



The role of local actors in the delivery of services to vulnerable groups in protracted crises

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Research Insights International

June 15, 2022

Question

What do we know about the role of local actors, including governments and NGOs, in delivery of services to vulnerable groups in protracted crises?

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The K4D helpdesk service provides brief summaries of current research, evidence, and lessons learned. Helpdesk reports are not rigorous or systematic reviews; they are intended to provide an introduction to the most important evidence related to a research question. They draw on a rapid desk-based review of published literature and consultation with subject specialists.

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1. Summary

As the needs of people affected by conflict, natural disasters and other crises grow year-on-year and become increasingly complex, the need for adapted service delivery has become ever more pressing. There is widespread recognition that top-down, externally driven support to service delivery is ineffective in reaching vulnerable populations in need of humanitarian support. Increasing strategic engagement by and with local actors is now an accepted norm for effective international humanitarian action (Metcalf-Hough et al., 2021). International commitments have been made to improve the provision of services in protracted crises. A body of literature indicates that engaging local actors in service delivery is one of the main ways to achieve improved service delivery. Despite the general acceptance of this principle, progress in achieving more localised responses to protracted crises has been slow. Evidence on how services can most effectively reach those in need is limited.

This report reviews available guidance and evidence on the role of local actors in delivering services to those in need of humanitarian support in protracted crises. The report begins with a brief overview of the evolving discourse on the need for better strategies to incorporate local actors in the delivery of services. The following sections review the available evidence on the different ways local actors have been involved in the delivery of basic services in protracted crises. Section 3 examines local actors' role in identifying the needs of affected communities. Section 4 examines the role of local actors in the effective coordination of service delivery. Section 5 discusses their role in transparency and accountability, and section 6 considers how local actors' engagement can contribute to the mitigation of further conflict.

Evidence on engaging local actors in service delivery in protracted crises tends to take the form of case studies of specific interventions or surveys of practitioners working in the field. Case studies in this area are often descriptive and rarely include any direct measure of service delivery or of the impacts of interventions on welfare outcomes among affected communities. One challenge for research in this area discussed in the literature is that some of the more structural changes sought by these initiatives, such as transparency and accountability, take a long time to develop. Another challenge noted is that crises tend to have a myriad of competing factors that need to be dealt with, leaving little scope among implementers or funders to undertake thorough research on programme impacts.

A noted gap in the evidence is on the distribution of services to potentially marginalised groups such as women or people with disabilities. Although effective targeting of local needs is a large focus of the literature, case studies do not disaggregate findings on the needs of specific groups or how local actors might better incorporate their needs into humanitarian support strategies. There appears to be an expectation that local actors are more attuned to the needs of a diverse range of groups in local contexts. However, the empirical evidence identified in this report did not appear to test this assumption.

Much of the literature in this area takes the form of guidance documents produced by international organisations working in humanitarian action. Some of this guidance refers to case study evidence. Still, most appear to refer to stakeholders' experiences and conceptual approaches to how service delivery happens in protracted crises. There are a range of instruments that have been deployed to improve service delivery in protracted crises – some of

which are referred to in this report – which could be formally evaluated to contribute to the evidence base on how such programmes effectively address the needs of vulnerable groups in need for humanitarian support.

2. Background

International support to the provision of basic services in protracted crises has historically been delivered in a top-down manner with strategies and delivery mechanisms determined by external actors (FAO, DI & NRC, p.8). “Despite the clear importance of local actors, the international humanitarian system was built by and for international actors, multilateral organisations and international NGOs” (OECD, 2017, p.1). This top-down approach to service delivery has come under increased scrutiny, with many observers concluding that “externally-imposed solutions don’t work” (Hearn, 2015).

Building on earlier commitments to humanitarian support, an agreement called the ‘Grand Bargain’ was reached by donors to improve the delivery of humanitarian aid at the World Humanitarian Summit in 2016. This agreement includes a commitment to “get more means into the hands of people in need and to improve the effectiveness and efficiency of the humanitarian action” (OCHA, n.d). The agreement includes 64 signatories, including the UN Member States, NGOs, UN agencies, Red Cross movements and inter-governmental organisations representing 84% of donor contributions in 2019 (OCHA, n.d). One of the core commitments of the Grand Bargain is to promote more support and funding for local and national responders. The messages of the Grand Bargain have been found to be reaching local actors. A survey of local and national NGOs across a range of countries found that the 65% were aware of the Grand Bargain, and two-thirds had used information from needs assessment to influence donors’ responses (NEAR, 2020, p.2)

A recent independent review of the Grand Bargain found that there has been progress towards supporting more localised responses at a strategic level, but this has not necessarily translated into improved practice (Metcalfe-Hough et al., 2021). Failure to deliver on this objective has been attributed to “the sheer volume of actors involved [which] has made it challenging to reach consensus, prioritise and take action, and there remain technical as well as political challenges to realising a more localised response to humanitarian action (Metcalfe-Hough et al., 2021, p.6). A recent survey of global and local humanitarian actors in Afghanistan and Pakistan found that 48% of international actors felt there was adequate representation of local and national organisations in international-national coordination forums and meetings. In contrast, only 28% of national and local actors felt there was adequate representation (Ullah, Khan & Wijewickrama, 2021).

