

CAN DO Annual Report 2019-2020

1. Timeline

July - Fiji and Vanuatu CAN DO partners started collaboration with Field Ready on Safe n Redi. Safe n Redi is a program which uses Geographic Information System (GIS) to map church facilities as evacuation centres. The partnership with Field Ready will support partner churches to ensure that the evacuation centres are up to standard for host communities.

August –ADRA received funding for the El Nino response in Papua New Guinea. This project promoted food security by strengthening the capacity of Farmer Resource Centres, promoting community awareness of food security and resilience measures and improving food security through the introduction of draught resistant crops and climate-smart agriculture. It also contributed to the government, NGO and private sector coordination by training officers on how to do vulnerability analysis and damage loss assessments.

September –ADRA and Caritas secured funding to support the Ebola response in DRC. This project focused on: strengthening community engagement in 7 health zones, through training, awareness raising through mass communication and Ebola prevention through WASH reaching nearly 1.8M people in the target areas. The project will continue to build on a mass communication and WASH programming based on careful assessment of communities’ knowledge, practices and behaviours, that is tested and developed in cooperation with the communities.

October – CAN DO partners began enumerator training in Solomon Islands, mapping church facilities around Honiara and mapping Guadalcanal province from September until November.

November – Theology of Disaster Resilience in a Changing Climate (TDRCC) training event took place in Solomon Islands, including participation from People with Disabilities during the workshop.

December – CAN DO members and partners prepared for cyclone season across the holiday period.

January – Through CAN DO, ALWS’ partner Lutheran World Federation (LWF), received funding for Myanmar – consortium with Save the Children to deliver a holistic Education in Emergencies programme for children who have been displaced by conflict.

February – CAN DO Coordination Unit worked with CAN DO Bangladesh team (Caritas Bangladesh, RDRS and Christian Aid) on the AHP design in Bangladesh.

March – COVID-19 worldwide pandemic

April –

- High level review of CAN DO
- Bangladesh design discussions continue
- Significant increase of activations – TC Harold in Vanuatu and Fiji and also Covid-19 response in Pacific and Timor Leste
- CAN DO received funding on all activations conducted by DFAT for TC Harold and COVID-19 response including: Vanuatu, Solomon Islands, PNG, Fiji, Tonga, Timor Leste

May: Further funding was received for Samoa, Kiribati and Tuvalu C19 response, additional funding for ongoing responses (Fiji)

June: Bangladesh design discussions continues

2. COVID and TC Harold Response – map

Kiribati - CAN DO consortium member: UnitingWorld with implementing partner: Kiribati Uniting Church (KUC) and Reitan Aine ki Kamatu (RAK) the women's fellowship of the KUC. Working together with Te Itoi Ni Ngaina - the Catholic Women's League and SDA Dorcus society

The DFAT funded project supported the psychosocial support, risk communication and community engagement (RCCE) of up to 16,619 people (50% women) within 154 communities across 19 Islands of Kiribati to navigate the stresses of the impacts of COVID-19, through community engagement by Disaster Chaplaincy Network and multi-media dissemination of positive theologies that promote Government-led COVID response and protection of women and children.

Tuvalu - CAN DO consortium member: UnitingWorld with in-country implementing partner: Ekalesia Kelisiano Tuvalu (EKT) and the Fakapotopotoga Fafine Ekalesia Kelisiano Tuvalu (FFEKT) the women's fellowship.

This DFAT funded project works with the Ekalesia Kelisiano Tuvalu (EKT), through the Women's Fellowship (FFEKT), to establish a network of Chaplains across the Islands trained to provide psychosocial support (PSS) to address fear and stress associated with COVID-19, promote Government-led health response, and address the risk of increased gender and family violence during COVID-19 crisis.

Samoa – CAN DO member ADRA Australia with implementing partners ADRA Samoa and Caritas Samoa

This DFAT funded project will strengthen the resilience of 967¹ families (7740 individuals) in Samoa (at least 50% women) whose livelihoods, physical and mental health are being impacted by the lock down measures associated with COVID-19. This will be achieved through training and provision of agricultural kits and access to water as well as psychosocial support and counselling. This program will also provide culturally relevant information on risk mitigation and health practices through comprehensive media campaigns and hygiene promotion activities.

Tonga - CAN DO members (Act for Peace, Caritas Australia, Uniting World) with implementing partners: Tonga National Council of Churches (TNCC) & Seventh Day Adventist Church (SDA), Caritas Tonga, Free Wesleyan Church of Tonga (FWC)

The immediate needs of 19,465 people (minimum 50% women) impacted by TC Harold and to strengthen COVID-19 prevention capacities in affected areas. This will draw on the grassroots presence and technical strength of CAN DO partners in health promotion and psychosocial support, WASH and food security, targeting those most in need.

