtain approvals (such as NOCs) and data from government departments more easily. Moreover, along with government resources and data, larger national organisations had the capacity to conduct quick assessments using their own resources, which allowed them to send needs assessment reports along with their proposals for direct funding. For instance, one Pakistan-based organisation with national outreach raised PKR 329 million more than its target of PKR 500 million for its Covid-19 response fund.[23] Its representative reported a 70–80% increase in funding in 2020 due to the pandemic, enabling them to support more beneficiaries. This also highlights how some of the larger national organisations in relatively strong positions were able to consolidate their position compared to smaller, community-based CSOs and NGOs.

Some of the smaller LNOs faced more financial constraints due to the challenges they faced, with already diminished resources leaving them struggling to find funding. Some local organisations faced challenges in receiving and issuing funds because Covid-19 restrictions impacted bank operations – including temporary closures or reduced hours and halting of physical cash transactions. This was a major

21   Pakistan – local organisation interviewee.

22   Interviews 5 and 9. Pakistan – local organisation interviewees.

23   Interview 1. Pakistan – local organisation interviewee.

challenge for local organisations that used cash payments for workers and contractors, meaning they had to shut down some projects or delay upcoming activities.[24] Some LNOs resorted to 'avoiding new recruitments due to their financial concerns',[25] as cashflows of smaller organisations were likely reduced by increased needs, redirection of finances and uncertain operational context. The increased cost of interventions was another concern the respondents raised; the pandemic prompted many new safety measures and, therefore, greater expense. Despite undertaking a greater proportion of the frontline work, LNOs' increased expenses were not appropriately covered by donors and intermediaries. However, LNOs continued to operate, making practical adjustments to reduce the risk for staff and beneficiaries. For example, this included working with community leaders to identify and prioritise beneficiaries upfront and conduct door-to-door distributions in place of larger gatherings and community meetings.

3.5   Capacity

The onset of Covid-19 had both positive and negative implications for humanitarian staff capacity. On the one hand, there were more opportunities for capacity-strengthening as more trainings and learning opportunities were moved online, making them more widely available and cost-effective. On the other hand, increased transfer of responsibilities and reduced ability to access resources and training content online disproportionately disadvantaged LNOs. This combination of effects is seen in the wide distribution of views captured in survey responses (Figure 6): 41% of the survey respondents felt that Covid-19 led to a reduction in human resource capacity, while 30% felt there was no change, and 29% felt there was an increase.

Figure 6   How has Covid-19 impacted your organisation's work with respect to staff/human resource capacity?

29%
Significantly or somewhat increased

30%
No change

41%
Significantly or somewhat reduced

24   Interview 1. Pakistan – local organisation interviewee.

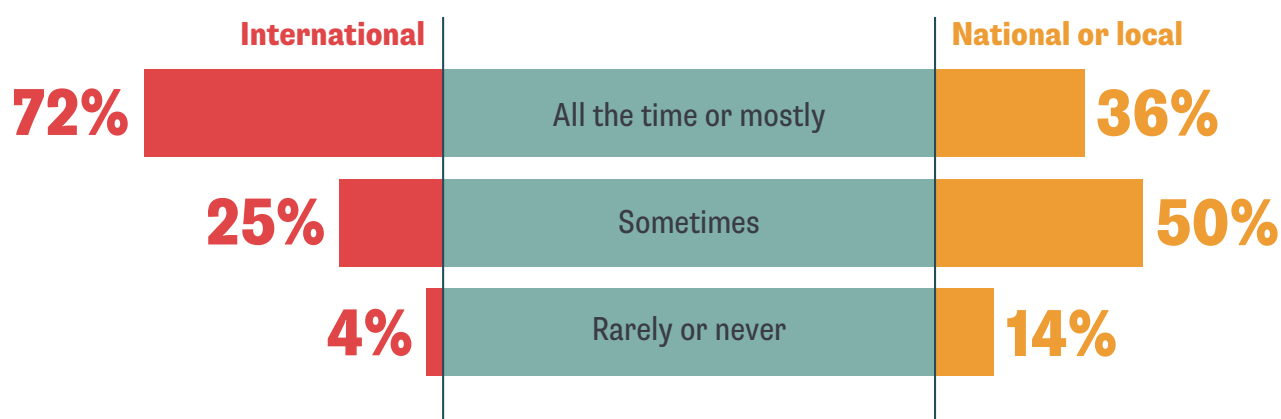25   Interview 6. Pakistan – local organisation interviewee.

