

# Cordaid Annual Report 2011 Partners



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## **Foreword**

In 2011, when it decided to evolve into a social enterprise, Cordaid took an important step into a new future. Because of the cutbacks in development cooperation and the signals that were being sent regarding the uncertain continuation of the MFS II grant, Cordaid took the decision to reshape its future. Obviously, the painful consequences of this decision, such as a 40% decline in employment, were accepted with conviction, although not wholeheartedly. The successful transformation into a social enterprise will largely determine our work in 2012.

The decision to become a social enterprise derives from the growing reality within the development cooperation sector, where operating internationally and with entrepreneurial qualities is becoming the rule. Cordaid is looking more and more across borders and is rapidly becoming more international. Large donors are putting their programmes out to tender, and foundations and companies want partners who follow an entrepreneurial way of thinking and operating. By moving towards social entrepreneurship, Cordaid wants to respond to this changing reality and to create a new position and role for itself.

There is no denying that 2011 was a difficult year due to the sharp decline in financial resources. We had to give a few hundred partners the painful message that our contribution was being reduced or discontinued. This was not because of their poor performance, but because the new Dutch government decided to seriously cut down its budget for development cooperation in the Netherlands, which ranks third in terms of prosperity and welfare in the Human Development Index. These cuts, along with their size and

the speed at which they are being implemented, are a slap in the partners' faces, because they had always been convinced that the Netherlands was a reliable donor. It is painful that these cutbacks in development cooperation are being made without considering the consequences for partners and target groups.

The cutbacks have also brought to light how development cooperation has evolved from a consensus based topic to an issue that divides society. At one extreme, we have citizens and politicians looking at the changing world with an open mind and at the other extreme are the people who basically want to protect themselves against foreign influence, which they perceive as a threat. It is crystal clear for Cordaid that we live in only one undivided world of interconnectedness with care for the global public good.

In spite of everything, many activities and projects have been executed that contribute to Cordaid's core mission of building a just and sustainable world. This means that major progress has been made in health care in African countries; the concept of Results Based Financing appears to be successful and Cordaid is seen as an important partner in this regard. The Haitian house building project gained momentum, leading to many families renewing their hope for a better future. The focus on rural development in Afghanistan yielded good results, even though insecurity and gloom are growing in the country. The Urban Matters programme was renewed with greater strength. As part of this process, Cordaid was invited for consultation and discussion rounds on the highest national and international levels.

In the years 2011 and 2012, many demands have been and will continue to be made of our employees, with painful messages for our partners and uncertainty concerning their own future. There is no clear path: we are building the bridge to the future as we walk across. We feel grateful and we have confidence in the future when we see that so many people within and outside the organisation are helping in this effort.

René Grotenhuis
Executive Director

**Frans Slangen**Chairman Oversight Board



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## Cordaid in 2011

**We understand** development as a process in which power relations change at the micro level, between people and organisations, and within international structures.

**We work together** with social organisations that share the values we believe in, that have a legitimate basis in their own societies, and that take full responsibility for building strong and just communities.

**We offer** a cohesive package of support to do this, consisting of project financing, capacity building of partners, cooperation in networks, knowledge and information exchange, and (joint) political influence; we also engender awareness of, and support for, development cooperation among Dutch society.

#### Vision: changing power relations

In Cordaid's vision, the root cause of poverty and exclusion is the unequal distribution of power between countries, as well as between the government and citizens, the elite and lower strata, and between men and women within countries.

On the one hand, poverty is related to structural deficiencies due to exclusion, and on the other hand, to the effects of conflicts and disasters. Exclusion refers to inequalities in the distribution of political influence, natural resources, and utilities and services. People are excluded because of their gender, caste, ethnicity, religion, disability, illness (HIV/Aids), and other reasons.

The issues of poverty, climate, trade, energy, migration, and food are closely intertwined globally. On a micro level, these issues can be addressed effectively only if the national state and the international community are simultaneously part of the intervention on the macro level.

This requires our joining forces, including key elements such as partnerships, cooperation, complementarity, and synergy.

Cordaid believes that the (Global) Communities of Change are a means to build power relations that are more balanced; the critical mass and impact needed to do this are obtained by bringing together different stakeholders' initiatives.

### Cordaid's origins and place in the development aid landscape

Cordaid was created at the end of 1999 through the merger of Memisa, Mensen in Nood, and Vastenaktie/Bilance. Our source of inspiration is the Roman Catholic social doctrine. Cordaid works both with Catholic partners and target groups, and those of other persuasions; further, no distinction is made on the basis of ethnicity, gender, sexual orientation, or political conviction.

An important role is reserved for Cordaid's network of Roman Catholic organisations and institutions.

In view of its religious background and expertise, Cordaid is a valuable partner for the topics of religion and development, and peace and reconciliation. Cordaid encourages discussions surrounding the church's vision of the relationship between men and women, as well as of HIV/Aids.

#### 1.1. Cordaid at a glance

#### Mission: 'Believing it can work'

**Every person counts.** Our central values are the dignity of every individual, the solidarity that demands that everyone have the opportunity to live a life of dignity, the understanding that people must be charged with their own development, and the mission to care for the world as good stewards.

**We believe** in human dignity and respect for diversity. We recognise the power of individuals to set positive change into motion in their own lives. Our ultimate goal is to enable excluded and marginalised people to stand up for themselves in their local, national, and international communities.

#### Strategy Plan 2011-2015

Cordaid has entered into an alliance called 'Together for Change: Communities of Change' with Mensen met een Missie, IKV Pax Christi, Impunity Watch, the Dutch Red Cross, Both ENDS, and Wemos, where Cordaid is the lead institution.

Furthermore, Cordaid participates in the alliances of Partners for Resilience, which focuses on disaster resilience, and Connect for Change, which is related to the application of ICT's in the health care sector.

Through these three alliances, for the years 2011-2015 Cordaid has access to a government subsidy of € 345 million total, or € 69 million per year. Moreover, the organisation receives (additional) contributions from the Dutch government, the European Union, the United Nations, national relief campaigns, donors, Caritas Internationalis, and many other institutions and organisations. Cordaid has nearly 400,000 donors; its own fundraising accounts for approximately € 37 million in private income.

Cordaid chooses its partners on the basis of their vision, fundamental premises, objectives, and capacities. About half of our 700 partners in 28 focus countries are church/faith-based organisations. New partners go through a review process and, as appropriate, they receive aid to build up their capacities. Cordaid keeps close tabs on the progress made by means of project visits, reporting, external audits, and evaluations.

Cordaid works in conjunction with governments, churches, private organisations, corporations, hospitals, knowledge and educational institutions, and (inter)national develop-

ment aid organisations. The Catholic networks CIDSE (16 development organisations from Europe and North America) and Caritas Internationalis (162 members and a structure mainly for emergency relief in practically every country) occupy a special place.

Cordaid is committed to improving the situation and living conditions of:

- people who live in fragile states/ conflict areas, by offering security and protection, legal assistance, peacebuilding and reconciliation efforts, health care, and agricultural support;
- people threatened by natural disasters by facilitating warning systems and preventive measures such as water storage, dike building, and drought-resistant crops;
- victims of natural disasters through direct aid (food, water, medical care, shelter), linked to reconstruction;
- people with insufficient access to (medical) care by providing basic health care with special attention for sexual and reproductive health, and community-based care for vulnerable groups;
- poor farmers through an improved, sustainable agricultural production and their integration into agricultural chains, retaining food security and granting micro credit;
- slum dwellers by creating better living conditions through multi-stakeholder cooperation processes and neighbourhood improvement initiatives;
- also: the fight against poverty and exclusion in the Netherlands through support for civil society organisations and individual assistance.

Women, youth, and vulnerable groups receive extra attention in all target groups and activities.



Kenya: In one of Kisumu's slums, Cordaid has started developing a Community of Change.

#### 1.2. Key figures 2011

Results: organisation	2007	2008	2009	2010	Planned 2011	Achieved 2011
Number of partner consultations	41	41	56	63	40 - 50	42
Personnel in fte's	270	278	267	265	247	248
% women in (sector) management positions	44	50	50	50	50	44
% health-related absenteeism	3,7	4,2	3,8	5,3	3,5	3,4
% satisfied employees	74	n.a.	71	n.a.	75	68
% implementation costs	7,3	8,1	7,7	7,6	9,3	12,4
% own fundraising costs	14,2	13,2	13,6	11,4	16,6	15,8
% management & administration expenses	2,0	1,6	2,1	2,1	2,3	3,0
% non-government subsidies relative to total	38	32	39	51	45	67
Results: partners	2007	2008	2009	2010	Planned 2011	Achieved 2011
Number of partners in permanent portfolio	1064	1070	1186	889	P.M.	693
% new partners	15	12	11	7	5 - 10	7
Total expenditures in € million	165,4	151,9	157,1	149,3	135	104,8
% church/ faith-based partners in commitments	52	46	50	45	50	52
Results: society	2007	2008	2009	2010	Planning 2011	Realisatie 2011
Private fundraising in € million	37,9	38,4	41,8	34,3	41,3	37,4
Number of donors	430.500	427.500	425.000	421.000	420.000	398.000
Primary/ secondary school students reached with teaching packages	578.400	551.500	565.000	551.000	500.000	446.000
Number of private initiatives	568	569	491	445	400	344

#### 1.3. Cordaid's transition

We immediately felt the effects of the cutbacks in government subsidies at the beginning of 2011. It was also clear that the long term government role as the dominant fund provider had become uncertain. Then there was also the growing conviction that Cordaid needed to position itself more strongly as an independent civil society organisation. In September this led to the decision of transforming Cordaid into a social enterprise, beginning with a business units structure. The units are built around the topics that Cordaid defined as focus topics at the beginning of 2011; that is, the topics in which the organisation can accomplish the most added value and impact given its knowledge and experience.

#### A new paradigm

We can no longer talk about 'poor' countries if they have wealthy elites and a prosperous middle class, and when most poor people live in middle-income countries. The global issues related to climate, energy, food, and migration do not fit in the poor-rich scheme. The world is struggling with major social issues; in the South the communities are divided because of ethnicity, clan and tribal memberships, or religion, while they lack a shared notion of citizenship. In the West, individualisation is not really a blessing since it also threatens cohesion in society. A 'western' lifestyle can no longer be seen as a point of reference for development.

This requires a new perspective:

Poverty reduction is becoming more and more a fight against inequality, which requires instruments for acquiring and distributing domestic resources. Tax collection, fair and transparent contracts for raw material extraction, and transparent and accountable governments are the pillars. The empowerment of civil society as a countervailing power must be a cornerstone in the discussions surrounding inequality.

Poverty is determined to a large extent by global development (climate, food, energy, water) and therefore requires answers outside the field of development cooperation and an agenda that goes beyond the North-South duality. International aid funds should be managed by the UN and should target global common goods.

The MDG's are mainly lagging behind in fragile states and conflict areas, which lack reliable and trustworthy institutions in the fields of security, public governance, social cohesion, and basic services. From a policy perspective, the 3D approach (diplomacy – development – defence) got stuck because of its excessive link to the use of (military) peace missions. In countries without peace missions it is also worthwhile putting the 3D concept into operation.

The perspectives outlined above require more, rather than less, support from civil society organisations. It is impossible to realise substantial changes unless civil society makes itself heard.

All these changes demand an adequate response from Cordaid. There is a need for fulfilling a different role in the partner network and identifying new partners. There are also needs for new forms of linking and campaigning to become engaged with our grassroots supporters, an enterprising approach to seize opportunities, and a sharper profile with clearer positioning, a greater visibility, and recognition.

The starting point for Cordaid is the 'capital' it has acquired, along with its good reputation and its image of being a reliable and solid organisation. Many years have been invested in a large partner network in the South; our ecclesiastical partners and the global networks of CIDSE and Caritas are unique selling points. NGOs like Cordaid chiefly have a role to play in fragile states. The Dutch government, the EU, and the World Bank have all acknowledged Cordaid's added value. Social entrepreneurship is the guiding principle to generate social added value. Cooperation, transparency, and entrepreneurship are the building blocks of an organisation that responds to new developments flexibly and adequately. The comprehensive activities take shape through business units with a certain degree of autonomy that provide incentives for entrepreneurship. Through differentiated fundraising, we can establish contact with (multilateral) governments, institutional donors, and private funds, while we can carry on with effective activities that aim at bonding, creating support, and fundraising among donors and others in the Netherlands.

This new model requires a deep transformation of our culture: from a strong focus on spending to attention for acquiring; from ensuring our existence to keenly proving our own relevance at all times.

Cordaid's organisation as a social enterprise also has consequences for staffing; thus, the positions will be rearranged significantly, while our financial perspectives are forcing us to strongly reduce current staffing as well.



 ${\it Cameroon: Cordaid\ Memisa\ shooting\ a\ special\ edition\ show\ for\ Dutch\ television.}$ 



# Policy and strategy

#### 2.1. Multi-year strategy

The years 2011-2015 are largely characterised by a broad, alliance-based programme in 28 countries, supported with € 357 million from the Dutch government. Cordaid is the leading organisation of this alliance, 'Together for Change: Communities of Change'.

