



## **An Integrated Peacebuilding Strategy to Prevent and Contain the COVID-19 Global Pandemic and Ensure Stability**

The COVID-19 pandemic is more than just a health crisis - it is fueling '[stabilization in reverse](#)' by increasing instability and violence and exacerbating conflict dynamics in conflict-affected and fragile states. All bi-lateral and multi-lateral donors must ensure peacebuilding and conflict prevention are at the center and integrated into their COVID-19 strategy.

The roughly [two billion](#) people living in countries affected by fragility, conflict, and violence are particularly vulnerable to the pandemic. [An Infectious Disease Vulnerability Index](#) shows conflict is present in the 25 countries most vulnerable to infectious diseases; 22 are in Africa, and the other three are Afghanistan, Yemen, and Haiti. Conflict also contributes to an increase in virus transmission. During the Ebola outbreak in the DRC from 2018 to 2020, violence contributed to increased [transmission](#) of the disease. Pre-COVID-19, a 30-year peak in wars and violence triggered the [worst displacement and refugee crisis](#) ever recorded, forcing almost 80 million people from their homes. [Refugee and IDP populations](#) in camps are acutely vulnerable to disease, as overcrowding or exposure can exacerbate infection rates.

Pandemics also impact other sectors, including governance, the economy, human and food security, and overall increase conflict dynamics. COVID-19 is quickly [accelerating existing conflict dynamics](#) in conflict affected and fragile states. In [Uganda](#), security services are using violence against protestors. In [Nigeria](#), small-scale riots over food are already taking place. Violent conflict also fuels violent extremism, and it remains the primary driver of [terrorism](#). Violent extremist groups, including [ISIS](#), are leveraging the pandemic to their advantage by legitimizing their ability to provide services to communities.

### **Lessons from the Ebola outbreaks in Africa**

International and local peacebuilders have drawn on lessons from dealing with the 2013 – 2020 outbreaks of Ebola in Africa. These peacebuilders stressed the importance of core peacebuilding skills, including developing and building on [relationships of trust and collaboration](#) within local communities. In places where peacebuilding, conflict prevention, and stability programming were not integrated into the response, outside efforts to control the spread of Ebola faced opposition, and outbreaks were persistent. In 2018, DRC health clinics were attacked, which extended the outbreak of the disease and exacerbated existing conflict dynamics. In 2014 and 2016 in Sierra Leone, health officials encountered [community resistance](#) – even violent rejection of intervention in some cases – prompted by fear, rumors, and conspiracy theories about the disease. In contrast, where an integrated peacebuilding approach was applied, community leaders acted early to stem the spread of Ebola, and their efforts were more successful. Local organizations understood community dynamics, local beliefs, and legacies of inequality and marginalization. In 2014 in Liberia, local civil society organizations acted as community mediators and, along with community radio stations, served as a [crucial resource to combat misinformation](#). Community leadership forums, established



under [an IREX initiative](#), provided opportunities for citizens to voice concerns and worked within local structures “to plan, implement, and provide ownership of Ebola response activities” in 60 communities in 13 of Liberia’s 15 counties.

**An integrated COVID-19 strategy, with peacebuilding at the center, is critical to preventing and containing the pandemic and preventing and reducing violence and violent conflict.**

The current joint State Department/USAID U.S. strategy is inadequate to address the crisis and prioritizes three of four pillars: protecting American interests, bolstering health systems, and addressing complex humanitarian crises. The fourth pillar focuses on preparing for, mitigating, and addressing second-order economic, civilian security, stabilization, and governance impacts. This strategy treats the fourth pillar as a second-order priority that will be addressed after the immediate health, and the humanitarian pandemic response has abated. This linear and siloed approach is [contrary to best practices](#), the reality on the ground, and the principles incorporated in the bipartisan U.S. Global Fragility Act (GFA), enacted in December 2019.

The GFA creates the first-ever comprehensive U.S. Government strategy to tackle and prevent alarming levels of global conflict. This shift from the status quo requires, by the end of 2020, a ten-year, coordinated, preventative, multisectoral, locally-driven, and evidence-based approach in at least five stabilization and fragile countries or regions. While the GFA Strategy is not complete, the next large-scale complex crisis is already here. Ongoing pandemic response strategy must reflect the principles of the GFA, including integration and interoperability of conflict prevention and peacebuilding in development assistance programs to minimize the potential for conflict and build sustainable peace. This approach highlights the “[Perspectives in Peacebuilding](#)” report findings that the peacebuilding field needs to break down silos and better integrate peacebuilding efforts across sectors, including health and humanitarian aid.