> Limitation of activities of international organisations may not have positive impacts on its staff capacity; contrarily, active involvement of national and local actors and their online trainings played a positive role in local staff capacity building.[26]

Covid-19 led to a greater share of responsibility being transferred from international humanitarian actors to national and local humanitarian actors. This required international actors to provide adequate capacity support to their local partners. International actors mostly supported their existing local and national partners in making some of these adjustments. It is important to recognise that the historical experience of LNOs in responding to various disasters, such as floods, earthquakes, conflicts and drought, underpinned their ability to quickly step up to respond to the Covid-19 pandemic. Similarly, some LNOs have long-term partnerships with international actors that helped them to strengthen institutional capacity in specific areas.

Ongoing capacity-strengthening work contributed to greater access to funding for LNOs. For example, the ACBAR-facilitated twinning programme supported LNOs to meet CBPF funding eligibility requirements. In the current phase, LNOs that completed the programme are supporting a new cohort of LNOs through this process. Since Covid-19, the programme has continued its work, but with a shift in approach, moving to virtual online training and meetings (ACBAR, 2021).

During the research, while 72% of international organisation survey respondents believed that international actors helped to improve the capacity of LNOs all the time or most of the time, only 36% of respondents from LNOs shared this sentiment (Figure 7). This shows a misalignment in perceptions of how capacity-strengthening activities are progressing through partnerships between international and local/national actors.

Figure 7   How much are international organisations helping to strengthen the capacity of local/national organisations? (Survey responses according to type of organisation represented)

International		National or local
72%	All the time or mostly	36%
25%	Sometimes	50%
4%	Rarely or never	14%

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26   Afghanistan – local organisation interviewee.

Training activities moving online increased opportunities for capacity-strengthening initiatives to become more accessible. However, these disproportionately benefitted staff from international actors, who had a global resource and training base to draw on. For example, staff in some international organisations were given more opportunities to improve their resilience to operate safely in the Covid-19 environment;[27] some LNOs used their own resources to acquire these much-needed skills. But broadly, more opportunities for training and learning opened up for local staff and LNOs than in the pre-Covid-19 environment.

> Trainings which previously required international travel now happens locally – mainly online. So, more people can undergo training. Maybe the exposure might have reduced, but it is still great that trainings are happening, and more local staff are getting the chance. There are so many trainings and meetings online. We now have access to so many trainings and content that it comes down to figuring out what is most relevant.[28]

Early in the Covid-19 response, when LNOs' staff faced difficulties in adapting to the remote working modalities, their management decided to provide internal training in the use of WhatsApp, Skype and similar technologies to support their expanded roles. In addition, field SOPs on using PPE and physical distancing practices ensured staff safety. At the same time, some organised external training; for example, a Pakistan-based local organisation directed its staff members to complete WHO's Workplace Response Certificate to learn new response mechanisms and tools.[29] Through this, staff not only received education about keeping a safe and healthy workplace environment but learned about remote and hybrid approaches for implementing field activities.