Cordaid is participating as one of the co-applicants in the Partners for Resilience alliance with the proposal 'Climate-proof Disaster Risk Reduction', under the leadership of the Dutch Red Cross (and together with the Red Cross Climate Centre, CARE Netherlands, and Wetlands International). We are also part of the Connect for Change alliance relative to ICT use, the leader of which is the International Institute for Communication and Development, together with ICCO, Edukans, AKVO, and Text to Change.

Whereas in the previous strategy period we were still able to count on an annual government contribution averaging € 109 million, for the coming five years this amount has been downsized to € 69 million, which signifies a reduction of 37%. For now, this means that we have had to leave one country (Rwanda), while five programmes had to be cancelled in five countries and all programme budgets had to be reduced proportionately.

Looking forward to 2015, when the MFS Co-financing Subsidy System may disappear and in any case will no longer be considered the main funding source, Cordaid will evolve into a social enterprise with a holding structure and thematic business units.

## 2.2. The South's influence in Cordaid's policy

There have been more than 40 partner consultations, with an average of 10 partners participating on each occasion, where both policy related and operational matters were analysed. Haiti and Malawi are two examples of consultations that influenced Cordaid's policy.

The mid- 2011 consultation held in Haiti gave rise to a geographical focus aligned to the working areas of the eight most important partners, which allows for approaching local and regional issues from different angles (conflict transformation, entrepreneurship, health care, and Disaster Risk Reduction - DRR). At the same time, the consultation was an opportunity to introduce DRR among the partners on the basis of a stakeholder analysis conducted by Cordaid. Since the partners were clearly interested in this topic, in November Cordaid organised an initial DRR training and decided to mainstream DRR in the Haiti programme.

A National Home Care Alliance officially started operating in Malawi in April. The first year will focus on lobbying the government and other stakeholders to recognise home care, with compensation for the services delivered, better facilities (e.g. transport and care equipment), and professionalisation of care through training being the central elements. The home caregivers and their clients also have to be represented in the national alliance (which for now only comprises NGO's) to carry out this lobbying agenda. The absence of home caregivers and clients was discussed

Cordaid's policy is formed around the central objective of taking the raised funds and using them efficiently to contribute to a better life for poor, excluded population segments. This is done through a strategy to change power relations, a focus on a limited number of comprehensive topics, and the creation of critical mass and synergy by means of alliances, multi-stakeholder processes, and Communities of Change (CoC).

This core task is supported by all other activities (fundraising, support, lobby, communication, operations, human resources policies, etc.).

#### Social entrepreneurship and strategic investments\*

Civil society organisations must profile themselves much more as organisations made up of citizens. A civil society's own mandate is paramount, and it is also the foundation on which to mobilise a countervailing power and ensure cooperation. The civil society organisations need to become enterprises with social aims that can follow their own paths and deal with a diversity of stakeholders and financiers.

The importance of civil society organisations is formed in several ways:

- Organisations that generate a countervailing power are indispensable; if it had not been for these organisations, sustainable soybeans and oil pollution in the Niger Delta would never have been placed on the political agenda. The importance of the organisations in the North continues to enable this political empowerment in the South by means of capacity building, international lobbying, and offering protection.
- Private institutions are often still needed to cover basic needs and services such as education, health care, and water/ sanitation. Particularly in fragile countries, governments frequently lack the necessary will or power to provide basic services. Hence, local organisations will need assistance for many years to come in order to ensure this provision.

- Civil society organisations are usually the ones that
  offer space for developing new initiatives and organising innovative powers in society. They experiment
  with new forms of aid, such as output-based aid.
- Civil society organisations often play a crucial role in conflict mediation and conflict transformation. In ethnically or religiously fragmented societies, NGOs and churches have a liaising role. Capacity building and offering protection from the North are continuing needs in this regard.
- Civil society organisations link up local problems to global causes. Today, practically all issues have a 'Northern' dimension. Health care policies are quickly linked to patents, and food security to agricultural subsidies.
- Change processes are often permeated by politically sensitive topics such as the rights of minorities, the situation of women, or the fight against the destruction of tropical forests. An active role of the Dutch government might lead to diplomatic irritations and restraint in these cases. This means that civil society organisations could be called upon to play an important role in, and contribute to, the objectives of Dutch foreign policy.

in the alliance's meetings, which Cordaid attended. Together with the Huairou Commission, Cordaid has reinvigorated the debate about mobilising and building up and strengthening these grassroots groups. Cordaid also encouraged its partners to give a voice to volunteers and clients.

#### 2.3. Complementarity and synergy

Cordaid is fully aware that the impact of its work increases if it adopts an approach of complementarity and synergy with other stakeholders. The practices regarding complementarity and synergy are described in more detail for the Afghanistan and Haiti cases.

In Afghanistan, there has been alignment, complementarity and synergy in the subjects of peace & security, health, and agriculture. The Afghanistan working group in the Dutch National Action Plan (NAP) 1325, with ICCO, Oxfam Novib, and Cordaid as the participants, met on several occasions to exchange information and align activities. A successful joint interactive debate was held in The Hague ('From Arab Spring to Afghan Summer?'). Cordaid entered into a partnership with the Afghan Women's Network, the largest women's network and an important spokesperson in the field of women's rights in national and international forums (such as the Bonn Conference in December 2011). In order to develop an Afghan NAP 1325, there have been consultative meetings with the Afghan ministries of Women's Affairs and Foreign Affairs. The discussions will continue in 2012. Together with the Dutch embassy in

<sup>\*</sup> taken from an internal memorandum, September 2011



Haiti: After the emergency relief phase, Cordaid is now working on long-term reconstruction.

Kabul, we had discussions about topics such as women human rights defenders, monitoring the security situation, and the Afghan NAP 1325.

Cordaid is the contract holder for basic health care in the province of Uruzgan, coordinating its activities with AusAID, Save the Children, the Afghan government, and others. Cordaid has frequent consultations with the Afghan Ministry of Public Health; the health care programme in Uruzgan follows government directives in its work.

Cordaid coordinates a coalition of international and Afghan

parties to combat maternal mortality. As the coalition leader, Cordaid coordinates activities with the ministry and with Afghan and international NGO's, the Afghan Midwives Association, and donors like USAID and the Norwegian Committee for Afghanistan.

Cordaid consulted the Dutch and Afghan governments, the World Bank, and the European Union on future funding for health care. Together with the Afghan government, Cordaid is working on a pilot for Results Based Financing (RBF) in Uruzgan; it is also negotiating with the EU to raise funding.

Within the Dutch Consortium Uruzgan (Cordaid, Save the Children, Healthnet TPO, ZOA Vluchtelingenzorg, and DCA-VET), Cordaid is implementing an agricultural programme, with consultations and alignment in the Netherlands, Kabul, and Uruzgan (mainly on an operational level). The Dutch government will support DCU until the end of 2013; DCU is getting prepared for a continuation without this support.

Together with ICCO and Woord en Daad, Cordaid is a member of the Comité Europa-Haïti (COE-H) committee, which focuses on coordination and joint advocacy for Haiti with the EU.

In March, the COE-H attended a conference in New York, organised by the Canadian Embassy, in which it emphasised the importance of civil society participating in the Interim Haiti Recovery Commission (CIRH); COE-H did this together with its local counterpart, Comité Haïti-Europa (COH-E).

The Haiti CIDSE working group met to discuss a joint trajectory plan for capacity building among the partners. In 2012, Cordaid, Trocaire, and Broederlijk Delen will start building up the partners' financial and monitoring capacity.

Cordaid signed contracts with CARE and Catholic Relief Services (CRS) to build temporary shelters, and we have entered into relationships with the internationally-based Build Change, Architecture for Humanity and Architects d'Urgence for technical assistance.

A project proposal for agro-ecological development from our partner GADRU was submitted to the EU together with CIDSE members SCIAF (Scottish Catholic International Aid Fund) and Cordaid and approved; in the proposal, SCIAF and Cordaid provide a financial contribution.

Land tenure is a major point of concern. Cordaid submitted a proposal concerning to a large extent land tenancy rights in Port-au-Prince to the EU, which honoured it. Cordaid worked with the local government in the municipality of Turgeau in implementation of the law surrounding the ownership rights of slum dwellers.

Cordaid maintains a relationship with several multilateral institutions. It plays an active role within the housing cluster led by UN-HABITAT, logement en quartier. Cordaid also participates in the health care cluster under WHO coordination; trauma care is coordinated with the Pan American Health Organization's mental health care working group.

## 2.4. Cordaid's contribution to the (inter) national debate and policy

Cordaid believes that as a large civil society organisation, we have to play an active role in the Netherlands, influencing the public and political debate by using our practical knowledge, as well as the expertise and information contributed by our partners. One of the ways to fulfil this role is to have direct contact with the political sector and the government, and through publicity activities.

Cordaid has realised, however, that the media are increasingly guided by the question of whether a contribution to the debate is sensational enough; there is often no space for a nuanced story. Cordaid is faced with the following dilemma because of this development: should it profile itself with sharply contrasting contours or stick to a wide-

ranging palette but with the risk of not really penetrating the public debate and only being heard by a small circle?

#### **Dutch politics and the Dutch government**

In 2011, Cordaid made itself heard on various occasions and in different ways.

- In two hearings on *Afghanistan*, Cordaid shared its views on the missions to Uruzgan and Kunduz; the description is included in Section 4.1.
- At the beginning of November, Cordaid distributed a letter to share its thoughts about development cooperation resources shifting from social institutions to the *private sector*. The government's own development policy has thus been sidelined to a large extent. However, the fact remains that Cordaid is convinced of the importance of the private sector for developing countries.
- On 15 June, as a member of UCP (United Civilians for Peace) together with Oxfam Novib, ICCO, and IKV Pax Christi, Cordaid explained its work in and for the Palestinian Territories to a parliamentary committee. The rights and interests of citizens are at the centre of this, beginning with international law and human rights. The Dutch government advocates for a two-state solution, though the UCP believes that it should act more strongly against the 'wall', with investments in settlements.
- Mining. On the eve of the presentation of the new Dutch natural resources policy, Cordaid advocated for disclosing the national mining income, because it is the only way in which the Dutch government has the right to expect other countries to follow suit. Thus, Cordaid

follows the Extractive Industries Transparency Initiative (EITI), a worldwide call for enhanced transparency in the mining sector. Since March 2011, Cordaid has been a deputy board member of the EITI.

#### The (Dutch) private sector

- On 26 January, the Lower Chamber asked Shell for an explanation of its activities in the Niger Delta. The ambassador to Nigeria and members of civil society were heard as well. Cordaid's proposal to sit around the table with the oil companies, the Nigerian government, and local and international civil society organisations was heard; the embassy in Abuja will organise a series of meetings, the first one on 22 March 2012.
- The 'Coal Dialogue' (which Cordaid is part of) focuses on responsible coal extraction for Dutch energy companies. Coal extraction for the Dutch market in Colombia, South Africa, and elsewhere is still tainted by human rights violations, environmental contamination, and local conflicts. At the start of 2011, the concerned companies, the unions, and the NGO's reached an agreement on more transparency. The result was a disappointment: at the end of 2011, the energy companies refused to disclose more information about the origin of their coal because, they pointed out, their contracts with coal mines prohibit disclosure and the information is also commercially sensitive.

#### **European Union**

CONCORD, the European NGO federation (which Cordaid has been a board member of since June 2011) issued two reports. In May, the *AidWatch* report found that European develop-

ment aid money is increasingly linked to national political agendas on security and immigration. Moreover, the report also pointed out that in 2010 the European countries spent almost  $\leqslant$  15 billion less on development cooperation than previously promised, and that more than  $\leqslant$  5 billion is unnecessarily included under the development cooperation budget.

In November, the Spotlight on EU Policy Coherence for Development document stated that policy coherence means that the European development cooperation policy should not be undermined by measures that the EU may take in other fields. CONCORD has pointed to serious shortcomings in this field, such as unfair trade agreements with developing countries, rights violations by European companies, which receive EU support and are involved in biofuel production, and subsidy arrangements that hinder agricultural development in the South. CONCORD's recommendation is obvious: the EU should map the potential effects of its policy and draft a complaints procedure for communities that feel adversely affected by the EU's development policy.

## **Budapest Conference – a lobbying** success

- At the beginning of 2010, the so-called EU 'Structured Dialogue' about the role of civil society started, and it ended in May 2011 with the conference which the European Commission organised in Budapest. The final declaration insisted on more actively involving civil society organisations in the EU's development policy: a place is reserved for civil society organisations in the development budget, while the EU delegations in developing countries embark upon a structural dialogue with civil society.
- On several occasions, Cordaid and its partners provided inputs for this Structured Dialogue (through the CIDSE and Caritas Europe forum in March 2010, and in four regional seminars in Africa organised by Cordaid).

#### CIDSE

In the last years, the CIDSE network of 16 development organisations from the 'North' has developed into a platform that promotes a deeper understanding of specific topics, with lobbying on the European and international levels. Cordaid participates in various working groups, forums and campaigns, among other things relative to global governance, the Financial Transaction Tax, natural resources (extractives), climate justice, food security, agriculture and fair trade, the Palestinian Territories, and entrepreneurship and human rights. Thus, our lobby letters, position papers, and recom-

mendations have been channelled to the highest international levels.

