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**Humanitarian
Policy Group**

Covid-19: a watershed moment for collective approaches to community engagement?

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Key messages

- Effective communication and community engagement (CCE) is a critical component of the response to Covid-19 in humanitarian settings. CCE can support affected people to make informed decisions, manage risk and highlight their evolving needs and priorities.

- Awareness of CCE's centrality to the Covid-19 pandemic is already leading to a surge in funding and interest. However, CCE must also address new challenges such as reduced access (particularly to marginalised groups) and more complex coordination environments.

- Collective approaches to CCE can add value in the Covid-19 response by ensuring that the right actors are working in the right configuration to deliver the best results, reducing duplication while increasing effectiveness.

- Collective CCE is yet to be well-integrated into either humanitarian responses or emergency preparedness, and it is not always easy to determine which approach is the right 'fit' for a given crisis.

- To strengthen collective approaches to CCE, it is important to ensure that they:
  - have well-defined objectives, a clear relationship to the rest of the response and strong links to key decision-making processes;
  - are well-resourced, supported by dedicated staff and funded in ways that support collective action;
  - are inclusive of a wide range of actors, make space for locally driven, bottom-up approaches and foster a sense of common ownership to ensure buy-in;
  - ensure that affected populations have multiple channels for two-way dialogue that include the most marginalised.

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Introduction

Effective communication and community engagement (CCE) (see Box 1) is a critical component of the response to Covid-19. Distributing messages on preventive behaviour is vital to slowing the spread of the disease; however, in many contexts, people may not have the resources to follow generic guidance on hand-washing and social distancing. At the same time, the Covid-19 outbreak has also been described as an 'infodemic', characterised by the widespread transmission of misinformation through word of mouth and social media channels, as well as conflicting or confusing information from official sources (OCHA, 2020).

Lockdowns and other coercive measures to control the disease have often been imposed rapidly and backed up by draconian enforcement. In many cases this has added to a sense of uncertainty and mistrust among crisis-affected communities that may already be suspicious of the intentions of service providers (Fordham, 2020). The secondary impacts of these measures are affecting the wellbeing of crisis-affected people in unpredictable ways. Knock-on effects range from the collapse of livelihoods and spikes in gender-based violence, to the emergence of new or reconstituted forms of community solidarity. In humanitarian contexts especially, it is more important than ever to ensure that:

- crisis-affected populations can make decisions based on consistent, relevant and accurate information from sources they trust;
- they have channels to provide feedback to service providers on their evolving needs, preferences and concerns; and
- those providers listen to this feedback and adapt their work as a result.

Dealing with access barriers as a new normal

The focus on physical or 'social' distancing and the resulting halt to almost all national and international travel has heavily restricted direct access to vulnerable populations for international as well as local humanitarian actors. This new situation, in some cases more akin to a highly restricted conflict setting than a public health crisis, requires careful thought on how to implement

Box 1: What is communication and community engagement?

The Communicating with Disaster Affected Communities (CDAC) Network defines communication and community engagement (CCE) as follows:

> Communication and community engagement is an area of humanitarian action based on the principle communication is aid. It gives priority to sharing life-saving, actionable information with people affected by disaster using two-way communication channels so aid providers listen to and act on people's needs, suggested solutions, feedback and complaints, and people receiving assistance have a say in and lead decisions that affect them. It also prioritises keeping people in crisis connected with each other and the outside world (CDAC, 2019: 10).

remote approaches to CCE that are effective and inclusive and that build trust, given there is an almost universal preference for face-to-face communication (Mosel and Holloway, 2019). One likely outcome is a drive to expand the use of digital technology in communication efforts. However, this must take into careful consideration the digital divides that exist between people of different ages, genders and socioeconomic statuses (Willitts-King et al., 2019) to ensure that messages reach the most vulnerable. Another outcome is a potentially expanded role in CCE for local organisations, new intermediaries – ranging from religious leaders to social media influencers – and affected communities themselves. On one hand, such changes could open up opportunities to transfer more power from UN agencies and international NGOs to local organisations and communities, and shift the emphasis of CCE from one-way information-sharing towards two-way communication and shared control of programming

(McLelland and Hill, 2019, Barbelet et al., forthcoming; OCHA, 2020). On the other hand, there could be an increased reliance on gatekeepers, downward transfers of risk without meaningful shifts in power, and the creation of 'alternative realities' detatched from the situation on the ground due to remote programming (Jaspars, 2020).