In post-Covid, we strengthened our staff capacity by educating them about WhatsApp group management and senior staff with computer tools like Zoom. With time we now get used to Zoom, and now the first thing we ask about any meeting is [for the] Zoom meeting invitation.[30]

Some interviewees from LNOs felt that difficulties local-level organisations faced in securing funding in the Covid-19 response were linked to their lack of readily available technical and financial resources, which restricted their ability to conduct rapid surveys and produce high-quality technical proposals. However, by using their local advantage, some actors managed to come up with solutions such as reaching out to vulnerable communities with the help of volunteers. For example, an Afghanistan-based local organisation engaged volunteers to help with needs assessments in IDP camps in Kabul and Kunar provinces (Charter for Change, 2020).[31] Nonetheless, while local organisations were able to work responsively and creatively as part of a larger response, neither the capacity-strengthening support they received nor the structures in which they were required to work were sufficient to maximise their contribution.

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27   Interview 30. Afghanistan – international organisation interviewee.

28   Pakistan – international organisation interviewee.

29   Interview 10. Pakistan – local organisation interviewee.

30   Pakistan – local organisation interviewee.

31   Interview 23. Afghanistan – local organisation interviewee.

As already alluded to, in the early days of the pandemic, segments of international staff, including aid workers and diplomatic staff, moved back to their home countries (depending on travel restrictions) or alternative working locations as they shifted to remote working.[32] In Pakistan, the government enacted a temporary border closure, while Afghanistan left the air borders open. Overall, it was noted that the outward movement of staff gradually reduced after the initial peak, with staff opting to return as flights resumed. With most international staff continuing their work remotely, and national staff taking on more responsibilities where needed, the impact of international staff movement on capacity was minimal.

32   These relocations also depended on the availability of flights, because some airlines stopped operations temporarily.

4   Conclusion

4.1   What does this mean for localisation in Afghanistan and Pakistan?

Despite their commitments to promote localisation under the Grand Bargain and other frameworks, international actors' practical steps have long been underwhelming (Konyndyk et al., 2020). Since the beginning of 2020, across the world, Covid-19 restrictions and risks have forced international actors to place greater focus on localisation, more from necessity than choice.[33] Some opportunities created by Covid-19 to further the localisation agenda were seized, while others were partially achieved or completely missed.

In Afghanistan and Pakistan, the Covid-19 pandemic has the potential to deliver a timely boost for the localisation process, but to date the shift has been partial, rarely upending established power inequalities. During the pandemic, the ability to reach local communities in hard-to-access areas became a core asset – even more than already required by challenging security conditions prior to the pandemic. Local and national organisations with the capacity to reach vulnerable communities achieved greater recognition and received more support.

> Covid highlighted the local responses. This was more a compulsion than a choice. Covid had a number of negative impacts on the humanitarian sector; however, the only positive and desirable impact Covid had on the humanitarian sector is localisation.[34]

However, this came without structural change to reflect the centrality of LNOs in the response. Crucially, increased funding during the pandemic was channelled through LNOs, but not at a scale that recognised their true contribution and potential role in the response to Covid-19 (Konyndyk et al., 2020). Small local organisations rarely accessed increased funding; instead, INGOs preferred partnerships with established or larger national organisations for their Covid-19 response based on previous experiences, greater capacity and trust. Donor policies do not appear to have shifted sufficiently to support increased funding to local organisations, and flows to preferred international partners have in fact increased, as seen globally and in other countries (ibid.).

> There hasn't been a mindset change from the donors to take on the perceived risks [of localisation]. There is no change in risk appetite. Maybe there is an acceptance that local actors are better placed to deliver the work, but processes, especially from donors, hasn't changed to reflect this thinking.[35]

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33   Interview 10. Pakistan – local organisation interviewee.

34   Pakistan – local organisation interviewee.

35   Pakistan – international organisation interviewee.

The pandemic provides an opportunity for humanitarian actors in both countries to create a cultural and operational shift that prioritises community-led interventions and empowerment of local staff. LNOs can be given more substantial roles in decision-making and service design as well as delivery, while more local staff can take up leadership positions. International actors' share of direct implementation can reduce, while their staff profiles will shift from application of operational expertise to fundraising, technical support, analysis, advocacy and strategic leadership positions (Mokdad, 2020). However, it remains to be seen if there is a willingness to make fundamental, system-wide changes that will lead to a locally led response model in the long run.