In September, CIDSE organised an international seminar in Brussels on the need to find alternatives to the classic models of economic growth, which are not sustainable and which do not contribute to a just global society either; as a result, we published *People and Planet First*; alternative ideas about development in November 2011.

In the period preceding the Climate Summit in Durban, South Africa, CIDSE launched the petition campaign 'We Have Faith – Act Now', which united Africans from different faiths around the call for climate justice. In conjunction with its members, CIDSE published the document *Recommendations to the CoP17/ CMP7 Climate Summit in Durban*, in which the parties taking part in the climate summit are called upon to take their responsibilities seriously, particularly where the poorest communities and those most threatened by climate change are involved.

Cordaid is also a member of international lobbying networks and coalitions involved in a broad range of topics. These programme-related lobbying initiatives are described more thoroughly in Chapter 4, among which are included the fight against counterterrorism and political space for civil society, natural resources, pastoralism, Disaster Risk Reduction, health care, vulnerable groups, and small scale entrepreneurs and microfinancing.

#### 2.5. Stakeholder satisfaction

We have been deeply engaged in consultations and correspondence with the *Dutch government*. The Annual Report 2010 and the Annual Plan 2012 of the Alliance were both approved. At the end of November, we held the yearly policy consultation with the Ministry of Foreign Affairs. Cordaid was complimented on its accountability; our conceptualisation of *Communities of Change* also received a positive assessment. Cordaid pointed out that it wants to have a greater focus on conflict areas and fragile states; the changes required to achieve this will be included in a proposal to be submitted to the ministry mid-2012.

Several studies addressed the level of satisfaction among our *donors* and Cordaid's image. The results will mainly be used to improve communication with the support base. At the end of 2010 we started to measure the degree of satisfaction among donors by means of a new score, through answering the question whether they would promote Cordaid as an organisation that pursues good causes among relatives and acquaintances. The first study was a baseline survey which will be repeated in 2012.

Donor complaints totalled 605 in 2011; most complaints were related to fundraising methods (33%), excessive mail (17%), and administrative mistakes (13%). These numbers are clearly a significant increase compared to previous years.

Our *partners'* level of satisfaction is mapped regularly. The next partner satisfaction survey will be conducted in 2012. We have recorded 8 formal partner complaints, which is

actually quite low considering the hectic transition to the new strategy period and the thereto related far-reaching measures. This means we have remained within the multiannual average (2007-2010) of around nine complaints. It should be noted that most measures had already been announced in 2010 and that the partners had already received explanations during the consultations. This partly explains the higher than average number of complaints, 18, in that year.

- One partner complained that it had not received any reaction to the reports submitted, which caused delays in disbursements. This complaint was found to be justified because, among other factors, the 2010 report had not yet been reviewed by Cordaid at the end of March 2011.
- One African partner complained about a Cordaid employee's behaviour. Following an investigation, it became clear that communication was difficult, with a lot of misunderstandings on both sides. The complaint has been solved with a compromise proposal acceptable to both parties.
- In India, a local organisation complained about the quality of a housing project carried out under the responsibility of a Cordaid partner. According to the population/ organisation, the partner had not properly addressed its complaints (an example of deficient downward accountability) and so they decided to contact Cordaid. We suggested conducting an assessment, which was effectively done in December, but the complaints were addressed insufficiently. A second assessment has been planned for April 2012, involving both the partner and the local organisation.

In 2011 the biennial *employee satisfaction survey* was conducted; the results were predominantly positive, even though at the same time it became clear that our employees are concerned and anxious about Cordaid's future.



## Core processes

#### 3.1. Income

Cordaid's financial results in 2011 were seriously affected by the lower MFS grant from the Dutch government. In the past few years (2007-2010), the yearly subsidy had been € 109 million, compared to € 69 million for the current period.

Our own fundraising yielded  $\leq$  37.4 million, namely  $\leq$  3.9 million lower than budgeted. The number of donors declined by 23,000 (an inflow of 30,000 and an outflow of 53,000 donors).

The revenues from national relief actions totalled  $\leqslant$  21.0 million, whereas we had budgeted an amount of  $\leqslant$  8.5 million. Cordaid raised  $\leqslant$  6.5 million through the campaign for drought in the Horn of Africa. The contribution from a national lottery was  $\leqslant$  5.1 million.

Our income from international governments and other entities totalled € 13.8 million, particularly from the World Bank and the European Union.

Cordaid distinguishes between seven primary processes: fundraising, financing partners predominantly in the South, capacity building for partners in the South, learning and knowledge development, lobbying & advocacy, encouraging and organising civil society involvement in the Netherlands, and multi stakeholder processes/ Communities of Change.

Within this last process, the working processes enjoy interdependence and synergy; the underlying principle is a shared agenda for change and the corresponding distribution of tasks and duties among the stakeholders involved.

#### 3.2. Strategic financing

Because of the lower government contribution, it was impossible to fully implement the original plans. Some programmes were cancelled, others clipped, and so it was not possible to realise the desired critical mass everywhere. In order to respond to uncertain and unstable financial amounts, Cordaid also decided to switch from multi-annual commitments to shorter term (mostly one-year) commitments. The project commitments accounted for a total amount of € 104.8 million.

Of the 1,867 financing proposals received, more than 60% received a positive rating (for further treatment);

in all, we approved more than 1,000 funding applications.

For monitoring the 2,780 on-going projects, we considered 1,093 audit reports, 1,986 financial progress reports, 1,814 in-depth progress reports, and 486 management letters.



Ethiopia: Cordaid provided water in the Horn of Africa through water trucking: large trucks supply water and fill the water reservoirs.

#### **Continents and countries**

Fifty-four percent of the commitments benefited Africa, followed by Asia with 28% and South America with 18%. Of the funds committed, 56% were for fragile countries/conflict areas and the remaining 44% for MDG and Transition Countries (see also Appendix 2).

#### Type of relationships and organisations

Of the funds committed, 37% were for strategically important partner relationships, 30% for one-time project relationships, 26% for (emergency aid) projects under self-management arrangements, and 7% for new, exploratory relationships.

Although the intermediary organisations, i.e. NGO's with 37%, and self-managed implementation entities (28%), still account for most of our partner portfolio, the networks and network-like constructions have clearly become more significant (with 14%), although this is hardly surprising if we recall Cordaid's focus on multi-stakeholder processes and Communities of Change.

#### Scope and reach

The scope of the *Conflict Transformation* programme is often limited in terms of the direct target group, while the indirect target group (for example, the audience of radio and television broadcasts or the electorate) could comprise millions of persons; for practical reasons, Cordaid limits its scope to the communities that are the object of protection and peacebuilding (direct poverty eradication). Conflict Transformation reached 388,000 people, plus 9 million mainly through health care in fragile states.

Disaster Risk Reduction targets the population of vulner-

able communities; in MDG and Transition Countries, we reached 0.9 million people.

In the *Health & Well-being* programme, the (indirect) target group usually comprises the service area of the health care or care institution; this area encompassed 2.5 million people in MDG and Transition Countries.

In *Entrepreneurship*, a very sharp distinction is made between the direct (small farmers, borrowers) and indirect (household members) target group; the programme reached 165,000 farmers and borrowers, and an indirect number of 0.8 million people.

In *Urban Matters*, the target group concerned is the neighbourhood (community), which encompassed 380,000 slum dwellers.

*Emergency Aid* usually helps entire communities; in the reporting year, we reached out to 880,000 disaster victims.

The total target group was thus made up of almost 15 million people.

#### 3.3. Partner policy and capacity building

No major changes were made to the existing policy, but in the reporting year we did introduce a code of conduct against sexual abuse.

## Cordaid introduces a code of conduct against sexual abuse

Sexual abuse is a violation of human dignity which is unacceptable for Cordaid. Henceforth, one of the conditions to receive funding is a code of conduct regarding sexual abuse, which is part of each funding agreement. The code has been introduced to the partners through an in-depth letter. Within this framework, partners are expected to take measures to prevent and sufficiently address sexual abuse in accordance with their own code of conduct (prosecution of the offender is the last resort). Partners are required to provide annual reports accordingly. If, in Cordaid's opinion, the partners are not serious enough about sexual abuse, this might eventually lead to a suspension of financing.

#### **Evaluation of project proposals**

This evaluation is an important moment in the project cycle, and involves an evaluation of both the partner and the project proposal.

## Characteristics of a partner organisation

Cordaid ascertains the partner organisations' capacity on the basis of three scans (organisational, financial management, and gender), covering four dimensions: Position & relating: how does the organisation operate in its environment (relationships with others, image, networking, accountability)?

Thinking & learning: does the organisation have a strategic plan, a good M&E system, a proper human resources policy?

Doing: how about sustainability of the organisation and its services; how efficient are its operations; and what about the quality of its financial management and administration?

Being: how is the supervision of the organisation organised; what is its gender policy and practice; are management and staff competent; and how transparent is the organisation in its operations?

Based on a dialogue about the strengths and weaknesses identified, Cordaid contributes to capacity building of the partner organisations.

#### Gender

Gender has been incorporated implicitly in the programmes by testing the projects' gender component, capacity building with regards to gender, targets regarding female participation (in Microfinance, 70% of the clients must be women), the identification of women's organisations, and gender mainstreaming in policies and particularly practice,

#### Characteristics of a project proposal

Cordaid's evaluation also covers the quality of the project as an additional guarantee and to gain knowledge. In a good project proposal, the activities and results are consistent, feasibility has been demonstrated, the quality of management is considered to be sufficient, monitoring is adequate, measures have been taken to enhance sustainability, and the budget is aligned with the intended results.

e.g. promoting female leadership and participation. In the Conflict Transformation and Health & Well-being programmes, this attention is made explicit and is included in sub-programmes.

#### Religion

Religion and church institutions play a key role in many developing countries. The Roman Catholic Church continued doing its duty during the war in (South) Sudan, even when all international organisations had left the country for security reasons, by providing food and medical assistance, keeping communities together, and offering consolation in the most miserable situations – without stopping to consider religion or ethnicity.

The national Caritas office in Bangladesh is among the main aid providers in the country, even though hardly 1% of the population is Catholic. However, this is not an obstacle: 90% of the employees have a Muslim background and 95% of the activities involve Muslim target groups.

Within the Conflict Transformation programme, church structures and partners occupy an important place. In South Sudan and the Democratic Republic of Congo, we work with bishops' conferences. The church partners are active in the field of reconciliation and conflict mediation, while in several countries church leaders receive support for their lobbying and advocacy efforts.

At the same time, our relationship with church partners is characterised by a critical dialogue. This means, for example, that Cordaid is not blind to the fact that the assistance offered by church partners has to be modernised so as to meet today's quality demands. However, it remains a delicate process for both parties; just as Cordaid questions its partners' policy regarding sexual and reproductive health and HIV/Aids, the church partners also have comments on Cordaid's policy.

The bishop of Batouri, Cameroon, questions *Results Based Financing* in health care. Does solidarity not get into a tight corner when clinics become autonomous, meaning that shouldn't well-functioning clinics be examples of solidarity and that they should thus share their profits? The fact that points can be scored when patients are received well is inappropriate; receiving patients properly is just part of the job. And the Roman Catholic Church cannot be formally involved in modern family planning. But the bishop does acknowledge positive changes: a better quality of care and more patients served. In his letter, the bishop asks Cordaid to embark upon a dialogue on these issues, an invitation which we will gladly act upon.

#### Monitoring implementation

Based on the progress reports and on information collected during project visits, an evaluation was made of 681 projects' implementations. The evaluation showed that for 86% of the project objectives, implementation was sufficiently on schedule, or at least to a good degree; for the remaining 14%, progress was moderate or poor. In the latter cases, the way in which Cordaid can help to improve implementation is being discussed. In certain cases (force majeure of a political, economic, or climatic nature) the objectives are adjusted; in exceptional cases, the decision is to end the project.

#### Phase out and renewal of the partner portfolio

Within the framework of the policy of geographical/ thematic concentration combined with the declining government contribution, Cordaid has had to cease its support for 240 partners. Concurrently, 44 new exploratory relationships were established. This resulted in a portfolio of nearly 700 partners, a drop of 22% with relation to 2010.

#### Termination of the funding relationship

Because of the greatly reduced budget, we have also had to limit the exit trajectories in terms of financial assistance and duration, even though Cordaid still looked for trajectories that offer partners a chance to take timely measures and tap new sources of funding.

In Burundi in 2005, Cordaid initiated a pilot to introduce *Results Based Financing* (RBF) in health care. The Burundi government raised RBF to a national policy in 2010. In 2009, Cordaid announced that it wanted to transfer its

tasks. However, the last weaknesses in the concept (objective verification of the results and anchoring civil society in the system by means of, for example, monitoring the services rendered) forced Cordaid to extend this period for an additional six months. Even though Cordaid is no longer implementing any actual activities, in the coming two years it will be providing technical assistance to local partners and governments.

