SUMMARY NOTE

SPECIAL EVENT AT THE ASIA PACIFIC REGIONAL CONFERENCE ON LOCALISATION OF HUMANITARIAN AID

INDONESIA: LOCALISATION IN CENTRAL SULAWESI HUMANITARIAN RESPONSE JAKARTA, 27 AUGUST 2019

Speakers:

- Nur Safitri, Sikola Mombine (local CSO)
- Rachmawati Husein, Muhammadiyah Disaster Management Centre/MDMC
- Tomy Hendrajati, Humanitarian Forum Indonesia (HFI)
- Dino Argianto, OXFAM
- Indira Hapsari, YAPPIKA ActionAid
- Yenni Suryani, CRS
- Cristy McLennan, CARE
- Jess Lees, Humanitarian Advisory Group

Moderator: Dr. Pujiono, Pujiono Centre

Background:

In September 2018, earthquake, tsunami and liquefaction hit Central Sulawesi Province. The Government of Indonesia decided to limit the presence of International responders to those already have local or national partners. Thus, local and national government and organizations became first responders while international actors stepped to the side and re-think of their traditional roles. Furthermore, Central Sulawesi response becomes an interesting specimen of localisation that attracted multiple studies, including:

- 1. Local leadership in the first 100 days of the Sulawesi earthquake response (Pujiono Centre/Humanitarian Advisory Group:)
- 2. Localisation in action: Operationalising support to local leadership in Sulawesi (Pujiono Centre/DRA-SHO)
- 3. A Feminist Exploration of Women-Led Localisation in the Central Sulawesi Response (YAPPIKA/ ActionAid)
- 4. Review of models for localization (OXFAM)
- 5. Review of localization in national NGOs capacity and programs (CRS)
- 6. CARE Localisation in Indonesia (Pujiono Centre/Care International)
- 7. Save the Children: Localization from multilevel perspectives (forthcoming)

Inclusive consultative meetings were also conducted:

- Meeting among agencies conducted Localisation studies 5 August 2019
- Central Sulawesi local CSOs Localisation workshop among 10 August 2019
- Interagency localisation roundtable, 15 August 2019
- National NGO Localisation Workshop, 26 August 2019

This special event aimed to provide key findings/highlights of the studies:

- Humanitarian Advisory Group / Pujiono Centre: Local leadership in the first 100 days of the Sulawesi earthquake response
 - Leadership:
 - The government took strong and visible leadership.
 - o National and local NGOs mobilised and formed their own networks.
 - National NGOs acted as intermediaries to underwrite the requirements of international donors.
 - o International actors underwent a shift in leadership from visible positional roles to less visible support roles.

- Partnership:

- The response was delivered primarily through national and local partnerships. International organisations were not allowed to operate without a local partner.
- o Many national and local NGOs were not traditional "humanitarian" actors. Many found it difficult to rapidly transition to humanitarian programming.
- o Radical shifts were reported by some INGOs in partnership arrangements, moving more towards an approach of working with partners, to working through partners.
- Consortia models were found to be good practice.

Coordination

- Humanitarian coordination was more locally led in Sulawesi than other responses in the region.
- All clusters were led by national or local government representatives. Cluster meets were by in large conducted in Bahasa.
- o International organisations largely supported this shift to national leadership of coordination mechanisms and to work with local counterparts.
- The roles of AHA Centre.

Sikola Mombine (Central Sulawesi ocal CSO)

- Capacity strengthening:
 - Almost all NGOs in Central Sulawesi work on development and advocacy and not on humanitarian. Thus when disaster occurred, they have to work on humanitarian while they do not have the capacity. No international support for them to fill the gap. Even if there is, it is only modest, narrow project.

- Partnership:

- International partners only provided short term project and the relationship is just like between employers and the workers.
- It is expected that there will be support for capacity building in future.

- Funding

- The funding provided is only for operational cost for distribution, and almost ignored the institutional and emergency needs of local CSO.
- Even if there was a large amount of funding provided, it will have complicated requirement.