While remote working created opportunities for increased participation, these gains were still affected by digital inequalities. The pandemic highlighted the importance of familiarity with digital telecommunications in adapting to remote working. International organisations had the resources to quickly adapt to remote working, but LNOs in more inaccessible areas faced multiple problems in working online. Notwithstanding ongoing problems with access to technology, many of these difficulties were mitigated over time.

Overall, 91% of survey respondents believed that Covid-19's impact on localisation will endure in the long term (Figure 8), with increased opportunities for LNOs to participate in coordination processes and improved capacity through remote and hybrid training. The responses also show that LNOs were more optimistic that Covid-19 would lead to longer-term change than their international counterparts. Effort and persistence are needed from all stakeholders to make this prediction a reality.

Figure 8   Will Covid-19 impacts on localisation result in long-term change in humanitarian sector operations? (Survey responses according to type of organisation represented)
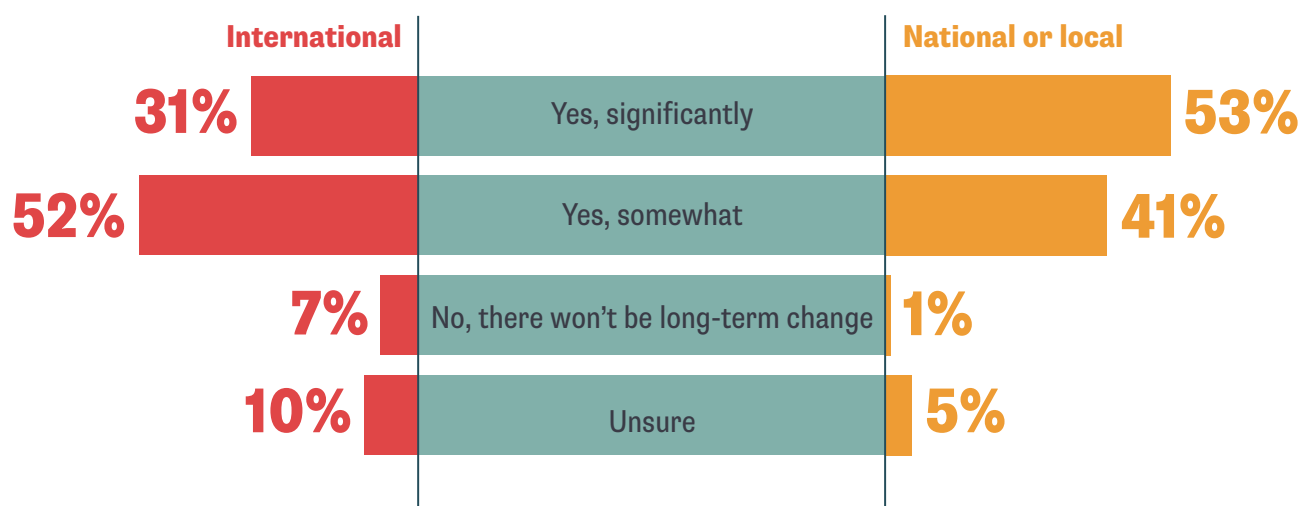
4.2   Recommendations

This section presents recommendations based on the findings and discussion presented above. They can be applied in both Afghanistan and Pakistan, as well as more broadly.

Opportunities to advance locally led humanitarian response emerging as a result of the Covid-19 context, as well as more broadly, are presented below. These are aimed at supporting long-term system-wide change to create a more inclusive and locally led humanitarian model. The implementation of these actions will require leadership, investment and commitment from HCTs, international actors and donors, in close collaboration with LNOs.

To enable greater relevance and ownership, it is important that local actors are given the space to define contextualised and country-specific localisation priorities and commitments. This can be managed through a dedicated locally led mechanism (such as a working group) positioned within each country's humanitarian coordination structure (with committed resources). This body can also lead the implementation of activities, as well as monitor and report on progress to the HCT and other actors.