Vanuatu

CAN DO member Anglican Board of Mission with implementing partner Anglican Church of Melanesia (Vanuatu)

Regional and Parish Youth leaders will be the focal people at the regional and parish levels and will be trained to take lead and manage community project implementation where they will organise and mobilize youths to ensure implementation and replications in communities. Address health and

¹ Based on 8 people per household in rural areas

hygiene with hand washing demonstrations and use government-approved messaging on COVID-19. Government health officials will be invited to support awareness-raising activities in communities.

Vanuatu

CAN DO member Act for Peace, ADRA and AOA with implementing partners Vanuatu Christian Council (VCC), ADRA Vanuatu and ACOMV.

DFAT funding will support the immediate needs of 950 households (4750 people and 60% women) affected by TC Harold through provision of non-food relief supplies in conjunction with hygiene and sanitation awareness raising activities. PFA support and gender-based violence (GBV) referrals will also be provided to support affected communities.

Vanuatu

COVID-19 33k (VCC)

Starter funding from DFAT to bring churches together in Vanuatu to coordinate better, develop Information Education and communication material and distribution hygiene awareness about COVID-19.

Vanuatu

COVID-19 bigger package CAN DO members Act for Peace, ADRA, AOA and (The Vanuatu Christian Council (VCC), ADRA Vanuatu (ADRA), Anglican Church of Melanesia Vanuatu (ACOM), Presbyterian Church of Vanuatu (PCV))

This DFAT funded project will support households to establish climate-resilient kitchen gardens, churches develop and implementing values based Safeguarding policies, dissemination of IEC material and awareness raising of referral pathways, Rehabilitation of water sources in communities, construction of gender and disability sensitive latrines, Construction/repair of handwashing facilities, Dissemination of COVID19 risk and WASH IEC materials.

Solomon Islands

CAN DO will implement through local church partners (South Seas Evangelical Church (SSEC), United Church Solomon Islands (UCSI), ADRA Solomon Islands, Anglican Church of Melanesia (ACOM), Caritas Australia in the Solomon Islands. ACOM will lead the coordination of CAN DO's local partners in this response.

Funded by the Office of the Pacific, this project will support the immediate needs of people impacted by Tropical Cyclone Harold in the worst affected areas of Guadalcanal, by providing timely and relevant shelter, WASH, food security and livelihoods to those in need, with a focus on the most vulnerable.

Solomon Islands

DFAT first round of funding 33k CANDO, Church Organisation; ADRA, ACOM and Caritas,

Information Educations and Communication materials created and disseminated to share messages about COVID-19 and prevention strategies.

COVID-19 major round

CAN DO Australia members: Anglican Overseas Aid (AOA) and UnitingWorld (UW)

CAN DO partners in Solomon Islands: Adventist Development & Relief Agency SI (ADRA), Anglican Church of Melanesia (ACOM), Caritas SI (CA), Solomon Islands Christian Association (SICA), South Seas Evangelical Church (SSEC), United Church in Solomon Islands (UCSI).

CAN DO partners represent the largest church denominations in Solomon Islands², and our program is targeting activities across locations where our operational presence has positioned us to lead interventions Western, Malaita and Guadalcanal Provinces:

- COVID-19 WASH and awareness promotion to schools and vulnerable communities
- Improved food security and livelihood outcomes for remote and rural communities through CVA, resourcing and training.

Address the issues of violence to women, girls, children and vulnerable people through theological based Gender Equality Safeguarding socialisation in schools and communities and targeted FSL & WASH activities

PNG – 333k

CANDO/PPP(Caritas, ADRA PNG, United Church PNG, Evangelical Lutheran Church PNG, Anglicare, Baptist Union PNG) World Vision, Child Fund, PLAN International and CARE International in PNG

Induction Training
Community outreach
Development of IEC materials
Sanitation & Safe Water facilities

Bigger C19 – 887k

CAN DO PNG/Caritas Australia in PNG, ADRA PNG, United Church PNG, Anglicare PNG

CAN DO, led by Caritas, will focus on Risk Communication and Community Engagement (RCCE), WASH and Food Security– reaching almost 96% of the population, and are trusted and deeply embedded in community life. CAN DO partners bring a diversity of technical expertise across humanitarian and development programming and work closely with communities to ensure cultural relevance of resources and response.

Fiji

TC Harold - ADRA Fiji through partnerships with Fiji Council of Churches, Methodist Church, Catholic Church, Anglican Church, Olafu, Salvation Army

Funding will support the immediate needs of 400 households (2050 individuals and 50% women) affected by TC Harold through the provision of agricultural kits and support of land preparation (CVA). It will also support 600 individuals (60% women) with psychological first aid to reduce the damaging psychological impact of TC Harold and the threat of COVID -19.

