



PARTICIPATORY

ADAPTATIONS

IN THE

COVID-19 ERA

Learning from the Past
& Preparing for the Future

MARCH 2024



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The photographs throughout this report aim to depict a snapshot of life in the countries in the PACE sample during the time period that is the focus of our research. Where possible, we included images from the programs in our sample, but when such photos were unavailable, we substituted other COVID-era images from the same Mercy Corps country office. For several countries, images are not included due to considerations related to the safety of Mercy Corps team members, partners, and program participants.

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EXECUTIVE SUMMARY:

Participatory Adaptations in the COVID-19 Era

Climate change, armed conflict, disease outbreaks, and natural disasters are all shocks and crises that can limit the ability of humanitarian and development organizations to engage with and access communities. The COVID-19 pandemic and its accompanying policies and restrictions created such challenges, especially for practitioners implementing participatory programs that require face-to-face interactions. To understand how programs can better adapt to shocks that limit community engagement, Mercy Corps conducted a qualitative study called Participatory Adaptations during the COVID-19 Era (PACE) that investigated how 15 global Mercy Corps programs across 10 countries adapted during the pandemic. Through interviews with program teams and systems mapping analysis, PACE provides actionable insights on how to adapt programming when faced with shocks that limit community engagement. Specifically, PACE identified four main adaptations applied by program teams, as well as the unique enablers, barriers, benefits, unintended consequences, and lessons associated with each adaptation.

The first adaptation involved **elevating committee representatives as liaisons** to sustain program activities in the absence of direct implementation by program teams. This adaptation highlights the importance of building on pre-existing community structures, providing them with consistent capacity strengthening, and fostering a cultural of participation as a means of not only enabling committees to function autonomously, but also to develop a sense of local ownership. However, this adaptation suffered where programs struggled to overcome the digital divide, sustain participant motivation, and adapt their technical resources for use by committee representatives. In some cases, it also resulted in inconsistencies in implementation and undermined program quality. Where programs opted to elevate traditional leaders as committee representatives, this adaptation limited diversity and inclusion in collaborative decision-making processes. Anticipated benefits of this adaptation include improved program efficiency, broader geographical coverage, and the cultivation of local champions capable of offering sustained coaching and mentorship within the community. To further invest in this adaptation, teams should foster a culture of participation through genuine community engagement; mapping and utilizing existing structures; collaborating with a diverse network of local actors; and deliberately selecting committee representatives to include historically marginalized groups and non-traditional community leaders.

The second adaptation centered on **empowering local practitioners** (including civil society organizations and field mobilizers) to co-design, implement, and adapt programs. Sustained and tailored capacity strengthening, virtual program management tools, and authentic and mutual partnerships were all enabling factors that nurtured a culture of participation and deepened the effectiveness of this adaptation. However, donor inflexibility often restricted the ability of program teams to effectively prioritize and resource partner needs. Local practitioners also occasionally experienced heightened feelings of pressure to deliver and tensions with community participants in the context of fast-changing crises. Despite these challenges, empowering local practitioners – especially those physically based in target communities – not only facilitated quicker resumption of activities as access constraints eased, but also enabled better development of context-specific activities and improved consistency of community participation. Future efforts to employ this adaptation should involve local CSO partners in program co-design at the outset; invest in sustained and tailored capacity strengthening initiatives; hire team members and technical experts who are physically present among participants; and map existing venues, equipment, associations, and initiatives that can be available to local practitioners during times of reduced access and beyond the program duration.

The third adaptation focused on **deploying technological solutions**, including low-tech and hybrid solutions, such as radio broadcasts and blending virtual spaces with in-person engagement. Technological adaptations were generally effective at supporting context monitoring and action-oriented tasks, even improving program efficiency by saving time and resources on travel and venue costs. However, they were consistently less effective for activities that sought to strengthen skills, nurture relationships, promote collaborative decision making, or resolve disputes. As a result, participants experienced reduced knowledge acquisition and fewer social cohesion gains as compared with in-person activities. Additionally, the digital divide disproportionately impacted marginalized communities, leading to exclusion of participants with lower levels of digital literacy or poor access to technology. Programs sought to address the digital divide by offering digital literacy training, providing equipment or phone credit, and mapping existing community resources to improve participation. Technological adaptations also inadvertently mitigated traditional norms around gender and age, enabling women to circumvent cultural barriers to participation by engaging remotely in activities, while youth harnessed their relative technological skills to assert themselves in discussions. This adaptation would benefit from further investment in low-tech and hybrid solutions; capacity strengthening activities to support the digital literacy of teams and participants; and internal technical resources such as digital tool guidance, video tutorials, and content modifications.

The fourth adaptation involved **addressing needs emerging from acute crises**, which led many programs to adjust the focus of their activities. Successful implementation of this adaptation relied on mature community structures, a commitment to centering community voices, and robust context analysis. While experience with previous crises enabled some communities to leverage past learning, in other cases, the normalization of crises undermined participant motivation to address emergent shocks and stresses. Rumors and misinformation only further led to feelings of disempowerment and complicated efforts to develop accurate and up-to-date context analysis. Donor flexibility and willingness to empower programs to modify their activities was invaluable to employing this adaptation. Conversely, programs struggled when donor inflexibility, due to heightened oversight and delayed approvals, impeded program responsiveness. Ultimately, this adaptation not only

enabled programs to address new community priorities, but also encouraged holistic problem-solving and stimulated community resilience. PACE found that programs seeking to implement this adaptation should invest in collaborative, robust, and ongoing context analysis; center community voices in analyzing new dynamics and generating locally led solutions; and focus on processes for community mobilization and collective action, rather than sector-specific solutions, to strengthen local resilience capacities.

The experiences of programs in the PACE study demonstrate the range of adaptations that can be implemented to maintain – and even enhance – community participation during crises that present barriers to access. These adaptations were most constructive when community participants were involved in their design and execution. Moreover, programs that had already been investing in centering community voices, context monitoring, regular capacity strengthening activities for civil society partners and local committee structures, coordination with external actors, and participatory processes were better placed to leverage these enabling factors to adapt more readily and effectively. These adaptations subsequently led to improved local ownership, increased participation of traditionally marginalized groups, and enhanced collective action, in a way that has the potential to deepen long-term resilience of communities. Moving forward, organizations should *proactively* integrate participatory and adaptive approaches into their programs before new shocks occur and adaptation decisions need to be made.



Uganda, Ezra Millstein/Mercy Corps

Introduction

Background

The rapid onset and unfamiliar nature of the COVID-19 pandemic simultaneously multiplied humanitarian needs, upended social dynamics, and transformed operational realities on an unprecedented scale. In the face of the public health crisis, government policies and global guidance aimed at preventing the spread and impact of the virus sparked a host of secondary effects – amplifying economic hardship and resource scarcity, increasing cases of sexual and gender-based violence, eroding social cohesion, and diminishing trust in government leaders and institutions (Mercy Corps 2021). Many communities experienced the pandemic as an assault on their cultural norms and activities, and by extension, as a fundamental strain on individual and collective wellbeing and resilience (Tubadji 2021; Mashaphu et al 2021). As a result, communities craved spaces for interaction and participation not only as a remedy for social isolation, but also as a way to address the overlapping challenges plaguing societies throughout the COVID-19 era.



DRC, Christian Visso/Mercy Corps

While the COVID-19 pandemic increased demand for participatory programming, movement and gathering restrictions instituted by governments to curb the spread of the disease created acute obstacles that tested the ability of humanitarian, development, and peacebuilding practitioners to continue meaningful community engagement. Many practitioners – including many Mercy Corps program teams – began experimenting with a variety of adaptations that allowed them to continue implementing participatory programming amid reduced access to communities, in many cases, increasingly relying on local actors for implementation (Center for Regional Change 2020; Manikam et al 2021). However, to date, there has been no systematic review of the full range of participatory adaptations that were deployed or the factors that enabled or hindered their success. Filling this evidence gap will help practitioners and communities to draw on these lessons in future crises.

To help fill these evidence gaps, Mercy Corps conducted a research project entitled *Participatory Adaptations in the COVID-19 Era (PACE)*. PACE was a qualitative, practitioner-focused study that examined how Mercy Corps teams adapted their participatory programs to the wide range of constraints engendered by the pandemic, as well as concurrent dynamics and barriers to implementation, such as insecurity, climate shocks, and other public health emergencies. Ultimately, the project aimed to develop resources that help program teams, civil society organizations (CSOs), and communities to integrate participatory and adaptive approaches into their program designs and institutional arrangements in a way that enables better locally led responses to future crises, including climate shocks and armed conflict.

Based on a series of interviews with implementers representing 15 Mercy Corps programs – many of which were governance and social cohesion programs – across ten countries, the study uncovered four core adaptations that characterize how program teams leading participatory activities responded to the constraints experienced throughout the COVID-19 pandemic:

- 1 Elevating Committee Representatives as Liaisons
- 2 Empowering Local Practitioners
- 3 Deploying Technological Solutions
- 4 Addressing Needs Emerging from Acute Crises

We also identified the factors that enabled and inhibited the success of each adaptation, along with the unintended consequences and downstream benefits resulting from each adaptation.

The purpose of this research report is to provide an integrative overview of the most common adaptations implemented by programs during the COVID-19 era and how they might be applied to future shocks and stresses. The report proceeds as follows. Section 2 presents the key debates and evidence gaps that motivated the study and that situate the findings within broader debates and literature in the field. Section 3 provides a high-level summary of the research design and methods used in the research. Section 4 offers a brief overview of the 15 programs that make up the core sample. Section 5 presents the core research findings, discussing each of the four adaptations, along with detailed supporting examples and evidence from the set of case studies where we observed each adaptation. We provide an accompanying systems map depicting the full set of factors leading to and stemming from each adaptation. Practitioners interested in a summary of the findings and practical implications related to each adaptation can see the thematic learning briefs available [online](#). This section concludes with a set of cross-cutting institutional factors that shape overall adaptive capacity. Finally, Section 6 summarizes the key takeaways from the research and presents lessons and recommendations that practitioners and policymakers can incorporate into their efforts to design and implement participatory programming moving forward.

COVID-19 & PARTICIPATORY PROGRAMMING:

Existing Evidence & Remaining Gaps

Why Participatory Programming Mattered during the COVID-19 Pandemic

Community mobilization and participatory approaches have long been recognized as critical factors in addressing public health emergencies, including Ebola (Mercy Corps 2019; Bedson et al. 2020), HIV-AIDS (Blanchard et al. 2013; Lippman et al. 2018), and cholera (Gupta and Gupta 2020). Research also strongly suggests that infectious pandemics and the outbreak and protraction of armed violence and civil wars are mutually reinforcing threats (Wise and Barry 2017; Iqbal 2006; Sisk 2020). From the onset of the COVID-19 pandemic, there has been mounting evidence that these dynamics played out once again, creating a range of secondary effects. The virus and accompanying containment measures intensified mis/disinformation, increased economic scarcity and resource competition, eroded social cohesion, and diminished trust in government leaders and institutions, which in turn, exacerbated preexisting conflict drivers and further undermined virus prevention and response efforts (Inks and Lichtenheld 2020; Mercy Corps 2021). Beyond the scope of public health emergencies, research suggests that community mobilization and participatory approaches have been effective at generating social cohesion, promoting inclusive decision making, nurturing constructive citizen-state relations, and empowering traditionally marginalized social groups in a way that can mitigate conflict and violence (Mercy Corps 2010; 2017; 2022; Meyer and Fletcher 2019).

Considering these COVID-19 era dynamics, community mobilization and participatory programming represented a critical opportunity not only to effectively mitigate the spread of the virus, including through vaccine acceptance (Hill et al. 2021), but also to prevent violence escalation and nurture long-term community resilience to future crises (Petryniak et al. 2020). Even in the early days of the pandemic, organizations recognized this potential and began calling for an acceleration of locally led solutions and participatory programming within the humanitarian, development, and peacebuilding sectors (Sheely and Kazis-Taylor 2020; Cechvala 2020). However, movement restrictions, social anxiety, physical distancing regulations, and mask mandates served to directly impede efforts at convening community participants.

How Participatory Programming Continued Operating during the COVID-19 Pandemic

In practice, existing literature suggests that organizations themselves undertook a range of strategies to maintain or deepen participatory programming during the COVID-19 pandemic. On the one hand, organizations grappled with “adaptive delivery,” shifting their implementation modalities for preconceived activities (Adapt Peacebuilding 2021). A global network of local activists and development practitioners reflected on how civil society action became more localized, more collaborative, and relied more on technology than prior to the pandemic (Landry et al. 2020). The use of digital technologies and hybrid solutions has been extensively discussed as a particularly widespread adaptation in program delivery (Spear et al. 2020; Manikam et al. 2021). International organizations facing access constraints for its expatriate staff also increasingly relied on local leadership and remote technical support (Australian Red Cross 2020). These shifts reawakened policy debates on the value of localization¹ as both an instrumental and emancipatory approach (Vij 2023). On the other hand, some organizations also altered the content of their participatory activities (Sloan and Sheely 2020) or developed entirely new activities (Adapt Peacebuilding 2021) to directly address COVID-19, its secondary effects, and prevailing conflict drivers that might undermine effective virus containment.

Research and practitioner thought pieces also reflect on the internal ways of working that facilitated these institutional and programmatic adaptations. Dedicated spaces for reflective learning (Landry et al. 2020), a culture of listening and humility (Patterson 2021), a value of experimentation and risk-taking (Adapt Peacebuilding 2021), and consistent communication and collaboration (Meekins et al. 2021) enabled organizations to be not only agile in reacting to new information, but also deliberate in instituting more strategic shifts. Situational leadership (Landry et al. 2020) and trusting team relationships (Australian Red Cross 2020) further facilitated adaptation. While these knowledge products represent critical learning, they typically present reflections on individual cases or map only discrete elements of the systems in which adaptations function. To date, there has not yet been a systematic attempt to synthesize the variety of participatory adaptations to COVID-19 and their enablers, barriers, consequences, and benefits across a large set of programs operating across diverse geographical contexts and towards diverse objectives.

How Lessons from Participatory Programming during the COVID-19 Era can Support Adaptations to Other Crises

In recent years, calls for adaptive programming – broadly understood as programming that continuously learns and improves – have gained traction as a critical approach to overhaul rigid program design models and funding mechanisms and to maximize impact in complex and dynamics contexts (Obrecht 2019; Oakley 2021; Valters et al. 2016). In particular, ALNAP, a global humanitarian learning network, argues that learning during and from crises, like COVID-19, is essential not only

¹ Mercy Corps defines localization as “the intentional shift of power and decision-making to the communities.” See our most recent 10-year strategy, [Pathway to Possibility](#), for a full description of our locally led commitment. We understand community mobilization and participatory programming as one of several strategies necessary for realizing localization.

to limit the negative impacts of crises as they unfold, but also to ensure that lessons are learned for similar crisis responses, and to reflect on the need for broader systemic change (Ramalingam and Mitchell 2023). In line with early calls for organizations to invest in localization and participatory programming during the pandemic, evidence suggests that “as a result of the withdrawal of field staff from development programmes, local expertise and networks have been used more frequently, cooperation between local stakeholders has increased, hierarchies have been reduced, and decision-making has been decentralised” (Roll and Kornprobst 2021). Participatory research affirms that such cases of community involvement and localization in the COVID-19 pandemic response enabled holistic responses that were inclusive, effective, equitable, and contributed to deeper resilience (Grant et al. 2023; IDS 2023).



While examples remain scarce, a few organizations have begun to employ adaptive programming methods beyond the scope of the COVID-19 era and to assess their processes, benefits, and enablers (Dempster and Herbert 2023). One study found that “72% of partners surveyed described adaptive programming as the most useful approach to programme management that they have used” and that it contributed to better development outcomes (Gray and Carl 2022). Similarly, World Vision suggests that their model of adaptive management, the “Fragile Context Programming Approach” (FCPA), enabled

them to more holistically address local dynamics that sit at the intersection of the humanitarian-development-peacebuilding nexus (Mukoloka 2020). While World Vision identified community participation as a fundamental ingredient in their adaptation, the FCPA framework – like several other examples of adaptive models identified through this literature review – still fail to embed locally led adaptation at the heart of the approach. This link between adaptation and participation has gained momentum in the peacebuilding (Gray and Carl 2022) and climate justice (Rahman et al. 2023) sectors but remains largely untapped within the wider humanitarian and development sectors.