4.2.1   Diversified and quality partnerships

- International actors should diversify their implementing partner database to include more LNOs – especially smaller local organisations. This will enable more LNOs to remain active in this shrinking humanitarian space. Furthermore, it will create more trusted partners with greater access for immediate deployments in humanitarian response situations.
- International actors should take into account the power imbalances that currently exist in their relationships and ensure that a principle-based approach to partnerships is applied (such as the Global Humanitarian Platform's Principles of Partnership (ICVA, n.d.)).

4.2.2   Diversified fund allocation

- Specific attention should be given to identifying and removing the blockages that prevent smaller local organisations from receiving quality funding.
- Donors should allocate a specific proportion of their funds directly to LNOs, such as earmarking their funding contributions to CBPFs. This will ensure some funding goes directly to LNOs and reduce their dependency on international actors. This will also allow them more flexibility in designing projects to meet local needs.
- Donors should commit to extending to LNOs the un-earmarked and adaptable funding conditions that are provided to international actors, including when the funding goes through an intermediary. This will allow LNOs to cover their administrative costs.

4.2.3   Strengthened national/local leadership

- Develop an inclusive approach that ensures LNO representatives can take leadership roles in various humanitarian forums. This can be done by mandating coordination forums to reserve some leadership roles for LNOs. LNO representatives can be elected to these roles (for specified terms) by the member LNOs of that particular forum or LNO coordination forums.
- The increased roles given to LNOs and coordination platforms in the Covid-19 period (such as moving coordination meetings online and opening up meetings for a wider audience) should not be reversed, but expanded.

4.2.4   Inclusive coordination forums

- Introduce multilingual coordination mechanisms for discussions to encourage participants to speak in the local language. This will encourage participants from LNOs to more confidently share their viewpoints and contribute to decision-making.
- The increased use of digital technology due to Covid-19 should be continued and encouraged (where feasible) to minimise the time and cost required to participate in meetings.

4.2.5   Capacity-strengthening of LNOs

- International actors should commit to robust, long-term capacity-strengthening approaches for their LNO partners with the objective of enabling LNOs to design, implement and independently manage complex humanitarian projects. These approaches should be built on existing models (such as ACBAR's twinning programme) and mutually developed with LNOs. Donors will need to play an important enabling role to support long-term planning.
- Provide capacity-strengthening for smaller local organisations on funding proposal development. This will give them greater ability to access funding independently.

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Appendix 1 Qualitative data analysis approach

The following are some of the key processes used for the analysis of qualitative data using MAXQDA software.

First, to organise the data, four sub-folders were created in the document system for LNOs and international actors for Pakistan and Afghanistan. Next, documents containing the interview notes were organised into their respective folders in the document system.