Small COVID-

IEC and handwashing, safety and protection gear

Fiji COVID major package – ADRA Fiji through partnerships with Fiji Council of Churches, Methodist Church, Catholic Church, Anglican Church, Olafu, Salvation Army

In this project, CAN DO will work with communities to identify available land for developing into community demo gardens, as well as provide 500 households with ‘SMART agriculture, crop diversification and management kits’ that will enable households to grow diversified crops. Trainings

² “2009 Population and Housing Census: National Report Vol 2”, Solomon Islands National Statistics Office, Solomon Islands

will be given to community and household members, with a focus on women and youth, enabling them to manage and value add to their crops (e.g. through food production such as baking or drying), and provide them with the knowledge and skills to sell products through a circular economy.

ADRA will use its previous experience building the capacity on financial literacy of 30 local CSOS and in partnership with Ministry of I Taukei will scaling up the Financial literacy training to women and youth group. Also women/youth group will receive a post-harvest/add value kit.

Timor Leste

Timor leste flooding – Caritas

Caritas Australia in partnership with its local church partner Caritas Diocesana de Dili (CDD), engaged I in implementing the emergency response by distributing hygiene kits to households affected by the flooding.

Timor Leste COVID

Targeted communities, market places, schools and health posts are supported to repair existing water supply systems and/or install water tanks.

Targeted, households, market places, schools and health posts have functioning handwashing facilities

Hygiene and handwashing awareness raising conducted in communities, market places, schools and health posts

Awareness raising of gender-based violence services and promotion and support to referral services.

3. Faith based Response

CAN DO

CHURCH AGENCIES AND FAITH BASED ORGANISATIONS IN COVID-19 HUMANITARIAN RESPONSE

It is important to consider the role of church agencies and Faith Based Organisations as significant local actors within the broader international and humanitarian response to COVID-19.

Churches and Faith Based Organisations (FBOs) are engaged in and continue to support national and local government led response to COVID-19.

Together, governments, church agencies and FBOs, and humanitarian actors should consider the role of FBOs and churches in this crisis. Particularly their:

- Ability to mobilise and share information (including utilisation of TV and radio)
- Influence as a trusted intermediary between government and local communities
- Voice of hope for all and compassion for vulnerable groups
- Vast networks of health and education services including in very remote locations
- Pastoral role which can provide psychosocial support and compassionate palliative care.

Effective humanitarian response requires holistic and coordinated engagement across key actors. CAN DO recognises that humanitarian response needs to be led by all levels of national governments, supported by effective coordination among the humanitarian system and effective engagement with trusted local actors – including traditional leaders and faith communities.

The COVID-19 pandemic is an unprecedented crisis presenting a significant global and humanitarian challenge. The rapid spread of the disease, its implications on health systems, disruption to social life and economic impacts, and likely flow on effects are complex and unparalleled.

The UN's Global Humanitarian Response Plan¹ (HRP), articulates three strategic priorities:



COVID-19 Global Humanitarian Response Plan

Putting national and local NGOs at the centre of humanitarian operations has been on the agenda for a number of years. This is becoming the reality in operations for next few months, out of necessity. It can also provide the blueprint for humanitarian operations in the longer-term future also.

1 <https://www.unocha.org/sites/unocha/files/Global-Humanitarian-Response-Plan-COVID-19.pdf>

1. **Contain the spread of COVID-19 pandemic** and decrease morbidity and mortality
2. **Decrease the deterioration** of human assets and rights, social cohesion and livelihoods
3. **Protect, assist and advocate** for refugees, IDPs, migrants and host communities particularly vulnerable to the pandemic.

There are significant practical challenges to the delivery of humanitarian assistance given the social distancing and lockdown measures across the globe. As such, **the Global HRP recognises the importance of involving and supporting local actors** in the COVID-19 response.



Localising Humanitarian Action through Local Faith Actors and FBOs¹

There is growing recognition of the role of local faith actors in humanitarian response. At the 2016 World Humanitarian Summit FBOs were **recognised for their unique and comparative advantage in humanitarian contexts**.³ It recognised that FBOs:

- Have both close proximity to and are part of populations affected by crises
- Are embedded in local communities and maintain relationships of trust and familiarity

- Are first responders who continue to provide assistance and protection during and after crisis
- Hold influence with national, provincial and local actors including governments and traditional leaders
- Share a critical responsibility and role in working for peace with the ability to facilitate sustainable behaviour changes based on faith motivations and worldview
- Provide ongoing pastoral support to communities including providing a sense of hope during and after disaster. In some crises this has been combined with training in psychosocial support, psychosocial first aid and palliative care.

At the Summit over 160+ faith-based humanitarian actors signed the **Charter for Faith Based Humanitarian Action**.⁴



Learning from Experience – Local Faith Actors in Ebola Crises

We can learn from the role of local faith actors in the Ebola crisis in DRC (2018) and West Africa (2014-15).

Evidence has shown that delayed engagement with local faith actors in the Ebola crises had significantly detrimental effects.

¹ Local Faith Actors (LFAs) and Faith Based Organisations (FBOs)

- Response measures were at times contrary to cultural values and religious practices resulting in hostility and denial of the disease
- Response methods sometimes exacerbated existing tensions and conflict.

