

CRS Recommendations

GUIDANCE ON AND CONSIDERATIONS FOR SOCIAL COHESION AND PEACEBUILDING, PROTECTION AND SOCIAL JUSTICE, GOVERNANCE AND EQUITABLE INCLUSIVE PARTICIPATION OF WOMEN, YOUTH AND VULNERABLE AND MARGINALIZED POPULATIONS DURING THE COVID-19 CRISIS

This document is intended to provide guidance to CRS country programs and partners on the impacts of COVID-19 on social cohesion, protection and social justice, governance, the inclusion of vulnerable people, especially women and youth and recommendations for how they may be addressed in programs and operations.

PRINCIPLES FOR COVID-19 RELATED GUIDANCE

In undertaking programming activities, CRS project staff and partners should:

- Ask ourselves how critical it is to carry out the activity against risk to staff, partners and participants.
- Adopt a "Do No Harm" approach: CRS and partners need to understand how COVID-19 is transmitted and implement general basic preventative measure to both protect themselves and reduce the risk of spreading the virus during program implementation (See guidance at WHO - COVID 19 - General Information and WHO - COVID 19 -Prevention measures). These measures include the following for all people with whom we work, including CRS staff, partners, volunteers, program participants and community members, service providers, vendors, etc.
 - Maintain Physical Distancing
 - Follow Recommended Hygiene Practices, especially proper hand washing, respiratory (cough) etiquette and not touching your eyes, mouth and nose
 - Do Not Participate in Program Activities when Feeling Unwell; anyone who is feeling unwell should stay home; if exhibiting signs/symptoms of COVID-19, they should follow Ministry of Health (MOH) protocols for seeking medical support/advice (e.g., calling before seeking medical care)

People should operate under the assumption that anyone they encounter is a suspected COVID-19 case. Maintain transparent communication with communities about activities, changes, and the community's comfort level and needs related to the health implications of continued programming.

- Keep up to date on and follow WHO and Government/Ministry of Health (MOH) protocols and messaging around COVID-19:
 - Follow government restrictions and request authorization for carrying out essential services/activities, as needed
 - Work with local health actors/cluster to ensure health messaging related to COVID-19 is consistent and contextualized

• Adapt programming guidance to your context and be ready to further adjust as the situation evolves: Elements of the guidance may need to be modified based upon community risk levels, types of programming activities undertaken, social norms and perceptions, local capacities, operating environment and feedback from donors in each country we work in. For assistance, please contact the COVID-19 focal points in your Region and/or on HRD or the relevant programming technical advisor.

This document provides additional recommendations from CRS, to be used in conjunction with and to supplement guidance provided by Inter-Agency Standing Committee (IASC), WHO and the local MOH as relevant. Please note that this guidance may be updated periodically.

Disclaimer: CRS COVID-19 program resources and guidance are developed after consideration of international guidance from relevant international organizations such as the World Health Organization (WHO), Inter-Agency Standing Committee (IASC), and other humanitarian bodies. CRS COVID-19 program resources and guidelines are updated regularly as new information becomes available. Partner and peer organizations wishing to refer to and use CRS resources and guidance should ensure that they are also referring to the latest information available from WHO and IASC.

As COVID-19 spreads globally, vulnerable adults and children—including but not limited to people living in conflict areas and fragile contexts, women and girls, children, people with disabilities, minority groups, people living in institutions, including children, refugees, internally displaced persons, migrants and the extreme poor—may be disproportionately affected by the disease and its after-effects. Prior experience with disease outbreaks has taught us that social networks can erode quickly and that some of the measures put in place by governments in response to the pandemic may exacerbate existing tensions and inequities in households and societies such as youth marginalization and urban-rural divides as well as contribute to increased risks of violence particularly for women and children. Coping mechanisms, resiliency and capacity to prevent and to respond to COVID-19 will differ from person to person, institution to institution. Adaptation, recognition and flexibility are key.

SOCIAL COHESION AND PEACEBUILDING

The extent to which healthy social ties can be maintained and adapted during this crisis period can determine the ability of fragile and conflict affected states and communities to shift into the recovery phase without increased conflict, violence and inequity. Social trust is an important ingredient in mitigating impacts and moving toward an inclusive and sustainable recovery. In their COVID-19 response, programs and partners can safeguard social cohesion by:

- Building on and updating existing conflict analyses to remotely monitor changing conflict dynamics to know how COVID-19 responses are affecting root causes and drivers of conflict and local social cohesion and peacebuilding efforts and to gather relevant information for conflict sensitive decision making so responses do not negatively affect conflict dynamics and exacerbate tensions, conflict and violence.
- Supporting faith and community leaders to speak with a common voice in favor of inclusion, solidarity, and fair and transparent distribution of resources and access to services. Providing services and information in collaborative, coordinated ways can also reinforce trust.
- Including messaging that promotes solidarity and reduces discrimination and scapegoating. Communities around the globe are finding creative means to reinforce connectedness even at a distance (common prayer hours, synchronized singing or pot-banging, banners and symbols in windows, pooling local resources in support of frontline workers across identity lines). Programs, partners and community leaders can invite their constituents to undertake in such common actions.

- Encouraging existing groups to undertake mutual aid efforts where possible, following WHO and local Ministry of Health physical distancing and group size guidelines. Maximizing inclusion by ensuring that all marginalized groups (people with disabilities, religious, ethnic, racial minorities, women, youth, migrants) and individuals have equal access to services and opportunities.
- **Countering stigma while supporting reintegration** of those who were ill or infected by COVID-19.
- Mobilizing and preparing existing community groups, civic networks, Peace Committees and youth trained as peace ambassadors to carry out aid initiatives or disseminate accurate information to hard-to-reach groups. Ensuring that the information shared comes from official government or WHO sources and follows <u>risk</u> <u>communication strategies</u>.
- Using technology to promote continued engagement across conflicting communities so that physical distancing does not exacerbate psychological divides. Using SMS messages and WhatsApp groups helps people keep in contact maintaining lines of communication and continuing to work together building trust, positive relationships and collaborating to identify shared solutions.
- Assessing and adapting current <u>social cohesion and peacebuilding activities</u> to the COVID-19 context including simplifying technical content and scope for virtual training sessions and peer-to peer learning and discussions using available technology.

