

**Grand Bargain in 2020:  
Annual Self Report – Narrative Summary**

**Name of Institution: Catholic Relief Services \_ USCCB**

**Point of Contact (please provide a name, title and email to enable the consultants to contact you for an interview):**

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(NB. Please limit your answer to no more than **5 pages in total** – anything over this word limit will not be considered by ODI in their analysis. Please respond to all of the questions below.)

## **Grand Bargain in 2020**

**Question 1: Reflecting on the information you have provided in the Excel spreadsheet, please highlight the 2 or 3 key outcomes or results relating to the Grand Bargain that your institution achieved in 2020?**

**Localisation:** Guided by our agency strategy and its commitment to local leadership, CRS has worked to increase our organizational commitment to local partners and their capacity strengthening, while also increasing our advocacy for expanded localisation. Programmatically, in FY 2020, 49% of all CRS humanitarian projects (164 out of 332 humanitarian projects in FY20) included local/national partner capacity strengthening, and we have also continued to invest in stand-alone capacity strengthening projects. These have engaged a total of 123 partners in 51 countries. Within the EMPOWER & Responso projects, 52 national partners have increased their emergency response capacity and sustainability. In 2020, EMPOWER supported the development and implementation of 17 funding agreements between international donors and national partners (out of which 53% were directly between donors and the national partners as prime). Through a PSEA-focused project CRS has worked with another 50 local partners to improve PSEA/safeguarding systems/structures. The project's results to date show improvements in policies/procedures related to code of conduct, safeguarding, recruitment, community engagement and feedback/complaints. In Haiti, partners show an average increase from 58% to 77% in their capacity assessment on PSEA/safeguarding.

CRS has also increased its policy efforts to urge donors to increase investment in local actors and their capacity strengthening. Through [policy briefs](#), events and meeting with donors, CRS has highlighted the importance of capacity strengthening investment and increased funding to local actors, as well as amplified partner voice in these arenas.

**Cash and Voucher Programming:** CRS continued implementation of its “coherent cash approach” in 2020, supporting 6 countries to take up and transition into implementing cash programs. Madagascar, Malawi, Vietnam, India, Bangladesh, and El Salvador started and have scaled up their cash programming over the last year. Nine country programs have transitioned to implementing electronic voucher programs, improving the agency's capacity to monitor and track voucher program quality. Although total CVA for the year has decreased from FY19 (\$43 million) to FY20 (\$38 million), the agency has improved its financial system for tracking and record keeping of CVA programs, including now having the ability to segregate cash transfers from voucher transfers, both provided directly by CRS or provided through a local partner organization. Agency policies for enabling compliant Financial Service Provider and voucher vendor contracting have improved CVA programming take up by country programs. As part of its Coherent Cash Approach, CRS has launched its CVA resource hub – The CVA Center – as the one-stop shop for CRS specific tools and resources on CVA programming.

It is also important to highlight the many achievements of the CCD which CRS continues to co-lead with Save the Children and World Vision. Progress included the finalization of a data sharing agreement template/process for all members, increased commitments by members to support Country CCD Platform Coordination Managers, coordinated assessments and analysis in 10 countries, including funding REACH market assessments/monitoring for the benefit of the wider humanitarian community and increase membership of local actors within Country CCD Platforms.

**Question 2: How has your institution contributed to the advancement of gender equality and women's empowerment<sup>1</sup> in humanitarian settings through its implementation of the Grand**

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<sup>1</sup> Refer to the IASC definitions of gender equality and women empowerment, available [here](#).

**Bargain? What results/outcomes have been achieved in this regard? (please outline specific initiatives or changes in practice and their outcomes/results).** Please refer to the Guidelines for definitions of Gender Equality and Women’s Empowerment, which are included in this self-report template package.