When engaged, faith leaders were transformational in the humanitarian response, by:

- Utilising religious texts to interpret relevant health messaging to control and prevent the spread of the disease and promote messages of hope.
- Countering misinformation as a trusted and influential source of information.
- Leading by example in behaviour change by modifying religious practices.
- Providing aid to vulnerable communities.
- Playing an intermediary role between the wider response and communities, particularly by dispelling fear and mistrust of critical interventions.



Churches and Church Agencies in the Pacific

Over 90% of almost all Pacific Island nations identify as Christian⁵. Religious belief, predominantly Christianity, is core to all aspects of society in the Pacific, including politics and community life, with high levels of church attendance, and strong regard for church-based institutions.

Churches are embedded at the grassroots of some of the most remote areas of the Pacific

and host many active social community affiliation groups such as youth groups and women’s associations.

Recent years have seen improvement in the coordination of Churches with national government response mechanisms and the wider humanitarian system in the Pacific. Church agencies have also invested in contextually appropriate community-based disaster resilience and preparedness programming.



A Faith Based Response to COVID-19 in the Pacific

The Australian Humanitarian Partnership has supported churches and church agencies, through CAN DO to respond to recent emergencies and to strengthen local capacity through the Disaster Ready Program. Significant achievements include:

- Mapping of church infrastructure as potential emergency management centres
- Development of Pasifika theological framework for disaster preparedness and response
- Increased coordination of churches within national disaster response and humanitarian system
- Strengthened safeguarding systems and inclusion in preparedness & response

There is momentum in the Pacific, which can be strengthened, particularly in this time of crisis.

Churches and church agencies are already responding to COVID-19. Across the Pacific church leaders hold influence with national, provincial and local actors including governments and traditional leaders. Many church agency staff are in the process of returning to be with their families in local communities in preparation for pandemic lockdown measures. In the process of doing this, they are sharing important information regarding COVID-19 on the journey and in their home communities, as well as sharing supplies (eg. for soap making) to support public health at the very local level.

3 The World Humanitarian Summit was a pivotal moment for the global humanitarian agenda, generating global momentum and political determination to move forward on the UN's Agenda for Humanity:
<https://www.agendaforhumanity.org/summit>

4 <https://www.agendaforhumanity.org/sites/default/files/CHARTER%20FOR%20FAITH-BASED%20HUMANITARIAN%20ACTION.pdf> 5 <https://journal.cjgh.org/index.php/cjgh/article/view/160/403>

4. PSEAH updates

The Church Agencies Network – Disaster Operations (CAN DO) is one Australian Humanitarian Partnership consortium comprised of eight Australian church agencies.

Through this collaboration, we have established a core CAN DO safeguarding working group to progress recommendations of an external review and establish a CAN DO safeguarding focal point. We have aligned PSEAH definitions and standards across all eight CAN DO agencies; and finalised a standard operating procedure. The objective of the SOP is to provide consortium-wide clarity on procedures for agencies to cooperate in the prevention of and response to SEAH, and child protection. It articulates how CAN DO member agencies, and partner policies and processes, interface within a CAN DO consortium program.

We have reviewed and developed safeguarding and protection modules on a disaster-ready training program; ensured the mutual terminology/definitions across CAN DO members' policies; and we held a two-day workshop at the end of last year where all the member agencies' safeguarding focal points came together to share learning, work on projects and develop our 2020 workplan.

The next steps for us are to develop a joint approach to partner training and socialisation of our individual safeguarding policies and procedures; engaging with local communities on safeguarding; and developing guidance questions for humanitarian designs and proposals to effectively embed safeguarding systems throughout project design.

The formation of the Working Group and my participation within it has directly impacted and enhanced my ability to strengthen Anglican Overseas Aid's safeguarding framework, as well as the methods and approaches I and Anglican Overseas Aid have adopted when working with partners to enhance their safeguarding culture and practices. I know this is the collective opinion of my CAN DO Safeguarding Working Group counterparts.

The development of a PSEAH policy, is not merely a plan adopted by us or our partners, but it is hoped that what is developed may be an effective and a sustainable implementation of plans and a concerted investment by partners and us through policy-enabling factors."

Held on 3 March 2020 in Melbourne, the 'Safeguarding with Partners' learning event
Panel presentation by Belinda Lauria, Program Manager – Quality and Compliance, Anglican Overseas Aid

Belinda Lauria is the Program Manager – Quality and Compliance at Anglican Overseas Aid. Belinda is experienced in child protection and safeguarding, policy and programmatic development and the application of child protection in the international aid and development sector.

Belinda has worked in safeguarding roles within both secular and faith-based organisations; and she is currently Anglican Overseas Aid's Safeguarding Focal Point.

Belinda's experience spans development of organisational safeguarding frameworks, including PSEAH policy development; and partner capacity strengthening and facilitation of technical training with international partners.

In her presentation, Belinda shares a case study of good practice from Anglican Overseas Aid's work with partners in the Solomon Islands and Vanuatu. She details key moments through the journey, highlighting lessons learned and assets for success.