PROTECTION AND SOCIAL JUSTICE

Physical distancing mitigates the spread of the coronavirus and is a form of solidarity, a reminder that everyone is in this together. Consider this crisis as an opportunity to incorporate core protection safeguards and to promote inclusion, reduce stigmatization and discrimination as well as to promote self-care and wellbeing. In their COVID-19 response, programs and partners can foster protection and do no harm principles by:

- Consulting <u>CRS' Guidance for Safe and Dignified Programming Under COVID-19</u>, with particular attention to the way that communication and programming is targeted so that the most vulnerable populations (for example, people with disabilities, the elderly, children outside of family care, minority groups, refugees, IDPs and migrants, women and children, etc.) are given equal access.
- Integrating tips for good mental health, the care by parents of children, self-care and the prevention of gender-based violence into programming to address the prolonged nature of this emergency and the fact that both staff and participants are likely to experience increased stress and/or the illness or death of family members.
- Strengthening families, preventing separation and pursuing family-based care options—not residential care—for children in need of care and supporting caregivers of those children who are separated from their families and being cared for in <u>alternative care settings.</u>
- **Providing staff working in the field with orientation and training** in identifying violence against children, gender-based violence and intimate partner violence risks and cases including referral options.
- Ensuring staff are trained on CRS Safeguarding Policy and Code of Conduct and Ethics and that staff and partners are aware of their responsibility to report any concerns of harassment, abuse and exploitation regarding CRS and affiliates.
- Advocating with current and future donors to maintain standards for gender integration into proposals and projects and increase funding for protection mainstreaming and gender-based violence prevention and response.

GOVERNANCE

By declaring states of emergency, issuing stay at home orders and limits to crowd size to combat the spread of the virus, some governments may also be surreptitiously restricting freedom of movement, association and assembly—measures that once in place can be hard to remove. It is important to ensure that community members continue to hold governments accountable for fair application of human and civil rights laws. In their COVID-19 response, programs and partners can promote more effective and responsive governance by:

- Assessing and understanding the socio-political context to ensure program activities are conflict sensitive and program teams regularly identify shifting power dynamics, new or changing opportunities, risks or threats. The <u>CRS Basic Guide for Busy Practitioners</u> offers a tool for this purpose.
 - Identifying who and what are the actors and factors and what are their respective roles, power, resources, alliances and agendas to inform responses that are appropriately adapted to the fluid situation and following Do No Harm principles.
 - Identifying which groups are at risk of exclusion, discrimination or scapegoating, as well as which conflict fault lines may be triggered or exacerbated by the pandemic. Leverage existing community assets and networks to support responses.
- Noting and monitoring both systemic weaknesses and failings (health, water, sanitation etc.) and the application of restrictive measures (movement, media, elections etc.) to inform medium and longer-term advocacy for systemic improvements and reforms. Measures to restrict freedoms should be <u>transparent</u>, proportional, time bound, subject to public scrutiny and reviewed periodically.
- Collaborating, cooperating and coordinating with governments to align program activities, interventions and contributions with government systems and strategies from the ministerial level to the local level, continuing to foster local ownership.
- Encouraging and supporting inclusive community participation to advocate and monitor for equitable and transparent access to and distribution of resources and goods and services and the fair application of government measures particularly for testing, treatment, good hygiene support and food distribution.
- Encouraging good leadership among government and civic leaders and strengthening the capacity of local government and civil society to foster the rebuilding of social networks damaged during COVID-19.
- Encouraging government partners to involve female health care workers and local women leaders in decision making, particularly at senior levels, to ensure that responses to COVID-19 outbreaks adequately address the needs of women and girls in each community.

COMMUNICATIONS FOR SOCIAL INCLUSION

As the United Nations Major Group for Children and Youth stated, "<u>COVID-19 attacks the</u> <u>respiratory system but it must not take our voice away</u>." Poor communication causes confusion undermines trust and can sow the seeds of conflict both in communities and between communities and government. Good communication that is science-based, accurate, measured, sensitive and timely builds trust, helps manage peoples' fears and expectations and increases the likelihood of following instructions. In their COVID-19 response, programs and partners can buttress good communication by:

• Encouraging and supporting governments' efforts to communicate accurate and timely information in a transparent manner with the public. A government's reputation for transparency engenders trust and a sentiment of solidarity and reinforces a belief among the public that actions are being applied fairly.

- Using a variety of communication channels—not only the internet and social media, but also community radio, SMS, WhatsApp and other safe, no-contact methods based on community preferences—to bridge the digital divide, to reduce barriers based on sex, age or other diversity factors and to reach the most vulnerable and marginalized populations.
- Building and capitalizing on young peoples' knowledge and skills in social media to expand accurate messaging in their communities about positive practices people can undertake to stay safe and support each other.
- Developing and disseminating messages with <u>accurate and easily understood</u> <u>information</u> to raise awareness of the risk of increased child protection risks, <u>gender-based violence</u>, how to manage physical distancing, good hygiene and other prevention measures. via community radio, SMS messages, and flyers that can be distributed along with food and non-food items (e.g. in hygiene and dignity kits). Lowliterate, linguistically diverse and child-friendly <u>communication</u> is essential.