- CSO themselves are affected by disasters. There was no support for staff and personnel who
 actually disaster-affected people. Humanitarian coordination was more locally led in Sulawesi
 than other responses in the region.
- All clusters were led by national or local government representatives. Cluster meets were by in large conducted in Bahasa
- International organisations largely supported this shift to national leadership of coordination mechanisms and to work with local counterparts.
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• Muhammadiyah Disaster Management Centre/MDMC

- Central Sulawesi has its complexity on its emergency response. As the Government of Indonesia decided that the international community has to channel their support through local NGOs, MDMC was approached by 15 international organizations, while they re also managing their endowment fund for initial responses (within 6 hours and 12 hours).
- o MDMC mobilized their people from North Sulawesi and South Sulawesi. They opened their Emergency Operations Centre (EOC) in Central Java and East Java.
- Operational cost became an issue. It was not easy to send volunteers for more than two weeks and it was very costly to send people to Central Sulawesi.
- MDMC deployed their medical team for 2 (two) weeks; and volunteers for 1(one) week.
- Traditional long term donors (such as DFAT and USAID) provided support easily).
- o MDMC worked with CRS to channeling the logistics.
- Money from the international partners is adding additional jobs as they have also managing their own money. International partners have different reporting formats, due diligence, etc.
- o MDMC is not an NGO and donor does not understand.
- Coordination mechanism conducted in Yogyakarta, Jakarta, and Palu. They have to report to the Government, report to AHA Centre, and request permit to go to local areas.

• Humanitarian Forum Indonesia (HFI)

- HFI has 14 members of faith-based organizations. Most of them are the main players on humanitarian response.
- HFI managed to have:
 - Joint assessment
 - Joint funding and programming
 - Joint situation report
 - Facilitated the donors to connect with members
 - Share the works and funding among the members.
- The main challenge is that there was no agency/organization support coordination for HFI Secretariat. HFI Secretariat received membership fee from the members but it was not enough for mobilization of Secretariat personnel to deal with coordination.

OXFAM

- As the international organizations have to work with local NGOs the barrier/challenges for international organizations are:
 - Limited capacity of local NGOs VS scale of work. Many times the international NGOs underestimate the capacity of local NGOs.
 - Speed and quality of delivery as the priority which are requested by the INGO from local NGOs.

- Accountability: only a few CSO has the experience dealing with big amount of money.
 With Central Sulawesi, within 6 months they have to work with huge amount of money.
 They need INGOs as the intermediary.
- INGOs should shift their role by empowering and building capacity of local NGOs.
- OXFAM works with JMK which consists of 24 local NGOs. At the beginning of partnership they
 do not have/exposed to humanitarian works, but through OXFAM-JMK partnership model
 which was being done before disaster, they are able to have the capacity.

CRS

- CRS does have pre-existing partnership with NGOs since 2010 to mentor, train and do other capacity building activities. CRS has not been providing emergency response since 2017 but channeling it through partners. They are exposed to standards and accompaniment through partnership with CRS.
- o For Palu, CRS has several organizations that they are working with such as MDMC and PKPU.
- Long term relationship provided opportunity to respond humanitarian needs.

CARE

- o CARE did not have pre-identified partners and rely much on international resources.
- Key findings of the study:
 - CARE established partnership early in the response and the process was simple and straightforward. Partners appreciated the support from CARE.
 - CARE staff and partners had a true intention to engage in fully equal partnership approach; though the funding timelines, heavy reporting and financial process were challenging.
- o For future:
 - Increase the actual capacity of non-traditional partners and empower them with resources. This will need funding from donors.
 - CARE structure will change from being a direct implementor into convener, mentor facilitator.
 - Channeling humanitarian supports through local actors.
 - Build partnership with networks (such as from Philippines), depend less on CARE own personnel, peer to peer networks.

YAPPIKA - ActionAid

- Existing gender inequalities that have been exacerbated and disrupted following the disaster created new risks, but also opportunities for change. Humanitarian agencies and donors should:
 - recognise the effect of unpaid and paid work on women's participation and leadership in
 the response and recovery processes; work in partnership with women to develop and
 resource practical mechanisms that support a reduction in women's increased unpaid
 care burden and ways of addressing this barrier; and invest in sustainable livelihoodgenerating opportunities for women.
 - ensure that the protection of women and girls is prioritized, and work with women's organisations to respond to GBV and other protection threats; and support the establishment of community based mechanisms for women to drive their own protection needs.

- resource local actors, including women's organisations to engage in longer-term social norm change programing focused on shifting power relations between men and women, boys and girls as a core part of recovery work and included in future humanitarian programming.
- Formal decision-making structures and coordination mechanisms for response continue to be dominated by men. However, local women and women-led organisations have been able to assert influence in local decision-making spaces.
- Local women and women-led organisations have diverse skills, knowledge and networks that
 are an enormous asset in humanitarian response (and preparedness). Yet, a lack of
 'humanitarian expertise' and operational capacity challenges limit their full engagement.
- The central government has championed localisation in the Central Sulawesi response. There
 is also a 'supportive policy environment' for the advancement of women's rights and
 protection. However, there is a lack of coherence and connection between the two, as well
 as limited operationalisation at a local level.