These findings suggest that COVID-19 served as a unique opportunity to ground-truth global commitments to localization and meaningful community participation (Bonis-Charancle and Vielajus 2020). However, as the situation has stabilized, concerns remain that the slow pace of reform within the humanitarian sector prior to the pandemic and that persistent systemic barriers mean that “any progress towards more local and national forms of humanitarian action will be incremental and temporary” (Barbelet et al. 2020). Rather, deliberate investment in transforming prevailing systems is essential to sustaining the demonstrable promise. This research seeks to add to the existing evidence base to further articulate the types of participatory adaptations that have proven to be feasible within the COVID-19 context and the factors necessary for organizations to consider their application to future crises.

Research Design & Methodology

The PACE study was guided by the central research question: “What can we learn from adaptations implemented during COVID-19 by Mercy Corps’ participatory programs worldwide in order to better prepare us for future shocks and crises that reduce physical access and spaces for face-to-face interactions, which lie at the heart of participatory programming?” Despite the focus on adaptations to COVID-19, we also explored how programs navigated concurrent dynamics and barriers to implementation – such as insecurity, climate shocks, and other public health emergencies – even if they were not directly linked to the pandemic. The research was designed as a qualitative study of selected Mercy Corps programs that met the following criteria: 1) implemented participatory community activities, and 2) were implementing activities at any point between March 2020 and December 2022, even if activities started before or continued after these dates. While we did not explicitly target programs that had objectives related to governance and social cohesion, many such programs had participatory community activities at their core, and, therefore, featured heavily in the study. Nonetheless, the research was meant to be inclusive of all sectors across the humanitarian development and peacebuilding spectrum and offer cross-cutting applications.

Core Concepts & Scope Conditions

PARTICIPATORY PROGRAMMING

Based on a review of academic and practitioner literature from within Mercy Corps, we developed a definition of “participatory” that aims to ground the study design and analysis in institutional experiences and core beliefs about what participation looks like. As a result, we decided that for a program to be considered participatory within the context of the research it must fulfill three criteria:

- 1 Participation must be the “active ingredient” in the program theory of change.** This means that programs – irrespective of their objectives or sectors – had to conceive of participation as a central element of how change would occur. The catalyst of the desired change might be the process of mobilization and collective action, the development of institutional arrangements that facilitate engagement, or the behavioral changes resulting from engagement.
- 2 Participants must be community-level actors who do not have implicit decision-making authority.** This implies that participants primarily engage in public life at the local level, rather than serving regional- or national-level functions, and that they are not considered social or

political ‘elites.’ Meanwhile, members of civil society or community influencers are considered within scope. Participants for specific programs need not necessarily be representative of the wider community but may be selected from a particular subset of the population that aligns with the program objectives.

3 Participants must be involved in shaping programming decisions. At a minimum, this means that participants must be directly consulted by program teams, so that their perspectives inform program strategies and implementation. A more robust and “meaningful” participation might be collaborative decision making between participants and program teams, while at best, participants are empowered to make their own decisions.

Where programs did not clearly uphold the three core criteria, we probed these considerations to ascertain whether the programs could be assessed as in scope. We also considered the types of activities and programmatic decisions that participants might be involved in, whether their participation was one-off or recurring, and whether their participation was spontaneous or motivated by external actors.



Nigeria, Mercy Corps

THE COVID-19 ERA (MARCH 2020 – DECEMBER 2022)

For the purposes of this research, we define the COVID-19 era as starting in March 2020, when the World Health Organization (WHO) first declared the virus to be a global pandemic.² This date was associated with the subsequent rapid adoption of containment policies – including border closures, lockdowns, and gathering restrictions – in the majority of countries where Mercy Corps works. Although WHO did not declare the end of COVID-19 as a global health emergency until May 2023,³ we adopted the date of December 2022. This date aligns with contemporaneous reports that “90% of the world population now has some resistance to Covid-19,”⁴ along with growing indications from Mercy Corps programs globally that their respective contexts and operating procedures had normalized.

Sampling & Case Selection

The first step in the sampling and case selection process involved an extensive review of internal Mercy Corps program documents, guided by screening questions that reflected the study’s scope conditions. This review generated a potential sample of 44 programs. We further refined this list through semi-structured screening interviews or screening emails with former or current program staff, resulting in the identification of 31 programs as in-scope.

We subsequently tagged these programs according to three categories of descriptors:

- 1 Geographic region**, based on standard Mercy Corps geographic zones of operation, as defined during the period that is the focus of this study (Africa, Asia, Middle East, or Americas);
- 2 Phase during COVID**, according to the stage of program design or implementation at the start of the COVID-19 era (Established, New, or Designed During); and
- 3 Program type**, based on the primary “active ingredients” in the program theory of change (Messaging, Interaction, Services, Empowerment, Institutional Capacity Strengthening, or Mobilization).

Of the 31 programs determined to be within the scope of this research study, 16 were in Africa and 12 were in the Middle East, while only two were in the Americas and one was in Asia. Meanwhile, 13 programs were classified as Established, 12 as Designed During, and six as New. The in-scope programs included 16 labelled as Interaction, 12 as Mobilization, 9 as Empowerment, 6 as Services, and 4 each as Institutional Capacity Strengthening and Messaging. These will be described in greater detail in Section 4.

We ultimately identified a list of 15 programs representing a balance of region, phase, and program type across ten countries to further explore. These programs are summarized in the table on the next page.

2 Ghebreyesus 2020.

3 Rigby and Satiya 2023.

4 Agence France-Presse 2022.

COUNTRY	PROJECT	START	END	REGION	PHASE DURING COVID	PROJECT TYPE 1	PROJECT TYPE 2
Afghanistan	Stabilization of Urban Neighborhoods (SUN)	November 2019	December 2022	Asia	New	Empowerment	Interaction
Burkina Faso	Position, Refine and Operate for Peace and Stability (PROPS)	December 2020	February 2023	Africa	Designed During	Interaction	Empowerment
DRC	Lutter contre Ebola via l'Engagement de Communautés Redynamisées [Fighting Ebola by Revitalizing Community Engagement] (LEVER)	October 2019	January 2021	Africa	New	Mobilization	Services
Haiti	Ann Viv Ansanm [Let's Live Together] (AVA)	March 2017	March 2023	Americas	Established	Mobilization	Interaction
Iraq	Better Future Through Reconciliation and Conflict Prevention in Ninawa and Anbar (Better Future)	August 2017	May 2021	Middle East	Established	Interaction	Institutional Capacity Strengthening
Iraq	Nakdar [We Can]	November 2019	August 2020	Middle East	New	Empowerment	Mobilization
Iraq	Strengthening resilience and income generating opportunities and supporting early recovery and stabilisation in areas of return in Iraq (Madad) [Sustaining]	January 2019	May 2021	Middle East	Established	Mobilization	Interaction
Jordan	Strengthening social capital and reducing tensions between Jordanian host communities and Syrian refugees (Strengthening Social Capital)	April 2016	September 2021	Middle East	Established	Interaction	Empowerment
Niger	Preventing Violent Extremism Actions through Increased Social Cohesion Efforts (PEACE)	April 2019	October 2021	Africa	New	Interaction	Empowerment
Nigeria	North East Conflict Management and Stabilization Program (NE-CMS)	December 2017	May 2021	Africa	Established	Interaction	Empowerment
Nigeria	Contributing to the Mitigation of Conflict over Natural Resources (COMITAS)	December 2020	December 2022	Africa	Designed During	Interaction	
Nigeria	Peace Action for Rapid and Transformative Nigerian Early Response (PARTNER)	October 2021	September 2026	Africa	Designed During	Institutional Capacity Strengthening	
Syria	Towards Safe Protected, Peaceful Communities (TSP3)	December 2018	December 2021	Middle East	Established	Interaction	
Syria	Together for Peace and Justice (T4PJ)	September 2020	December 2022	Middle East	Designed During	Interaction	Services
Uganda	Apolou	September 2017	September 2023	Africa	Established	Mobilization	Services

TABLE 1: Summary of programs in the study sample by region, phase, and program type



Uganda, Ezra Millsstein/Mercy Corps

Data Collection & Analysis

SEMI-STRUCTURED INTERVIEWS

The primary data collection⁵ consisted of 27 semi-structured interviews with respondents who were directly involved in the selected programs during the COVID-19 era. PACE aimed to speak with one respondent at the manager level (e.g., program directors, managers, or technical advisors) and one respondent at the implementer level (e.g., officers, coordinators, or CSO partners) for each program. Due to staff turnover, PACE was only able to interview one respondent for the Better Future program in Iraq and one each for the two programs in Syria. Interviews were conducted over Teams in either English or French. French interviews were audio recorded with the permission of respondents and summarized into detailed English notes. All study participants gave verbal informed consent before the start of data collection, and interview notes were stored on a secure, password-protected server.

CODING AND CONTENT ANALYSIS

PACE employed content analysis through thematic coding of the interview notes using the qualitative analysis software Dedoose. Two researchers on the PACE team conducted an initial round of coding, generating a codebook with nearly 300 distinct codes. After further refining the codebook, a third researcher conducted a second round of coding and preliminary analysis. Code applications and presence were quantified against program descriptors used in the sampling process.

⁵ PACE also undertook action research activities aimed at gleaning observational data on how program teams are experiencing and navigating barriers to community participation and applying adaptations in real time. To do this, the PACE team identified and established thought partnerships with two ongoing participatory Mercy Corps programs: COMITAS II in Nigeria, and the Women and Youth-Led Peace and Reconciliation in Iraq (WYPRI). The PACE team engaged in continuous accompaniment of the COMITAS II and WYPRI program teams through regular reflection sessions that sought to create rapid feedback loops to apply action learning. A separate Learning Brief on the action research approach and insights gleaned from the thought partnership with COMITAS II can be found online on the landing page for the PACE study.

How to Read a Systems Map

A systems map is a visual tool that aims to depict all of the integrated factors involved in a complex environment, as well as the relationships and feedback loops between those factors. For the purposes of this research, systems maps (specifically, causal loop diagrams) were used to help analyze the interactions between diverse factors that underpin participatory adaptation. The detailed systems maps used for analysis are presented in the appendix, while consolidated versions can be found for each adaptation throughout the Findings section. The systems maps employ the following symbols:



Each bubble represents a unique node or factor in the system. In this case, the factors are color coded into four categories for ease of reference. Throughout the Findings section, bolded words represent factors in the detailed versions of the systems maps. Readers may want to refer to the systems maps at these points in the narrative.

 Benefits  Enablers  Barriers  Consequences



Arrows demonstrate a causal relationship between two different factors. The direction of the arrow indicates the direction of the influence, whereby an arrow pointing from X to Y means that X causes some sort of change in Y. In some cases, Y may also cause a change in X, creating a feedback loop.



Each arrow is accompanied by a + sign or a – sign, which represents the type of relationship between the two linked factors. A + means that X and Y have a positive correlation, whereby if X increases, then Y increases, OR if X decreases, then Y decreases. A – means that X and Y have a negative correlation, whereby if X increases, then Y decreases, OR if X decreases, then Y increases. While the wording of some of the factors can make these correlations confusing to interpret, it's important to think about the magnitude of the factor increasing or decreasing.

SYSTEMS ANALYSIS

While the content analysis process helped to draw out correlations between different themes and factors, we also employed a systems analysis approach aimed at unpacking causation, enabling us to assess *how* different factors were interacting. Systems analysis emerges from a value of systems thinking, which ALNAP defines as “a set of principles which aims to address complex problems in practical, tangible ways by examining the relationships between different parts of a system and making use of multiple and diverse perspectives” (Campbell 2022). As such, systems analysis provided a useful framework for understanding the dynamic and complex causal relationships between contextual and institutional factors and programmatic decisions about participatory adaptation.

Systems mapping is a specific method employing visual models to represent complex realities (Barbrook-Johnson and Penn 2022). We specifically used causal loop diagrams as one of the more flexible and intuitive models for systems mapping. We first constructed a systems map for each program, based on the initial thematic coding and a secondary narrative analysis of the original interview notes. Using these program-level systems maps, we identified the common

adaptations that had been employed and developed a systems map for each main adaptation and its accompanying enablers of and barriers to implementation, as well as unintended consequences and downstream benefits of each adaptation. The systems analysis informs the structure of the Findings section, where we discuss the Enablers, Barriers, Unintended Consequences, and Benefits associated with each key participatory adaptation, as well as the relationships within and across these different factors. Consolidated systems maps for each adaptation appear in their respective Findings sections, while detailed maps can be found in the appendix, which is accessible online from the landing page for the PACE study. The following textbox on “How to Read a Systems Map” serves as a user’s guide for interpreting the symbols used in systems maps and how to understand them in the context of the narrative findings.

Limitations

We grappled with several limitations in conducting this study. To start, the initial document review used as the basis for our sampling and case selection was bound by what we could find readily available in Mercy Corps’ grant management system. While there may have been additional programs within the scope of the study, they may have been omitted if relevant and current documents could not be accessed.

Second, we made several research design choices that nonetheless created limitations. One of the primary study objectives was to systematically document adaptations across a diversity of programs. In maintaining breadth, we were only able to involve two respondents per program, which may have undermined the triangulation of certain experiences. To mitigate this limitation, we were intentional about speaking with one respondent from the manager level and one from the implementer level. Moreover, insights from direct program participants have not been captured in the research. It is important to note that we piloted a participatory data collection tool to engage a sub-section of participants from two programs in the study sample. However, due to the small sample size and inconsistencies in the application of the tool across groups, the data gleaned from this exercise was not incorporated into the analysis presented in this report.⁶

Finally, the primary data collection was conducted in March and April 2023, three years after the start of the COVID-19 era, when Mercy Corps teams began grappling with the effects of the pandemic. Interview questions focused on contextual changes, programmatic decisions, and their effects throughout the COVID-19 era. While a few respondents reviewed documents from that time in preparation for their interviews, the insights shared relied heavily on recall. As a result, the data are subject to the natural effects of memory.

⁶ Although the data collected from the participatory tool was not integrated into this report, the piloting experience created the basis for the design of similar participatory tools to support programmatic adaptation as part of the COMITAS II thought partnership. These tools and the thought partnership process are described in the separate Learning Brief, which can be found here.

SNAPSHOT OF THE SAMPLE:

The Varieties of Participatory Programming

As part of the sampling process described above, the research team identified six different program types to describe the “active ingredients” in each theory of change. These program types did not necessarily align with a particular sector or objective, but rather, represented the central ways in which the program expected to generate the desired attitudinal, behavioral, relational, or institutional change. The six program types include 1) Interaction, 2) Empowerment, 3) Mobilization, 4) Services, 5) Institutional Capacity Strengthening, and 6) Messaging. Although the PACE team recognizes that most programs require multiple catalysts to generate complex outcomes, the team decided to assign only two program types, representing the most prominent elements of the program theories of change.

› **Interaction** programs seek to foster attitudinal, behavioral, relational, and/or institutional changes through activities that compel interaction among participants, either to promote mutual exchange and understanding or to generate collaborative action. Most interaction programs aspire to mitigate violence, improve dispute resolution, or enhance social cohesion. Social cohesion could include a vertical dimension, focused on the relationship between governance structures and communities, or a horizontal dimension, focused on relationships between different identity groups within communities. Common activities include dialogue, collective action initiatives, and intercultural exchange events. Overall, we classified 11 of the 15 programs in the study sample as Interaction programs, of which five were paired with a label of Empowerment, demonstrating an essential link between social cohesion and social inclusion. Several Interaction programs also included an element of Mobilization. Among the Interaction programs, five were in the Middle East, four in Africa, one in Asia, and one in the Americas. They were relatively equally divided across the program phases.