CRS completed its 10-year Global Gender Strategy, which will provide guidance to all of CRS’ humanitarian and development programs globally. The strategy includes 5 priority program areas, including one dedicated to ensuring that CRS’ humanitarian programming efforts are gender responsive. CRS has also developed a basic training for staff on gender-based violence and how to support survivors of GBV, if encountered, in ways that are survivor-centered, following guidance from IASC and the WHO. Finally, CRS has developed detailed guidance for staff and partners on integrating gender into COVID-19 response.

In terms of specific projects, in a year dominated by the onset of, and response to, the COVID-19 pandemic several CRS projects worked to address and advance gender equality:

In **Bangladesh**, CRS has been implementing an emergency response program to support cyclone affected households. COVID-19 pandemic impacts on households included: a significant decrease in income, particularly for women who rely in particular on non-agricultural wage labor, reduction in number of meals, particularly for women, and increase in the sale of assets. The program responded by mobilizing female volunteers to reach women with essential messages, posters especially geared to reaching women, adaptation of distributions to reach female-headed households and separate handwashing stations for women and men at distribution centers.

The impact of the COVID-19 pandemic has been significant in **Zimbabwe** –work burdens for women and girls increased significantly as did rates of GBV. CRS Zimbabwe’s ‘I-Votsha’ food security project provided redeemable vouchers to female-headed households given their roles as primarily responsible for feeding the household. The Pathways project referred adolescent girls, women and children experiencing GBV to service providers specialized in this area, including local partner, Musasa, which provided legal support, post trauma – counselling through a toll-free line, WhatsApp and SMS platforms. Implementing partners also raised awareness about signs of GBV, where and how to report, through radio programs in English and national languages.

In **Uganda** CRS is working to improve the living conditions of vulnerable South Sudanese refugees in Bidibidi Refugee Settlement in the West Nile sub-region of North western Uganda and vulnerable Congolese refugees in Kyangwali Refugee Settlement in Hoima district of western Uganda. In this initiative, CRS will aim to construct complete shelter units with household latrine facilities as to ensure that each home is safe and sanitary. The project addresses gender in a number of ways including ensuring that protection principles are mainstreamed into all programming to ensure safe, dignified and accessible responses with special considerations based on gender, age and the diversity of the population, including those with disabilities, gender is considered in all MEAL activities by holding all-female focus group discussions to address the needs of girls and women in our programming and operations and establishing gender-responsive feedback mechanisms for reporting concerns/questions, abuses and complaints in all its asset transfer programs.

In the **Europe Zone** (Bosnia and Greece), CRS is providing gender-sensitive shelter and housing for migrants through safe houses in Bosnia, including specifically to meet the needs of women and their families, including providing adaptations for the COVID-19 pandemic. In Greece CRS and Caritas partners are providing shelter and housing to meet the specific needs of women and children, including female-headed households.

**Question 3: How has the humanitarian-development nexus been strategically mainstreamed in your institutional implementation of the Grand Bargain commitments?** Please explain how your institution has linked commitments 10.1 - 10.5 with other commitments from other workstreams.

Cash and Voucher Programming: CRS' agency strategy aims for a significant scale-up of cash across both humanitarian and development programs by 2030. The coherent cash approach initiative aims to streamline and improve quality cash programming, recognizing the impact that quality cash programming in development programs can have on surging or pivoting those programs in a humanitarian context – and vice versa. To that end, in FY20 CRS has committed to hiring a new “Social Protection and Cash Programming” technical advisor on the development team, to be hired in FY21, that will link directly to CRS' humanitarian cash team.

### **Grand Bargain 2016-2020: Overall achievements and remaining gaps**

**Question 4: What are the 2-3 key achievements/areas of most progress by your institution since 2016?** Please report on your institutional progress for the period 2016-2020, **even** if your institution did not become a signatory until after 2016.

Localisation: Since 2016, CRS has elevated, deepened, and expanded its commitment to the Grand Bargain's localisation agenda. Local Leadership has become a core part of CRS' agency strategy, and programmatic investments in capacity strengthening, as well as increased advocacy for localisation have shown promising results. In addition to the inclusion of capacity strengthening in the majority of CRS' humanitarian programming, two stand-alone emergency response and capacity strengthening projects demonstrate progress.