THE VOICES OF THE CHURCH LEADERSHIP

“In July 2019, I was fortunate enough to be invited by our partners, the Anglican Church of Melanesia, to co-facilitate a ‘Safe Churches’ policy development workshop. The Church has had a presence in the Solomon Islands for over 150 years, it’s a well-established Church and civil society organisation with a membership of some 200,000 (or 34% of the population in the Solomon Islands). It is the largest church in the Solomon Islands, in a nation where 96% of the population identify as Christian; and in Vanuatu the Church has 44,000 members (or 15% of the population). “During this workshop in Honiara, there was a strong sentiment from the group that sexual exploitation, abuse and harassment was very real and very raw for them. That this is not just about developing policy; this is about addressing a prevalent issue affecting them and the community. “The quotes here are from some of the Church leadership during that workshop:

“We have detached from religion”

“People stay silent because they believe it is against their cultural belief and would disrespect the perpetrator”

“This is not a biblical perspective”

“Only once people start reporting and demonstrating to other people in the workplace and the community that such behaviour and treatment is unacceptable, will people be encouraged to speak out, this is the only way to reduce the harmful practices”

“The quotes illustrate the emotion, the urgency, and the reality of abuse, harm and exploitation that was discussed that day.

“The group vocalised that as a Church they need to accept and acknowledge that abuses do happen, yet most people are remaining silent. Priests in the room reminded us that vulnerable people are experiencing harm and abuse, and not much is being done about it.

“It was quite an extraordinary experience for me to be in that room at that moment.

“If I had co-facilitated in Australia, I don’t know that people would have been so open. Which comes back to what Bronwyn said earlier, that being the outsider coming in sometimes does put us in the position of, hopefully not offending, but at the same time touching on a very sensitive topic. Because we are detached from that community it can allow us to encourage the group to open up a bit more. And I don’t know if that would be the same here in Australia.

“People in that room – the members of that Church – were committing to publicly naming and addressing sexual exploitation and abuse. The initial step taken was mobilising key Church figures to start to develop a safeguarding framework and specifically looking at then developing a PSEAH policy.”

A DESIRE TO ‘BREAK THE SILENCE’

“Shortly after that workshop, once I had returned to Australia, the church adopted a whole-of-church approach and started the Safe Churches working group.

“The working group facilitated a talanoa, which is Tongan for a meeting where all sit together in the same room, on the same level and talk to a topic.

“The aim there was to capture voices and feedback from across the church – both Solomon Islands and Vanuatu –

from their staff, clergy and management.

“It also aimed to ensure that the working group aligned this particular policy with broader church work, particularly processes in the different ministries of the church who, because of coalitions they are part of, were developing other safeguarding frameworks and practices in their own departments. It aimed to make sure they were all working towards the same goal with one another and not duplicating processes.

“Some religious leaders have spread discourse condemning family violence and promoting gender justices by identifying and condemning harmful practices based on religion and reaffirmed the religious imperative to protect all people based on biblical scripture.”

FAR-REACHING AND INFLUENTIAL: INSTITUTION-LEVEL CHANGE

“In 2019 Anglican Overseas Aid and our partners in Vanuatu collaborated to design and conduct a baseline. Data was collected from approximately 200 individuals comprised of committee members, traditional and faith leaders. It gathered data on gender and GBV attitudes, beliefs, practices and knowledge.

“The study found that interventions that had been welcomed into communities and that had created change are those that had been developed in a culturally appropriate, holistic framework. This included listening to community voices and advice; and seeking solutions not only on the physical needs of the GBV survivor, but the underlying causes including the social and spiritual systems that reinforce and perpetuate harmful beliefs and

behaviour that diminish females relationships with each other, themselves, their environment and their spirituality.

“Data including testimonies from community leaders detail several transformational changes in priests and chiefs that are now actively working alongside contemporary interventions and community support services such as counselling services.

“At Anglican Overseas Aid, we have applied the same approach with PSEAH at the organisational level with our partners.”

“The group vocalised that as a Church they need to accept and acknowledge that abuses do happen, yet most people are remaining silent... People in that room – members of that Church – were committing to publicly naming and addressing sexual exploitation and abuse.”

ASSETS FOR SUCCESS

“I will briefly describe some of the key and pre-existing assets of our partners in the Solomon Islands and Vanuatu that were mobilised and that enabled the safeguarding process to commence. These resources will aid in their implementation of the policy throughout their very large church staff and then their communities.”

Asset for success: ecumenical affiliations

“Our partners are generally members of national, regional and global ecumenical coalitions. Many of our partners have been positively influenced and motivated through these connections and opportunities to engage and participate in the discourse on church safeguarding practices.”

Asset for success: language and religious discourse

“Often, it’s the language that we use that is key. We talk about ‘Safe

Churches' rather than the prevention of sexual exploitation, abuse and harassment. That doesn't mean to say we don't need that term – of course we do, and in all formal documentation it's there. But that's not how we frame or commence the conversations."