COALESCE: Mercy Corps' Approach to Social Cohesion

Mercy Corps' forthcoming handbook guides practitioners in designing, implementing, and measuring interventions that seek to increase social cohesion. It is intended both for practitioners that focus on social cohesion as part of peace and good governance programming, as well as for those seeking to integrate social cohesion interventions into other development or humanitarian programs. The handbook describes four key approaches to fostering social cohesion: 1) facilitate opportunities for groups to engage in collective action across lines of division; 2) strengthen peaceful conflict management mechanisms and practices; 3) foster social and cultural engagement across groups; and 4) facilitate meaningful inclusion of youth, women, and other systematically marginalized groups.

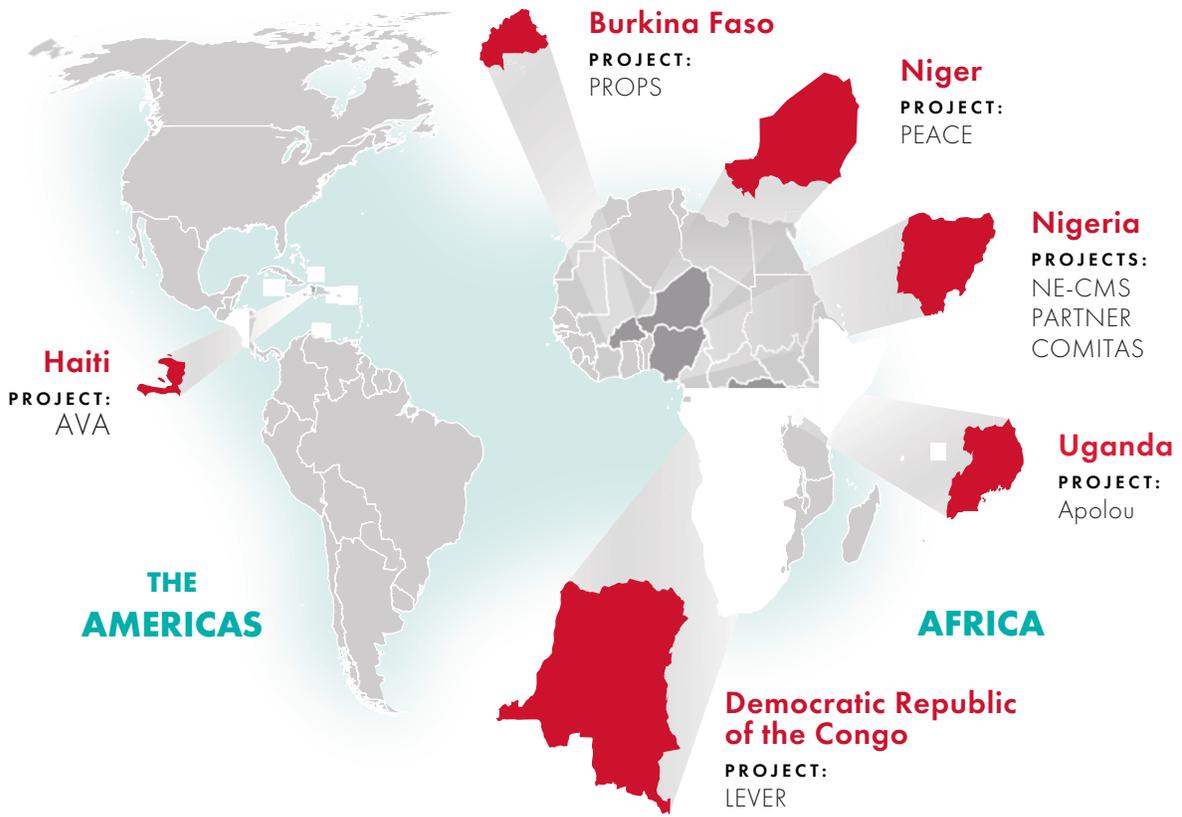
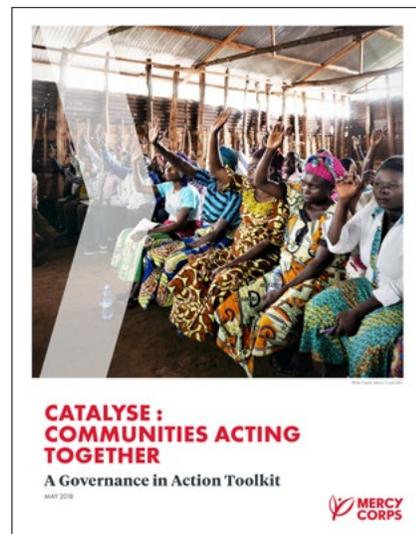


FIGURE 1: Map of programs in the study sample

» **Empowerment** programs work to bring about attitudinal, behavioral, relational, and/or institutional changes for vulnerable and/or marginalized individuals and groups, focusing on improving their sense of belonging and agency or inclusion in public life. In some cases, these programs also work to change pervasive community perceptions and norms related to vulnerable and/or marginalized groups, as well as the policies and structures that exclude them. These programs most often focus on engaging women and youth, who frequently face unique vulnerabilities that are linked to harmful traditional practices and cultural norms around gender and age. Many programs that include objectives related to prevention of violent extremism have a central element of Empowerment, based on the assumption that meaningful inclusion of vulnerable individuals will mitigate other drivers of their involvement in violence. Empowerment programs tend to engage participants in training on leadership skills, livelihoods support, and collective action initiatives. Within the sample, we labelled six programs as Empowerment, with all but one also labelled as Interaction. Three Empowerment programs were in Africa, two in the Middle East, and one in Asia.

» **Mobilization** programs focus on community involvement in programmatic decision making to generate attitudes and behaviors that recognize participation and local ownership as valuable outcomes on their own merits. Many Mobilization programs seek to achieve governance objectives, such as enhancing civic engagement, although they can be used to build the legitimacy, relevance, effectiveness, and/or sustainability of interventions, regardless of their sector or desired results. Critically, the process is the central element of Mobilization programs. Mercy Corps' CATALYSE approach seeks to encapsulate this process, with activities including collective analysis, prioritization, planning, and action, especially joint development initiatives and advocacy campaigns. Civil society actors often sit at the center of this programming. The PACE team identified five of the 15 programs as Mobilization programs, pairing two with Interaction, two with Services, and one with Empowerment programs types. This diversity suggests the broad applications of Mobilization processes to support both vertical and horizontal social cohesion, service delivery, and social inclusion. Of the five Mobilization programs, two were in the Middle East, two in Africa, and one in the Americas.



» **Services** programs aim to produce institutional changes that improve the access of communities to specific services (e.g., health, education, legal, etc.) through the development of infrastructure, policies, or systems. In most cases, Services programs combine the physical construction or rehabilitation of public facilities with the establishment of spaces, such as community mapping and action planning sessions, for community input on which facilities should be prioritized and how they should function. Responsibility for undertaking public works may be conducted by government agencies, program implementers, or for small-scale initiatives, community participants themselves. Three programs in the study sample were labeled as Services, two in Africa and one in the Middle East, although the PACE team considered applying this tag in at least two other instances. In cases

where Services was a secondary or tertiary element of the program theory of change, it was typically as a precondition for generating community buy-in for Interaction and Empowerment programming that is often viewed as producing long-term, intangible results.

» **Institutional Capacity Strengthening** programs seek to change institutional behaviors and norms by expanding the capacity of existing or new structures at the local community or governmental levels. These structures may include tribal justice and local dispute resolution mechanisms, civil society organizations, early warning early response committees, or government agencies. Institutional Capacity Strengthening programs typically employ trainings and coaching to encourage skill acquisition and integration of good practices. They may also focus on supporting structures to build relationships and identify resources for their long-term sustainability. Of the two programs from the study sample that were identified as Institutional Capacity Strengthening, one was in Middle East, and one was in Africa.

» **Messaging** programs seek to compel an attitudinal and/or behavioral change among participants by raising public awareness on a selected issue through any number of communication channels, including social media, radio, or community theater, among others. These programs are often associated with public health sensitization (whether Ebola or COVID) as well as peace messaging. Although three in-scope programs were tagged as Messaging, none were included in the final sample. PACE found that these Messaging programs self-identified as “participatory,” on the basis that community-level actors were not only recipients of sensitization campaigns, but also involved in implementation of campaigns or monitoring of public perceptions. Despite one notable exception from Haiti, messaging programs during COVID-19 era largely continued to rely on one-way communication and traditional data collection practices.



Nigeria, Mercy Corps

FINDINGS:

How Participatory Programs Adapted During the COVID-19 Era

ADAPTATION 1 Elevating Committee Representatives as Liaisons

Case Examples:

- COMITAS (Nigeria)
- NE-CMS (Nigeria)
- PEACE (Niger)
- PROPS (Burkina Faso)
- Apolou (Uganda)
- SUN (Afghanistan)

Nearly all the programs selected for this study established local community structures or committees, especially when employing Mercy Corps' CATALYSE approach for community mobilization. These committees aimed to provide program participants with a collaborative space to contribute to locally led programmatic decision making – analyzing the local context, identifying and prioritizing gaps and needs, developing action plans, and implementing diverse community development, public health, social cohesion, and advocacy initiatives.

Members are typically selected through nomination by community leaders or local associations, public election, or open application. In nurturing such committees, program team members typically travel – often to remote areas – to engage committee members in person in order to conduct relevant training or workshops and to provide oversight and guidance on a range of themes or processes related to the program sector and objectives.

This direct implementation approach has long contended with access constraints, including insecurity, administrative constraints, environmental shocks, and poor infrastructure. With the onset of COVID-19, lockdowns, curfews, border closures, and gathering restrictions for larger groups further limited physical accessibility. These barriers prevented program teams from having face-to-face interactions with local committees, leading many programs to rely on committee representatives to assume the tasks that would previously have been implemented by the program team, such as planning, implementing, and documenting activities. These committee representatives were often selected based on their existing leadership role within the committee (such as a chairperson), ability to communicate with the program team (such as access to a smartphone), and their literacy and digital literacy levels.

Within the sampled programs, this adaptation was regularly implemented by programs in Africa, including the PEACE program in Niger, NE-CMS and COMITAS in Nigeria, PROPS in Burkina Faso, and Apolou in Uganda. While the SUN program in Afghanistan also used this adaptation, it served an ancillary role to support other adaptations. It is also important to note that the SUN and PEACE programs were new at the start of the COVID-19 era, which likely undermined their ability to effectively employ this adaptation.



Nigeria, Mercy Corps

ENABLERS

In addition to the precondition that programs have established committee structures, several critical enabling factors contributed to the success of this adaptation. Capacity strengthening activities for the selected committee representatives enhanced the quality of implementation and supported them in their new liaison roles. For programs that were well established at the start of the COVID-19 era, committee members had already received training on a range of topics aligned with program themes, which may have included civic engagement, interest-based negotiation, psychological first aid, or public health and hygiene, among others. These trainings prepared the committee members to contribute to programmatic decision making and adopt more substantive leadership roles during COVID-19. However, programs facing barriers to access at the outset of program implementation, as committees were being formed, were unable to use this approach.

How to Read a Systems Map (Example)

To assist readers in applying the symbols described in the textbox “How to Read a Systems Map,” we take an example from Adaptation #1 (on the next page), Elevating Committee Representatives as Liaisons. Capacity Strengthening is a factor that is considered an Enabler. It has an arrow with a + pointing to the central adaptation, meaning that when program teams invested in capacity strengthening, they witnessed an improvement in the adaptation to elevate committee representatives. What about the factors connected to Capacity Strengthening? Let’s take Poorly Adapted Resources, which is a Barrier. It has an arrow with a – pointing to Capacity Strengthening, which means that when program teams found they had poorly adapted resources, it undermined their capacity strengthening, which in turn, weakened the overall adaptation.

In some cases, these relationships are counterintuitive. Let’s look at the factor Inconsistencies in Implementation, a Consequence, which is a direct result of the adaptation, as depicted by the arrow pointing to Inconsistencies in Implementation. The + sign suggests that if the program team increases their use of this adaptation, then there will be an increase in inconsistencies (not that the adaptation improves the inconsistencies). We can also see that the Digital Divide serves as a Barrier inhibiting the implementation of this adaptation. There are also several cases in which you can find a pair of Enabler/Barrier or Benefit/Consequence that are each other’s opposites, such as Reduced Efficiency and Improved Efficiency, as you will see in Adaptation #3, Deploying Technological Solutions. Depending on the context, both results may be possible.



FIGURE 2: Systems map of Adaptation #1, Elevating Committee Representatives as Liaisons

Instead, several new programs opted to **relocate trainings**, convening committee representatives in regional capitals, before sending them back to their communities to share what they had learned with the wider committee. This approach ensured access by the program team and availability of suitable facilities, where COVID-19 protocols could be upheld, while committee representatives relied on their understanding of conflict dynamics and access to alternate forms of transportation to travel. The COMITAS program, for example, found that its committee representatives relied heavily on motorbikes, which not only enabled them to mitigate the risks of COVID-19, but also to navigate rainy season flooding that made roads inaccessible to cars and buses.⁷ While the PROPS program in Burkina Faso had considered relocating their activities, they determined that patterns of insecurity were too intense and unpredictable for participants to safely travel.⁸

Programs also frequently used **remote coaching** to support capacity strengthening efforts, conducting regular check-in calls and providing technical resources via digital platforms. For example, the PEACE program in Niger established a WhatsApp group and shared voice messages and video tutorials to help build the confidence of the committee representatives to independently implement programming activities.⁹ Remote coaching was especially challenging for programs operating with rural and semi-literate populations in areas with poor connectivity, whereby the **digital divide** became a barrier to this adaptive approach. Where possible, programs **covered expenses** associated with remote coaching, such as providing pocket Wi-Fi devices and phone credit to mitigate the digital divide, even if the effects were uneven across different demographic groups. (See the Barriers section for Adaptation #3 on Deploying Technological Solutions for a full explanation of the digital divide.)

Where the program team was unable to provide direct capacity strengthening support, some programs increasingly **coordinated with local stakeholders** to create a network of accessible technical support. Notably, the PEACE program in Niger and PROPS program in Burkina Faso engaged local government officials from relevant technical departments to support committee representatives.¹⁰ These two programs both had a strong emphasis on enhancing vertical social cohesion between communities and government authorities. Therefore, enlisting the support of government authorities served not only to fill the gap left by program teams, but also to further program objectives. Similarly, where programs selected committee members from preexisting community structures – rather than establishing arbitrary new groups – they noted heightened levels of **local ownership**, due to the established credibility of the representatives and their intrinsic motivation to support positive change in their communities. Building on established structures also enhanced the durability of results beyond the life of the program.

“We conducted weekly calls with the leaders, or our focal points to ask them what they had achieved, which activities, related to what topics, how many participants, how did it go, what difficulties they faced. For those who were confused, we tried to explain the process to them, step by step to reassure them and consolidate their command of the material.”

—Manager, PEACE, Niger

7 Interview, Implementer, COMITAS, Nigeria.

8 Interview, Implementer, PROPS, Burkina Faso.

9 Interview, Implementer, PEACE, Niger.

10 Interview, Implementer, PEACE, Niger; Interview, Implementer, PROPS, Burkina Faso; Interview, Manager, PROPS, Burkina Faso.

“We were taking their complaints seriously and responding to them. If there are complaints about an activity or if they felt our staff was rude to them in any way, we acted on it, and we communicated to them that these were the steps that we have taken. We called them to ask, ‘Is there anything that you need us to improve on in our programming?’ We had their trust, and they knew that we were doing the right thing and standing for their interests.” —Implementer, NE-CMS, Nigeria

A **culture of participation** and **spirit of local ownership** were essential to employing this adaptation. Many interconnected and mutually reinforcing factors contributed to nurturing this environment, including a commitment to **centering community voices**, genuine relationship building, and **transparent and empathetic communication**. Programs realized their commitment to centering community voices when they created space for community leadership, either as an accepted behavioral norm within the program team, or as a systematic, participatory programming approach, such as **CATALYSE**. In some cases, conversations with community committees required deep humility by the program teams to accept criticism without defensiveness.