An expanding role for governments

In many humanitarian crises, governments have taken a back-seat in CCE. This may be due to several factors, including limited capacity or overstreched resources (Barbelet, 2020), political, societal and governance cultures that do not prioritise transparency or consultation (Lough et al., forthcoming) or the burying-away of CCE as a technical activity within internationalised humanitarian responses (Holloway and Fan, 2020). However, as a global public health emergency, Covid-19 is blurring the boundaries between 'crises' and wider issues of governance.

With governments likely to be taking on a much more engaged role in Covid-19 related communication activities nationwide, there may be an opportunity for humanitarian actors to break down silos and engage governments more effectively in CCE. However, such efforts must take into account how best to reconcile competing or conflicting messaging, priorities or approaches with national authorities (Dewulf et al., forthcoming). They should also consider the risk that messaging or approaches may be co-opted to serve political objectives, as well as questions of legitimacy and trust, especially in fragile and conflict-affected contexts (El-Tarabousi-McCarthy et al., forthcoming; Kleinfeld, 2020).

New approaches, more resources

Awareness of CCE's centrality to the Covid-19 pandemic is already leading to a surge in funding and interest. CCE occupies an unusually prominent place within the global humanitarian response plan for Covid-19, potentially opening up new avenues of funding. The crisis has already driven the formation of a new global collective service for risk communication and community engagement (RCCE), led by the International Federation of the Red Cross (IFRC), the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF), which aims to improve coordination

and capacity for RCCE across different actors and spheres. It has also led to increasing donor interest, including from actors such as the Gates Foundation that have not previously been involved in funding collective CCE initiatives.

Given these dynamics, a scenario is emerging where innovation, adaptation and bricolage around a rapidly changing global emergency could lead to long-term fundamental changes in how CCE is implemented and resourced. In the short term, there is already a greater imperative and most likely more resources available to prioritise, coordinate and strengthen CCE approaches (especially RCCE) across many contexts. Long-term, questions hang over how far a return to the previous status quo is possible for humanitarian action as a whole. Changes occurring now could well be be reflected in the 'new normal' for years to come.

Why collective CCE is important for Covid-19

In recent years, there have been growing efforts to develop more collective approaches to CCE (see Box 2) – supplementing or integrating existing agency- or programme-level activities – to improve the quality and effectiveness of humanitarian responses. In the context of Covid-19, the potential added value of these approaches takes on increased significance. Providing consistent information, meaningfully engaging communities and adapting in response to their insights is unlikely to happen effectively if there is fragmentation at sector or programme level. Similarly, it is critical to ensure that the right stakeholders – including governments and non-traditional actors – play complementary roles and that duplication, gaps and confusion are avoided.

Working collectively can ensure the right actors are working in the right configuration to deliver the best results around CCE, reducing duplication while increasing effectiveness. By harmonising messaging and ensuring it is deployed through multiple, complementary channels, collective CCE can reduce the risk of fragmented and incoherent communications that could breed confusion or undermine trust. It can also reduce the burden on affected communities

Box 2: What are collective approaches to communication and community engagement?

For the purpose of this briefing note, collective approaches to communication and community engagement (CCE) are defined as

> a multi-actor initiative that encompasses the humanitarian response as a whole, rather than a single individual agency or programme, and focuses on two-way communication: providing information about the situation and services to affected communities; gathering information from these communities via feedback, perspectives and inputs; and closing the feedback loop by informing the communities as to how their input has been taken into account. The goal of a collective approach to CCE is the increased accountability to and participation of affected communities in their own response (Barbelet 2020: 9).

and make reporting complaints or requesting information as straightforward as possible by establishing better systems for gathering inter-agency feedback. Through creating space for joint analysis of feedback and ensuring that this serves as a basis for high-level advocacy, it can also help ensure that humanitarian decision-makers prioritise listening to the people they are trying to help, pushing responses to be more adaptive to communities' rapidly evolving needs. And by offering a common entry point, it can strengthen coordination or collaboration with government and development actors engaged in overlapping activities – especially risk communication – around Covid-19.