Asset for success: the power of Faith in communities

"The Church is deeply embedded and influential across every facet of life in the communities in which we program. Therefore, a biblical approach is highly appropriate and contextual for our partners in those communities.

"Local faith actors can be critical to sustaining systemic changes because they are omnipresent in communities. Church denominations themselves have a unique network that place of them in an influential position in the policy space as well.

"A safe whole-of-church approach engaging the local faith community is key to sustaining systemic changes and widening influence and impact."

Asset for success: faith leaders as agents of change

"Developing this policy with our partners is not just a policy for a small group of staff members. This is a policy for an entire church.

"The equivalent of CEOs and COOs as well as theologians, bishops and archbishops have been consulted and involved in the policy development and the general safeguarding strengthening of their systems and practices.

"Many of the communities in which your agencies program will be affected by PSEAH policies that churches develop. There are some of you here today that partner with branches of the church. One example is IWDA with the Christian Care

Centre – the Centre's safehouses in the Solomon Islands is one project of the Anglican Church of Melanesia, run by an order of Anglican sisters."

WORKING WITH OUR PARTNERS: INDIVIDUAL AND CONTEXTUALISED, LONG-TERM AND CONVERSATIONAL

"Our work with partners has been a long-term approach, starting with a very soft entry with conversations both remotely and out in the field.

The dialogue became more familiar over time, and we started working it into project and process

documentation (for example, risk registers, agreements, etc.).

"The catalyst for the whole-of-organisation approach began with a survey, designed by the Church Agencies Network – Disaster Operations (CANDO), of which Anglican Overseas Aid is a member.

"The survey that was emailed out to partners was after about a year of conversations with partners on the topic. The survey provided Anglican Overseas Aid with consolidated data about partners' current practices that relate to

Learning Event Summary:

'Safeguarding with Partners'

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the prevention of sexual exploitation, abuse and harassment.

"Baseline data lets Anglican Overseas Aid see how things change for our partners over time, and whether their experiences have been positive or negative.

"The survey also aimed to support partners by identifying existing processes and practices that partner organisations have in place to address things like harm, abuse, exploitation, and child protection, ensuring that as their partner Anglican Overseas Aid can be more effective and efficient in

how we work with our partners and support them in their strengthening of their safeguarding frameworks and the development of their policies.”

THE VALUE OF EFFECTIVE COLLABORATION

“The Church Agencies Network – Disaster Operations (CANDO) is one Australian Humanitarian Partnership consortium comprised of eight Australian church agencies.

“Through this collaboration, we have established a core CANDO safeguarding working group to progress recommendations of an external review and establish a CANDO safeguarding focal point.

“We have aligned PSEAH definitions and standards across all eight CANDO agencies; and finalised a standard operating procedure. The objective of the SOP is to provide consortium-wide clarity on procedures for agencies to cooperate in the prevention of and response to SEAH, and child protection. It

articulates how CAN DO member agencies, and partner policies and processes, interface within a CAN DO consortium program.

“We have reviewed and developed safeguarding and protection modules on a disaster-ready training program; ensured the mutual terminology/definitions across CAN DO members’ policies; and we held a two-day workshop at the end of last year where all the member agencies’ safeguarding focal points came together to share learning, work on projects and develop our 2020 workplan.

“The next steps for us are to develop a joint approach to partner training and socialisation of our individual safeguarding policies and procedures; engaging with local communities on safeguarding; and developing

guidance questions for humanitarian designs and proposals to effectively embed safeguarding systems throughout project design.

The formation of the Working Group and my participation within it has directly impacted and enhanced my ability to strengthen Anglican Overseas Aid’s safeguarding framework, as well as the methods and approaches I and Anglican Overseas Aid have adopted when working with partners to enhance their safeguarding culture and practices. I know this is the collective opinion of my CAN DO Safeguarding Working Group counterparts.

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5. DR highlights

Solomon Islands

The 2020 period of the Disaster READY project in the Solomon Islands (SI) saw collaboration and coordination amongst the six national CAN DO partners over the past two-three years come to fruition, as evidenced by the close workings and effective coordination of the partners along with co-delivery TC Harold and COVID-19 responses. In these projects combined partner teams undertook rapid needs assessments and distributions, and coordinated joint trainings on COVID-19. It is the first time that CAN DO local partners at the national level have led and delivered a joint response which is key to the overall goal of the local partnership, and a significant contribution to effective humanitarian coordination amongst CSO actors in the Solomon Islands. The Solomon Islands team also led the first implementation Safeguarding & Protection training from the CAN DO Core Humanitarian Training Package.