For example, committees supported by COMITAS sent several complaint letters to the program team about concerns regarding activity implementation. The program team accepted these letters as a mark of success that they had empowered community structures to convincingly and freely express their grievances.¹¹ These collective enablers not only generated continuous engagement from community structures, but also inspired reciprocal trust between program teams and participants that facilitated new ways of working.

Consistent **capacity strengthening** also contributed to a sense of **local ownership** by the community structures and feeling that they were being genuinely invested in. As a result, committee representatives and the wider committees were motivated to spearhead implementation of initiatives, and, in some cases, commit not only their time but also financial and in-kind resources. For instance, the COMITAS program found that some participants used their own savings to supplement transport allowances provided by the program in order to attend activities.¹²

“Because we were deliberate from the start about community participation, that helped us in more fully transitioning the power to the community during COVID. Anytime that NE-CMS had planned training for staff, we planned the same trainings for the community structures. I can remember another project that we had at the time, the committee was not well empowered, and we had to halt activities entirely.”

—Implementer, NE-CMS, Nigeria

¹¹ Interview, Manager, COMITAS, Nigeria.

¹² Interview, Manager, COMITAS, Nigeria.

BARRIERS

Despite deliberate efforts by programs to strengthen the capacity of committee representatives and provide them with the tools that they needed to conduct activities autonomously, some programs found that **poorly adapted technical resources** created a barrier to this adaptation. Even for programs that had always taken a joint implementation approach, most planning tools and activity facilitation guides had been designed primarily for program teams, using English or French, as well as technical programming language. Rather than adapting these tools, some program teams attempted to share them directly with committee representatives but received feedback that the resources felt bulky, overwhelming, or confusing.¹³

Another critical barrier was the **diminished motivation** by some members to actively participate in community structures during the height of the pandemic. Respondents identified two main drivers of this demotivation. In some cases, as multiple, compounding crises intensified, committee members felt compelled to **prioritize urgent basic needs** over involvement in voluntary programming activities, especially in cases where these activities did not provide an immediate, tangible benefit. For example, in Karamoja Uganda, the COVID-19 era coincided with a rise in famine, insecurity, and economic hardship. The Apolou program witnessed many male and female committee members prioritizing livelihood activities, efforts to source food, and domestic duties over involvement in governance activities.¹⁴

“It is a bit hard to engage someone who is not economically stable, because they always have in the back of their minds that they might get something from Mercy Corps for participating. It became hard for us in terms of managing their expectations, and they became disappointed.”

—Manager, Apolou, Uganda



Niger, Mercy Corps

Programs also faced with demotivation among committee members due to **delayed financial incentives**. Committee members often receive some form of transport stipend, refreshment, or other allowance for attending program activities, in order to defray costs associated with their involvement or to compensate them for time that would otherwise be spent on income generation. However, during COVID-19, where committee members continued meeting locally, movement restrictions prevented some Mercy Corps staff from disbursing allowances during these activities. In one case, despite pledges by Mercy Corps to provide these benefits retroactively once access was restored, the delay strained relationships with committee members at a time when they were already under immense economic pressure due to COVID-19.¹⁵

13 Interview, Implementer, NE-CMS, Nigeria; Interview, Manager, Youth ACT (for PEACE), Niger.

14 Interview, Manager, Apolou, Uganda.

15 Interview, Implementer, NE-CMS, Nigeria.

“We weren’t always sure if they [committee representatives] faithfully transmitted the messages about social cohesion and tools we gave them, but instead, each person had their own interpretation and passed the message according to their own manner.” —Manager, PEACE, Niger

UNINTENDED CONSEQUENCES

While this adaptation enabled the continued implementation of programming at a time of severe barriers to access, it also produced **inconsistencies in implementation**. Prior to the pandemic, program teams typically accompanied community structures to jointly implement activities, in some instances, increasingly handing over facilitation roles to committee members as their skills, knowledge, and confidence improved. With the onset of COVID-19, as committee liaisons suddenly began conducting activities with greater independence and less direct support, program teams observed growing disparities across locations and distortions in the intended messaging or technical approaches. Some committee representatives took liberties with the content that they had learned in trainings when trying to cascade it down to others, while others simply struggled to apply **poorly adapted resources**. For programs in which committee members and other community participants had engaged in similar activities prior to COVID-19, some noticed marked differences in the way that committee representatives were facilitating the process, sharing discontent over **weakened program quality** and concerns that these disparities would undermine desired results. These issues also fomented **tensions between participants and program teams**.

In some cases, programs opted to select predominantly adult male traditional or religious leaders and local authorities as committee representatives, based on pervasive gender norms and assumptions that their recognized leadership roles would make them credible interlocutors and imbue them with strong communication skills.¹⁶ Moreover, as programs relocated trainings to cities accessible to the program team, community leaders were able to negotiate safe passage and mitigate **access constraints**, due to their **prior knowledge** of local conflict dynamics and influence with violent actors who might otherwise harm civilians.

However, the reliance on community leaders and local authorities inherently **reduced diversity and social inclusion**, undermining the involvement of women and youth, who have traditionally been excluded from such leadership roles due to **restrictive cultural and gender norms**. Even when programs sought to mitigate this imbalance by identifying women and youth leaders to serve as co-representatives, they often faced unique **access constraints**. Programs, such as the PEACE program in Niger, therefore encouraged and provided resources for female participants to travel with male relatives, as a **self-protection strategy** to comply with restrictive gender norms, while enabling women’s engagement.¹⁷

Respondents also acknowledged that elevating community leaders and local authorities as liaisons **reduced program quality** for programs that sought to cultivate practices of inclusive and collaborative decision making, since community leaders tended to be more directive and less consultative in their approach than envisioned by the program. Some committee members from the NE-CMS program in Nigeria even feared that local authorities who merely participated in program activities might co-opt them for their personal benefit, creating a **risk of intercommunal tension**, if the program team was not present to facilitate.¹⁸

¹⁶ Interview, Manager, Youth ACT (for PEACE), Niger; Interview, Implementer, PROPS, Burkina Faso.

¹⁷ Interview, Manager, Youth ACT (for PEACE), Niger.

¹⁸ Interview, Implementer, NE-CMS, Nigeria.

BENEFITS

All of the programs utilizing this approach of elevating committee representatives as liaisons highlighted the basic benefit that they were able to transcend prevailing access constraints and, therefore, avoid canceling activities during COVID. This benefit not only meant that programs could continue implementing activities in line with contractual commitments, but also enabled programs to avoid the consequences reported by programs that canceled activities. These consequences included tensions with participants, inefficiency in terms of time and funding, staff pressure, and reduced social cohesion gains.

“We now have a second phase of COMITAS. But it was the community who loved it and wanted it to continue. We had a big town hall meeting with [the donor], and it was the community who demanded a second phase and pushed [the donor] to agree to it on the spot.” —Manager, COMITAS, Nigeria

While several programs described their commitment to **local ownership** as a key enabler of this adaptation, they also framed it as a core principle – not only in service of implementation and expected outcomes, but as a meaningful result in and of itself. Respondents spoke with pride describing how committee members took ownership for generating and realizing solutions to local grievances and how their model of programming had effectively created that space for participants to lead.

Other benefits had not yet been realized by programs but were rather expectations about the potential long-term benefits of adopting this adaptation. Respondents were hopeful that the empowerment of committee structures to conduct activities with increasing autonomy would **improve efficiency** of programs in terms of time and funds, while **increasing the reach and geographic scope** of programming through a multiplier effect. Moreover, investing in the capacity of credible committee representatives could enable them to serve as local champions to provide **sustained coaching and mentorship** to other community members. The box below describes how the COMITAS program in Nigeria is contributing to these envisioned benefits since the COVID-19 era. Overall, this adaptation has the potential to promote **durable community resilience** to address needs emerging from acute crises, beyond those being immediately addressed by the program.

Featured Program: COMITAS (Nigeria)

The COMITAS program began conducting its natural resource management activities in January 2021, at a time when intensifying insecurity, severe rainy season flooding, and COVID-19 prevention measures inhibited access for the program team and participants alike. Although the program had initially planned to visit the newly formed Natural Resource Management Committees (NRMCS) in their respective wards to conduct trainings and facilitate activities, the program team recognized that it had to adapt. In collaboration with the NRMCS, the program team identified committee representatives who were responsible for attending trainings and briefing sessions in the state capital before returning to their colleagues to share what they had learned. Through continuous remote coaching and mentorship from the program team, the NRMCS then planned, implemented, and reported on community initiatives, enabling the program to maximize local ownership. As a result of this experience, COMITAS has further deepened its approach to empower the NRMCS and their representatives in the second phase of the program, which commenced in January 2023. COMITAS has since designed new local language resources for the NRMCS to independently facilitate community activities, provided them with training-of-trainers sessions, piloted outcome journals as a locally led monitoring method, and envisions establishing a platform for the NRMCS formed during the first phase to mentor the new committees.

LESSONS AND IMPLICATIONS

- › **Foster a Culture of Participation:** Programs that were most effective at employing this adaptation to harness committee members as liaisons were able to inspire a culture of genuine engagement and leadership by community participants to collaborate, advocate, and undertake programming. Programs should aim to nurture meaningful participation not only through the delivery of capacity strengthening activities that aim to empower community members, but also through the facilitation of activities that center community voices throughout the program cycle, including participatory analysis and action planning, joint implementation of initiatives, and participatory monitoring and evaluation. Program teams should seek to cultivate relationships with participants based on humility, empathy, and trust in community voices. Organizations can help enable this culture by deliberately hiring program managers and team members who demonstrate these qualities, developing onboarding materials and internal norm forming initiatives to reinforce these qualities, and integrating them into annual performance assessments.
- › **Map and Resource Existing Structures:** To enhance this adaptation, programs should more deliberately identify and harness existing structures, rather than creating new groups disconnected from the local ecosystem. This could mean collaborating with established local associations, developing networks among community-based organizations (CBOs), or supporting committees formed through previous programs. Program should ensure that facilitation guides and technical tools are developed or adapted to the language and style that are accessible to local structures, so that they can utilize these resources independently. Joint identification of existing community venues, safe access routes, and communication modalities can also enable these structures to continue functioning during times of crisis and sustain their community contributions beyond program funding cycles.
- › **Collaborate with a Diverse Network of Local Actors:** Programs should seek to engage existing institutions, academics, businesses, government agencies, and faith leaders to support committee structures, especially during times of crisis. These local actors can serve as technical resources to mentor committees on their activities; advocates to communicate committee work and mobilize community members; and facilitators to navigate administrative approvals. Programs should work to galvanize these actors, link them with committee structures, and support them to identify their respective roles in enabling committee activities at the outset.
- › **Deliberately Select Committee Representatives:** This adaptation can only be effective if selected committee members and liaisons are diverse, representative, and credible actors. While customary leaders and government officials have vital roles to play in enabling community structures, their authority status may impede space for meaningful and inclusive collaboration and even fuel intercommunal conflict if they are further elevated as liaisons on behalf of the wider committee or community. Rather, program teams should consult extensively with diverse and marginalized groups, including women and youth, and embed participatory selection approaches, such as community nomination and voting processes, to ensure that committee representatives are committed to community-driven change.

Case Examples:

- NE-CMS (Nigeria)
- TSP3 (Syria)
- T4PJ (Syria)
- CSSF (Jordan)
- Madad (Iraq)
- PARTNER (Nigeria)

Mercy Corps views the cultivation of equitable CSO partnerships and teams representative of the communities where we work as key ways to achieve the perceived benefits of localization – ensuring the relevance, effectiveness, and sustainability of programs – and of upholding commitments to respect, accountability, and principled programming.¹⁹ Mercy Corps programs have historically partnered with local, national, or regional Civil Society Organizations (CSOs) for a range of technical and operational reasons. For many humanitarian programs operating in emergency response contexts, CSO partners often serve as critical force multipliers and means

of accessing vulnerable populations, especially in contexts facing high levels of insecurity. For governance and peacebuilding programs, integrating CSO partners into programming is often central to nurturing effective and responsive governance systems and vertical social cohesion.

With the onset of COVID-19, some Mercy Corps programs adapted to either rely more heavily on their existing CSO partners for implementation or to engage new partners. Notably, in Northeast and Northwest Syria, the TSP3 and T4PJ programs had long undertaken a remote management approach with national CSO partners, due to security constraints. The NE-CMS program in Northeast Nigeria had also engaged a team of four local CSOs as thought partners and force multipliers to scale up the programming since its inception in 2018. These partnership arrangements were already in place when COVID-19 lockdowns were instituted, although the programs had to adapt to fewer opportunities for in-person technical trainings and program review sessions. Meanwhile, the Strengthening Social Capital program in Jordan had been undertaking a direct implementation approach prior to COVID-19. As movement restrictions were introduced, the program team formalized its relationship with CBOs who had previously participated in the programming, involving them to take a more active role in conducting activities.²⁰

In other cases, programs utilizing a direct implementation approach hired community mobilizers or field liaison officers to maintain a physical presence in local communities and conduct a range of administrative tasks for the program team, including identification of local venues, mobilization of participants for activities, and simple data collection and documentation tasks. These mobilizers typically were not staff members, but rather, were well respected community members from the program locations with deep knowledge of local dynamics and strong relationships with program participants, who were employed as service contractors or daily workers. Since most Mercy Corps program team members are not from the communities where programming is being implemented, community mobilizers were critical to ensuring direct access and representation of local community voices. For programs such as NE-CMS in Northeast Nigeria and PEACE in Niger, which were already engaging community mobilizers prior to the pandemic, program teams became more dependent on mobilizers for information sharing and implementation as access became constrained by COVID-era lockdowns and other movement constraints.²¹

19 See Mercy Corps' 10-year strategy, "Pathway to Possibility," for a full articulation of our commitment to localization and locally-led action.

20 Interview, Implementer, Strengthening Social Capital, Jordan.

21 Interview, Manager, Youth ACT (for PEACE), Niger; Interview, Implementer, NE-CMS, Nigeria.

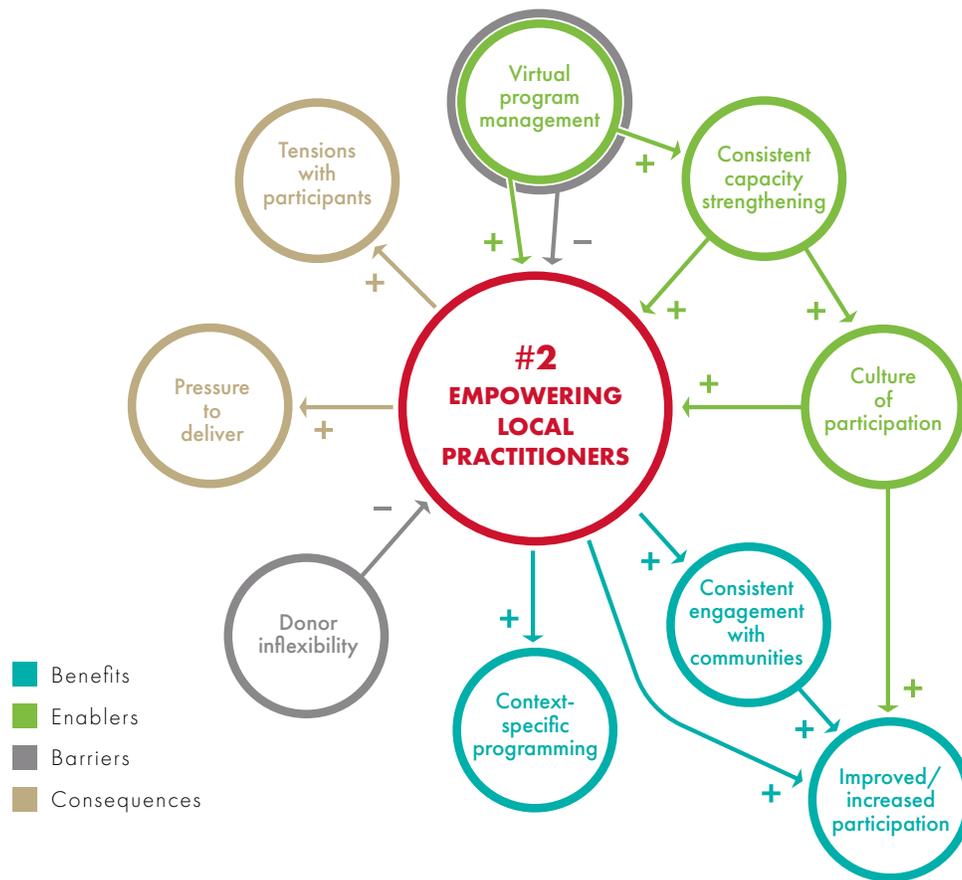


FIGURE 3: Systems map of Adaptation #2, Empowering Local Practitioners

ENABLERS

Programs found that their partnerships with local CSOs flourished when they were able to foster a strong **culture of participation** and mutual respect. Spaces for co-creation and collective learning – especially in times of shock and stress – were critical to nurturing these relationships and to generating and implementing creative solutions. Programs described deliberately creating opportunities for CSO partners to actively participate in designing programmatic resources, participant selection processes, budgets, and work plans. In certain cases, the same collaborative approach was employed in designing a joint program contingency plan in response to COVID-19.²² Mercy Corps program teams also sought to ensure that these exercises were not extractive, but rather, a two-way street based on mutual and **transparent communication**. For example, when strategic decisions related to program expansion, security, or funding had the potential to affect the PARTNER program, these issues were shared openly with all of the partners, so that they could better orient their thinking and contributions to the program. In many cases, they participated directly in meetings with the donor or Mercy Corps senior leadership.²³

This culture of participation was often most vibrant when it was actively endorsed and exemplified by program managers. This **constructive leadership** meant that program managers actively sought to demonstrate behaviors of empathy and humility in a way that would trickle down to the program team, CSO partner teams, and to their engagement with the local community structures. By

22 Interview, Implementer, NE-CMS, Nigeria; Interview, Manager, PARTNER, Nigeria.

23 Interview, Manager, PARTNER, Nigeria.

extension, program managers also played a role in encouraging program team members to invest in equitable and authentic relationships with the CSO partners, so that they would feel more at ease in contributing to collective design and learning exercises. These authentic relationships also enabled the Mercy Corps program team to more holistically understand the individual and organizational strengths and weaknesses and communication preferences of the CSO partners and to provide more effective coaching and mentorship.