Services are often delivered by a broad range of local actors in protracted crises including national and local governments and other state actors, local non-government organisations (NGOs) or country offices of international NGOs, faith-based organisations, traditional voluntary organisations and customary organisations (such as chiefs and tribal leaders (Albrecht, 2013). Local actors are usually distinguished from global actors, such as bilateral donors, multilateral institutions, and International Non-Government Organisation (INGOs). These broad categorisations are used in this report to reflect the breadth of definitions

used in the literature. However, it is worth noting that research in this area would benefit from clearer classifications of who is considered local, global and any stakeholders that might fall in-between.

Localised service delivery is often conflated with decentralised service delivery, though these are not equivalent concepts. Decentralisation is typically concerned with the reallocation of finance, decision-making and accountability from central governments to local tiers of government (see Ahmad et al., 2005 for an overview). It is therefore primarily concerned with state provision of services. Localised service delivery, on the other hand, tends to include a broader range of state and non-state actors that often take on the role of service delivery in protracted crises, particularly when the state is not capable of delivering these services. There are clearly overlaps between localised and decentralised service delivery, and many studies and guidance documents use these interchangeably. This report uses a broad concept of localised service delivery that includes state and non-state actors, and that may include state-focused decentralisation initiatives.¹

3. Improved targeting of local needs

Local actors may be better positioned to identify the specific needs of populations affected by crises. It has been observed that development cooperation often “does not prioritise crisis-affected regions at the subnational level, target the most vulnerable or marginalised populations, or focus on the sectors-subsectors that would most likely benefit them” (FAO, DI & NRC, p.7). Local actors are more likely to better understand the context of crisis-affected areas and be able to determine local needs, which are likely to change as crises change and develop over time (Twigg et al. 2017).

Some case study evidence supports the role that local actors can play in targeting service delivery to meet the needs of vulnerable groups. A review of EU support for conflict prevention and peace building in Ukraine, for example, found that local stakeholders delivering support were able to introduce issues that were not previously included in regional development programmes (Litra, Medynskyi, & Zarembo, 2017). A review of international cooperation to support the National Community Driven Development Programme (PNDP) in Cameroon also found that engagement with local actors helped develop services that benefited crisis-affected populations (FAO, DI & NRC, p. 8).

The delivery of health services through community health workers (CHWs) has been highlighted by some studies as a particularly effective strategy to enable local actors to better deliver services in protracted crises (Miller et al., 2020; Khan et al., 2014). A scoping review on the role of community health workers in protracted crises found that CHWs tend to be able to continue providing services through both acute and protracted crises and that flexible funding to CHW programme helps to facilitate the transition from more development-oriented programming to humanitarian programming (Miller et al., 2020). An assessment of Ethiopia’s

¹ Debate on the role of the state in the provision of services is beyond the scope of this report. Most guidance on service provision in protracted crises takes for granted that different stakeholders take up the responsibility of service delivery. Further research in this area might consider this balance of responsibility between state and non-state actors and what implication this has on the suitability and sustainability of services.

decentralised health spending and health extension programme, for example, was found to contribute to improved health indicators such as vaccination rates, antenatal care and deliveries by a skilled birth attendant (Khan et al., 2014, p.24).

Knowledge of the pre-crisis context has been identified as an asset that local actors might bring to provide more effective and inclusive service delivery. Analysis of recovery from the 2015 earthquake in Nepal found, for example, that local knowledge was also used to inform appropriate building practices to reduce future risks from geohazards (Twigg et al., 2017, p.26). Local knowledge also revealed that households whose homes were damaged or destroyed were not able to access government grants to rebuild where they did not have legal title to their land (Twigg et al., 2017, p. 23). Delivery of shelter and other services through a devolved coordination model in Mosul, Iraq, was similarly found to be better adapted to local conflict dynamics (Konyndyk, Saez & Worden, 2020).

Local actors who are embedded within communities can react to smaller-scale crises that do not reach international attention (OCED, 2017). While international support tends to involve operations at scale, local crises might fall under the threshold of established targets but equally require support to provide services to vulnerable groups. Those able to access international support in times of crisis tend to have a certain level of capacity and resources to begin with (Babister, 2020, p.116). Babister points to the prioritisation of certain rural areas where crises have tended to occur and notes that localised crises in urban centres are often overlooked (2020, p.116-117).