PNG

CAN DO Disaster READY activities in PNG are delivered through long established partnerships the Church Partnership Program (CPP), and build on lessons learned in responding to recent disaster emergencies in the country. This consortium of churches consists of the seven mainline churches and church-based organisations in the country; Anglicare, ADRA, Baptist Union, Caritas Australia, Evangelical Lutheran Church, Salvation Army and United Church in PNG. In 2020, the Disaster READY initiatives in PNG focused largely on effective engagements in disaster preparedness from the community level up to leadership levels within the church systems in the country. Tracking progress of key project targets and deliverables in pilot provinces of Bougainville and Western Highlands became stalled at the onset of the COVID-19 pandemic, as it prevented travel in PNG for much of 2020. Nevertheless, some of the key deliverables were achieved, including strengthening the PNG Disaster Hub operational capacity, coordination mechanisms for church Disaster Risk Management (DRM) activities, capacity building of church partners and improving communication while working remotely. The Theology of Disaster Resilience in a Changing Climate (TDR), whereby church leaders are able to challenge religious-based misconceptions of disasters and hazards, was further developed for the PNG context, and initial implementation also began. TDRCC resources were also adapted to provide culturally relevant and government aligned messaging for COVID-19 preparedness and response, and also translated into Tok Pisin, to make it more accessible for community members across PNG. While travel and meetings in-person were restricted, online forms of communication were prioritized, and the recruitment of staff to strengthen the capacity of Disaster Hub in Logistics and Monitoring and Evaluation were prioritised to support the remote work of the churches adjust and adapt to the 'New Normal'.

Fiji

The experience of COVID 19 enable CAN DO partners to adapted and be ,resilient to reach the communities under the new norm. Project activities were implemented creatively using PPE and following the restrictions, and using virtual engagement. We implemented the GIS mapping of Church assets and the facilitation of Training of Trainers (TOT) for the Theology of Disaster Resilience in a Changing Climate (TDRCC) and the Psychosocial First Aid (PFA). The main activities achieved are (i) Training of trainers and their practicum in communities on the Theology of Disaster Resilience in a Changing Climate including the translation of the resource materials (ii) Finalization of the Psychosocial First Aid Manual to meet the requirements for further endorsement by the government to be considered the National PFA manual for Humanitarian workers . (ii) Dedicated TDRM Women's

TOT (targeting 64 women, 25% women with disabilities). (iv) Continue to train and mobilise volunteers to carry out surveys of church-owned assets and the continuous development of GIS software, including an evacuation centre management page and (v) The continuation of the establishment of CAN DO operations and coordination with relevant stakeholders. During TC Harold response, NDMO approach us to work together with FCOSS, considering churches' reach at the Community level. CAN DO Fiji focus the work at Sub National level to strengthen the coordination and communication.

The CAN DO Disaster READY program in Vanuatu is a continuation of activities from Year 2, adding to that the PPF Safe N Redi project. Therefore, there are six components in total: (1) Geospatial Information System (GIS) mapping led by ADRA Australia and ADRA Vanuatu; (2) evacuation centre management training and (3) psychosocial support training to build the capacity of church-based personnel and communities to respond to disasters; (4) dissemination of the Theology of Disaster Resilience in a Changing Climate; (5) humanitarian coordination amongst churches; and, (6) developing solutions for church asset upgrades. The program is delivered in collaboration with church communities and humanitarian actors in Shefa, Malampa, Penama and Sanma Provinces.

6. Emergencies – PNG earthquake, DRC, Bangladesh,

The most important achievements in this program were the following:

Achievement 1: The PNG Church partners have been able to optimize a collective effort in reaching the most vulnerable. By working together, they were able to expand their already broad reach into fragile communities. Within these communities they have prioritized the most vulnerable, and in doing so have generally been able to assure gender equality and social inclusion.

Significance:

- The PNG church partners were already present in some of the most fragile and remote communities impacted by the earthquake which provided an opportunity to access the most vulnerable. Building on this strength and embracing an ecumenical approach, the churches ensured impartiality; giving priority to the most urgent cases and making no distinctions on the basis of nationality, race, gender, religious belief, class or political opinions.
- Working with inclusive WASH committees made up of mixed representations of men, women and people with disabilities has helped to ensure gender and disability-inclusive design features in the design and installation of the water tanks and latrines. By promoting dignity through meaningful participation and by adapting local solutions, the approach of the program has strongly acknowledged the role and the voice of women and of people with disabilities in the humanitarian process. In turn, this has increased the accountability of local churches to targeted communities by building trust and respect.
- Being embedded in communities and having access to networks throughout the country has put the Churches in a unique position to work with local leaders, mobilize volunteers and leverage other local resources. Effective response collaboration, networking and partnership has been a significant achievement. The locally-led collaborative approach enabled the CAN

DO partnership to leverage greater impact by working with various other stakeholders in the humanitarian field. For instance, PNG Red Cross were engaged in hygiene promotion at certain response sites and the PNG Church-partners were also able to achieve wider impact through consulting with CARE to access shared services and to collaborate in other DRR initiatives. In some geographic areas this enabled the program to support a higher number of people affected by the earthquake than otherwise would have been possible.