Capacity strengthening efforts by program teams not only enabled CSO partners to effectively conduct activities, but when done with consistency, respect, and the intention to empower, also deepened partnership relationships. The NE-CMS program adopted an approach to strengthening the capacity of partners, in a way that not only viewed knowledge and skills as flowing downward from the Mercy Corps program team, but also upward from the CSO partners, and horizontally between the partners.²⁴ Prior to implementing new activities, the Mercy Corps program team conducted technical trainings on activity facilitation guides, adapting them in real-time in response to feedback from partners. These trainings sought to invest genuinely in the partner team members as peacebuilding professionals beyond the scope of the NE-CMS program, and therefore emphasized the broad applications of the concepts and skills being learned. Monthly debriefing and planning sessions promoted further applied learning and cross-learning between the CSO partners in the spirit of a community of practice.

For programs that had existing relationships between the Mercy Corps program team and CSO partners, **virtual program management** enabled programs to continued to harness these partnerships and invest in collective adaptation. In particular, **prior experience** with remote management also made it easier for programs to adapt their existing systems to the COVID-19 context. For example, long before the pandemic, NE-CMS in Nigeria had established a WhatsApp group for CSO partners and the Mercy Corps program team to continuously engage throughout activity implementation in local communities.²⁵ CSO partners provided narrative updates and photos of activities and asked questions on technical tools that emerged as they were being applied. In response, the Mercy Corps program team provided ongoing, remote troubleshooting support and coaching on programmatic approaches, where needed. With the onset of COVID-19, NE-CMS was able to not only rely on, but also deepen its use of this virtual platform.

“Tools were not developed exclusively by Mercy Corps staff, but collaboratively with partners. All of the partners were called to review the tools to see whether there were things to change so that they were fully adapted to the local context...Partners were given flexibility to innovate, if what was collectively developed for the overall project was found not to work in the specific localities.”

—Implementer, NE-CMS, Nigeria

²⁴ Interview, Implementer, NE-CMS, Nigeria.

²⁵ Interview, Manager, NE-CMS, Nigeria; Interview, Implementer, NE-CMS, Nigeria.

Featured Program: NE-CMS (Nigeria)

Since its inception in 2018, the NE-CMS program had engaged a team of four CSOs to serve as thought partners and force multipliers, so that the programming could be implemented at scale. While the Mercy Corps program team was responsible for the overall management of the NE-CMS program and program quality, the CSO partners were charged with conducting day-to-day activities across the program's many target communities. The CSOs were viewed less as grantees and more as an extended program team, which was critically involved in designing program strategy, refining technical resources, and contributing to program learning. The Mercy Corps program team was deliberate in providing not only foundational trainings on programmatic approaches, but also consistent demand-driven coaching and mentorship. Furthermore, the NE-CMS program adopted a layered approach whereby the CSO partners subsequently cascaded both this culture of participation and their technical skills to community committees, with each 'level' feeling empowered to make decisions about activities in their respective areas. This approach enabled the NE-CMS program to transition seamlessly into the COVID-19 era.

Similarly, while the TSP3 program in Syria attempted to support its partner through online trainings, the program team found that consistent, virtual mentorship and coaching was a more effective approach to clarify and reinforce new concepts and skills.²⁶ For example, following a request from the partner to build their report writing skills, the team instituted digital tracking tools and Google Docs for better collaboration on activity reports and began jointly and simultaneously reviewing reports, with the program team and partner CSOs each giving suggestions throughout the process. TSP3 continued utilizing digital solutions for partner capacity strengthening even after lockdowns and gathering restrictions had been lifted.

BARRIERS

While **virtual program management** was a key enabler of effective partnerships for programs that were well established by the time that COVID-19 had started, virtual processes were a critical barrier inhibiting robust partnerships for programs that were being designed virtually, as was the case for the PARTNER program in Nigeria. As a result, the entire program design process was conducted remotely through online workshops and interactions. Program design workshops are often a formative time not only to develop the strategic vision for new programs, but also to get to know the motivations, communication preferences, and working styles of program partners as individuals and organizations. PARTNER found that while the virtual design workshops generated the content for a successful program proposal, they did not create the space for the development of **authentic relationships**.²⁷ Similarly, without a physical space to convene, the partners didn't have an opportunity to build relationships among themselves, and the program team sensed that this resulted in initial competition between the partners that might not have occurred otherwise.

²⁶ Interview, Manager, TSP3, Syria.

²⁷ Interview, Manager, PARTNER, Nigeria.

PARTNER also found that their organizational capacity assessment processes were poorly adapted to virtual program design.²⁸ As a result, Mercy Corps was unable to rigorously and accurately evaluate the institutional or technical capacities of the partners, and upon commencing implementation, found that partner capacity levels were not aligned with the responsibilities that they had committed to in the proposal. This significantly delayed activity implementation and invalidated initial **capacity strengthening** plans. However, PARTNER was able to negotiate an extended inception period, during which Mercy Corps and the partners were able to revise these plans. The program team also adopted a mentoring and accompaniment approach, with the partner initially shadowing Mercy Corps during activities to gradually build their skills and confidence to lead implementation in the future.

In some cases, **donor inflexibility** also impeded the ability of program teams to nurture strong and sustainable partnerships, due to compliance rules and donor timelines that made it impossible for Mercy Corps to effectuate certain contractual arrangements. While understandable, these donor constraints made it difficult for the program team to prioritize and center partner needs and strategic priorities and undermined the trust that was central to the effectiveness of this adaptation.

UNINTENDED CONSEQUENCES

The reliance on CSO partners for implementation inherently transfers a degree of accountability for activity implementation and the burdens that come with it. While these demands and the **pressure to deliver** are common across implementing organizations, CSO partners often experience them more acutely because of inherent power imbalances with international agencies and donors and their more limited access to stable funding. As described by a respondent from the TSP3 program in Syria, this experience was further heightened during the early days of the pandemic, as the CSO partner may have felt an expectation to operate at the same level and meet the same targets within the same timeline, despite scary and unfamiliar changes in context.²⁹

In some cases, the engagement of local CSO partners and community mobilizers **generated tensions with community participants**. This occurred primarily when CSO partners and community mobilizers were not involved in the program at its inception or because they were perceived as having conflicting interests. For example, the Strengthening Social Capital program in Jordan had already been implementing programming for four years prior to the onset of COVID-19. When the program engaged CBOs as an adaptation to COVID-related movement restrictions, the CBOs subsequently assumed responsibility for selecting and mobilizing participants, implementing community initiatives, and providing feedback to the program team. As a result of this transfer of responsibility, some participants who had previously been engaged in Strengthening Social Capital program activities were not selected by the CBOs for continued engagement, causing these former participants to feel excluded.³⁰ In another case, program participants were concerned that financial compensation being paid to community mobilizers might erode the commitment of the mobilizers to conducting quality program activities and generating meaningful results.³¹

28 Ibid.

29 Interview, Manager, TSP3, Syria.

30 Interview, Implementer, Strengthening Social Capital, Jordan.

31 Interview, Manager, Youth ACT (for PEACE), Niger.

BENEFITS

Programs that were able to foster robust partnerships with CSOs or hire community mobilizers as an adaptation to COVID (and other barriers to access) found that they were not only able to more readily navigate constraints, but also more effective at maintaining **consistent engagement with communities** in a way that also **increased participation**. The Strengthening Social Capital program in Jordan found that partner CBOs not only had easy physical access to communities, but also familiarity and credibility enabling them to better mobilize program participants.³² For example, when youth participants demonstrated hesitation over attending activities, the CBOs would go to their homes directly to speak with them and their families to encourage their participation. Programs noted similar benefits when they engaged community mobilizers, who were physically and socially well placed to mobilize participants and manage community spaces without encountering checkpoints and while adhering to curfews. In the case of Madad in Iraq, the program found that the presence of the mobilizers enabled the program to return to full-scale implementation much more quickly after lockdowns were lifted.³³ These benefits were only true in cases where CSO partners and mobilizers were physically residing in target program localities.

When programs gave space for local staff or partners to meaningfully contribute to program co-design and implementation, this adaptation also enabled **context-specific programming** and adaptations and enhanced community buy-in. For example, the Madad program in Iraq found that the engagement of community mobilizers enabled them to better understand the specific cultural dynamics in each area and contextualize their programming in a more nuanced way.³⁴ In parallel, when participants saw that local staff, CSO partners, or community mobilizers had actively contributed to programming, participation improved. It is likely that the improved contextualization of programming also enhanced the quality of participation.

“You don’t need access if someone is already there.”

—Implementer, Madad, Iraq

“These [mobilizers] will be neutral people who can understand the interests of communities and also the goals of the organization. Local people will say, ‘This is our son. This is our daughter.’ Even the acceptance of the project will be much more robust.”

—Implementer, NE-CMS, Nigeria



Nigeria, Mercy Corps

32 Interview, Implementer, Strengthening Social Capital, Jordan

33 Interview, Implementer, Madad, Iraq; Interview, Manager, Madad, Iraq.

34 Interview, Manager, Madad, Iraq.

LESSONS AND IMPLICATIONS

- › **Involve Local CSO Partners in Co-Design:** Programs that employed this adaptation as well as those that did not emphasized the potential value of empowering local CSO partners not as an afterthought in response to crisis, but in the design of future programs. Where possible, CBOs that are physically present in target communities and have existing relationships with local stakeholders should be prioritized to maximize the benefits of these partnerships. These organizations should be identified in advance and actively engaged in co-designing the strategic vision and programmatic approaches for the program. Even when these partnerships must be established in a virtual context, programs can work to have more honest conversations about the envisioned shape of the collaboration, conduct more robust capacity assessments, and advocate for extended start-up and refinement periods to ensure sufficient time to nurture relationships, strengthen capacity, and harmonize institutional structures.
- › **Invest in Sustained and Tailored Capacity Strengthening:** In partnering with local CSOs, program teams should work not only to enhance the technical skills related to the specific sector or topic of the program, but also to strengthen the professional and institutional capacities of the CSOs and their team members. These capacity strengthening approaches should be tailored to the unique interests, needs, gaps, and explicit requests of the partners and should be conducted holistically and continually, utilizing accompaniment approaches, refresher trainings, and coaching sessions throughout program implementation in a way that aims to empower partners for the long term. Program teams and donors should also collaborate to ensure that CSO partners have the necessary IT equipment, generators, vehicles, and other operational resources needed to safely and effectively realize their potential.
- › **Hire Locally:** Programs should adopt as a standard practice a strategy of hiring staff and mobilizers from communities where programming is being implemented, while being careful not to hire skilled staff away from local CSOs. These team members can play a vital role in monitoring local dynamics, consulting local stakeholders, contextualizing activities and adaptations, and consistently mobilizing and mentoring community participants. They could also be given responsibility for operational tasks, including cash management and small purchases, so that activities can continue, even while finance and procurement officers are unable to access remote locations. In the long-term, deliberate capacity strengthening can enable local staff and mobilizers to grow professionally in ways that decentralize power, invest in local capacities, and stimulate the local economy. Similarly, local academics and technical experts should be considered as trainers and for other consultancy roles.
- › **Map Existing Resources:** This adaptation would further benefit from an asset-based mentality and deliberate approach of mapping existing community capacities and resources during the design of the program. These resources could include local activists and associations, activity venues, and ongoing civic action and development initiatives. Even where local associations are unable to meet the institutional capacity standards to serve as formal grantees, programs could be more intentional about establishing arrangements to engage them in implementation, utilize their office spaces, and support them with the IT equipment so that program implementation can continue during periods of reduced access, and even beyond the lifecycle of the program.

ADAPTATION 3

Deploying Technological Solutions

Case Examples:

- AVA (Haiti)
- SUN (Afghanistan)
- Madad (Iraq)
- Nakdar (Iraq)
- Better Future (Iraq)
- CSSF (Jordan)
- Apolou (Uganda)
- TSP3 (Syria)
- T4PJ (Syria)
- LEVER (DRC)

Technological solutions were often the first impulse of program teams facing access constraints to physical engagement with community participants and direct implementation of activities. Nearly every program in the study sample considered, if not attempted, some form of technological solution to help them continue implementing participatory programs throughout the pandemic. Programs used a wide range of technological solutions, including video conferencing platforms, such as Zoom and Skype, as well as social media applications, such as Facebook and WhatsApp, which was perhaps the most widely used tool. Meanwhile, several programs turned to low-tech solutions, such as radio or conference calls.

Overall, technological solutions were widely deemed inappropriate for delivering technical trainings and social cohesion activities, such as community dialogue sessions. As a result, programs that had planned to focus on these types of activities during periods of reduced access often favored delaying or cancelling their activities, rather than undermining the quality of implementation. The one key exception was the AVA program in Haiti, which employed conference calls to deliver life skills trainings to adolescents. Meanwhile, technological solutions were typically assessed to be effective for ongoing context monitoring, regular meetings by community structures, action planning sessions, and registration of participants for distributions. These activities were less aimed at fostering trusting relationships, nurturing space for collaborative decision making, or generating nuanced analysis, but rather tended to focus on communicating and verifying basic information on new developments, activity progress, and participant eligibility.

In all cases, programs that employed technological solutions as their primary adaptation – especially the SUN program in Afghanistan, AVA in Haiti, and Madad, Nakdar, and Better Future in Iraq – maintained a direct implementation approach rather than engaging committee representatives or CSO partners to conduct activities (as in Adaptations 1 and 2, respectively). In cases where this adaptation was considered by the program team to be effective, some form of low-tech or hybrid element appeared to be critical to its success, in alignment with the available digital infrastructure, local norms, and community capacities.



BARRIERS

The most consistent and significant barrier to this adaptation was the digital divide, whereby participants in certain regions or demographic categories had poor access to digital (internet-based) technology, poor digital literacy skills, or weak trust in digital technologies that inhibited their engagement. In some cases, program teams deemed the divide too severe to even attempt or continue employing digital tools, particularly in remote and underdeveloped areas of Burkina Faso, Uganda, and Syria. In most cases, the primary barrier to engagement with digital platforms was a lack of access, including low rates of smartphone ownership (especially among women), weak phone and data network connectivity, and frequent power outages. Even where networks were available, persistent economic hardship, which was exacerbated by the pandemic, meant that participants did not have enough money to purchase smartphones or phone credit, nor did the programs have sufficient funds to supply all participants with equipment or phone credit for activities.³⁵ As a result, some participants felt actively excluded from virtual activities.