Collective approaches to CCE are still relatively new: while the emerging evidence base suggests that they can add value, there remain significant obstacles to achieving their full potential. Not only are there challenges to doing CCE well

in a sudden-onset emergency like Covid-19, but CCE has yet to be done well collectively, particularly when getting started quickly. However, evidence from ongoing HPG research suggests that collective approaches are often an iterative process, and that taking steps to work together on CCE can improve or enable CCE more broadly throughout humanitarian responses (Barbelet, 2020; Holloway and Fan, 2020). Moreover, as evidence from recent experience in the Ebola crises in West Africa and the Democratic Republic of Congo (DRC) shows, an early failure to work together to solve the complex challenges posed by CCE in public health emergencies can actively undermine effective humanitarian responses, losing valuable time and weakening affected populations' trust in humanitarian actors.

Existing challenges to effective collective approaches to CCE

Global commitments to better CCE have yet to be matched by progress on the ground

A collective approach to CCE will be more effective if it is underpinned by strong implementation of CCE across a response. However, global commitments around the need for more systematic and better CCE are yet to be matched by clear progress on the ground. The CHS Alliance 2018 *humanitarian accountabilty report* notes that, while 'most stakeholders believe change is necessary' and there are 'significant senior level commitments to change the current situation', in practice 'commitments to actions are vague', definitions differ and measurements are lacking, giving only a vague idea of what success looks like (CHS Alliance, 2018: 29). A similar assessment appears in the 2019 independent Grand Bargain review, which reported that aid organisations still struggle to implement the 'participation revolution' consistently across their programmes, and that there remains a gap between how well organisations believe they are doing and how they are perceived to be doing by the recipients of their aid (Metcalfe-Hough et al., 2020). Currently, the focus is mostly on providing information to affected people and setting up complaints mechanisms, as opposed to deeper efforts to ensure two-way

communication – including closing feedback loops – and meaningful participation of affected populations in decision-making processes.

Parallel approaches and terminologies limit effective collaboration

As mentioned in the CHS Alliance report, definitions differ among humanitarian organisations. The inability to agree on what CCE is and should look like in a response limits the uptake of CCE at a system-wide level. 'CCE' is not an agreed term, and others are favoured by different organisations because they highlight different things (examples include communication with communities (CwC), accountability to affected populations (AAP), community engagement and accountability (CEA) and communication for development (C4D)). Yet, regardless of term, by and large the humanitarian sector is 'talking about exactly the same thing' (Iacucci, 2019: n.p.). In a public health crisis such as Ebola or Covid-19, a new acronym – RCCE – is introduced. Similar to the definition of CCE above, RCCE is defined by the WHO as 'the two-way and multi-directional communication and engagement with affected populations so that they can take informed decisions to protect themselves and their loved ones' (PAHO and WHO, 2020: 1). However, evidence suggests that this may lead to a heavier emphasis on changing behaviour than on offering meaningful two-way dialogue with and accountability to affected populations (DuBois et al., 2015; Dewulf et al., forthcoming). These variations in terminology may lead RCCE actors and programmes to end up working in parallel with pre-existing CCE mechanisms (Holloway and Fan, 2020).

CCE is not prioritised as part of emergency preparedness

To ensure that CCE is implemented at the beginning of a response, more consideration needs to be given to it in the preparedness phase. Yet, at a country level, it is rare to see CCE being considered in the preparedness phase, resulting in missed opportunities to explore and develop complementary roles of local actors and to engage government leadership (Holloway and Fan, 2020; Lough

et al., forthcoming). At the global level, there is a lack of deployable surge capacity and a lack of funding for capacity-building (de Serrano, 2018; Taminga and Nuñez, 2018).

Technical approaches are not always matched to political challenges

There has also not been enough consideration of CCE as a political issue as well as a technical process. Especially in conflict-affected contexts, narratives are likely to be contested, information is as likely to be withheld as shared and specific groups are likely to be deliberately marginalised and excluded (El Tarabousi-McCarthy et al., forthcoming). In order to be effective, particularly where public health crises intersect with conflicts or complex emergencies, CCE messaging aimed at behaviour change must be clear, freely available and trusted by all.