- The collective response has optimized the sharing of resources and expertise among the Churches, thus offering a practical model for future engagement. Whilst traditionally there has been high-level collaboration between Churches at a strategic level throughout the Church Partnership Program (CPP), the earthquake response was the first time that Churches have collaborated so deeply at an implementation level. The learning for all of the Churches, the establishment of processes for close collaboration and the deepening of relationships is enormously significant for the development of the capacity of UCPNG, Caritas, ELCPNG and ADRA to collaborate closely in a similar way on future projects.

Achievement 2: The program has had substantial impact on mitigating the psychosocial impacts of the earthquake through trauma counselling, peace building and building Disaster Resilience.

Significance:

- The significance of the psychosocial impacts of disaster has been recognized and addressed. Immediately following the earthquake, churches in PNG recognized that there was significant trauma experienced by beneficiaries as well as for those attempting to support them. Psycho-social training for affected CPP church leaders led to an increased participation in the psychosocial support program. Community-based counsellors contributed to building traditional coping mechanisms and to developing social safety nets for communities.
- Traditional knowledge and practice incorporated in the design of trauma counselling promoted Gender Equality and Social Inclusion. This was achieved by involving family partners or couples as counsellors in the communities. The approach was also locally appropriate in that it promoted self-help and built resilience of the affected community.
- The level of participation by affected communities was furthermore enhanced through a real-time evaluation of the Trauma Counselling and Conflict Resolution TOT being delivered in Southern Highlands. During the Training, the monitoring team from AHP NGO called-in at the training venue to observe the sessions and directly interact with participants (community-based counsellors) to gauge perceptions around the program and capture lessons-learnt.
- The original response plan was to train Church and community leaders to provide psychosocial services solely to those affected by the earthquake. However, on a number of occasions training participants saw an opportunity to apply these skills in the area of tribal conflicts and relationship counselling, and proved that the training was still relevant and appropriate some months after the earthquake.
- The feedback from the counselling and peace building workshops has inspired Churches to find ways to continue and expand this training. Based on the feedback and stories emerging, funding is being leveraged from other sources with the goal of running further training before the next disaster happens. Networks established during the earthquake response and individuals trained will be utilized to further this work.

- The program has successfully strengthened Church-based systems and mechanisms for disaster preparedness and response, in the form of the establishment of Disaster Committees. Following the earthquake, response mechanisms have been enabled, assessments conducted, and learning and capacity gained. Committees were able to evolve and improve in function and have played a key role in the development of the Church-led Disaster Management Plan. This has enhanced Disaster Resilience capacity for the participating Churches and their partners.

Achievement 3: Community-led WASH activities were effectively monitored and adaptive, resulting in inclusive facilities and empowered beneficiaries.

- Under the WASH program, local churches were able to contextualize the Sphere Standards for the WASH sector to be specific and appropriate to local context, by ensuring that provision of water sources (water tanks) and latrines to beneficiaries was acceptable to the affected population, without exacerbating pre-existing inequalities. The implementation of the WASH activities provided the opportunity to engage the local church partners and churches in a conversation to address gender equality and social inclusion, and to address the needs of women and people with disabilities who are especially vulnerable in a disaster. During community mobilisation and consultation, women and people with a disability were encouraged to participate in the response activities. This resulted in women acknowledging a sense of ownership and empowerment in the response and were found to be highly engaged in response activities. Additionally, to promote disability inclusion; latrine and tank designs were revised to be disability inclusive and users were consulted prior to installation to ensure that facilities met the needs of all beneficiaries.
- In order to ensure skills and knowledge were retained at local levels, Community Church leaders were used as local WASH focal points. Additionally, a local pool of expertise was also established as a result of involving youth (both male and females) and local congregation leaders in the construction of tank bases and latrines. Working alongside local WASH professionals provided an opportunity for youth volunteers to learn and develop skills that can now be applied in their community to prepare for and respond to future disasters.

7. How are we tracking – health check and governance review

Annual Health Check: Overarching Positives

- Increased profile with DFAT, AHP and broader sector
- Massive increase in funding
- Safeguarding
- Strong MEL support
- Strong coordination and collaboration
- Increased presence and response outside of the Pacific through COVID activations
- Promoting localization through partners

Areas for Improvement

- Overstretched capacities for a range of staff
- Reactive nature of COVID proposals
- Communication and coordination during COVID
- Strengthening in-country engagement beyond the Pacific
- Lack of clarity in some major areas of collaboration
- Working Groups have not been active
- Lag time on receiving funding
- Need to readdress decision making process and proposal writing

What needs to change in the next year to address these areas?

- Following COVID, CAN DO should carry out lessons learned from all proposals and go back over emergency processes
- Intentional investment in building capacity of partners
- Stronger processes developed which outline responsibilities
- Need better mechanism to hold ANGOs accountable to the elevation of local voices in decision making
- Increase resources/support available to the Coordination Unit
- Increased guidance on partnership management