In 2016, CRS began implementing the *Preparing to Excel in Emergency Response* (PEER) project to strengthen the capacity of Local Faith Institutions (LFIs) in India, Indonesia, Jordan, and Lebanon when responding to emergencies. In 2019, independent evaluators found that: all partners had a measurable improvement in their organizations' systems and procedures for both emergency and non-emergency work; partners increased contribution to UN Cluster meetings to better coordinate with other actors; partners began to obtain and use beneficiary feedback on programming; and partners gained new respect from and opportunities to collaborate with government and peer organizations. Building on this experience, CRS began the EMPOWER project in 2018 South America and the Caribbean. EMPOWER is CRS' deliberate paradigm shift from its role as gatekeeper of emergency resources to bridge builder – connecting LFIs directly with donors and assuming more of a sub-contractor role to LFI primes who decide whether or not to include funding for CRS' ongoing technical assistance into its own project budgets. Since the beginning, EMPOWER's initial seven partners across six countries have secured over \$21 million to implement 17 emergency programs. They have also accessed funding from 11 donors with an 86% win/loss rate. Of these, four accessed \$8.6 million (53%) from USAID/DOS across 4 countries. Currently, three EMPOWER partners have successfully passed the OFDA Pre-Award Survey, and 10 have been registered in the grants.gov system. Through business development support, the EMPOWER project will help local partners directly raise an additional \$5 million by the end of 2022 to implement high quality humanitarian responses as well as become eligible to receive U.S. government funding directly.

Cash and Voucher Programming: The Agency 2030 Global Strategy set a goal of 1 billion USD in CVA programming by 2030. This agency commitment has aligned efforts at the headquarter, regional and country-level to reach the proposed target. The Cash Roadmap 2030 identified 5 main areas of investment to reach scale and quality of CVA programming, establishing the following agency workstreams: Response Analysis and Mainstreaming CVA; Data Integration and Interoperability; Knowledge Management; FSP Procurement; and Policies & Procedures. Through these 5 workstreams, the agency has collaborated across departments to overcome obstacles to CVA programming.

CRS has also continued investment in CCD collaborations, primarily at country level, as CCD continues to be an important model for cross-agency collaboration, even as we continue to “learn as we go”.

**Question 5: What, in your institutional view, have been the main achievements of the Grand Bargain signatories, as a collective, since 2016?** Please indicate specific commitments, thematic or cross-cutting issues or workstreams where you think most progress has been made collectively by signatories.

The Grand Bargain has allowed for a common framework to hold each other accountable for improvement in each of the workstreams to contribute to overall improvement in humanitarian outcomes for affected populations. It provides a common platform for dialogue across the signatory groups which is unique and important.

We feel there has been progress in many of the workstreams, including those highlighted above-localization and cash. However, regarding localization there is still a great need to continue with these efforts – placing more emphasis on the issues that are inhibiting real and measurable progress. We still see limited change in where donor funding goes and the ability for funds to flow quickly to local organizations, cover their full costs (including overhead, security, safeguarding) and incentivize INGOs and UN agencies to shift to a support and accompaniment role where feasible.

Also, it is only in the last year that, from CRS' perspective, that we have seen the shift to the country level. Localization discussions and forums have now been established in many countries. For example, the Localization Technical Working group (LTWG) led by Humanitarian Coordination Task Team (HCTT) was established in recently in Bangladesh and chaired by a LINGO – Caritas Bangladesh. We need to ensure we are making the most of these forums, including START Hubs, to see real progress at the country level supported through addressing global barriers.

**Question 6: What has the Grand Bargain not been able to achieve in its five year tenure? What outstanding obstacles, gaps, areas of weakness still remain after five years, in terms of improving the efficiency and effectiveness of humanitarian action?** Please indicate specific commitments, thematic or cross-cutting issues or workstreams where you think there remain key gaps or obstacles.