FIGURE 4: Systems map of Adaptation #3, Deploying Technological Solutions

Even in cases where participants had access to digital technologies and were familiar with the selected platforms, they didn't always feel comfortable using these tools to participate in program activities. For example, in urban neighborhoods of Kabul, the SUN program had planned an inclusive process to mobilize and select members for its community structures, and prior to COVID-19 lockdowns, had already conducted several large-scale outreach campaigns. With the onset of the pandemic and persistent insecurity, the SUN program team shifted to using Facebook to continue digital outreach campaigns and accept nominations for committee members. It also used Facebook polls to prioritize which local infrastructure programs to implement. Although Facebook was well known to community participants, it was not initially viewed as a credible platform for addressing serious topics, due to persistent mistrust in social media.³⁶

As programs began deploying technological solutions, many program teams discovered that the facilitation techniques that they had used for in-person activities, especially technical trainings, were incompatible with or difficult to adapt to a virtual context.³⁷ This **poor transferability of facilitation techniques** meant that online trainings sessions no longer felt interactive, so participants had more difficulty following the content and quickly lost their focus and became disengaged. Program teams found that they also lacked the skills and experience to adjust the content and facilitation techniques to an online context.

The AVA program in Haiti, however, anticipated that their existing approach to in-person trainings would be ineffective and instead took a deliberate approach to adapt their training content and facilitation techniques for conference calls.³⁸ The program team redesigned the training manual to reduce the amount of content to be delivered during each session, and developed and distributed printed workbooks to the participants, so that they could follow along. They also encouraged the trainers to ask more direct questions and call participants' names during the sessions to keep them engaged.

Featured Program: AVA (Haiti)

The AVA program in Haiti had been preparing to deliver a series of life skills trainings for adolescents when COVID-19 lockdowns and gathering restrictions were first introduced. The program team considered organizing small group sessions designed to respect social distancing, but found that parents were uncomfortable sending their children, due to the risk of infection. Meanwhile, the digital divide was particularly acute in Haiti – smartphones are not widely available, and internet infrastructure is either damaged or plagued by regular electrical outages. Instead, the team attempted to overcome COVID-19 constraints and digital barriers by using audio conference calls, which relied only on access to a basic cell phone and phone network. The AVA program adapted their materials and facilitation techniques to this new platform and distributed printed workbooks for trainees to follow along with the content. This approach enabled adolescents to participate in training sessions from the safety of their home. By harnessing low-tech solutions that were tailored to the Haitian context, the AVA program was not only able to continue implementing their programming, but also reached larger numbers and new types of participants than expected.

³⁶ Interview, Implementer, SUN, Afghanistan.

³⁷ Interview, Manager, T4PJ, Syria; Interview, Manager, TSP3, Syria; Interview, Manager, Strengthening Social Capital, Jordan; Interview, Manager, Better Future, Iraq.

³⁸ Interview, Implementer, AVA, Haiti; Interview, Manager, AVA, Haiti.

ENABLERS

Program teams attempted to overcome the digital divide through a number of different measures aimed at improving access, strengthening skills, and reducing mistrust related to technological solutions. In its simplest form, many programs began **providing resources**, such as equipment, materials, and stipends to participants, so that they could more easily access both digital and low-tech platforms. These included tablets, solar-powered charging stations, phone credit, and radios.³⁹ Alternatively, programs **mapped existing resources** in the community. For example, in order to adapt to the new conference call format for life skills trainings, the AVA program in Haiti adjusted its selection criteria, so that only adolescents with access to a phone were eligible to participate, ensuring that participants would be able to join training sessions.⁴⁰ Many programs also provided their participants with **training on digital literacy and technology**, as well as video tutorials and written instruction on how to use specific tools.⁴¹ In some cases, programs were able to leverage on existing **familiarity with technology**, especially among younger participants, to accompany those with lower levels of digital literacy.⁴² When all else failed, some programs felt that the lack of alternative options for engagement and a spirit of solidarity amid collective uncertainty generated **participant enthusiasm** to overcome barriers to this adaptation.⁴³

Although technological solutions were primarily designed to overcome barriers to access and to be conducted entirely remotely without physically convening participants, several programs adopted hybrid approaches that involved holding modified in-person sessions that upheld COVID-19 prevention measures while using technological solutions to supplement these in-person meetings. For example, the SUN program in Afghanistan adapted its initial activities for establishing community structures and prioritizing local infrastructure projects to be conducted predominantly through Facebook.⁴⁴ However, the digital divide made it unlikely that the social media platform would be effective on its own. Instead, the program team conducted an in-person outreach campaign during periods when lockdowns were eased. This face-to-face engagement was essential to overcoming prevailing mistrust around social media as a credible tool for community decision making. The program also dispatched a mobile team with tablets to conduct a door-to-door outreach campaign specifically targeting vulnerable individuals that the program team knew lacked access to internet or digital literacy skills.

UNINTENDED CONSEQUENCES

Technological solutions are generally assumed to create efficiency. However, the constraints of certain technological platforms meant that activity implementation resulted in **reduced efficiency** in many cases. This was especially true for technical trainings that sought to improve participant knowledge and skills or collaborative activities that aimed to generate complex analysis, produce joint solutions, or nurture relationships. In these cases, program teams found that they had to decrease the number of participants per session, decrease the duration of sessions, and increase the frequency of sessions in order to meet program targets. These changes put exceptional **pressure on program teams** to multiply the number of sessions, often without any increase in time or resources.

39 Interview, Implementer, Strengthening Social Capital, Jordan; Interview, Manager, AVA, Haiti; Interview, Manager, TSP3, Syria; Interview, Implementer, Apolou, Uganda.

40 Interview, Implementer, AVA, Haiti.

41 Interview, Manager, Strengthening Social Capital, Jordan; Interview, Manager, SUN, Afghanistan.

42 Interview, Manager, SUN, Afghanistan; Interview, Manager, Madad, Iraq; Interview, Manager, TSP3, Syria.

43 Interview, Manager, T4PJ, Syria.

44 Interview, Implementer, SUN, Afghanistan.

The AVA program in Haiti experienced these consequences acutely as they adapted their life skills trainings for adolescents to a conference call format.⁴⁵ To start, the program team reduced the amount of content to be delivered during each training session, since it took longer to communicate key concepts using only verbal facilitation. Second, the program team determined that they would have to shorten the duration of training sessions, since participants were unlikely to be able to focus as long as in an in-person training. In order to maintain active engagement, the program team also reduced the number of participants to six adolescents per session. As a result, the life skills trainers conducted an average of four 90-minute sessions per day. In addition to the sheer pace of implementation, this process demanded considerable internal coordination within the team and external mobilization of participants to ensure that it went smoothly.

Programs also consistently witnessed **reduced knowledge acquisition** by participants in cases where technological adaptations were used to deliver trainings, relative to in-person trainings. This occurred primarily due to the **poor transferability of facilitation techniques** to virtual platforms. However, even when programs were deliberate about adapting their facilitation approaches, data from pre- and post-tests and other assessments indicated that participants did not achieve nearly the same degree of comprehension as they would have during in-person sessions.⁴⁶ Similarly, programs that attempted to conduct virtual data collection for research or monitoring and evaluation purposes felt that their **data quality suffered**.⁴⁷ This may also have made it more difficult for teams to produce robust and current context analysis.

Considering that the digital divide affects different populations unequally, many programs that employed technological adaptations – especially those in Iraq, Jordan, and Syria – observed a **reduction in diversity and social inclusion** in their programming, as women, elderly, and participants with lower levels of educational achievement or financial means disproportionately dropped out of activities, lost access, or became less actively engaged.⁴⁸ For example, as the AVA program in Haiti modified its participant selection criteria to include only those with access to a phone, the program may have inadvertently excluded adolescents whose families lacked the means to own a phone or purchase phone credit.⁴⁹ These trends equally applied to programs utilizing low-tech solutions such as radio or conference calls.



Iraq, Ezra Millstein/Mercy Corps

45 Interview, Manager, AVA, Haiti; Interview, Implementer, AVA, Haiti.

46 Interview, Implementer, AVA, Haiti; Interview, Manager, Better Future, Iraq.

47 This finding was evident in the Strengthening Social Capital program in Jordan and the PEACE program in Niger, which both used technological solutions – and virtual data collection, specifically – as an ancillary adaptation. Furthermore, the PACE research team piloted a data collection approach that blended participatory and virtual methods. The team ultimately assessed that the resulting data was of insufficient quality to include in the study analysis.

48 Interview, Manager, T4PJ, Syria; Interview, Manager, TSP3, Syria; Interview, Manager, Better Future, Iraq.

49 Interview, Implementer, AVA, Haiti.

At a time when social cohesion was frayed due to reduced spaces for interaction, tension over government policies, fear of infection, and polarizing views about COVID-19 and individual prevention behaviors, technological adaptations only further **reduced the social cohesion gains** intended by most programs. Mercy Corps' COALESCE approach to strengthening social cohesion necessitates frequent and positive interactions among diverse participants to promote mutual understanding and cooperative relationships – both between identity groups and between communities and the government. However, virtual spaces were not conducive to meaningful interactions. In many cases, programs opted to delay or cancel activities that explicitly sought to nurture relationships, rather than investing time and funds in attempting these activities virtually.⁵⁰

“We supported a tailoring business, for women [from different backgrounds] to make masks and sell them to the community at a reasonable price. We were able to achieve the livelihoods component, because this could be done alone, but we couldn’t get people together to celebrate it. If you posted to social media, it will be news, but not have the same impact as if you do it in person.”

—Implementer, Madad, Iraq

In Arab and Kurdish culture, for example, the concept of *sulha* (reconciliation) is central to the informal justice system and traditionally requires leaders from opposing clans to sit jointly and come to a mediated solution, which, if agreed, is marked by drinking coffee together. Reflecting on the potential of applying digital adaptations to this activity, an implementer from the T4PJ program suggested, “There’s no point in calling someone up to mediate a solution, as you would do in a Western society.”⁵¹ Rather, the team assessed that it was more appropriate to rely on existing cultural practices and delay this element of programming, instead of attempting to adapt it using technological solutions.



Iraq, Ezra Millstein/Mercy Corps

50 Interview, Manager, Strengthening Social Capital, Jordan; Interview, Implementer, Madad, Iraq.

51 Interview, Manager, T4PJ, Syria.

“Before the pandemic, I would go to the directorate offices with only two committee representatives, because we could not go with the full group of 40 youth. It would have taken a lot of coordination to hire a separate venue to accommodate everyone all together. With Skype, the majority of participants could attend the sessions with the click of a button.” —Implementer, Nakdar, Iraq

BENEFITS

Throughout the pandemic, access constraints, gathering restrictions, mask mandates, and social distancing guidance impeded efforts at convening in-person activities and enabling constructive participation. Programs were therefore required to reduce the number of participants to comply with these COVID-19 prevention measures. However, technological solutions created opportunities to **increase the number of participants** involved in programmatic activities – either by maximizing access through social media or radio broadcasts, or by reducing the administrative burden on teams to organize conducive physical venues and mobilize participants to attend. In some cases, digital alternatives also expanded the types of participants involved in the programming beyond the profile initially targeted. For example, when the AVA program in Haiti adapted their life skills trainings for adolescents to be conducted via conference call, they found that parents, siblings, and neighbors of participating youth who were also in confinement began joining in around a single phone.⁵²

Although the use of technological adaptations decreased the efficiency of technical trainings and collaborative or analytical activities, technological tools tended to **improve the efficiency** of action-oriented communications with program participants and registration or verification of aid recipients. Prior to COVID-19, program teams would typically conduct meetings with program participants directly in local communities – even if those meetings were brief and required long travel times. As teams became accustomed to using phone and video calls to communicate with participants about implementation updates at the height of the pandemic, they recognized how this practice saved time without undermining the results.

Technological adaptations were also widely viewed as an appropriate method for collecting information about conflict dynamics and other contextual developments. Moreover, it enabled increased frequency of updates, which improved the ability of program teams to generate robust and current context analysis and further inform subsequent program adaptations. In many cases, programs establish specific tools, such as the “irregularity tracker” used by the PEACE program in Niger to monitor specific incidents and broader trends occurring within local communities that might have a positive or negative impact on activity implementation⁵³ or the “perceptions tracker” used by the LEVER program in DRC to collate rumors within the community related to public health.⁵⁴ In the case of LEVER, the team also used technology to rapidly respond to identified rumors as a way of interrupting them before they could spread within the community. For other teams, regular, semi-structured calls with participants were a more flexible approach to context monitoring, which could be scaled up in times of crisis.⁵⁵

52 Interview, Manager, AVA, Haiti; Interview, Implementer, AVA, Haiti.

53 Interview, Implementer, PEACE, Niger.

54 Interview, Manager, LEVER, DRC.

55 Interview, Manager, Better Future, Iraq.

Digital adaptations created natural spaces for **increased youth participation** and leadership. Prior to the pandemic, adult men often represented the dominant voices during programmatic activities, due to traditional norms around age and gender. In shifting activities to online platforms in response to COVID-19, program teams observed that male and female youth participants began to engage more actively and even facilitate in some cases, due to their relative familiarity with digital technologies. In the case of the SUN program in Afghanistan, some youth committee members even proactively contributed to **technology training**, developing video tutorials on how to use social media.⁵⁶ This initiative not only alleviated the challenges faced by participants with lower levels of digital literacy, but also reframed youth as potential leaders in a society that otherwise excludes them from community decision-making and leadership positions. These intergenerational shifts were also observed by the AVA program in Haiti in the relationship between parents and children. When the AVA program began using conference calls to conduct their life skills trainings for adolescents, many parents were obliged to lend their phones to their children to participate in the sessions. The program team observed that this “created a climate of trust and warmth and independence between the parents and their children.”⁵⁷

Although technological solutions often impeded the involvement of women, in some cases, they mitigated harmful gender norms, resulting in **increased women’s participation**. Notably, programs in Iraq found that online activities enabled women to more easily manage their household responsibilities and navigate prevailing gender norms that prevented them from participating freely in public life without a male relative to accompany them. Knowing that they would be safe at home, male relatives were more willing to let women and girls participate in activities.⁵⁸



Nigeria, Mercy Corps

56 Interview, Manager, SUN, Afghanistan.

57 Interview, Implementer, AVA, Haiti.

58 Interview, Manager, Better Future, Iraq; Interview, Manager, Madad, Iraq; Interview, Implementer, Madad, Iraq.

› **Employ low-tech and hybrid solutions:** While technological solutions convey many potential benefits, reduced knowledge acquisition, social inclusion, and social cohesion gains remain prominent challenges. To mitigate these unintended consequences, programs should consider integrating low-tech and hybrid approaches to transcend the digital divide and ensure that diverse participants can benefit from activities. Where participants are unable or unwilling to engage with digital platforms, radio and phone calls remain powerful low-tech tools for communicating information and even creating participatory space. Meanwhile, a mix of virtual and in-person activities can balance the advantages of each. Other hybrid and low-tech approaches, such as sharing video trainings or other technical resources with participants via sim card or at community centers where participants can gather locally to watch video trainings, could offer similar opportunities.

› **Invest in digital literacy:** Programs are likely to continue relying, at least in part, on technological solutions to adapt to future shocks and stresses. To ensure that participants have the knowledge and skills to interact effectively in virtual spaces, program teams should integrate capacity strengthening activities to improve the technological skills and digital literacy of participants in a way that aligns with their literacy and numeracy levels. In some cases, these efforts may require hybrid approaches, using in-person training sessions and coaching, especially to overcome prevailing mistrust of digital technology.