For policy reasons, as of 1 June 2011 Cordaid discontinued its partnership in the Niger Delta with MOSOP (Movement for the Survival of the Ogoni People). From now on, Cordaid will support cooperation alliances and networks that comprise several ethnic groups, as well as environmental and human rights organisations. The relationship with MOSOP, which exclusively targets the Ogoni population, no longer fits in this scheme. MOSOP shall have to find sources that better match its profile and positioning. To this end, Cordaid has facilitated training in Kenya for MOSOP staff members.

#### Capacity building

Cordaid views capacity building of its partners as part of the framework of civil society building, targeting organisations that make a solid, representative, and sustainable contribution to civil society, with innovations and the accountability to stakeholders for what they do.

#### Partner portfolio as at the end of 2011

	Conflict- transformatie	DRR*	Health and Well-being	Entrepre- neurship	Urban Matters	Total	In %
Africa	109	24	81	61	31	306	44%
Asia/ Middle East	100	23	40	51		214	31%
Latin America	57	2	4	27	30	120	17%
Netherl./ world	26	3	10	12	2	53	8%
Total Cordaid	292	52	135	151	63	693	100%
% church/ faith based	48	42	53	15	100		52%

<sup>\*</sup> Only partners for disaster prevention; that is, excluding emergency aid partners.

The experiences of 2011 are pointing to new paths that are being/ have been taken:

- The trend that started in previous years continues that
  of working with local institutions and consultants for
  capacity building and advising partner organisations.
  There are/ have been resolute investments in building
  expertise in the South.
- Southern teams are now responsible for 80% of all project evaluations conducted. In terms of quality, they are a match for Northern or mixed teams.
- In recent years in India, investments have been made in the financial management of partners. In this regard, Mr. M. Kandasami and his network of auditors have set the tone; they also provided services to partners in other Asian countries. A similar approach is now being developed for several African countries in cooperation with local auditors, with Mr. Kandasami in an advisory and accompanying role. In 2011, we started with 30 partners.
- Together with the English 'Integrity Research and Consultancy' and in consultation with local knowledge institutions, such as universities, we are looking into the possibility of setting up a 'Research Training Centre' in South Sudan, which lacks considerable research capacity.
- 2. The reporting year was largely atypical because of the accelerated termination of funding relationships and exit strategies for entire countries. Even though we should be cautious in view of the limited number of scans made (< 80), it has been clear that reducing the partner portfolio has not affected quality. On the contrary, the scores</p>

on the organisational, gender, and financial scans have all gone up.

- 3. Since 2009, it has become clear that extra attention is given to networks and Communities of Change (CoC). While in 2009 7% of the funds were allocated to network and network-like constructions, in 2010 this percentage went up to 9% and then to 14% in the current reporting year. This mirrors the focus on multi-stakeholder processes, Communities of Change, and international lobby networks.
- 4. With the growing focus on fragile states and contexts, capacity building for government entities is on the rise. Some examples in the reporting year include:
- In Afghanistan, Cordaid works on capacity building for the Ministry of Public Health; Afghan government managers and doctors had a chance to attend the KIT institute's training on health systems reform and financial sustainability.
- In the Democratic Republic of Congo, Cordaid participated in government capacity building. In South Kivu, for example, the provincial health care service and the inspectorate for public health have been strengthened. Both institutes receive assistance for risk analyses, the inspection of hospitals, the control of medication, etc.

In all, almost 130 Cordaid partner organisations were involved in capacity building, mostly through workshops and trainings, and by receiving assistance from consultants. Approximately 55% were strengthened with respect

to OD/ID (financial management, M&E, strategic planning, gender, sustainability, etc.), 30% with respect to thematic in-depth knowledge (monitoring of laws and regulations, Results Based Financing, public health insurance, Disaster Risk Reduction, rice production, etc.), and 15% with respect to their lobbying capacity (including the collection of data in support of lobbying).

#### By way of illustration:

- In South Sudan, all 15 women in the parliament of the Upper Nile were trained in leadership; the training is clearly linked to peace and security in view of the many conflicts among the population groups, and also considering the refugees returning from North Sudan.
- In India, the members of the National Dalit Watch network are trained in, among other things, more inclusion of the Dalits and casteless into the aid programmes and the development of local disaster preparedness plans;
- Partners in the health care sector in Ghana, Malawi, and Uganda receive assistance to integrate ICT (data management, electronic patient files, the use of mobile phones for communication, knowledge dissemination, and training).
- The Zambian Northwestern Beekeepers Association defends the interests of almost 10,000 beekeepers.
   Agri Business Forum assists this association in strengthening its capacity in the field of market information systems, (logistics) management, and service provision to the members.
- Fundraising among private persons and local companies is promoted among the partners. India is the

forerunner. The partners are encouraged and trained to take advantage of local sources of income. With a contribution from Cordaid, the Think Strategic institute from India published a document with examples of the successful strategies of 12 organisations.

• The partners become more sustainable as they gain access to funds from their own governments, and from bilateral and multilateral donors and international foundations. Through two regional seminars in Africa, we informed approximately 50 partners about locally available sources of funding from (inter)national entities, besides providing practical training in raising these funds.

#### 3.4. Knowledge development

In 2011, Cordaid started turning knowledge development into a separate working process. Knowledge teams were established in each programme and began to operate 1 April. The Cordaid Academy started in the second half of 2011, with the aim of improving knowledge management and learning. There have been workshops, discussions, and lectures surrounding capacity building, Results Based Financing, local fundraising, and other subjects, and we have started to systematise knowledge documents. Besides the learning agendas, around 10 studies and analyses related to directly applicable knowledge have been initiated; these are included within the programmes (Chapter 4.).

#### **Learning trajectories**

The *On Track with Gender Trajectory* is carried out by the Ministry of Foreign Affairs, knowledge institutions, and Oxfam Novib, Hivos, ICCO, and Cordaid. A first policy memorandum on gender mainstreaming was published in 2010, followed by a second note in 2011, based on case studies, that emphasised the following main comments and recommendations:

- the emphasis on mainstreaming is at risk of occurring to the detriment of stand-alone initiatives for the empowerment of women. This could be improved with a greater alignment and complementarity between mainstreaming and empowerment;
- the men have to be involved more, particularly to rethink and transform their traditional ideas of what manhood entails;
- gender equality is insufficiently embedded in government services and local authorities. There is thus a need for investments in their gender capacity and for strengthening the relationship between women's organisations and the government and other civil society organisations.

The Religion and Development Knowledge Centre is a cooperation alliance of Cordaid, ICCO, Oikos, the Seva Network Foundation, and the Islamic University of Rotterdam; it contains a digital database with (scientific) publications. In March, the Knowledge Centre officially presented the practice book *Religion and Development: Suggestions for Practice*. Cordaid contributed to this publication, which is a reflection of the knowledge, experience, and reflections gained during the last five years.

Cordaid participates in the *IS-Academy on Human Security in Fragile States*, a research trajectory that includes the Ministry of Foreign Affairs, Wageningen University, ICCO, Oxfam Novib, and the Dutch Red Cross, among others. The research encompasses both multi-annual promotion trajectories and short term studies. Notes are issued surrounding on-going research to encourage debates. One of the activities in 2011 was an exploratory study in human security in Haiti, which studied how (movements for) human rights, democratisation, and the improvement of the situation of women can be supported in the best possible way; the idea is that a stakeholder mapping will give the initial impetus for a coherent programme.

Cordaid participates in the learning programme *Dealing with Power Dynamics in Multi-Stakeholder Processes*. The research and learning revolves around the participation of weaker parties (particularly target group representatives), the position and role of NGO's in the North, and strategies to influence power dynamics within multi-stakeholder processes to benefit the weakest participants. The purpose is to build a broad-based learning community of stakeholders in the North and the South.

Another learning trajectory focuses on *Planning*, *Monitoring* & *Evaluation* (*PME*) *in complex situations*.

The players in this case are ten Dutch and Belgian development organisations, the Centre for Developmental Practice (CDRA), and Gender at Work. Traditional PME systems are not satisfactory in complex (conflict) transformation processes. Therefore, there is a need for new approaches in 'results measurement' that also encompass the procedural component of interventions.

#### Participatory Impact Assessment (PIA)

Cordaid has been working with CIDIN from Nijmegen since 2009, as well as with partners and research institutions in India, Ghana, and Peru, on a PIA methodology based on the use of control groups. This methodology was not practical enough for Cordaid because our programmes involve multiple levels and stakeholders, but it is useful for interventions with a direct focus on the communities. That is why in recent years the trajectory addressed training and guidance for the partners involved to use this impact measurement methodology.

#### **Knowing Emerging Powers**

In September 2011, together with development organisations Hivos and SNV, the Africa Study Centre in Leiden, and the Rotterdam School of Management (Erasmus), Cordaid was one of the initiators of Knowing Emerging Powers, a knowledge initiative concerning the role of emerging powers, mainly in Africa. The programme builds a bridge between practice and academic research, particularly centring on raw material extraction, agriculture (land grabbing), and health care. Discussions and knowledge development are stimulated and shared through an interactive platform (www.emergingpowers.org), as well as by organising lectures and participating in academic conferences.

#### **New Deal for Fragile States**

In Busan, the 4th High Level Forum on aid effectiveness was held at the end of November. For the first time civil society organisations were given a place in the negotiations; the final declaration emphasises their independent role and the value they add to development cooperation.

The conference yielded a *New Deal for Engagement in Fragile States*, the core premise of which is that the aid provided in fragile states should take into account security and state building, besides poverty reduction. Pilots are being carried out between 2012 and 2015 in several fragile states. The idea is to present *Peacebuilding and Statebuilding Goals* (PSG's) in September 2012. In view of its growing efforts for and in fragile states, it is of the utmost importance for Cordaid to contribute to, and invest in, the planned pilots by influencing policies and supporting the partners in their lobbying for peacebuilding. Extra capacity will be made available in the organisation for this purpose.

#### 3.5. Lobby and advocacy

The partners are increasingly involved in lobbying their own local and national governments and international entities. The international networks are important in this regard. In 2011, we recorded 91 lobbying initiatives, especially in the Conflict Transformation and Health & Wellbeing programmes (37 and 36 initiatives, respectively). By way of illustration:

- The *Initiative Congolaise pour la Justice et la Paix* (ICJP) advocates for human rights, peace, and justice in South Kivu. ICJP works in conjunction with eight local committees that monitor the security situation in their region and that transfer information to ICJP in support of regional and national lobbying; the committees themselves have their own lobbying activities as well.
- In a growing number of countries, the government is

- required to account for its responsibilities by means of annual campaigns for topics such as maternal and child care (the 'Moedernacht' campaign) and the elderly (Age Demands Action). The inclusion of minorities, such as the Dalits in emergency aid, persons with disabilities in social programmes, and vulnerable children, is at the heart of many interventions, particularly in Asian middle-income countries.
- The Centre for Social Concern in Malawi plays an important role in the national debate. Cordaid contributed to its monthly study on the cost of living. The results were shared with around 500 civil society organisations, grassroots groups, unions, media, and policymakers, using them for lobbying on the local and national levels to improve the position of small farmers and food production.

#### 3.6. Civil society engagement

Cordaid is working to ensure a greater involvement of broader segments of society in development cooperation and Cordaid itself. Around 400,000 donors have been informed about Cordaid's work through newsletters and e-mail messages; several topics were treated in depth during donor meetings. We received help from approximately 22,500 volunteers, mainly for *Vastenaktie*, the Lenten Campaign for fundraising. We reached almost 450,000 students with learning packages. Cordaid worked with dozens of parishes, service clubs, social institutions, and migrant organisations whose own contribution to project funding totalled € 2.1 million, i.e. twice the amount

of 2010. Around 300 Dutch initiatives and organisations were involved in the execution of projects in the South; more than 3,000 volunteers helped them in the fields of fundraising, information, publicity, and awareness-raising.

There is a growing number of partnerships with companies and institutions; in particular, Urban Matters is looking for Dutch companies and institutions that are willing to participate in its neighbourhood development programmes (water, housing, the youth, employment, and waste processing).

Citizens were informed through campaigns (*Moedernacht*, festivals, sponsor runs, and television productions) and opinion articles.

But there is also a darker side: the outflow of donors exceeded the inflow, we have not sufficiently reached the youth yet, we are still not proficient in the use of social media, and we have not yet been able to fully realise the intended focus on large public campaigns because a lot of time was invested in repositioning the different Cordaid funds.

#### 3.7. Multi-stakeholder processes/ Communities of Change

At the beginning of 2009 Cordaid introduced the concept of Communities of Change (CoC), which can be described as international coalitions that go beyond the lines dividing North and South, and that exist between implementation and policies, and between grassroots and lobby, in order to change power relations and realise impact. The first task

was clear: develop and test the concept together with the partners and stakeholders. It is important for Cordaid to play a variety of roles in a CoC: as a participant that shares responsibilities, as a patron of the CoC activities or partners, as a facilitator of meetings, as an initiator of linking & learning, as a knowledge broker, and as a stakeholder in (international) lobbying efforts.

Significant investments were made in policymaking, trainings, and workshops in 2010-2011; the CoC criteria surfaced and potential CoC's were described. In conjunction with the Centre for Development Innovation of Wageningen University, 120 Cordaid employees were trained in CoC theory and methodology, and in the corresponding practical competences required. This led to an extensive document (*On the road to CoC - work in progress*) that contains a collection of new views and practical lessons.