Trust deficits are a growing concern

Effective CCE relies on trust – trust that the information provided is accurate and that any feedback or complaint given will be kept confidential and used to improve the response. A 2019 report by the IFRC found that a 'lack of responsiveness to feedback was described as a barrier to building trust with staff and volunteers' (IFRC, 2019: 6). If affected populations do not trust humanitarian actors, efforts at communication and information provision are likely to be less effective. At the same time, complaints and feedback are likely to remain hidden, since there will be little belief that they will change the humanitarian response (El Tarabousi-McCarthy et al., forthcoming).

Identifying the right approach for the right response remains a struggle

To date, there are few, if any, examples of fully realised collective approaches to CCE in operation, which means there is no strong evidence base on what does and does not work on the ground. Over the past decade, collective approaches to CCE have been structured in different ways depending on the context in which they have been implemented. There has sometimes been a tendency to focus narrowly on process or technical aspects of these approaches, with less attention paid to outcomes.

Different contexts pose different challenges and opportunities for implementing collective approaches – key dynamics to take into account include whether a crisis is a natural hazard-related disaster or a conflict, whether it is short or protracted, and the type of coordination system involved, including the presence or absence of a strong government role.

Humanitarian CCE during public health emergencies has a mixed track record

When it comes to a public health crisis such as Covid-19, there are only a few examples of collective approaches to CCE, and the global track record is mixed. After the 2010 earthquake in Haiti, the first example of a collective approach to CCE shifted its focus to the cholera outbreak, resulting in clear messaging and effective joint initiatives that mitigated the impact of the outbreak (Ljungman, 2012). Yet, in 2014 and more recently in 2019, Ebola outbreaks in West Africa and the DRC respectively have been hampered by poor communication, fragmented coordination structures and a wider inability of various actors in the response to work effectively together (DuBois et al., 2015; Dewulf et al., forthcoming; Kemp, 2020).

Critically, responses to conflict or natural hazard-related disaster settings are also characterised by different coordination systems and ways of working compared to public health emergencies at global, regional and country levels. Bridging the divide when two systems are functioning in parallel – as was the case in eastern DRC during Ebola and is likely to be the case in many contexts during Covid-19 – remains an important challenge.

Towards better collective approaches to CCE during and after the Covid-19 pandemic

Based on ongoing HPG research on recent efforts to establish collective approaches to CCE in different contexts (Barbelet, 2020; Holloway and Fan, 2020; El Taraboulsi-McCarthy et al., forthcoming; Lough et al., forthcoming), as well as secondary data from other sources, this section outlines key considerations for any actors seeking to set up or strengthen

a collective approach to CCE in response to Covid-19. In particular, it highlights the importance of clarifying objectives in the design phase, securing necessary resources, supporting effective leadership and securing buy-in.

Design

- **Focus on outcomes:** Different contexts require specific approaches, implying varying configurations of stakeholders and programme emphases. What works in conflict-affected displacement settings may not be appropriate in areas prone to natural hazard-related disasters or with strong government leadership. In recent years, growing capacity and experience in providing common services for CCE has resulted in a wide menu of 'out-of-the-box' approaches, such as common feedback mechanisms, perception surveys, rumour tracking and coordination platforms. However, while offering clear potential to add value, these processes may also risk imposing new burdens in terms of resources, sustainability and complexity. Before implementing any form of CCE, there must be careful analysis of what specific priority outcomes the collective approach is trying to achieve, before deciding on the most relevant and efficient way to achieve them in a timely manner. In this respect, it is important to prioritise 'good enough' approaches with realistic short-term ambitions, while also building in space for approaches to deepen as they become more established.

- **Harmonise parallel approaches, building on what already exists:** In any response, collective approaches to CCE should be well-situated within and adapted to existing coordination structures in order to ensure buy-in and influence strategic direction. In many contexts, however, different approaches to CCE often run in parallel and may be poorly integrated – across the development–humanitarian divide, for example. This is especially relevant in the case of Covid-19, where public health and humanitarian responses are likely to be operating in the same spaces and may consequently risk producing complex and disjointed coordination structures.