CRS would like to highlight the following in terms of where there needs to be greater effort:

1. Support for GB efforts at the country level. For many workstreams the GB dialogue at the country level is only beginning and all signatories need to focus more on supporting country level efforts in line with the workstreams that we agree to prioritize for the next phase of the GB. Country level efforts provide a “real time” opportunity to address any impediments linked to risk, barriers to increased collaboration and willingness to ensure greater access to resources and support and accompaniment to front line actors.
2. We should focus collectively on supporting initiatives that can impact multiple work streams, have momentum and just need the political support and resourcing to ensure real change at the field level. For example, more support/resources for shifting to [Area Based](#) approaches (also referred to as the [Settlement Approach](#)) that has support from the IASC, leadership of the Global Shelter Cluster Urban Settlement Working Group, buy in from other Clusters, NGOs, and HCs. This approach improving coordination and contributing to localization, quality financing, joined up analysis and assessments.
3. Signatories address internal barriers that are preventing progress on streamlining and sharing key processes – reporting, audits, due diligence, compliance requirements related to risk management, definitions for acceptable in country support costs.
4. Donors move beyond verbal commitments to localization and identify and resource concrete actions at scale that will contribute to a significant increase in local leadership (programming and coordination). They need to hold their INGO and UN partners accountable to do the same when making use of their funding.
5. Donors, INGOs, UN Agencies, with implementing partners, have to make a strategic shift towards a shared understanding of risk (and that the type/level of risk is not the same for all within a

given context) and risk sharing informed by principals outlined in a risk acceptance framework adopted by all.

6. Having common indicators for each workstream is challenging. At the same time, individual signatories could develop agency specific KPIs to help them measure progress. For example, just this year, CRS has adopted a small number of KPIs focused on localization and local leadership that will help to provide clarity on direction and promote progress across the agency.
7. Reducing the number of work streams to those that require both political and technical engagement to make true progress.

## **Risk and the Grand Bargain**

### **Question 7a: How has risk (financial, operational, reputational, etc) affected your institution's implementation of the core commitments since you became a signatory to the Grand Bargain?**

CRS would like to offer two examples:

In a certain country a donor communicated that we are not allowed to have material engagement with the Government. However, there is both lack of clarity on how Government is defined (national, state, etc..) and lack of consistency in the application within the same country leading to reputational and operational risk, as well as inefficient use of resources. These restrictions have led us to not be able to pay stipends to Ministry social workers seconded (who have the experience and capacity) and recruit, train and supervise to a team of social workers. In the same country, we are allowed to second and pay stipends of Ministry agricultural extension agents.

Donor decision to use a common food pipeline for a country that has both humanitarian and development food assistance as the donor sees this as a way to increase efficiency and reduce risk from their perspective. However, having a single pipeline within a very unstable context is likely to create more risk (reputational, operational, staff safety and security) as the one pipeline will struggle to meet the varied needs – location, timing, quantities. This inhibits our ability to make commitments to communities with regard to food for assets or emergency food assistance as a failure to deliver would significantly damage our standing with communities and local authorities, and given the depth of need could also put our staff at very real risk of violence/retaliation.

### **Question 7b: How has your institution sought to mitigate or address these risks to enable implementation of the core commitments?**

Some examples of how CRS has worked to mitigate risk include:

1. Establishment of an Ethics Unit that focuses on fraud and PSEA prevention, capacity strengthening/training and case management.
2. Sharing capacity with local partners through staff secondments, sharing of systems (i.e. FRM that is jointly managed by CRS and local partner) and joint decision making around who leads on certain program activities based on outcomes of capacity assessments.
3. Still in pilot phase, but CRS has developed a process to support country program (and eventually partners) to carry out regular risk assessments and the development of a "live" risk register that identifies risk, level of likelihoods/impact, mitigation measures and person (s) responsible.
4. Engage in dialogue via Inter Action or directly with donors on the impact of certain restrictions/compliance requirements create risk for CRS and/or our local partners.