Even though the concept has not yet been fully developed from a theoretical perspective, the emphasis now is on doing and learning as the most appropriate path to further development. An important milestone was when two cases were discussed (slum development in Kisumu, Kenya and 'women and violence' in Colombia), using analyses of the Centre for Developmental Practice and Gender at Work, respectively.

The overall conclusion is that the CoC approach, even under development, deserves a positive assessment. Both studies showed that the approach unites different parties and that the process component (participation in a joint change process, a dialogue between representatives of different sectors, and a variety of angles and perspectives) is as important as the tangible results. The partners and

other stakeholders pointed out that their relationship with Cordaid has become stronger and that they appreciate Cordaid's new role. The researchers also underscored the need for new competences: dealing with different interests and agendas; negotiating and convincing; and managing tensions between facilitation and control, between political processes and community interests, and between short term results and longer term empowerment processes.



4

# The programmes

Cordaid differentiates the following programmes:

- Conflict Transformation in 17 fragile areas/ countries (with supporting contributions from the Disaster Risk Reduction (DRR), Health & Well-being, and Entrepreneurship programmes);
- Disaster Risk Reduction in 10 focus countries, and Emergency Aid in disaster situations;
- Health & Well-being in eight so-called MDG and Transition Countries;
- Entrepreneurship (small producers and financial services/ microfinancing) in 10 MDG and Transition Countries;
- Urban Matters (slum improvement) in three cities in three countries;
- The Programme in the Netherlands with support for private initiatives, poverty eradication in the Netherlands, the Vastenaktie Lenten Campaign for fundraising, and activities surrounding immigration.

Focus topics have been identified in all programmes as the cornerstones of the programmes and the basis for the development of business units.

#### 4.1. Conflict Transformation

#### Introduction

Conflict Transformation aims at transforming situations of insecurity and violence into ones of safety and lasting peace. Civil society is an absolutely indispensable player in this effort. Local communities have to play an active role in peace and security efforts, and women and youth should be recognised as *agents of change*. With links between the local and (inter)national levels, the interventions become more powerful by means of lobbying efforts and the mobilisation of international entities and networks.

During the presentation of the *World Development Report* in the Netherlands, Cordaid's work was mentioned as being innovating and relevant. The way in which we use health care (Burundi, DR Congo, Central African Republic) and agriculture (Afghanistan), not only with a view to providing services, but also to strengthening empowerment and local governance, was an eye-opener for many. The World Bank report was an encouraging confirmation for Cordaid of the course taken towards an inclusive and responsive conceptualisation of conflict and fragility.

Four focus topics have been identified within the programme:

*Grassroots security* by means of local peacebuilding, protective measures, and resilient communities; this goes hand in hand with active citizenship, defending human rights, information and awareness raising during elections, and local governance.

The *position of women* is strengthened through empowerment and political participation. UN Resolution 1325,

namely regarding the engagement of women in peace and reconciliation trajectories, occupies a central position. In this area, Cordaid works as part of international (women's) networks and with local women's organisations.

Natural resources such as petroleum, uranium, etc., and also land and water, are growing sources of conflict. An ecologically and socially responsible extraction and a fair distribution of land and water must be the pillars of the programmes.

For civil society to be an effective watchdog and *counter-vailing power* it needs to be given, or, if necessary, take the necessary space; this requires actions, especially in the international sphere, related to the effects of counterter-rorism measures.

It is not possible to create security and to work towards peace in a vacuum. Concrete improvements in *basic health care* (including trauma care), joint *economic activities*, and strengthening the collective *resilience to disasters and conflicts* enhance social cohesion and allow one to build bridges across religious or ethnic dividing lines.

The programme was active in 17 countries/ conflict areas: in Africa: DR Congo, Burundi, Nigeria, Central African Republic, Sierra Leone, Zimbabwe, South Sudan, Ethiopia, and Kenya;

in Asia: Afghanistan, Sri Lanka, Northeast India, Palestinian Territories/Israel, and the Philippines;

in South America: Colombia, Guatemala, and Haiti.

- The programme was active in 17 countries\* and with 292 partners
- The total amount committed was € 43.8 million (DRR € 0.8 million, H&W € 25.2 million, and Entrepreneurship € 1.2 million)
- 221 contributions assigned for partners/ projects
- Reaching 9.4 million people (DRR 50,000 and health care 9 million)
- \* an overview of the concentration countries by programme and the amounts committed can be found in the appendices

#### Cooperation

There are complementary efforts with *Mensen met een Missie* (MM) in Guatemala, Colombia, Indonesia, South Sudan, the DR Congo, and Burundi, where MM works through faith-based grassroots organisations, while Cordaid focuses on the broader community of civil society organisations, governments, and companies.

With *Impunity Watch* (IW) complementarity mainly exists from a thematic perspective. In Burundi and Guatemala, IW works around impunity, offering a legal context to Cordaid for its activities surrounding promotion, training, and lobbying/ advocacy.

We work with *IKV/ Pax Christi* in Colombia and South Sudan. The organisation has expertise in compensation arrangements for land and human rights violations as a result of extractive activities, which is complementary to Cordaid's work. It also has expertise in the fields of risk analyses, standard setting, and policymaking for the benefit of companies in the fields of security and human rights.

We work with the Global Partnership for the Prevention of Armed Conflict (GPPAC) in The Hague for policy and operational efforts, with the objective of preventing the negative effects of counterterrorism measures on civil society. With regards to financial transparency in mining, Cordaid is a prominent member of the global networks, Publish What You Pay (PWYP) and the Extractive Industries Transparency Initiative (EITI), which is the only network in which national governments, companies, and NGO's advocate together for public dissemination of the revenues from the extractive industries.

#### **Lessons** learned

Based on the experiences of our partners mainly, it is clear that considerable conflict mediation is applied in fragile settings with varying degrees of success. Differentiation is important; for example, neutral mediation in peace negotiations is subject to completely different rules than those that apply to solving mutual disputes within a community. Both the partners and experts realise that the parties in a conflict sometimes switch from one mediator to the next with no satisfactory solutions being found for the conflict. Moreover, most of these mediators almost never have any competence for arbitration and they lack moral authority to enforce binding solutions. Experience is forcing Cordaid to be more reserved in the use of mediation.

A responsible extractive industry demands links between the local and international levels. The communities should be informed well when advocating for their rights and interests. The (research) capacity of the local organisations has to be strengthened and the locally collected data have to support lobbying efforts in the North to insist that governments and companies honour their obligations. In the longer term, the industry has more to gain by informing and involving the population from the very beginning in the extractive activities. In this regard, Cordaid actively pursues a multi stakeholder approach.

Although the lack of future perspectives in fragile contexts contributes to outbursts of violence and conflict, too few

#### A precarious balance

In its work related to natural resources, Cordaid always seeks to play a balanced role. On the one hand, it is necessary to plainly denounce the detrimental consequences of petroleum extraction and mining for the local

communities, health, and the environment, while on the other, Cordaid believes it has an important role in bringing together the different parties involved (governments, local communities, interest groups, and petroleum and mining corporations). This last role is consistent with the Communities of Change methodology in which all parties together work on solutions. Particularly in the often polarised discussion surrounding petroleum and mining, it is not always easy to strike the perfect balance. Cordaid sides with the local communities for the benefit of sustainability, though it does not want to be disconnected from other stakeholders as a result.

investments are made in agriculture as the main source of income, food security, and employment. The farmers' organisations are too weak and they need support to improve the services they provide to their members and to exercise their influence through lobbying. Furthermore, several studies have shown that agricultural development is more effective if it is combined with female empowerment. To this end, Cordaid made an initial investment in 2011 in an organisation of female farmers in the DR Congo; this strategy will also be implemented in Sierra Leone.

#### Strategic financing

Of the amount spent (around € 43.8 million), € 9.9 million went to Afghanistan, € 9.5 million to the DR Congo, and € 7.7 million to Zimbabwe; further on we had (South) Sudan (€ 3.6 million), Sierra Leone (€ 2.4 million), Burundi (€ 2.4 million), and the Central African Republic (€ 2.0 million).

#### Afghanistan

In anticipation of international troops withdrawing in 2014, Cordaid's partners are increasingly concerned. Will civil war break out? Will all that has been generated in recent years be lost again? Although Cordaid is one of the smaller players, it does have something which many international organisations and governments lack: local partners who know Afghan society inside and out.

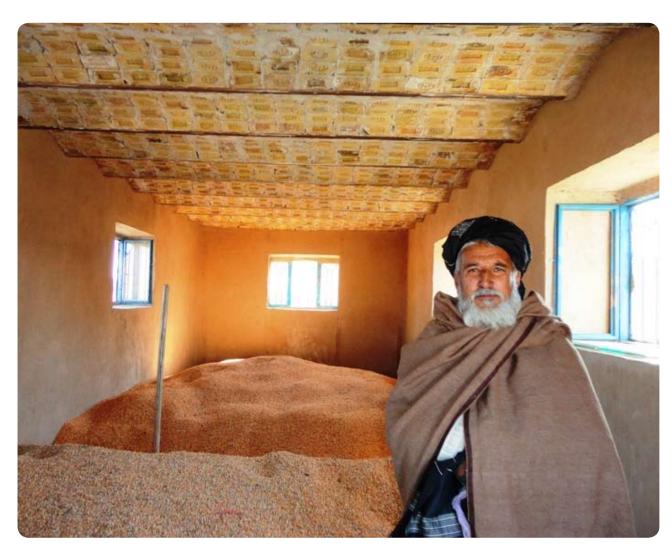
For the most part, Cordaid's contribution (€ 5.5 million) was spent on health care, mainly in Uruzgan. Thanks to an EU contribution, the health programme executed by AHDS (Afghan Health and Development Services) in Uruzgan was secured until May 2013. In the new phase also, the idea is to improve the access to and quality of health care for the

386,000 inhabitants, with special attention to women and girls, as well as displaced persons, persons with a disability, and prisoners. Parallel to this programme, AHDS carries out projects to combat malnutrition and to train nurses and midwives.

Cordaid coordinates the Dutch efforts surrounding Millennium Development Goal 5, which is to reduce maternal mortality, in conjunction with seven Dutch and three Afghan organisations. The Afghan Midwives Association is a capable partner that received support from Cordaid in 2011 during the process that resulted in adequate laws and regulations concerning education and practical training for nurses and midwives, and also support for the promotion of safe maternity by means of campaigns, the organisation of the Moedernacht campaign, and a congress for midwives.

The Norwegian Project Office/ Rural Rehabilitation Association for Afghanistan has been fully controlled by Afghan hands for many years. It advocates for rural communities to occupy a better social and economic position. With a contribution from Cordaid, six carpet weaving cooperatives (750 women) are being set up, with an estimated income increase of 33%.

Cordaid and the Serve Health, Relief and Development Organization have been successful in putting on the agenda of (inter)national bodies the forgotten group of displaced persons around Kabul. Until December 2011, the WHO financed medical care; Cordaid temporarily took over funding of the mobile medical teams serving 16,000 displaced persons.



Afghanistan: Shura leader in a grain warehouse. The Dutch Consortium Uruzgan wants to stimulate the economy in Uruzgan through agricultural development. In this way Cordaid and partner NPO/RRAA helps families provide for their own nutritional needs.

#### The International Afghanistan Conference, Bonn, 5 December 2011

The good news is that the international community has made the commitment to continue providing aid for the next 10 years, something Cordaid had been advocating for during many years. But still some questions remain: What will the international community do? There have been many accomplishments in health care and education, but security, the state of law, and good governance are lagging far behind. Corruption is a source of considerable insecurity and requires urgent actions.

Where were the Taliban? They were conspicuous by being absent and so a major breakthrough failed to materialise. It is worth mentioning that Cordaid was not happy per se about the Taliban's participation, because what will the future for women be like if the Taliban are sitting around the negotiation table?

Where was Pakistan? Pakistan boycotted the conference. Since the assumption is that Pakistan controls the Taliban, it should be brought on board in some way or other to take responsibility for stability in the region.

On 6 December, there were attacks on processions of the Shia Muslims (around 15% of the population) in which more than 50 people died. In Iraq and Pakistan there is a lot of violence between the Shiites and Sunnis, though this has not spilled over to Afghanistan yet. The attacks were therefore a complete and shocking surprise for many Afghans and practically everyone condemned the attacks, including the Taliban. The attacks are yet another threat to the peace process.

#### DR Congo

The government in the DR Congo is unable to offer security and basic services to its citizens. The integration of rebels into the army has not yet been completed and, because of the presence of the militia, insecurity continues to govern, e.g. in the provinces of North and South Kivu. The state of law practically does not function, and there is hardly any trust between the different ethnic population groups. In 2011, Cordaid made available more than € 9.5 million, affirming that the DR Congo is one of its focus countries. One of the central features of cooperating with the government is that Cordaid acts as an advisor and is involved in capacity building of government agencies. Cordaid has an

office in Bukavu in eastern Congo for monitoring and capacity building purposes.

