



Photo by Stephanie Glinksi for CRS

CRS and COVID-19

POLICY RECOMMENDATIONS TO SAVE LIVES AND ENSURE HUMAN DIGNITY

The unprecedented global challenge of COVID-19 will require comprehensive and extraordinary responses from all stakeholders, including national governments, public and private donors, international aid agencies, multi-lateral coordination bodies, and local civil society and communities. Responding to a call of solidarity to the current crisis, CRS aims to save lives, care for those affected— especially the most vulnerable—while ensuring human dignity.

In partnership with local governments and organizations, CRS’ global response includes **addressing the immediate health crisis**—working with health systems to provide essential services across the continuum of care and supporting communities in preventing the spread of COVID-19; and **helping to mitigate its social and economic impacts**—shoring up food security and meeting basic needs, minimizing the impact of job loss and strengthening social cohesion and psychological well-being. CRS aims for a locally led COVID-19

response that helps ensure people survive with dignity, rebuild their lives and communities, and strengthen their long-term stability and resilience.

For CRS and other humanitarian organizations to meet these immense and changing needs, donors and policy makers must act quickly and boldly to ensure an effective response is possible. Our recommendations to the U.S. Government include the following:

COMMIT AND DISBURSE RESOURCES THAT ARE SUFFICIENT AND FLEXIBLE TO RESPOND APPROPRIATELY TO THIS UNPRECEDENTED CRISIS

While COVID-19 is a domestic priority, it is all too clear how interconnected our world is and, therefore, the importance of addressing the health crisis everywhere, including in developing nations. COVID-19 presents a special challenge as many donors and donor

governments are facing their own crises. Now is the time to bravely commit to a bold response, and to support organizations best placed to effectively address community needs.

Recommendations

- **Provide at least \$12 billion in emergency supplemental resources for the International Affairs Budget to support the global response**, while ensuring the U.S. Department of State and the U.S. Agency for International Development expeditiously expend the roughly \$1.6 billion in supplemental funds already appropriated for poverty-reducing international humanitarian and development assistance. Funding should ensure that health and secondary assistance target the poorest and most vulnerable communities, including displaced persons, children and the elderly.
- **Ensure funding is sufficiently flexible** to respond to situational fluidity, with decision making at localized levels. Flexibility should support changes in project activities, costs, and accountability and compliance measures, including for keeping staff and project participants safe, as well as integration of COVID-19 response activities through crisis modifiers and modifications. Where possible, issue clear guidance to missions and field offices to ensure flexibility is available and implemented uniformly and without delay in this challenging time. Early action and quick response are critical.
- **Coordinate pandemic response funding and decision making through existing global platforms**, like the United Nations and World Bank. Where debt relief is granted, ensure that countries invest payments into immediate programs to halt the spread of the disease and stabilize already sparse public service systems.

PROTECT THE MOST VULNERABLE

Evidence is growing that COVID-19 is particularly dire for communities that are already vulnerable, including refugees and migrants who live in close quarters and difficult conditions, vulnerable children, people living in fragile states or in informal settlements, people with disabilities, and people living with HIV and their households. Any existing and additional programming must take special action to ensure their protection.

Recommendations

- **Protect refugees, migrants and the displaced** by ensuring camps, settlements and detention centers are up to international health and

sanitation standards and provide access to clean water, handwashing stations, and quarantined areas if necessary. Ensure forced migrants are part of any government's economic stimulus plans.

- **Bolster existing health systems strengthening activities and global health security** focusing on the empowerment of local COVID-19 task forces comprised of public and faith-based providers, health management teams, health workers and community extension agents. Address holistic human needs—including psychosocial, economic and social cohesion—of affected populations while ensuring access to lifesaving care.
- **Use diplomatic pressure to ease humanitarian catastrophe** including securing cease fires, adequate humanitarian access and sufficiently meeting the needs of those in conflict. Adjust programming to the context of fragile states.

SUPPORT LOCAL LEADERSHIP AS KEY TO EFFECTIVE RESPONSE

COVID-19 has upended existing systems as we know them, including humanitarian and development assistance. Travel limitations, as well as potential disruptions to aid supply chains and social distancing, require this humanitarian response to rely especially heavily on local actors to lead in new ways to meet their communities' needs. Effective COVID-19 response will require that strong local government and strong local civil society organizations design and implement humanitarian and development programming responses. International actors—donors, multi-laterals, and INGOs—must support local leadership through quality partnerships, effective capacity strengthening, flexible and adaptive funding, fair multi-stakeholder risk sharing, and reasonable and realistic compliance requirements.

Recommendations

- **Expand funding opportunities to local organizations** via avenues like the United Nations pooled funds or Start Network. Simplify and harmonize minimum application criteria. Contribute to community-based emergency response funds and other efforts to address the health and economic impact on those most affected by this pandemic.
- **Encourage and fund local institutional participation in decision making and coordination** processes related to the COVID-19 response, including holding a lead or co-lead role in cluster or sector coordination.

- **Proactively ensure equitable risk sharing** so locally led humanitarian response does not put undue risk burdens on local institutions by funding local actors to manage risk and risk transfer.
- **Require clear and coordinated communication amongst international and local actors.** Coordinate communication with similar messaging and approaches, as feasible, to eliminate confusion and provide increased support to local and national responders.
- **Include faith-based organizations (FBOs)** in responding to COVID-19. FBOs have broad community recognition and are trusted by people of all faiths and can be critical actors in effective community responses.

ADDRESS SECONDARY IMPACTS AND ANTICIPATE RECOVERY NEEDS, ESPECIALLY FOOD SECURITY AND LIVELIHOODS

In addition to the immediate COVID-19 response, implementers and donors must anticipate secondary humanitarian and development impacts. Limitations of movement will cause longer term disruption in health and development outcomes. If schools are forced to close, millions of children who receive critical meals could face a food security crisis in addition to a health crisis. Other food insecure populations dependent on aid may also be unable to receive critical assistance if large scale distributions are no longer feasible. Disruptions to food supply systems, price fluctuations and potential barriers to physically accessing markets could also particularly impact poor communities. Farmers may be unable to successfully plant, tend, harvest and market their crops, affecting the food security of their communities. All of this raises grave concerns about widespread nutritional impact.

Access to education and health care for millions of children worldwide is also under threat. With school closures that could last for months, the potential for learning loss and dropout is huge. School closure is also linked to a heightened risk of violence, and pregnancy for adolescent girls and young women. In addition, some countries are entering peak malaria season, yet distribution of nets is hampered by travel restrictions and disruptions to supply chains. Fears are also increasing that overwhelmed health systems will struggle to maintain essential lifesaving services such as immunizations, antenatal care, care of young infants and older adults, as well as infectious disease prevention and care, including for HIV, malaria and tuberculosis. Previous experience in health emergencies have shown that more people are in danger of dying from these health, social and economic impacts than from COVID-19 itself.

Recommendations

- **Maintain development funding** to mitigate secondary impacts of the pandemic. Development programs should utilize crisis modifiers and other available mechanisms to address the full range of community needs. Essential programming must continue, with the flexibility to ensure the safety and security of participants and implementers.
- **Proactively plan for recovery.** The impact of COVID-19 is widespread and will require significant investment across communities to recover and thrive as they emerge from the pandemic.