A forthcoming HPG study on the Ebola response in DRC identified no fewer than six coordination bodies involved in different aspects of CCE, spanning both public health and humanitarian coordination systems, with significant overlap in both function and membership (Dewulf et al., forthcoming). In cases where Covid-19 triggers an expansion of interest in CCE, it is especially useful to map out and rationalise existing CCE efforts; the alternative may be layers of competing or conflicting approaches that expend substantial resources for little benefit.

- **Cut through the semantics and learn from each other:** It is important to realise that despite differing terminologies around RCCE, AAP, C4D, etc., the actors involved in each are, for the most part, already on the same page, even if they are not all speaking the same language (Iacucci, 2019). However, it is vital to be sensitive to differences where they exist, and to learn from different approaches. For example, the increased focus on biomedical communication of risk under RCCE must not come at the expense of participation and two-way feedback, as it did during the Ebola response in both West Africa and DRC (DuBois et al., 2015, Dewulf et al., forthcoming).

Resources

- **Human resources are critical:** Collective approaches have both strategic and technical requirements that need to be properly resourced. Effective leadership of collective approaches requires strong coordination skills, including the political and diplomatic know-how to secure buy-in and resolve disputes. Additionally, leadership requires 'clout' to effectively navigate the often-byzantine world of humanitarian leadership structures, as well as to effectively engage with government stakeholders as they take on a more prominent role. Simply possessing strong technical CCE skills may not be enough (de Serrano, 2018). The large amount of data generated by feedback systems, which is often central to collective approaches, also means that strong information management and analysis capacity – linked but distinct

skillsets – is needed to ensure information can be aggregated, made sense of and clearly presented (Holloway and Fan, 2020).
- **Flexible funding through the right mechanisms:** Collective approaches to CCE are relatively cheap. Ongoing HPG research on the cost of collective approaches suggests annual budgets range from around $500,000 or less for a basic coordination platform, to up to $2 million for a more comprehensive set of activities – both well under 1% of the requirement for an average humanitarian response plan in 2019. However, these costs may need to be distributed as smaller grants among multiple organisations fulfilling different complementary roles. Given many donors' increasing preference for larger contracts with pre-vetted partners, funding through intermediary mechanisms is critical in resourcing collective approaches. It is vital that any such systems operate in a transparent and accountable manner to contribute to buy-in and ensure the collective approach is neutral and not perceived to be 'owned' by a given intermediary. In this respect, country-based pool funds have an important role to play in chanelling funds to smaller, local organisations. However, it is important to maintain a degree of flexibility in funding as collective approaches evolve and adapt – something that could potentially be achieved by devolving allocation of a portion of funds to CCE coordination platforms themselves.

Implementation, leadership and engagement

- **Clear leadership and structure are needed to link operations and strategic decision-making:** Humanitarian Country Teams (HCTs), government disaster management agencies and other leadership bodies have a key role to play in ensuring collective approaches are effectively integrated into humanitarian responses. While common services such as rumour tracking or feedback aggregation can emerge organically over time, the information they generate is unlikely to impact how responses are run unless it has a clear pathway into strategic decision-making

processes. Without this link, the scope for meaningful two-way communication is limited. When feedback gets stuck at the field level, CCE is reduced to a technical exercise in communications, rather than used as an avenue for greater participation. In the Central African Republic, for example, leadership from the HCT has been vital in ensuring that a complex set of CCE activities has overarching legitimacy as well as clearly defined opportunities for input into decisions made throughout the humanitarian programme cycle (Barbelet, 2020).

- **Collective ownership is needed to ensure buy-in:** Even if CCE activities are delivered as a common service, they may be limited in impact if design, implementation, analysis and decision-making are not open to collective engagement. For example, despite substantial attempts at outreach and transparency, a common complaints and feedback mechanism run by IFRC in DRC was met with scepticism among some actors as it was still felt to be an 'IFRC process' (Dewulf et al., forthcoming). In this respect, it is helpful if common services are bound together under the leadership of an actor that is perceived as 'neutral' – i.e. lacking a bias toward a specific operational mandate (Ford and Khajehpour, 2018; El Taraboulsi-McCarthy et al., forthcoming).