Through a Dutch lottery, Cordaid was able to access resources to fight against sexual violence in the DR Congo. The contribution is meant for legal assistance, training for local paralegals and mediators, training for 2,400 people in monitoring human rights and conflict resolution, and an awareness raising campaign designed to make the citizenry, the legal sector, and the government realise the practice of impunity and the failing legal system that exist. Part of the campaign is carried out through mobile mini movie theatres to reach the more isolated regions.

Security was enhanced by setting up peace committees

charged with solving conflicts related to refugees and displaced persons and with monitoring the security situation. Security was also strengthened by training in citizenship with a view to the elections, assigning observers, protecting human rights advocates, and supporting critical radio stations.

Women were empowered by promoting female leadership and fighting against discriminatory traditions and laws. Cordaid contributed to health care by supporting diocesan health care structures and by promoting the *Results Based Financing* methodology. With its hospitals and clinics, the Roman Catholic Church provides health care to a large portion of the population. Cordaid assisted six dioceses which together manage 32 hospitals and more than 300 health care centres, including maternity clinics and training institutes, for the benefit of 5.5 million people.

#### South Sudan

On 9 July, the new country of South Sudan hoisted its flag. It faces countless problems: an underdeveloped political arena dominated by a single party, a shortage of staff, an extremely underdeveloped rural area, and conflicts related to land, cattle and oil wells. Civil society is weak, among other reasons because skilled people left for government jobs and jobs in international organisations, and also because the country still lacks collectively shared goals and a unifying vision.

In the coming years, Cordaid wants to be present in South Sudan with a relatively extensive programme, for which the first foundations were laid during the reporting year.

We supported several peacebuilding activities:

- Cordaid contributed to the creation of peace committees made up of young people, tribal chiefs, religious leaders, women, and pastoralists and to the organisation of the dialogue among the different ethnic groups and the returnees in two districts of West Bahr el Ghazal;
- With their moral authority and the support they enjoy, which stretches to the remotest areas, the Sudanese churches are an important player, and the government recognises them as such. In order to more sharply delineate their new role in peacebuilding, in September and October several symposia were held. Due in part to this, the government asked a delegation of the Sudanese Church Council to act as mediators in the inter-ethnic fights in Jonglei;
- The South Sudan Law Society wishes to improve the quality of access to legal assistance for women in Central Equatoria. To this end, 140 women, 50 local leaders, and 25 police officers and prison guards are presently being trained. The issue of violence against women is denounced and discussed on radio programmes;
- The largely illiterate population of South Sudan is poorly informed about the developments in the country; there is a small number of reasonably independent radio broadcasting stations, though their range is limited to the big cities. Cordaid supported four radio stations that mainly operate in rural areas; their joint audience is around 1.5 million people.

South Sudan has a tremendous shortage of health care personnel; estimates are that hardly 5% of all births are assisted by a skilled midwife or nurse. The Catholic Health Training Institute in Wau offers a three-year training programme. Cordaid covers the costs of 15 of the yearly 35 students. Once the institute has been fully rebuilt, the idea is to transfer management to the government.

Cordaid contributed to the health care programmes of the dioceses of Juba, Khartoum, and El Obeid. Their intervention area covers 100,000 people. More than 140 health care workers are being trained, 15,000 children receive special care, and there is also special care for women and mothers, displaced persons, and people with HIV/Aids. Economic reconstruction is still in its infancy. The war has

Economic reconstruction is still in its infancy. The war has done a lot of damage and the high unemployment rate is threatening stability. Investments in economic development are an important dimension of reconstruction, and this also comprises financial services. Finance Sudan has been a Cordaid partner for many years. At the end of July 2011, the institution had more than 4,000 clients and managed a portfolio of almost € 1 million. More or less 40% of its clients are women. Finance Sudan wants to reach rural clients, which will be possible with a Cordaid loan meant to serve an additional 2,000 clients.

#### Zimbabwe

Cordaid signed an agreement with the World Bank and the Zimbabwean government in September 2011 for implementing a health programme. With the available funds of USD 15 million, the health care institutions are paid for the results achieved, e.g. the number of prenatal controls, safe childbirths, and vaccinated children. The patients are inter-

viewed to check whether health care has truly improved. Cordaid was chosen as an independent party to manage the funds and monitor the results. In two years' time, Results Based Financing (RBF) will be introduced in more than 400 health care institutions, which together cover an intervention area of two million people. During the reporting year, the focus was initially on the baseline study, and on the recruitment of personnel, training, development of a M&E system, production of a RBF manual, and opening the executive office in Harare. The first 28 health care institutions were contracted at the beginning of July in two districts. The others will follow in April 2012. Refresher trainings for hundreds of nurses will ensure the necessary knowledge and skills in obstetrics. For technical matters, Cordaid works with specialised consultancy firms.

#### Capacity building

#### Afghanistan

The Afghan Women's Network has more than 80 member organisations and 3,000 individual members, with actions focusing on the political participation and rights of women. An assessment conducted in conjunction with Cordaid showed the priorities of further capacity building (accounting, financial planning, and the like); five organisations were selected for training.

Cordaid believes it is important to build the capacity of the Ministry of Public Health. Health care still depends to a large extent on foreign donors; Cordaid therefore seeks to attain a greater sustainability by promoting RBF and to lay the necessary foundations through capacity building. Within this framework, Cordaid financed the participation of five Afghan managers and doctors of partner organisa-

tions and the government in a training on health systems reform.

A civil society that wants to seriously take on its role as countervailing power requires objective information and reports based on research. Cordaid financed a project of the English Institute for War and Peace Reporting, which attends to the training of journalists, the production of 30 research reports, and the creation of public forums through two radio stations.

#### DR Congo

In a meeting with the Congolese Caritas organisations, Cordaid pointed out that its role as a strategic financier will become less important and that it is therefore seeking to ensure a strong positioning of its partners. Among other things, this gave rise to a request for Cordaid to support local fundraising; Cordaid thus organised a training programme with 30 participants.

In February, 24 representatives from eight partners took part in a three-day training course on financial management and administration, context analyses, and strategic planning. Individual agreements were made with the partners for a continuation. In October, the next series of training courses started, this time for seven partners.

#### The revision of hospital legislation in the DR Congo materialises

In the last 30 years, the government has significantly weakened its own hospitals by not offering any support, and at the same time forcing them to include large numbers of personnel on their payrolls. The hospital boards have no say in human resources and financial matters. Because the country is so large and because there are more than 500 hospitals, the central administration has never been adequate. With technical assistance from Cordaid and a consultant, several ideas have been

developed for a greater decentralisation. The hospitals are granted legal capacity and powers and can appoint their own personnel. Some elements have been laid down in a five year plan with financial and technical assistance from Cordaid. Meanwhile, this plan has also been accepted by other donors. The new design ties in well with Results Based Financing in health care advocated by Cordaid.

#### South Sudan

Cordaid supports a coalition of 160 civil society organisations that work in peacebuilding and democratisation. In July, the coalition organised a national convention with more than 250 attendants; the until then fragmented civil society formulated a shared vision on the future of the country. To further strengthen this coalition, Cordaid asked Justice Africa, a well-respected English NGO, for assistance.

Civil society organisations are important for monitoring mining and petroleum companies and for enhancing transparency of the contracts and payments. Together with Justice Africa, Cordaid is seeking to build a 'transparency coalition' of civil society organisations. At the end of 2011 and beginning of 2012, a series of consultations was held in this regard.

#### Knowledge development

#### Afghanistan

Cordaid has gained a lot of experience since 2002 in the field of Results Based Financing. Recently, the Afghan Ministry of Public Health mentioned it is interested in this methodology. At the beginning of 2011, we organised a mission to explore the possibilities. We also examined the extent to which

RBF, in which monitoring and verification by the users of the services delivered is a core element, can be applied in areas that are not safe. A pilot will start in 2012.

Despite the conflicts and insecurity, Cordaid and AHDS have been able to provide health care in practically the entire province of Uruzgan. In order to gain a better understanding of the relationship between health care and conflict transformation, together with the Afghan think tank, Cooperation for Peace and Unity, Cordaid is studying the situation in Uruzgan. The study is expected to generate recommendations aimed at strengthening the relationship between health care and conflict transformation.



South Sudan: In a referendum in July 2011, this country was declared independent with enormous popular support. The name of this stationary store reflects the owner's sentiment on the eve of the referendum.

#### South Sudan

Through the World Bank, Cordaid has gained access to a survey instrument based on mobile phone use. A representative group of inhabitants is given mobile phones with credit. Every two months, they receive a phone call to answer questions about health care and the security situation. The instrument also offers possibilities for providing information or making cash transfers. In 2012 we will evaluate the pilot as the basis for a decision on possible extension of the initiative.

In the state of the Upper Nile, millions of litres of petroleum have been extracted and exported since 1981. Nonethe-

less, this has not led to development; the dissatisfaction among the local communities has recently become clear in strikes and roadblocks. A study will be the basis for the local communities, the government, and the oil companies to have a deeper understanding of the effects of petroleum extraction and to embark upon a dialogue and consultation process. The diocese of Malakal is responsible for the study because it enjoys the people's confidence and because it has mediated in conflicts in the last years. In order to map the possibilities for introducing RBF in health care, Cordaid has conducted an extensive study in Upper Nile, closely examining 22 out of the 41 health care

institutions and interviewing health care workers and households. The results are clear: there is an enormous shortage of trained personnel, hardly 50% of the health care posts have equipment for childbirth and vaccinations, and the provision of medication is far from sufficient. There are discussions about an RBF pilot in Upper Nile, in which Cordaid might have a role to play.

# Cordaid and Justitia et Pax (J&P) work together in the UN Human Rights Council

At the beginning of 2011, together with the International Work Group for Indigenous Affairs (IWGIA), VSF (Vétérinaires Sans Frontières) Belgium, Cordaid, and organisations of pastoralists, J&P drafted a series of reports about human rights violations against pastoralists in Tanzania and Uganda. The reports were submitted to the Human Rights Council in Geneva within the framework of the *Universal Periodic Review* that tests human rights every four years. In October, it was Tanzania's and Uganda's turn for the first time. Delegations of pastoralists attended the meeting to defend their interests among states and UN rapporteurs. Several countries, including the Netherlands, issued recommendations to improve the situation of pastoralists and fight against human rights violations. Representatives of the Tanzanian and Ugandan governments promised to consider the recommendations. In 2012 the Human Rights Council will issue its decision.

#### DR Congo

On the island of Idjwi in Lake Kivu, Cordaid has linked the RBF method to a personal reward system for pregnant women through a pilot experiment. When women attend their prenatal controls, give birth in a health care centre, or inquire about family planning, they receive some money. An analysis will be made to find out the cost-effectiveness of this approach and whether it should be applied more extensively.

Cordaid started with RBF in South Kivu in 2006. Several aspects have been measured to determine the impact of this programme. The most important result is that 32 out of the 35 indicators display a positive evolution in the zones where RBF is used; in the zones without RBF, positive trends were observed in 25 out of the 32 indicators. One important difference was seen in the per capita costs, namely USD 5.90 in non-RBF zones compared to USD 2.01 in, for example, the district of Katana. The outcomes were discussed in a workshop in which the World Bank took part, underlining its interest in a greater involvement in the introduction of RBF in the DR Congo (together with the EU, Global Fund, and USAID, among others).

The provision of medication in South Kivu is far from adequate. Public and private health care are unable to furnish sufficient quality medication at a reasonable price. Based on a study about the medication market, a new system will be proposed (e.g. a commercial public private partnership or a franchise model).

#### Extractives

Together with other CIDSE organisations, Cordaid mapped the legal strategies that the local population can use in the report titled *Legal strategies dealing with negative consequences of extractive projects in Latin America* (June 2011; also published in Spanish). One of the attachments to the publication is a compendium with relevant legal texts and case law. It is clear from the report that collective legal actions against companies and governments are effective. The report also points out that relatively little attention is paid to indigenous peoples' right to participate in planning and preparing Environmental Impact Assessments. The report was shared with CIDSE organisations and their partners and it was made available on the website of OCMAL, a network of Latin American organisations involved in extractive industries and conflict.

#### Lobbying and advocacy

#### Afghanistan

At the end of January and again in mid-December, Cordaid's Executive Director, René Grotenhuis, was heard in the Lower Chamber about the police mission planned for Kunduz and the Uruzgan mission, respectively. For Cordaid, this is equal to recognition of its and its Afghan partners' work. To date, Cordaid has been invited to four hearings about Afghanistan.

## Cordaid's vision of the Uruzgan mission (Lower Chamber Hearing, December)

The Dutch mission's contribution has to be considered mainly in terms of creating a safer environment so that others could do their job. From Cordaid's point of view, the very detailed political interference from The Hague was meant to ensure cooperation between development organisations and the ISAF mission, which bore witness to the limited understanding within Uruzgan's reality of the NGOs' position relative to the mission. Still, Cordaid admitted to the importance of the 3D concept, and even made efforts to build alignment and cooperation. The NGO's can work with the intervention force provided this is no problem for the local population. Because of the independent position of Cordaid and its partners, it has also been possible to work outside the 'ink blot' during the mission. Now that the mission has concluded, there is no problem at all in staying in Uruzgan.