› **Expand internal technical resources:** Shifting from in-person to virtual activities often requires changes related to content, methods, facilitation techniques, and technologies. Additional internal technical support would enable teams to more smoothly adapt their activities to virtual spaces by ensuring that they have the relevant knowledge, resources, and skills. These could include video tutorials on how to use various digital platforms, as well as guidance on facilitating participatory online sessions using virtual whiteboards and breakout groups. Similarly, program teams would benefit from technical resources on how to adapt Mercy Corps approaches, such as CATALYSE, to be conducted virtually.

Most development and humanitarian programs – both at Mercy Corps and at our peer organizations – are designed to address specific needs and issues within communities, whereby the narrative



DRC, Christian Visso/Mercy Corps

ADAPTATION 4 Addressing Needs Emerging from Acute Crises

Case Examples:

- Madad (Iraq)
- Better Future (Iraq)
- Nakdar (Iraq)
- LEVER (DRC)
- NE-CMS (Nigeria)
- CSSF (Jordan)
- AVA (Haiti)

proposal presents a problem analysis describing which dynamics it plans to focus on. In some cases, especially for peacebuilding and governance programs, programming is designed to provide sufficient space for community participants to prioritize specific issues or needs within the established scope and identify concrete actions that they believe will contribute to a positive change. However, if new shocks and stresses arise, programs typically view them as barriers to planned implementation, rather than an opportunity for adaptations.

The pandemic changed this norm, as communities and donors encouraged a direct response to COVID-19 and its secondary effects. As a result, many programs adapted by addressing this new reality head on, often harnessing existing programmatic approaches, such as CATALYSE, or in a few rare cases, introducing entirely new strategic objectives and activities. Nearly every program adapted to address COVID-19 by integrating some form of sensitization on infection, prevention, and control into their programming, either as a short briefing during existing activities or as a standalone campaign. In addition, program teams and community participants developed creative new ways to not only address COVID-19, but also to reduce violence, foster social cohesion, and promote civic engagement, in line with broader program objectives.

The existence of capable community structures was often a precondition for programs that applied this adaptation, since these committees were typically formed to collaboratively analyze the context and plan and implement responsive actions, empowering participants to actively engage in programmatic decision making. Moreover, all the programs in the study sample that were well established at the beginning of COVID-19 used this adaptation. This is likely because committee structures had time to mature enough to apply methods that they had learned to address emergent dynamics. In addition, two programs that were new at the outset of COVID-19, including Nakdar in Iraq and LEVER in DRC, also employed this adaptation. This can likely be explained by the fact that the program team implementing Nakdar was also implementing well established peace and governance programs during the same period and was therefore able to leverage experiences from across its portfolio. The LEVER program was already focused on responding to Ebola, so it may have been easier for it to adapt to address another public health emergency.



FIGURE 5: Systems map of Adaptation #4, Addressing Needs Emerging from Acute Crises

ENABLERS

Programs were more effective at employing this adaptation when they engendered a **culture of participation** and spirit of local ownership within its community structures (see the Enablers section and systems map for Adaptation #1 on Elevating Committee Representatives as Liaisons for a full explanation of these enablers and secondary enabling factors). At the outset of the pandemic, many programs were hindered by various lockdown measures and considered delaying activities until the prevention policies were eased. However, these enabling factors fostered a space in which committees had the skills, confidence, and will to leverage existing methods, such as **CATALYSE**, to develop creative and **context-specific programming** solutions to new COVID-19 challenges. For example, the Madad program in Iraq found that the committees not only encouraged the program team to follow through on this proposition, but also to convince the donor, which made the program’s advocacy more convincing.⁵⁹ This initiative on the part of the committees was only possible because the program team had communicated transparently with participants from the beginning, so that they were aware of the program scope, budget, and possible benefits and felt that they had an active role to play in shaping specific activities and their implementation. Furthermore, the involvement of diverse community voices ensured that adaptations would be broadly relevant and effective within communities.⁶⁰

59 Interview, Manager, Better Future, Iraq.

60 Interview, Manager, Strengthening Social Capital, Jordan.

“We received a request from our community committees, saying that we understand that you cannot access us or resume activities. But we have a part of our project that is meant to be for recovery and relief. We can add an activity to distribute food items...We had to share this idea with the Madad management, and they were excited. We felt like we can finally do something to help.” —Implementer, Madad, Iraq

Robust and current context analysis was also essential for program teams and participants to identify emergent needs and generate relevant and evidence-based responses, particularly during a crisis in which dynamics were still unfamiliar and evolving. This type of analysis was cultivated through various approaches, including systematized context monitoring, in-depth research, or informal context updates. Many programs had already instituted context monitoring or incident tracking tools to document and analyze new developments, disputes, trends, and community perceptions that might affect program implementation.⁶¹ In many cases, these were collaborative exercises in which committee members gathered information, program teams analyzed the data, and both jointly translated it into actionable insights to shape their activities. Alternatively, the AVA program in Haiti benefitted from several former research studies, which enabled the program team to analyze how COVID-19 was contributing to intracommunal tensions.⁶² As a result, the AVA program team was able to integrate these findings into their life skills training for adolescents, adapting modules on personal leadership to sensitize participants on community conflicts resulting from COVID-19 and strategies for de-escalation.

“This research really helped us to adapt our activities in relation to COVID, because already, we had a clear idea of how the people would perceive the pandemic, how we could approach it, and make adaptations.”

—Manager, AVA, Haiti

Featured Program: Madad (Iraq)

Prior to the pandemic, the Madad program in Iraq had three objectives, related to social cohesion, livelihoods, and infrastructure, with community committees that designed and implemented initiatives related to each objective. Once COVID-19 occurred, the committees harnessed existing modalities for analysis and collective action to rapidly shift their activities to address emergent needs associated with COVID-19 and its secondary effects. The committees distributed food kits to vulnerable families, not only to fulfill their basic needs, but also to mitigate growing tensions between communities and the government, within communities, and even within households. Similarly, a sanitation campaign in government offices sought not only to reduce the spread of COVID-19, but also to ensure swift resumption of service delivery by government agencies as an investment in vertical social cohesion. The committees also adapted their livelihood programming by conducting a neighborhood cleaning campaign as a cash-for-work program in collaboration with the municipality. In line with existing infrastructure programming, the committees requested Mercy Corps to build a mobile clinic to quarantine COVID-19 patients and procure desks for local schools to avoid overcrowding and enable better social distancing by students. Rather than remaining tethered to pre-pandemic programming, these initiatives demonstrated how existing systems and processes could be leveraged for collective resilience in the face of new crises.

61 Interview, Manager, LEVER, DRC; Interview, Implementer, PEACE, Niger; Screening Interview, Manager, Better Future, Iraq; Interview, Manager, Strengthening Social Capital, Jordan.

62 Interview, Manager, AVA, Haiti.



Where programs, program teams, and community participants had relevant prior experience, existing relationships, and practical knowledge, they were often able to address needs emerging from acute crises more efficiently and effectively. In most cases, the fact that programs were well established prior to COVID-19 enabled them to acquire this experience. For example, although Mercy Corps does not typically implement public health programming, several programs had experience implementing community mobilization activities during public health emergencies, such as LEVER, which supported Ebola risk management with community

committees in DRC. Once COVID-19 arrived, the program team and community structures readily applied the knowledge, resources, and processes that they had acquired through their experience responding to Ebola to address the emergent dynamics associated with COVID-19. Not only were they motivated to avoid the level of death experienced as a result of Ebola, but they had already assimilated certain practices, such as handwashing, that had faced resistance when they were initially introduced.⁶³ Similarly, prior to COVID-19, the Strengthening Social Capital program in Jordan had engaged the Ministry of Health to construct health clinics to serve Syrian refugees and Jordanian residents. As the Ministry began to execute its COVID-19 response, the program team was able to leverage its existing relationships to identify relevant initiatives to implement that were also well integrated into broader government strategies.⁶⁴

Finally, **donor flexibility** was an essential enabler for programs seeking to adapt their programming to address needs emerging from acute crises, particularly when the proposed modifications did not clearly align with stated program objectives or would have considerable implications for the budget. In these cases, donor approval was compulsory before the program team could proceed with any new activities or approaches that had been designed in consultation with community structures. The Strengthening Social Capital program in Jordan found that the donor was not only accommodating of program modifications, but also actively encouraging adaptation to COVID-19.⁶⁵ The program had been designed to promote social cohesion between Jordanian residents and Syrian refugees. However, following a conflict analysis process at the beginning of the pandemic, the donor and program team collaborated to address emergent needs and grievances, deepening its youth civic engagement programming and adding an entirely new component on economic development.

“The [donor] team lived in Jordan, so they knew the situation and understood the challenges in the field.”

—Manager, Strengthening Social Capital, Jordan

63 Interview, Manager, LEVER, DRC.

64 Interview, Manager, Strengthening Social Capital, Jordan.

65 Interview, Manager, Strengthening Social Capital, Jordan.

BARRIERS

Given the centrality of community voices to effectively addressing emergent needs, **reduced participant motivation** was a critical factor undermining this adaptation. Especially in localities where communities have long dealt with overlapping public health emergencies and violent conflicts, **prior experience** with similar crises served not as an enabler to inform new adaptations, but as a barrier, because of the **normalization of crisis**. As a result, community participants were less willing to shift their attention to address COVID-specific challenges, or in some cases, were preoccupied with **urgent basic needs** (see the Barriers section and systems map for Adaptation #1 on Elevating Committee Representatives as Liaisons for a full explanation of this barrier). Many programs further recognized that by 2021, community participants and program teams alike were suffering from COVID-19 fatigue, and efforts to adhere to COVID-19 protocols or address COVID-19 directly began to diminish significantly.

The risks of demotivation were especially pronounced in cases where local community structures had received **financial incentives** prior to COVID-19, as in eastern DRC, where the government had mandated the creation of *Cellules d'Animation Communautaire* (CACs; Community Facilitation Cells) to coordinate with international organizations in the fight against Ebola. Many international organizations, including Mercy Corps, provided CAC members with monthly stipends. However, as Ebola funding dried up and was diverted to the COVID-19 pandemic, many INGOs were no longer able to offer allowances to CAC members. The LEVER program was able to mitigate this barrier by generating intrinsic motivation through the **CATALYSE** approach to “put the participants at the center of the project” and nurture a sense of **local ownership** that might supersede financial motivations.⁶⁶ Programs also provided non-monetary, **in-kind incentives**, such as plastic chairs, hygiene kits, or grinding mills to encourage committee members to continue voluntarily participating in the program.⁶⁷ These contributions also unintentionally created a source of revenue for the committees, improving their durability beyond the life of the program.

“This is always the tricky thing in working in contexts where crises are so recurrent...To them [local communities], COVID was just a bad bout of malaria.”

—Manager, COMITAS, Nigeria

“We struggled with this practice, because when you pay people to fight for a cause, this reduces the community engagement. The moment that you can no longer pay them, they will no longer take action, but wait until you can pay them again to resolve their own problems... Personally, I fear that if there will be another dangerous epidemic, it will be difficult to engage the community in the fight.”

—Implementer, LEVER, DRC

⁶⁶ Interview, Implementer, LEVER, DRC.

⁶⁷ Interview, Implementer, LEVER, DRC; Interview, Manager, Youth ACT (for PEACE), Niger.

“Once COVID came, they felt that this is something crazy, this is something created by the humanitarians, just to continue working in DRC, just to continue getting money.”

—Manager, LEVER, DRC

and participants were unable to generate accurate analysis to inform programming, but also because they felt demotivated by the idea of trying to address issues that felt so far out of their control. In DRC, for example, communities had already been suffering from Ebola when COVID-19 emerged, creating perceptions that the two were somehow connected and intentionally introduced with cruel intent.⁶⁸ These types of beliefs made it incredibly challenging to address public health emergencies in a direct way, although credible community leaders proved to be effective messengers to combat rumors and misinformation.⁶⁹ The effects of weak context analysis were magnified where there were **complex contexts** in pre-pandemic times, whereby COVID-19 and its secondary effects often created complicated and surprising new dynamics.⁷⁰

On the backdrop of the global shockwaves created by COVID-19, many donors maintained or even deepened their hands-on oversight of and involvement with programs. They were particularly interested in potential modifications to envisioned program objectives or major potential budget implications. In these cases, donor approval was compulsory before program teams could proceed, delaying or obstructing new activity implementation in cases when authorization was slow or not granted. Many programs experienced this as **donor inflexibility**, which further hindered this adaptation to address needs emerging from acute crises.

Just as robust and current context analysis enabled programs to understand new dynamics and develop relevant responses, programs with **weak context analysis** struggled to address needs emerging from acute crises. **Rumors and misinformation** about COVID-19 were particularly consequential in hampering the ability of program teams to produce meaningful context analyses. Poor and distorted local knowledge about COVID-19 undermined efforts to design and implement an effective and evidence-based response, not only because program teams



Uganda, Ezra Millstein/Mercy Corps

68 Interview, Manager, LEVER, DRC; Interview, Implementer, LEVER, DRC.

69 Screening Interview, Manager, AVA, Haiti; Interview, Manager, LEVER, DRC.

70 Interview, Manager, Strengthening Social Capital, Jordan.



Jordan, Mercy Corps

UNINTENDED CONSEQUENCES

Addressing emergent needs related to COVID-19 required program teams to act swiftly to respond to issues around which knowledge and understanding were limited. Particularly during the early stages of the pandemic, understanding the causes of disease spread and effective mitigation strategies were still nascent and rapidly evolving. As program teams continue to operate in this environment, they often struggled with uncertainty, heightened psychosocial health needs, and **increased pressure** about how to protect themselves. For example, in Jordan, the Strengthening Social Capital team had agreed to provide infrastructure support to a major hospital in Amman in response to heightened pandemic-era needs. However, this required the team to work close to a ward with many of the most infectious cases, causing many team members intense anxiety.⁷¹

BENEFITS

Programs found that the pandemic, a resulting sense of common purpose, and a commitment to this adaptation to address needs emerging from acute crises generated the **will to respond** to issues previously considered out of scope, taboo, or too difficult to take on. This dynamic created a positive feedback loop in which collective resolve further reinforced this adaptation to **address needs emerging from acute crises**. The LEVER program in DRC explained how their community structures had initially been focused only on responding to Ebola through the development of risk mitigation plans. However, with the onset of COVID-19, the committees were able to harness the same tools and approaches not only to formulate plans to mitigate the spread and effects of COVID, but also felt compelled to create plans to mitigate the risks associated with other illnesses and public health threats.⁷²

“We didn’t know much about COVID at that stage, so it was really scary for our team. They were asked to wear full protective suits and face shields, which really caused them a lot of stress.”

—Manager, Strengthening Social Capital, Jordan

71 Interview, Manager, Strengthening Social Capital, Jordan.

72 Interview, Manager, LEVER, DRC; Interview, Implementer, LEVER, DRC.

The pandemic also created an unexpected opportunity for program teams and participants to interrogate their assumptions about gender-based violence and harmful gender norms and their role in addressing them. As COVID-19 lockdown policies and economic hardship fueled a spike in domestic violence cases globally, Mercy Corps program teams and participants increasingly acknowledged the unique ways that women were being affected by the pandemic, even if they weren't always able to respond. For example, community leaders involved in the Better Future program in Iraq received an unprecedented number of complaints about domestic violence incidents during the lockdown period. Although such cases had previously been considered outside the scope of local justice mechanisms, their prevalence compelled male and female community leaders to begin mediating domestic disputes and intervening to prevent abuse.⁷³

When programs employed this adaptation to address needs emerging from acute crises, it often unlocked creative thinking to **holistically advance multiple objectives**. This was especially true for peacebuilding and governance programs. For example, the Better Future program in Iraq, which had initially been designed to improve dispute resolution and mitigate violence, began supported a women-led business to sew masks for the community and lab clothes for medical personnel. Although this activity did not appear to be within the program scope, the initiative engaged women with perceived affiliation to ISIS, with the aim of improving community acceptance of families affiliated with ISIS and reducing tensions that can escalate into violence.⁷⁴ In some cases, the adaptation also expanded inclusion, as addressing emergent needs pushed teams to think beyond prevailing assumptions about who should be involved in programming.⁷⁵

Addressing emergent needs related to COVID-19 **tested community resilience** for programs that were well established and had already nurtured relationships and systems for managing shocks and stresses. In these cases, as program teams became constrained in their ability to directly facilitate activities, they were able to observe the extent to which program participants, especially community structures, were able to autonomously apply processes for analysis and collective action, such as CATALYSE, to new issues or conflicts.⁷⁶ Where participants were successful, it demonstrated a vital shift in their ability to cope with immediate threats in a way that also had the potential to deepen long-term wellbeing.