Upon completion of initial data management, coding of the documents commenced. The coding system was designed using a thematic framework and included headings such as Funds, Capacity Building, Coordination, Partnership and Contract (Figure A1). Word cloud and lexical search techniques were employed for creating and naming the codes. Then colours were assigned to each code, and codes were reordered using a priority-based hierarchical structure.
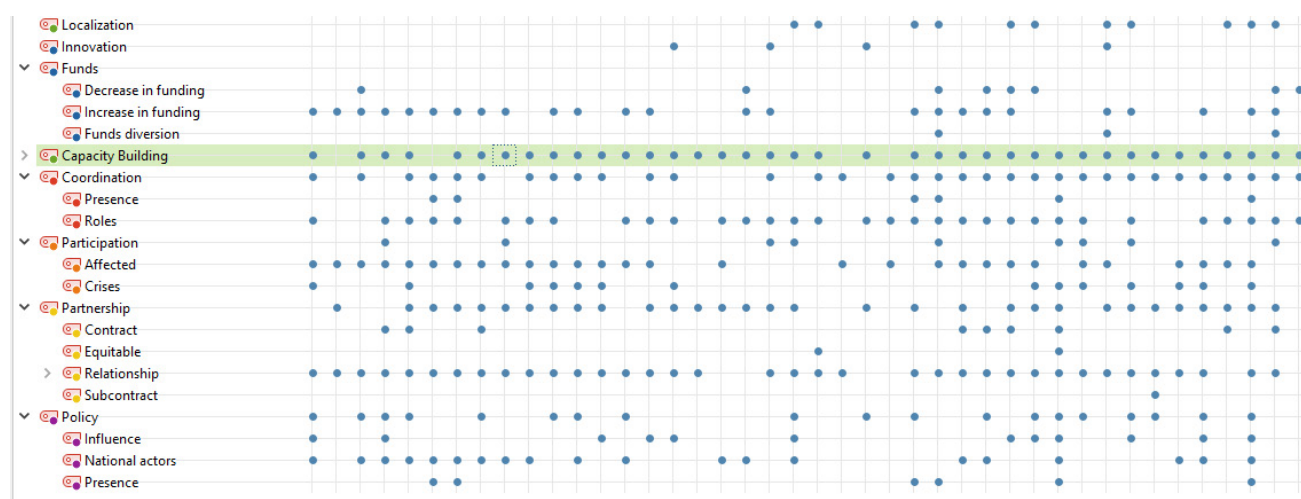
Figure A1   Coding hierarchical structure
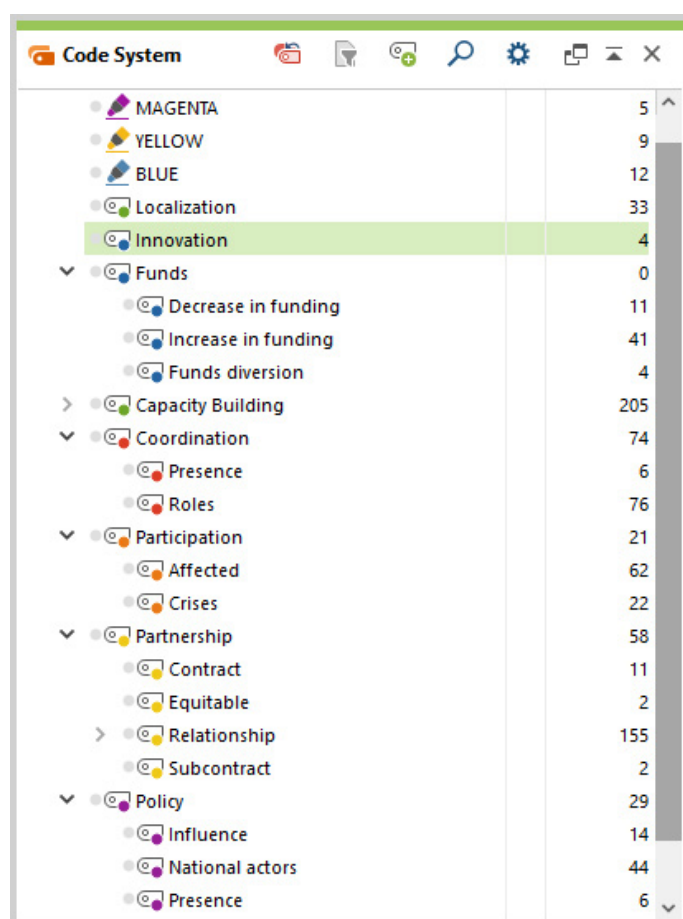
Following coding, the analysis processes were commenced using the Code Matrix and Code Relation Browsers. These are visual tools that allow the user to see which codes show up in which documents through a matrix view (see Figure A2). Once completed, the Code Matrix process allowed the analysed data to be viewed in multiple formats. The Code Matrix and Code Relation Browser were used multiple times for particular codes and datasets.

Other analysis tools utilised were the 'compare cases and groups' function and interactive word tree tool. These functions enabled easy retrieval of information from coded segments across document groups, permitting interpretation of how respondents within each group spoke about particular codes of interest.

Figure A2   Utilisation of the codes for analysis