## Cordaid's vision of the Kunduz mission (Lower Chamber Hearing, January)

It became known in 2010 that the ISAF mission would end in 2014. Cordaid's partners expect a drawn-out and heated conflict and even more insecurity thereafter. There are two possible paths into the future: a far-reaching militarisation or a political compromise. The international community has chosen the path of militarisation, with the police operating as a paramilitary force to control the Taliban and other opposition groups. This means that little space will be left to resolve disputes related to land and water, to protect women against domestic violence, or to address drug-related crime. In Cordaid's vision, a police mission makes sense only within the framework of a political solution. Minister Rosenthal has promised the Chamber that concrete measures will be taken to this end, and Cordaid will be reminding the minister of this pledge.

#### DR Congo

In the months leading up to the November elections, the government silenced any type of opposition. Lawyers, journalists, and activists received death threats. In a letter to the Dutch Minister of Foreign Affairs, together with others including Justitia & Pax, IKV Pax Christi, and Mensen met een Missie, Cordaid drew attention to this situation, particularly demanding the protection of the Dutch embassy for five human rights activists who had received death threats.

#### Civil society under fire

African activists and organisations that advocate for a transparent governance and good leadership have been taking the brunt. Paul Okumu, Cordaid partner and coordinator of the Africa CSO Platform on Principled Partnership, warns that "the attack against civil society is becoming more brutal and dangerous every day. These attacks are not only launched by national governments, but also by regional and international governments."

In July in Malawi, 19 citizen activists were murdered, and at a congress of civil society organisations in Angola in August, three influential civil society leaders were arrested and taken away. Okumu was informed of similar events in Rwanda, Ethiopia, Cameroon, Sudan, Zimbabwe, Swaziland, and other African countries. He is launching an urgent call for solidarity to all civil society organisations in the North and the South.

#### Northeast India

Hidden from the eyes of the world, a drama has been unfolding for 50 years now in Northeast India. Civilians in the state of Manipur are suffering from terror of both the rebels and the army and police. Cordaid has been active here for many years. Together with its partners, it is working for the benefit of the communities affected by violence, ethnic tensions, government corruption, and poverty. And together with regional and international networks, Cordaid is exercising pressure on policymakers in the EU and is working with UN agencies to put the topic of Northeast India on the agenda. The situation can only get better if the world knows what is going on. This is precisely the idea behind the publication entitled *De stok*, *de kogel en de* blote vuist ('The stick, the bullet, and the bare fist'), which recounts the life stories of women who call themselves the qun widows. Their husbands were executed extrajudicially by the army or the police, or were tortured to death by the rebels. It is a joint publication of Cordaid and four organisations from Manipur. Cordaid and its Indian partners plan to use the publication for lobbying efforts in India, the Netherlands, and in international forums. In September 2012, the testimonies will be handed over to the UN Special Rapporteur on Extrajudicial Executions and Violence Against Women.

#### Counterterrorism and civil society

In militarised regions worldwide, Cordaid works with civil society activists and development workers whose political rights and freedoms are increasingly violated due to security reasons and counterterrorism measures. The organisations and persons who advocate for democratisation, or

denounce government corruption and international mining companies, are being muzzled. Their accounts are blocked and they disappear behind bars or underground.

For years now, Cordaid has been studying the impact of international security policy in the political and operational space of civil society organisations. In 2008, Friend not Foe: Civil Society and the Struggle against Violent Extremism was published, followed by Countering the Politics of Fear in 2010, with accounts and analyses of civil society activists in 11 countries. In 2011, Friend not Foe: Opening Spaces for Civil Society Engagement to Prevent Violent Extremism updated and expanded on the study from 2008. All these studies reached the conclusion that counterterrorism and military security strategies do not counteract, but rather encourage, violent extremism unless civil society movements, peace workers, and human rights and development organisations are actively and prominently involved in establishing and organising peace and security building processes.

# **Cordaid joins the UN Security Council**

For the first time, the UN Security Council, as the supreme body that monitors compliance with the Global Counter-Terrorism Strategy, invited civil society organisations for a consultation on counterterrorism. Cordaid was one of the three organisations invited to join the Counter-Terrorism Committee of the UN Security Council at the end of September. This marked a historical moment. Cordaid's presentation in New York addressed the effects of counterterrorism measures on the situation and work of human rights advocates and development workers, based on studies conducted together with experts and partner organisations. It is one of the next steps towards the ultimate goal: a platform that involves civil society organisations in the UN counterterrorism policy, and which at the same time offers opportunities to check the counterterrorism measures against human rights standards and other humanitarian directives.

# Multi-stakeholder processes/ Communities of Change

Ten years ago, the UN adopted Resolution 1325 on Women, Peace & Security. Since then, 25 member states have developed plans to improve the situation of women during and after a conflict, which they have laid down in National Action Plans (NAP). However, implementing these NAP's is a problem because of the lack of cooperation and the shortage of financial resources, as was clear from a study conducted in 2009 commissioned by Cordaid and the Global Network of Women Peacebuilders (*Costing and financing 1325...*). A subsequent

study conducted in August 2011 concluded that good initiatives do not come to fruition either if there is a lack of coordination and synergy.

In October 2011, Cordaid partners from Afghanistan, Burundi, the DR Congo, Sudan, and Colombia met in New York to continue building a network for Women Leadership and Political Participation in Processes of Peace and Security, which is aimed at enhancing women's participation in peace negotiations, truth commissions, local governments, and the law enforcement and justice sector. During a workshop, participants mapped the main challenges. The participation of women in peace processes is too often seen as a women's affair and not as a matter of peace and security. The ministers of security and defence, for example, do not yet sufficiently recognise the importance of female participation in these processes; hence, the most important task is to make these key stakeholders realise the urgency of enhancing women's participation and leadership.

# The NAP in Burundi

The main recommendation has effectively been taken up in Burundi. The country is working on a funding modality in which the contributions from the different participants (government, UN, donor countries, and NGO's) to the NAP are aligned, with the objective of using the available resources as efficiently as possible.

# The NAP in the DR Congo

The NAP, approved in 2010, includes plans to improve the position of women. An assessment of the state of affairs was made in 2011. Cordaid's Congolese partners travelled to 10 provinces, focusing on the number of women in senior government positions and their participation in the Armed Forces, the police, and the judiciary branch. The data were analysed and discussed during a workshop in Kinshasa, which the Prime Minister's gender advisor and a representative of the Minister of Gender attended. The results were pathetic. The number of women in the Congolese government has gone down compared to 2010, and the picture is no different regarding the participation of women in the army and on the police force. This outcome provides sufficient input to lobby the Parliament of Congo regarding enactment of a law to improve the position of women. The collected information is also forwarded to the UN as part of, among other things, the Global Monitoring Report UNSCR 1325.

# 4.2. Disaster Risk Reduction and Emergency Aid

# A. Disaster Risk Reduction

#### Introduction

One of the core programmes in the 2011-2015 period was (Community Managed) Disaster Risk Reduction, or simply (CM)DRR. DRR aims at reducing the risk of natural disasters and enhancing the resilience of the population, by means of warning systems, disaster drills, drought-resistant crops and cattle, the construction of cyclone shelters, the implementation of water reservoirs and dams, and income diversification. In 2009, a group of international experts made a very positive assessment of Cordaid's approach and results. Current policy and practice cover points for improvement, such as sustainability of the projects, involvement of the local communities in decision making, and the integration of DRR into other (Cordaid) programmes.

The DRR programme was active in 10 countries:

In Africa: Ethiopia, Kenya, Malawi, Uganda, and Zambia; In Asia: Bangladesh, India, Indonesia, and the Philippines (through PfR, Partners for Resilience);

In South America: El Salvador, Honduras, and Guatemala (through PfR).

Activities were also carried out within the Conflict Transformation programme in the fragile countries of Guatemala, Haiti, and South Sudan.

# Cooperation

Cordaid participates in *Partners for Resilience*, an MFS alliance with the Dutch Red Cross (lead institution), the Red Cross Climate Centre, CARE Nederland, and Wetlands International. The focus is on a combination of DRR, climate change adaptation, and ecosystem recovery and management. Cordaid is engaged in implementation in Uganda, Kenya, Ethiopia, India, Indonesia, Guatemala, and the Philippines.

Cordaid works together with extensive networks, such as GNDR (Global CSO Network on Disaster Reduction) and the European Voice DRR Working Group, to insist on the importance of DRR with (inter)national stakeholders, including the EU, the UN, and the World Bank.

With regard to climate change and adaptation, Cordaid is part of the CIDSE Poverty & Climate Justice Group, which lobbies for good climate policies and financing climate adaptation measures in developing countries.

Cordaid is a co-founder of the Coalition of European Lobbies on Eastern African Pastoralism (CELEP), which brings together 18 European organisations that are active in the field of pastoralism in eastern Africa.

#### Lessons learned

Recent emergency aid projects have shown that Cordaid has to further develop its internal decision making process and preparedness in order to respond more quickly, while the partners have to be strengthened in the preparedness & response field.

The coherence between DRR and Emergency Aid is favourable for responding adequately and must take shape

- The programme was active in 10 countries and with 52 partners
- The total amount committed was € 7.9 million in 2011 (outside fragile states)
- 174 contributions were assigned for partners and projects (including Emergency Aid partners)
- Reaching 900,000 people

within the cycle of disaster – emergency aid – rehabilitation – reconstruction – risk reduction preparedness; the experiences gained in the Horn of Africa - with rapid switching from emergency aid to enhancing resilience - are useful in this regard.

There is growing international interest for DRR. Still, there are only a few concrete experiences and lessons learned that can serve as evidence to actually highlight the value of DRR. It is therefore important for Cordaid to document and share its lessons learned and its practical experiences. To this end, a study was begun in the Horn of Africa at the end of 2011 in conjunction with the Centre for Development Innovation of Wageningen University.

# Strategic financing

The goal of improving a community's resilience encompasses risk assessments and the corresponding assessments of capacities, awareness raising and training of the population in DRR, drafting disaster plans, setting up local DRR committees, implementing projects (warning systems, rainwater collection, reforestation, terrace building, dyke building, emergency shelters, etc.), ensuring alignment with the (local) government, lobbying for concrete government aid, and building networks for the exchange of knowl-

edge and joint political advocacy. In 2011, Cordaid contributed to improving the resilience of more than 650 communities with around 900,000 inhabitants.

#### Zambia

Between 1991 and 2008, Zambia was afflicted by four major droughts and two floods; each disaster affected at least one million people. The Keepers Zambia Foundation (KZF) targets the poorest and most disaster-prone provinces. The project target group covers 13 communities with 9,000 inhabitants. Government agencies and ministries are also involved in the project. The activities consist of training, drafting disaster plans, implementing projects (forestation, winter agriculture, deepening riverbeds, and improved drainage of irrigation channels), building the capacities of the relevant government agencies, enhancing cooperation between the government, KZF and the population, and lobbying the government to set up a meteorological unit.

#### Uganda

Following a 20-year struggle between the Ugandan government and the Lord's Resistance Army, negotiations gave rise to relative peace in northern Uganda. Most displaced people returned and the reconstruction process began. With support from Cordaid, TPO Uganda carried out a trauma care programme. An evaluation highlighted the need for improving the livelihoods of 8,000 vulnerable households and for preparing and carrying out DRR plans for the benefit of 16 communities.

#### India

The area in Tamil Nadu where the Rural Uplift Centre (RUC) works has been affected by drought for 10 years now. Twenty percent of the population has moved in recent years, particularly to Mumbai. The project target area comprises 12 communities. Twenty leaders are trained in DRR and a disaster committee is being set up in each community. The villagers now know what to do before, during, and after a period of drought. In every community, a working group has been set up and trained in food security, drinking water, aid distribution, and income improvement. Moreover, the population is lobbying for its rights in accordance with the *National Disaster Management Act 2005*, such as safe drinking water provision, the dredging of rivers and ditches, and relief goods in case a disaster strikes.

# Bangladesh

Disasters and climate change do not stop at national borders. Heavy rainfall or the construction of damns in the Himalayas can have a major impact further downstream. Cordaid works on disaster prevention together with Concern Universal Bangladesh. The project has a broad scope in terms of content and geographical reach. Thus, 77 civil society organisations in Bangladesh (50), India (10), Nepal (5), Bhutan (5), and China (5) are trained in DRR and climate change adaptation; in turn, they train and provide extension services to 45,000 villagers. Measures are taken, such as equipping rescue teams and implementing evacuation systems and water and sanitation facilities, which can also be used during periods of flood. The government's Disaster Management Committees are trained and involved

in the DRR approach. The 77 organisations lobby on the national level for better cooperation and for access to government resources. The (partner) networks in the five countries will also lobby together for a cross-country approach.