However, there are challenges to ensure peacebuilding and conflict prevention are successfully integrated into development and humanitarian programming. These challenges include a lack of understanding of how to integrate a peacebuilding lens, low demand from donors, and a lack of time and resources. Development and humanitarian implementers have been reluctant to acknowledge their programs are operating in conflict-affected or fragile areas. Additionally, many development and humanitarian actors believe they must be completely impartial and express concern that working on “conflict prevention, stabilization, or peacebuilding” impugns their neutrality.

**Recommendations for governments, donors, and implementers to correct course:**

- 1. We urge USAID and the State Department to replace their COVID-19 strategy with an integrated approach that puts peacebuilding and conflict prevention at the center and builds on research, lessons learned, and failures from previous U.S. Government operations such as Iraq and Afghanistan.** If not, it will be business as usual, and the U.S. national security will suffer along with the health and stability of fragile and conflict affected states. U.S.-funded programs operating to contain and prevent the pandemic and its impact must understand the relevant political, economic, and historical context and conflict dynamics at



all levels – local through international - to guarantee success. In addition, all future funding mechanisms must be evaluated specifically on how the funding mechanisms address and incorporate conflict prevention and peacebuilding.

- 2. Integrate peacebuilding organizations already working in the region and local frontline peacebuilders within the U.S. COVID-19 strategy.** Health, humanitarian, or other organizations do not have to develop and learn how to apply a peacebuilding lens to their programs quickly. Instead, they should partner with peacebuilding organizations and local civil society already on the ground. Simultaneously, peacebuilding organizations should work with local partners [to develop practical and simple tools](#) and impact indicators that can be applied to these programs.
- 3. Adopt flexible and neutral terminology.** Specialized and technical language act as a barrier to entry and integration. All sectors employ industry terminology; however, these differences across sectors can be a deterrent for collaboration as literal language barriers. An integrated approach requires that sectors use more neutral and simple language, effectively translate resources, and be willing to adopt new and flexible terms that are understood and resonate across sectors. The peacebuilding field must also be able to adjust and use terms such as “risk assessment” instead of “violence and conflict sensitivity,” so other sectors are more comfortable with this work. The peacebuilding field must also provide practical guidelines detailing what works instead of only discussing what does not work.
- 4. Develop and build relationships of trust with local CSO’s and communities.** This lesson was significant from the 2014 Ebola outbreak in West Africa. Within months of the outbreak, efforts were made by organizations, including the [Johns Hopkins Center for Communication Programs](#), to engage and empower village leaders to spread accurate information about Ebola and safe burials. Virtually every NGO and CSO that worked on the Ebola outbreaks has cited the [need for trust](#) as a critical factor in the success of their efforts.

In responses to the COVID-19 pandemic, the establishment of trust with local communities is vital and it can be built by including local CSOs and community members in decision-making processes and must be maintained through a mutually accountable relationship. Pandemic responses should empower, and [partner with local actors](#) trusted in their communities to play vital roles, including messengers, mobilizers, and mediators. In addition, responses that are [entirely inclusive of local actors](#), rather than selective representatives, are more likely to accumulate trust from local communities and, therefore, ultimately be more successful, sustainable, and cost-effective.

- 5. Build-in learning and adaptive management from the beginning.** The current strategy calls for addressing complex humanitarian crises before stability and prevention, in complex conflict affected and fragile contexts that require more flexible and non-linear approaches to programming and measurement. In these environments, consistent monitoring is critical to understand the changing context and assess conflict risks to adapt responses quickly and efficiently. This requires strengthening rapid and in-depth research; developing effective



and well-resourced systems for information management; designing learning agendas; supporting an ethos of transparency through assuring open dissemination of findings, both successes and failures; shouldering risk for exploration of new programmatic approaches; integrating learnings into response activities, including community engagement; publishing programmatic tools and indicators; and providing open data platforms that adhere to strict data and privacy protections.