- **An inclusive approach involves multiple, integrated feedback channels:** Over-emphasis on a single feedback mechanism – especially hotlines – is likely to exclude people who cannot access it. Similarly, reactive channels focused on complaints handling are likely to produce biased data unless complemented by proactive attempts to reach out to affected people and understand their concerns. In Mozambique, regular feedback bulletins from an inter-agency hotline are not currently complemented by data from other approaches, leading to concerns that the voices of women and residents of under-serviced areas are being marginalised (Lough et al., forthcoming). There is also a need not just to collect and disseminate information from multiple channels, but to ensure these channels are fed back into collective decision-making processes and not siloed within individual agencies or

programmes. In both Indonesia following the Central Sulawesi earthquake and in the Rohingya refugee response in Cox's Bazar, a wealth of different feedback gathering initiatives has not always been matched by strong mechanisms for joint analysis or validation, leading to a critique of 'too much data, not enough analysis' (Lewis and Foster, 2019; Holloway and Fan, 2020).

- **Create space for flexible, bottom-up approaches:** Humanitarian coordination structures can be rigid and opaque, with a tendency to exclude local voices. Non-traditional humanitarian actor groups may have significant knowledge and skills to contribute to collective CCE, but lack the entry point or resources to do so. This has been the case in the DRC Ebola response, where faith-based actors commanding significant levels of trust and access in affected communities were largely marginalised by the international humanitarian response (Balibuno et al., 2020). In this respect, international organisations may have a key complementary role to play in opening up space for local counterparts.

- **Consider how best to support government approaches:** In many contexts, this will be through supporting government-led RCCE work and providing a bridging role between nationwide Covid-19 RCCE approaches and the specific dynamics of humanitarian crises. It may involve a substantial advocacy role, both in pushing for more transparency and engagement from sometimes-reluctant governments, as well as ensuring that community feedback informs government as well as humanitarian decision-making. As governments around the world take a leadership role in a pandemic that affects everyone, humanitarian agencies may need to turn to behind-the-scenes advocacy and play a supporting role where possible (Holloway and Fan, 2020).

- **Start long-term planning early:** Collective approaches require time to establish. Therefore, in sudden-onset crises, the timelines of setting up a new approach from scratch, and of the crisis response itself, may be hard to align. As a consequence, it is

important to find ways to ensure time and resources invested in collective approaches are sustainable – for example, by incorporating CCE into preparedness planning through links to national disaster risk reduction architecture, as has been piloted by CDAC in Fiji and Vanuatu (CDAC Network, 2020), or maintaining a CCE community of practice, as in Indonesia and the Philippines (Holloway and Fan, 2020). Doing so is likely to help ensure that the knowledge and relationships generated by collective approaches are not lost, and that they can be scaled up rapidly as new crises emerge.

- **Think beyond Covid-19:** Finally, it is important to ensure that any attempts to strengthen collective approaches in response to Covid-19 do not limit themselves to only addressing the current pandemic. The needs and priorities of affected people in crisis settings are diverse and extend well beyond the silo of public health messaging. Indeed, a narrow and heavy focus on Ebola in eastern DRC has weakened public trust in humanitarian action in a context where decades of overlapping hardships have otherwise attracted little interest from aid actors (Dewulf et al., forthcoming). Further, new crises will continue to emerge and existing ones evolve irrespective of the spread of Covid-19. Collective approaches that maintain a wider focus from the start will be better placed to take new challenges in their stride.

Conclusion

Covid-19 presents an opportunity for systemic change and reform in the humanitarian sector in terms of how it coordinates, implements and resources collective approaches to CCE. Moving forward, it will be important to monitor and document trends as they emerge in order to ensure that successes can be effectively built on and course corrections made. Particular trends to watch are as follows:

- To what extent is the Covid-19 crisis leading to fundamental changes in how the humanitarian system resources, plans and prioritises community engagement?
- How is the Covid-19 crisis changing the humanitarian system in ways that make effective CCE more critical?
- What new approaches are being successfully adopted to strengthen CCE in the context of Covid-19? How have these been helped or hindered?
- Is the Covid-19 crisis leading to changes in the level of meaningful participation by affected populations in humanitarian decision-making and responses?
- To what extent is CCE being built into preparedness agendas and linked to government-led communication processes?
- Can an increased focus on CCE be leveraged to further the localisation agenda given the critical role of local actors for effective engagement?
- Where changes have occurred, which ones are likely to be sustained and which are likely to revert to the pre-Covid-19 status quo? Why?

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