“COVID created an opportunity for the local committees to prove to their own communities that they could be helpful. The area was just out from the crisis after ISIS liberation, so there was a lot of destruction. COVID was a new crisis that everyone was suffering from. Although the culture of volunteerism was new to them, if you have someone supporting you, you will feel motivated to do more.”

— Manager, Madad, Iraq

73 Interview, Manager, Better Future, Iraq.

74 Interview, Manager, Better Future, Iraq.

75 Interview, Implementer, Strengthening Social Capital, Jordan.

76 Interview, Manager, Better Future, Iraq.

LESSONS AND IMPLICATIONS

- › **Invest in Robust and Ongoing Context Analysis:** Programs were able to better address needs emerging from acute crises when they had a strong contextual understanding in which to situate new developments and generate relevant responses. Programs should invest in both in-depth research and assessments – such as conflict sensitivity analysis, gender equality and social inclusion (GESI) analysis, and political economy analysis – as well as ongoing, systematic context monitoring to support evidence-based and timely action. Whenever possible, this monitoring and analysis should be done in collaboration with community committees and participants to ensure that knowledge is grounded in community expertise and owned by community structures to make ongoing use of that knowledge.
- › **Center Community Voices:** When faced with new crises, program teams often rely on existing institutional approaches to ensure rapid deployment of assistance. However, programs found that local leadership typically enabled responses to emergent needs that were more relevant, swift, and effective. This requires teams to ensure that community participants have the knowledge, skills, and confidence to share their perspectives and generate solutions, and demands that teams safeguard space for participants to initiate action.
- › **Focus on Processes for Resilience:** This adaptation of addressing needs emerging from acute crises was most readily adopted by programs that focused on collaborative processes for problem solving and conflict management, in a way that developed skills and practices for participants to respond to any range of crises. Programs should avoid focusing on specific sectors or solutions in favor of nurturing approaches and capacities for community resilience to diverse shocks and stresses, as local priorities shift over time, even beyond the life of the program.

Cross-Cutting Institutional Enablers & Barriers to Participatory Adaptations

In addition to the specific factors associated with each of the four programmatic adaptations, programs described a range of institutional enablers and barriers that either facilitated or impeded their ability to adapt – both to COVID-19 and other contextual dynamics and barriers to implementation. Some of these factors appeared closely linked to one or more of the featured adaptations, while others were entirely cross-cutting and broadly relevant, irrespective of the selected adaptation.

ENABLERS

Technical support from regional and headquarters teams was one of the most widely referenced enablers of adaptation. Respondents described how internal briefing sessions to understand COVID-19 and basic mitigation measures, resources on how to use digital platforms such as Zoom, and guidance on remote team management during the early lockdowns made them feel supported during an otherwise scary period. The NE-CMS program team in Nigeria also spoke extensively about how digital platforms established by the program prior to COVID-19 enabled the team and local CSO partners to continuously benefit from real-time technical support on how to adapt programmatic activities to new realities, while upholding program quality. Teams repeatedly called for more of this type of technical support in the form of programmatic tools and training materials on various themes and activity modalities, as well as case studies and other types of knowledge sharing based on experiences from other country contexts.

Creative and efficient **operational support** from in-country procurement, finance, and logistics teams was essential to adaptation of programmatic activities. Respondents widely reported swift support from finance and operations colleagues to revise budgets, adopt modified procurement procedures, and identify new venue, transport, and communications alternatives in compliance with COVID-19 mitigation measures. Consistent communication between operations and program teams to jointly review needs, progress, barriers, and alternatives ensured continuous adaptation as the context continued to evolve. In a particularly strong case, the Strengthening Social Capital program in Jordan recalled how the operations team had proactively and directly coordinated and followed up with program partners to ensure delivery and functionality of facilities and supplies, which took pressure off the program team as they were struggling to find ways to implement at the outset of the pandemic.

Programs consistently found that having **diverse, healthy, and collaborative teams** was a critical success factor in their adaptation. Program teams that included members with diverse skill sets and had a spirit of collective action and mutual support were able to more readily adapt. At the height of the pandemic, donors diverted resources away from non-emergency programs and towards the

“Projects that were working on the fight against Ebola and COVID benefitted from staff that came from other projects that were being scaled down in terms of their financing at the time... These human resources reinforced teams working on the fight against Ebola and COVID.”

—Implementer, LEVER, DRC

COVID-19 response and INGOs revised their human resource policies in response to lockdowns. While these changes were often a source of staff anxiety, some teams found ways to creatively harness these shifts for effective adaptation. For example, respondents from Iraq programs described how Mercy Corps instituted a policy allowing team members to return to their home areas to be with their families during the initial lockdown. In moments when lockdowns and curfews were eased, these team members used their proximity and skills to support other Mercy Corps programs that they had not been hired to work on. Similarly, gender diversity within teams enabled programs to adapt to operational risks and barriers to access. As described by the PROPS program in Burkina Faso, rather than cancel activities in the face of violent extremist organizations espousing restrictive gender norms, the program team was able to deploy capable male and female team members to facilitate activities separately for male and female participants, respectively.

Constructive leadership also played an instrumental role in fostering a conducive environment for adaptation. Receptive managers, both at the Program Manager and Senior Management Team levels, were viewed as those who welcomed team contributions and sought to build consensus and motivation around creative adaptations. In many cases, they also actively invested in staff well-being and made deliberate efforts to bolster team morale in response to the fluid crisis context. The common experience of COVID-19 increasingly inspired managers to lead with empathy. Managers also supported staff well-being by encouraging them to utilize external resources, such as KonTerra,⁷⁷ and participate in professional development trainings during periods when implementation was otherwise slow.

“We always took time at the beginning of these [internal] meetings to check in on how the team was doing and how we were adapting to the new situation and finding good ways to manage the remote work context.”

—Manager, NE-CMS, Nigeria

Staff wellbeing was also enhanced through interpersonal relationships formed outside of a strictly professional context, which allowed colleagues to feel more comfortable raising work-related challenges and creative ideas that could support adaptation. Teams in Syria, Jordan, and Nigeria highlighted how sharing personal stories and videos of dancing, singing, or cooking from home helped to foster a joyous spirit of connection and reduce feelings of isolation during lockdown.

Contractual arrangements and donor flexibility enabled adaptation when programs had sufficient time and funds to realign programmatic activities to emergent needs and when donors were responsive and supportive of that realignment. Programs with bigger budgets and longer implementation periods, especially of two or more years, felt that they had a buffer to adapt without requiring formal contract amendments. In some cases, donors were willing to grant no-cost or cost extensions, allocating more time and money for programs to continue implementation amid delays. In Jordan, respondents from the Strengthening Social Capital program highlighted their unique experience in which the donor not only accommodated strategic shifts and budget modifications to

77 KonTerra is a professional network providing specialist counseling, training, coaching and consulting services to help those working in dangerous and demanding roles manage stress, enhance wellbeing, and improve resilience. KonTerra serves as Mercy Corps' Employee Assistance & Resilience Program global provider. See <https://www.konterragroup.net/konterra-resilience/employee-resilience-program/> for more details.

the program but also encouraged them, based on their own knowledge of the local context. Similarly, the PARTNER program in Nigeria indicated feeling that US donors were especially committed to participatory approaches and adaptation at the time due to the concurrent social upheaval associated with COVID-19 and Black Lives Matter.⁷⁸

Programs were able to better adapt when they had **effective coordination and relationships** with a broad network of international actors and local officials. When programs were embedded in established coordination forums, they found that they were able to tap into spaces for knowledge exchange on emergent dynamics and harmonize their activities and practices. These benefits were emphasized by respondents working on programs in Haiti and DRC, where coordination platforms established in response to the preexisting public health emergencies of cholera and Ebola, respectively, were repurposed to respond to COVID. Respondents also emphasized how strong relationships with government officials not only facilitated administrative approvals, but also gave them access to up-to-date security information critical to adaptation.



BARRIERS

Contractual constraints and donor inflexibility were by far the most cited barriers to adaptation. The programs that most struggled to adapt during COVID-19 were those with short implementation periods, since they had limited time to assess the changing dynamics prior to deciding on appropriate adaptations. For example, the Nakdar program in Iraq lasted only eight months. COVID-19 lockdowns struck when Nakdar had only completed its first three months of implementation, leaving them with the most substantive elements of programming to conduct under full lockdown.

⁷⁸ Black Lives Matter is a social movement originating in the United States that seeks to fight against racism and violence experienced by black people, especially in the form of police brutality. Although the movement began in 2013, it gained critical visibility and momentum in the summer of 2020 during protests triggered by the murder of George Floyd.

This barrier was compounded by donor inflexibility regarding modifications to established agreements. Programs described facing onerous requests from donors to justify their proposed modifications, which created severe delays in response or, if denied, meant that the program was unable to substantively adapt. Program revisions were especially difficult to navigate when contextual changes and urgent local needs appeared to depart from established program objectives, even when the program team and community participants clearly recognized the strategic value of adapting to new dynamics. This may have been a particular challenge for funding mechanisms designed to support development and peacebuilding interventions, rather than humanitarian programs, although this trend requires further investigation. In at least one case, Mercy Corps was able to circumvent this barrier by leveraging core funds to cover expenses associated with a critical program adaptation, which would otherwise have been disallowed by the donor.⁷⁹

Respondents recommended that new programs should include extended co-creation phases for donors, implementers, and partners to establish a common understanding of operational and strategic realities. Most notably, new programs should assume that unforeseen events will occur and that programs will need to adapt beyond the initial proposal. As such, donors and implementers should allot more generous timelines and funds to ensure that programs can readily adapt to inevitable crises. Programs can also improve efficiency by relying more on existing community assets and resources.

Numerous respondents reported **internal policies, procedures, and norms** as critical barriers to their ability to adapt. Program teams felt that while technical support from regional and headquarters teams on COVID-19 mitigation measures and use of digital tools was helpful, standard operating procedures (SOPs) largely felt top-down and inflexible, reflecting institutional realities and global norms, rather than the local context, let alone participant voices. As a result, program teams felt that SOPs created new obstacles to implementing activities when lockdowns and curfews imposed by governments were already making it difficult to conduct programming.

Although many programs had positive experiences engaging with operations teams to realize their program adaptations, others found that operations teams were unwilling to adjust their normal procedures to support program teams during an already challenging time. Operations teams often required extensive justifications for modifications to transport requests and procurement plans, often due to local norms or perceptions of organizational policies. These interactions were further complicated when operations teams were unfamiliar with ‘soft’ programming, such as peacebuilding, governance, and research activities.

“COVID policies and protocols were not developed in participatory way. They were completely top down. We never sat down with communities to develop those standards and protocols to understand what would work for them. It was just a responding to a script... We are repeating the same mistakes again. We were developing an elections contingency plan. How many people from the community did we speak to? Zero.” —Manager, COMITAS, Nigeria

79 Due to sensitivities, we are not referencing the specific program that provided this information.

Conclusion & Lessons

As the COVID-19 pandemic recedes into the distance, the PACE research project has provided a vital opportunity to examine the experiences of practitioners at the height of the crisis and reflect on their potential applications to future crises. This research has explored four common participatory adaptations undertaken by Mercy Corps programs globally during the COVID-19 era: 1) Elevating Committee Representatives as Liaisons; 2) Empowering Local Practitioners; 3) Deploying Technological Solutions; and 4) Addressing Needs Emerging from Acute Crises. By mapping their enablers, barriers, consequences, and benefits across diverse geographical contexts, the research has been able to extrapolate from the singular experience of COVID-19 the broader system in which these adaptations live, providing practitioners with critical insights on the factors necessary to consider in replicating and improving on these adaptations to navigate future shocks and stress.

ADAPTATION	SUMMARY RECOMMENDATIONS
#1 Elevating Committee Representatives as Liaisons	Foster a culture of participation
	Map and resource existing structures
	Collaborate with a diverse network of local actors
	Deliberately select committee representatives
#2 Empowering Local Practitioners	Involve local CSO partners in co-design
	Invest in sustained and tailored capacity strengthening
	Hire locally
	Map existing resources
#3 Deploying Technological Solutions	Employ low-tech and hybrid solutions
	Invest in digital literacy
	Expand internal technical resources
#4 Addressing Needs Emerging from Acute Crises	Invest in robust and ongoing context analysis
	Center community voices
	Focus on processes for resilience

TABLE 2: Summary of recommendations by adaptation

These adaptations are likely to have critical relevance to diverse crises caused by insecurity, political instability, environmental shocks, or other public health emergencies. While many humanitarian, development, and peacebuilding programs working in complex contexts are accustomed to these dynamics inhibiting their activity implementation, most programs – even post-pandemic – continue to plan for the best-case scenario, without meaningfully considering and investing in the enabling factors and adaptations that they can harness when acute crises and barriers to access inevitably arise. Similarly, despite the heavy reliance of programs on community participants, CSOs, mobilizers, and other local stakeholders to conduct programming throughout the COVID-19 era, narratives around adaptive management and participation remain disparate, and efforts to transform global systems that undermine localization remain largely inert.

The PACE research has demonstrated the following key lessons:

› **Adaptation is possible – and enabling it does not have to wait until the next crisis.**

The PACE research demonstrates that practitioners are capable of changing their programmatic approaches and internal ways of working when the situation calls for it. However, some programs were better equipped to adapt than others. Prior to COVID-19, many programs were already investing in centering community voices, context monitoring, regular capacity strengthening activities for CSO partners and local committee structures, coordination with external actors, and participatory processes, such as CATALYSE. These enabling factors meant that teams already had the building blocks to employ their programmatic adaptations in ways that not only upheld quality standards, but also generated unexpected new benefits. Practitioners should prepare for the next crisis by continuously investing in the adaptive capacity of their teams and the resilience of local communities.

› **Participation was successful not in spite of adaptation, but because of adaptation.**

At a time when normal social interactions largely ceased, localization and community participation paradoxically increased. This was especially visible in programs that adapted. Most of the common adaptations employed by teams were those that embedded participatory approaches at their core, which served both to center community voices as a benefit on its own merit and to advance broader desired social changes. Moreover, the participatory nature of these adaptations only further enhanced the adaptive capacity of programs, enabling them to continue refining their approaches and adjusting in the face of new developments. Despite persistent structural barriers that prevent the global aid infrastructure from creating genuine space for locally led action, the PACE research demonstrates that programs were still able to make changes to deepen participation and localization and offers evidence to suggest that these approaches can and should be sustained beyond the COVID-19 era.

› **Institutional factors are more influential in shaping adaptive capacity than typically acknowledged.** Despite a penchant for focusing on the technical elements of program implementation, it is equally essential to recognize organizational culture, internal policies, contractual arrangements, and learning capacity and practices as factors enabling effective adaptation. In some cases, these factors – especially donor policies and expectations – were so critical that they not only improved or undermined adaptation but were preconditions to adaptation occurring at all. The PACE research demonstrates that just as program teams must do more to integrate adaptive and participatory approaches into their program design and implementation, donors and implementing organizations should ensure their systems and norms create a conducive environment for participatory program adaptation.

Given the scale and the cost of the COVID-19 pandemic, practitioners and policymakers have a responsibility to incorporate these lessons in order to mitigate harm and maximize benefits for local communities amid future crises. Moving forward, more real-time action research should be done to understand how diverse participants experience various participatory adaptations and to critically test the causal relationships between different participatory approaches and desired social change outcomes across a wide range of crisis contexts – especially climate crises – in a post-pandemic world.

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About Mercy Corps

Mercy Corps is a leading global organization powered by the belief that a better world is possible. In disaster, in hardship, in more than 40 countries around the world, we partner to put bold solutions into action—helping people triumph over adversity and build stronger communities from within. Now, and for the future.



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