- 6. Ensure mental health programs are well-resourced to address the significant psychological trauma from COVID-19.** Failure to address mental health issues early will prolong the impact of COVID-19 and contribute to ongoing and future conflict dynamics. In a [survey](#) of Hong Kong residents about SARS, nearly two-thirds of respondents expressed helplessness, with nearly half saying their mental health had severely or moderately deteriorated because of the epidemic and 16% demonstrated posttraumatic stress symptoms. Studies have shown that unaddressed trauma can worsen over time, posing significant threats resulting from a pandemic of this scale. [AfP's recent survey of peacebuilding organizations](#) expressed deep concern about the mental health of staff as they grapple with diminished funding, demanding program adaptations, and shifting realities simultaneously. An integrated mental health approach is a necessary component of all programs related to COVID-19 response.
- 7. Engage local actors, including women and youth, actively and early to prevent and contain the pandemic and ensure stability.** Local ownership requires engaging legitimate local authorities and peacebuilders in strategy development, ownership, and more flexible procurement mechanisms. [Women and youth](#) are often on the front lines of response in crises such as the COVID-19 pandemic. They must be significantly involved in developing, implementing, and monitoring programs from the earliest stages. Women worldwide have taken a leading role in dealing with COVID-19, even as the pandemic has had a disproportionately negative impact on them. Since the pandemic emerged, women have had to shift their attention to immediate needs, including distributing food, hygiene supplies, and accurate information about COVID-19. But some have expressed concerns about the [reluctance of donors to shift development aid](#) to address immediate needs and access to education. There must be smaller-scale, flexible, and risk-tolerant funding modalities that require simplified grant applications and reporting criteria. More flexible programs allow [local peacebuilders](#) to do work, such as continue their roles as mediators and maintain peace and cohesion. Youth peacebuilders have been developing innovative ways of distributing supplies and reliable information about the pandemic. For example, a coalition of youth groups in South Sudan created an online and mobile phone-based campaign to confirm or discount rumors about COVID-19. Where these technical options are unavailable, they use bicycles outfitted with megaphones to [spread valid information about the virus](#).
- 8. The international community must increase and sustain foreign assistance to contain this pandemic that knows no borders.** Beyond the health implications, the COVID-19 pandemic poses far-reaching and long-term dangers through the disruption of effective governance, collapse of economies, and significant threats to human and food security. Fragile and conflict-affected states are [disproportionately affected by the virus alongside a global uptick](#)



[in violence](#). The U.S. COVID-19 response and all donors must include supplemental funding for foreign assistance, and the integration of conflict prevention and peacebuilding— core principles of the Global Fragility Act.

**9. Do not shortchange standalone peacebuilding programs.** At least 22 African countries are [experiencing political violence](#). Countries like Nigeria, Cameroon, Somalia, Libya, South Sudan, and DR Congo are experiencing high-intensity armed conflicts between armed opposition groups and national governments. The COVID-19 crisis is worsening ongoing conflict dynamics, but it also threatens current peace processes and programs needed to address ongoing grievances. Standalone [peacebuilding programs must be supported](#). Some conflict affected countries are preparing for elections, and the pandemic could delay elections. pandemic could delay elections. During the pandemic, some governments are restricting freedom of speech and assembly and targeting the opposition and vulnerable populations. Retreating peacebuilding programs due to funding cuts and the pandemic will stall peace processes and allow grievances to grow unchecked. However, peacebuilders are finding ways to adapt their work during the pandemic to continue their efforts to address conflict dynamics and build peace. As South Sudan begins to face the COVID-19 crisis, it is more important than ever that focus is not lost on the implementation of the peace agreement. [Saferworld's peacebuilding work in South Sudan](#) is critical and donors must robustly sustain these types of programs.

**10. Measures are needed to stabilize and resource the peacebuilding field.** COVID-19 has upended economies & societies. When peacebuilding is needed most, we are facing a potential loss in peacebuilding capacity globally. AfP surveyed 60 member CEOs from around the world on COVID-19's impact on their organizations and found: 50% have suspended programs; 47% are not financially secured for 3 months; and 86% project income losses. Small, medium, and large-scale organizations agreed on the need for flexibility across funding mechanisms and grant structures, especially since inability to meet current grant obligations was a common challenge. These flexible mechanisms include conversion of restricted grants to general support, allowing re-purposing of funds towards COVID-19 responses, and/or reallocation of budget lines to assist adaptation of organizations. Additionally, organizations highlight the need for increased funding opportunities either through new grant sources, or through renewal of existing grants into multi-year grants and toward online capacity.

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