Local actors might also help international organisations access hard-to-reach communities. A report from the OECD observes that:

“In an increasing number of conflict areas, it has become challenging or impossible for expatriate or even national humanitarian workers associated with international organisations to access people in need. As a result, international organisations are increasingly resorting to local humanitarian responders to perform needs assessments, deliver aid and interact with local populations and/or local or national armed groups. In certain contexts, this can also improve the general acceptance for humanitarian aid from armed groups or local authorities.”

(OCED, 2017, p.7)

Local actors have been directly engaged in data collection to inform service delivery in some contexts. In Afghanistan, a Balanced Scorecard was created to facilitate the local assessment of the implementation of health service monitoring and evaluation by community members (Rowe et al., 2014). This programme involved training local health professionals and teachers in data collection, with participants being paid to carry out health facility assessments. An evaluation of this method of needs assessment found that locally based data collectors were able to assess twice the number of facilities as traditional survey methods, were able to access insecure areas and assessments were found to be more cost-effective (Rowe et al., 2014).

Local actors are more likely to stay on in crisis-affected areas after the immediate impacts, whereas global actors often have response times limited to immediate lifesaving objectives (Babister, 2020, p.120). Babsiter (2020) points out that “recovering households have both immediate goals, such as maintaining health and re-establishing livelihoods, and longer-term goals, such as resisting hazards and reducing their poverty... households’ short-term priorities constantly change as households head towards their longer-term goal” (p.119). This finding is supported by evidence from Nepal and Philippines where households were found to be on ‘recovery pathways’ that rapidly changed and moved beyond the immediate needs identified in needs assessments following the onset of crisis (Twigg et al., 2017, p.33). Therefore, local actors might be better positioned to adapt to these changing needs in more protracted crises due to their continued proximity to affected populations.

4. Coordination

The lack of coordination among global actors in humanitarian responses has been widely argued to lead to inefficiencies in responses and result in poorly designed programming that fails to meet local needs (FAO, DI & NRC, 2021; Konyndyk, Saez & Worden, 2020).

Global actors have been critiqued for working in sectoral silos and therefore failing to link up the range of services populations are reliant on in protracted crises. The capacity of local actors to deal with uncoordinated responses, particularly in a time of crisis, has been highlighted by the OECD: “Government emergency agencies and local civil society humanitarian responders have to manage a surge of activities and financial flows during a crisis response. The spike in activity often places a significant stress on organisational capacity” (OCED, 2017, p.17).

Most humanitarian service delivery appears to be administered at a sectoral level, with some observing that this leads to an unhelpfully segmented approach. “Humanitarian coordination... organises around major technical sectors and the large agencies that lead them, rather than applying a holistic, people-centred approach to relief priorities” (Konyndyk, Saez & Worden, 2020). Effective strategies in one sector do not appear to get translated to other sectors. For example, there is a body of evidence supporting the effectiveness of community health workers in delivering health services in humanitarian settings (see Miller et al., 2020 for a review), but similar approaches do not appear for other services such as education.

Local actors must coordinate the delivery of services as part of a wider system of governance. While coordinating with them directly has the potential to cut through layers of bureaucracy, there is a wider system and range of stakeholders through which services are delivered in any setting. Albrecht observes that:

“Local service providers are part of an extensive system of governance that incorporates a variety of centrally and locally embedded organisations and institutions. The systemic nature of how public services are delivered must be central to any development design and programming endeavour that seeks to enhance service delivery, including the varied nature of the actors that constitutes this system.”

(Albrecht, 2013, p.5)

Konyndyk, Saez & Worden (2020) propose an ‘area-based’ approach to service delivery in protracted crises, whereby holistic service packages are developed to address needs within a defined community of geography. They argue that a multisectoral and multidisciplinary approach to delivering services through participatory engagement “would better align and integrate humanitarian action around expressed needs and aspirations of crisis-affected people” (Konyndyk, Saez & Worden (2020, p.2). The authors hold that this would help to overcome the centralisation of service delivery in large institutions, usually based in capital cities, that are typically inaccessible to local organisations that deliver services in times of crisis.

5. Transparency and accountability

Initiatives that take a more decentralised approach to service delivery have been found to promote greater transparency and accountability, particularly where local populations are in the decision-making process. The Promoting Basic Services Programme (PBS) in Ethiopia, a series of block grants distributed from the federal government to regional governments, involved a process of developing joint service improvement plans in consultation with communities. This process increased opportunities for “constructive collaboration between citizens and the state to improve basic public services” (Khan et al., 2014, p. xix). A survey conducted in pilot areas of the PBS programme found that more than 84% responded positively to social accountability initiatives, and basic services were observed to have improved (Khan et al., 2014, p.18). The World Bank’s Afghanistan Reconstruction Trust Fund has also been designed to improve accountability through initiatives such as the Citizen’s Charter Afghanistan Project. Among its core activities, this project supports Community Development Councils to improve the delivery of infrastructure and social services (Openaid, 2022).

Local actors can also be effective partners in service delivery when partnerships with central governments prove challenging, particularly when there is active conflict (FAO, DI & NRC, 2021). “Centrally governed institutions in fragile situations rarely have the legitimacy or the capacity to provide public services... Therefore, the actors who do exist at the local level and who do provide services must be engaged in the process” (Albrecht, 2013, p. 8). To determine the most effective partners to work with in protracted crises, some agencies use a Partner Capacity Assessment to determine the governance and institutional capacities of implementing partners (OCED, 2017, p.12). This assessment tool categorises eligible partners according to their level of risk and adjusts this over time through demonstrated performance (OCED, 2017, p.12). In Somalia, for example, where there is a high risk of funds being diverted and non-delivery of services, capacity assessments have been used to determine whether implementing partners have “sufficient managerial, financial, and technical capacity and expertise to receive funding... and implement projects” (SHF, 2020).

It should be noted, however, that the literature identified for this report rarely discusses the effectiveness of engaging local actors in the inclusion of marginalised groups in accessing services. Studies did not, for example, discuss the role that such initiatives have in addressing access to services for women, people with disabilities, or other groups that may face unique barriers to access in protracted crises. It is well known that “humanitarian emergencies can have devastating and differential consequences on individuals and communities due to

factors such as gender, age, disability, ethnicity, and sexual identity and orientation (OCHA, 2021). It appears to be taken for granted by many studies that local actors will incorporate the needs of these groups. However, much of the evidence generated does not explicitly examine the extent to which they do so in practice. Disaggregated data needed to measure the extent to which services reach marginalised groups is often unavailable. Monitoring and evaluation initiatives do not appear to capture the effect of localised programmes on different segments of the population.

6. Promoting local ownership to prevent conflict

The promotion of local ownership in the delivery of services has been found to be a key instrument in reducing the risk of the recurrence of violence and insecurity (World Bank, 2011, p.7-8). A survey carried out in six countries and territories affected by violence found that inequality and corruption was a leading driver of conflict cited among respondents (World Bank, 2011, p.9). Analysis has also found that countries with above-average indicators of governance relative to income level is associated with a 30-45% lower risk of the outbreak of civil conflict within 5 to 10 years (World Bank, p.10). Analysis from the world bank concluded that:

“To break cycles of insecurity and reduced the risk of their recurrence, national reformers and their international partners need to build the legitimate institutions that can provide a sustained level of citizen security, justice and jobs – offering a stake in society to groups that may otherwise receive more respect and recognition from engaging in armed violence and in lawful activities.”

(World Bank, 2011, p.8)

It has been observed that the process of developing trust in legitimate institutions can be slow and complex, taking between 15-30 years (World Bank, 2011, p. 10). Bojicic-Dzelilovic & Martin (2016) argue that this process requires going beyond the delivery of services to promoting changes in mindsets among stakeholders to rebuild social foundations. Albrecht (2013) also observes that:

“Allowing linkages to develop organically between centrally governed institutions, NGOs and other local actors is desirable, takes time and is unpredictable. Such relationships cannot be forced from the outside. They must be nurtured through building informal relationships, and they often emerge outside written contracts, because above all, they are driven by the personalities involved and, on their initiative.

(Albrecht, 2013, p. 8)

The inclusion of a broad range of stakeholders in the process of building trust in local service providers has been highlighted by various sources (Albrecht, 2013; World Bank, Bojicic-Dzelilovic & Martin, 2016). Bojicic-Dzelilovic & Martin (2016) discuss the concept of a ‘Whole of Society’ approach to local ownership to “leverage the density and complexity of the local” (p.6). The 2011 World Development Report on Conflict, Security and Development suggests the concept of an ‘inclusive enough’ coalition-building process to begin building trust between different societal groups and between the state and society (World Bank, 2011, p.104).

The report also recommends using signals of a break from the past and delivering early results to build confidence in local institutions and show stakeholders that improvements will be sustained (World Bank, 2011, 0.104-105). Albrecht (2013) suggests adopting a broad definition of the state and moving beyond the division of state and non-state actors to understand the role of different service providers in protracted crises (p.7).

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Suggested citation

Lenhardt, A. (2022). *The role of local actors in the delivery of services to vulnerable groups in protracted crises*. K4D Helpdesk Report 1163. Brighton, UK: Institute of Development Studies.

[DOI: 10.19088/K4D.2022.127](https://doi.org/10.19088/K4D.2022.127)

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