# Capacity building

### India

In India, most often the poorest of the poor, the Dalits and tribal people, are hit the hardest by droughts or floods because they live in disaster-prone areas and are often excluded from emergency aid provision. Following the 2008 floods in Bihar, Dalit Watch Bihar investigated several cases of exclusion and discrimination and used the results for lobbying purposes. The government then took a series of measures, albeit limited ones, to improve the situation. In 2009, National Dalit Watch (NDW) was set up to extend the method used in Bihar to the national level. NDW has meanwhile issued several monitoring reports and has organised consultations and workshops; the organisation is now working with the Indian government, UNDP, ECHO, and (I)NGO's on the prevention of exclusion and discrimination in emergency aid programmes. The aim of the current project is to strengthen the members of the NDW network (Karnataka, Andhra Pradesh, Assam, and Orissa) with regards to disaster prevention, inclusion into aid programmes, and the development of local disaster plans. Concurrently, there are lobbying efforts with the government, UNDP, and EU/ECHO for integrating DRR into their emergency aid programmes.

# Knowledge development

#### Horn of Africa

With the objective of having a better understanding of the effects of its DRR programme in the last eight years, at the end of 2011 Cordaid started conducting a study in Kenya and Ethiopia which is being executed by the Centre for Development Innovation of Wageningen University; two researchers from Kenya and Ethiopia are part of the team. Five partners are also involved in the research, and the outcomes are discussed with all relevant stakeholders. Cordaid uses the research report to make possible adjustments of a political and strategic nature and for lobbying and advocacy toward donors and governments. There are plans to publish a scientific article about the research.

#### El Salvador

El Salvador is the victim of large scale deforestation and erosion; the (chemical) pollution of the water and soil by agricultural poisoning and waste discharges is extreme. The project refers to the introduction and testing of a method to decontaminate the soil and groundwater by using microorganisms. The peasant households have made test fields available for this purpose. The results are presented and shared in a regional forum, and the process is documented with a video and pictures.

# Lobby and advocacy

Cordaid takes advantage of each opportunity to bring its DRR method to the attention of national and international policymakers as an adequate response to impending disaster situations and climate change. At present, the organisation has a collection of studies, evaluations, and learning documents.

Cordaid is the only Dutch NGO to have organised a workshop during the World Bank CSO Forum in September 2011,

# **Experiences with Disaster Risk Reduction in the Horn of Africa**

With financial assistance from ECHO, in mid-2011 Cordaid and the IIRR (International Institute of Rural Reconstruction) released a publication about the experiences of partners in Ethiopia, Kenya, and Uganda in their struggle against drought, floods, and conflicts. The book bundles 15 successful projects of/for a target group of around 60,000 people, with the primary purpose of sharing these experiences with other communities and organisations that might use them as a source of inspiration. The results of the DRR approach have also convinced governments (and, in the past, donor agencies such as ECHO): the Kenyan government has adopted it as a strategy for arid and semi-arid districts; in northern Uganda, the District Disaster Management Committees have adjusted their course; in Ethiopia, Dire Dawa's city council has replicated the flood-control project in other communities.

Among other things, the measures encompass the restoration of communal pastureland by removing 'hostile' vegetation, planting new grass, installing fencing, and having adequate management; the use of reforestation and terracing; the introduction of camels (who can live three weeks without water, live on shrubs and weeds, and can transport 60 litres of drinking water over large distances); the use of so-called biosand filters to purge contaminated surface water; rainwater collection on roofs with zinc roofing and storage tanks; sports activities to overcome tribal disagreements; or roads so that previously isolated communities can receive help faster from the authorities (police and army) in the event of (imminent) conflict.

During the World Bank's spring meeting, the publication was in great demand among the attendants. Cordaid makes the publication available within its networks and presents it during workshops and conferences.

with the aim of further explaining the contribution of local communities in DRR. The workshop provided a space for Cordaid's partners from Ethiopia, Bangladesh, Indonesia, and Honduras to share their experiences. Cordaid made recommendations as to how the World Bank can work with local governments and NGO's to engage the communities in disaster prevention and mitigation. Cooperation with local communities in disaster prevention has meanwhile become one of the World Bank's spearheads.

# Field visit of a member of the European Parliament

Cordaid invited European Parliament member Thijs
Berman for a visit to the drought-stricken north-west of
Kenya. Mr. Berman paid for the trip himself. Cordaid
trusted that Berman's findings would be heard in
Brussels, which effectively happened. On 13 July, the
Development Cooperation Commission voted on an
initiative report: EU policy framework to assist developing countries in addressing food security challenges.
In this regard, Mr. Berman had submitted an amendment
that was adopted: 6a. (new) Calls on the Commission to
take into account the role of arid and semi-arid land
(ASAL), with a special focus on livestock since the largest
supply of meat for the more urbanised areas is provided
by the ASAL regions.

The third UN Global Platform for DRR took place in Geneva from 9 to 13 May. Cordaid was there with the Partners for Resilience alliance, which organised a well-attended side event. Moreover, one of the documents which Cordaid published together with ECHO about *best practices in drought cycle management* was distributed. Partners for Resilience also co-hosted a learning meeting in which Cordaid's DRR advisor was one of the speakers.

In Ethiopia, *Disaster Risk Reduction Day* (12 October) was a major event. Cordaid was also there sharing its knowledge and experiences. The Ethiopian Ministry of Agriculture and the World Bank were also present. In the Horn of Africa, DRR mainly revolves around cyclically recurrent droughts. The key questions are thus: how can a period of drought be identified in time, what measures should be taken, what to do when disaster strikes, and how can the community be rebuilt if cattle have died and in the meantime the men have left to look for another job?

#### Results

- The realised water storage facilities ensured extra water during three months in five Kenyan districts for 66,000 people and 70,000 cattle. The stream of immigrants from Ethiopia and northern Kenya in the district of Isiolo led to tensions, but thanks to the peace plans drafted previously, there were no conflicts related to water sources and pastureland.
- Thanks to its own efforts and with hardly any external assistance, the community of Hodod Samaro in Ethiopia acquired 1,600 ha of extra pastureland, which is sufficient to keep 6,500 cattle alive for two months.

- In Mandera West in Kenya, three underground rainwater storage tanks yielded very good results: with a joint capacity of almost 2.5 million litres, 10,000 people had access to safe drinking water during the drought. While the distance to the water sources used to be 30 km, now it is only 2 km.
- In the rainy season, the district of Karonga in Malawi was hit by floods. Thanks to the DRR programme of partner Cadecom supported by Cordaid, many households were adequately prepared for this disaster: the villagers fled on time to the shelters on higher ground and there were fewer mudslides thanks to the trees planted along the rivers. The project also contributed to strengthening the organisational capacities and communication within the communities. Among other things, the local DRR committees carried out projects for food security.
- INSIST (Indonesian Society for Social Transformation) held a workshop about DRR at the end of October for government officers, communities, and NGO's. The positive reactions, and particularly the intent to implement DRR in five new districts, are evidence of INSIST's successful lobbying. The workshop resulted in the desire of creating a DRR platform to exchange knowledge and facilitate communication. Therefore, INSIST provided an online platform on its website for documentation and exchange, and in particular for NGO's, local governments, and communities to establish cooperation alliances.

# A Tale of Two Rivers

This is the title of a publication by our partner Kalvi Kendra (India) about the fight of 10 poor villages against regular flooding of the area inhabited by the villagers. In 2007, together Kalvi Kendra and Cordaid started working on disaster prevention. Women took the lead naturally, mapping the risks, lobbying the local government, and paying particular attention to vulnerable widows, the elderly, and the Dalits.

The (intermediate) results achieved by these well-aware villages are worth mentioning:

- 300 stone houses have replaced the mud shelters; roads, culverts, bridges, and dam walls are regulating water (for which the government provided € 62,800 as a result of the lobbying efforts);
- there are first-aid kits, rescue teams, life rafts, and five rescue shelters; 500 women and children have learned to swim; the population can be alerted to imminent flooding in time with loudspeakers;

- where appropriate, there is a switch to more water resistant varieties of rice, sugar cane, or cassava;
   10,000 trees have been planted; the water pumps have been placed on platforms in order to avoid contamination;
- (harvest) insurance has been taken out for 5,700 villagers;
- 600 members of self-help groups have been trained in productive activities; 136 groups saved € 160,000 in three years' time and borrowed € 320,000 through short term loans; 23 groups were benefited with a revolving fund of € 20,000 granted by the government; and 29 groups were granted bank loans for an amount of € 109,000.

The publication also convincingly underscores the complementarity of Cordaid's programmes, Disaster Risk Reduction, Micro credit, and Well-being (social protection).

# B. Emergency Aid

#### Introduction

Cordaid provides emergency aid in areas struck by natural and man-made disasters or conflict. The interventions focus on basic needs (shelter, water and sanitation, health care, and livelihoods) with special attention paid to women and vulnerable groups. Cordaid helps through its partner organisations and international networks, such as Caritas Internationalis, or with self-managed projects if the local capacity is not sufficient or temporarily insufficient.

In the reporting year, emergency preparedness was considered as well, next to acute humanitarian aid; this started in Haiti, South Sudan, and Indonesia.

In 2011 we also continued to provide relief in Haiti and Pakistan. A new major disaster occurred in the Horn of Africa affecting Somalia, Ethiopia, and Kenya. These five countries accounted for over 90% of all spending. We also made modest contributions to provide relief from other disasters, mostly floods, in a dozen countries (see the overview below).

# Cooperation

Cordaid is part of the *Samenwerkende Hulp Organisaties* in the Netherlands for joint fundraising among the general public; in the reporting year, we received funding through this channel from three national aid campaigns for Haiti, Pakistan, and the Horn of Africa.

Cordaid works with the international network of Caritas. By means of Emergency Appeals, Cordaid receives money for its emergency aid actions, and vice versa, Cordaid also

- The programme was active in Africa (5 countries), Asia (7), and Latin America (3)
- The total amount committed in 2011 was € 21.0 million
- Reaching 880,000 people

makes funds available for emergency aid actions of peer organisations. With the Anglo-Saxon Caritas Members (CAFOD, SCIAF, and Trocaire), a consortium for providing emergency aid is being prepared. Cordaid plays a role in the Humanitarian Advisory Committee of Caritas Internationalis to improve emergency aid provision. The Caritas organisations also participate in Cordaid trajectories for capacity building with respect to Disaster Risk Reduction.

#### Lessons learned

At the end of 2010, Cordaid concluded internally that its provision of emergency aid has to become operational faster. One way to accomplish this is by prepositioning stocks, i.e. when positioning contingency stocks of emergency kits in strategic places in the world, first basic necessities can be satisfied quickly in case a disaster strikes. In 2011, there was a study on adequate locations and composition of the packages.

Zimbabwe is one of the countries where we gained positive experiences with 'vouchers', with which people can individually purchase (agricultural) inputs from local shops. 'Cash for work' can be applied when cleaning up debris and restoring infrastructure. Cordaid will continue to develop these strategies, and when doing so will also pay attention to replacing relief supplies by money or vouchers.

# Strategic financing

With its fund commitment of € 21.0 million, Cordaid reached a total number of around 880,000 persons. Within the framework of the aid provided as a result of the drought in the Horn of Africa, priority was naturally given to water provision for 850,000 people. Medical care for 474,000 people and food distribution to another 430,000 also occupied an important place in global emergency aid. There was also a focus on the preservation and restoration of economic livelihoods, which was clear from the size of the target group (468,000 people) of mainly cattle farmers and peasants. We had smaller target groups for non food items (90,000), hygiene kits (155,000), and temporary/permanent housing (35,000).

Haiti (€ 9.7 million), Pakistan (€ 5.3 million), Kenya (€ 2.7 million), and Ethiopia (€ 2.3 million) were the main beneficiaries.

#### Horn of Africa

The drought affected around 10 million people. The cattle farmers were forced to travel with their livestock to the last water sources and pasturelands, while the women and children went in search of aid. Cordaid established a wideranging programme: the vulnerable groups received water and food coupons, while mothers, children, and the elderly were checked for malnutrition and the mobile medical teams were activated. A series of timely measures was taken, such as de-stocking (selling the animals while the price was still acceptable) and emergency slaughtering, buying the meat, and then distributing it among vulnerable groups. Thanks to veterinary care, part of the cattle was kept alive as future breeding stock; supplementary feeding

was accomplished by hay that was distributed. The water pumps were repaired and measures were taken for maintenance and disinfection of the water reservoirs; the transport companies brought water to the schools and hospitals.

In Somalia, the effects of the drought were magnified because of the reigning anarchy and the presence of Islamic extremists. Cordaid does not have a partner network in Somalia and therefore contacted peer organisations that are actually operating in the affected areas, such as CARE Somalia and Caritas Germany. We also worked with Dutch immigrant organisations that could provide emergency aid through their direct contacts.

# Two victims of the drought

Kabele Golicha Guyo (widow, 5 children): "I have never before experienced such a long drought. All my cows and calves have died. Every three months, the government gives me 50 kilos of grain and some extra food, but that is not enough. Fortunately, before it was too late, I was able to sell a cow to ACORD (one of Cordaid's local partners), that slaughtered the animal and distributed the meat. I bought some corn with the money. That is how we could survive."

Roba Macha Nura (40 years old, married, 4 children): "Of the 20 cattle we had, only three survived. Because there is no water and no grass, it is difficult to keep them alive. I have participated in Cordaid's cash-for-work programme and so in exchange for food vouchers or money, I had to dig water wells and help remove shrubs so that the grass can grow back when it starts to rain."

And the rain did come, though it did not automatically solve the problems. In November, a Cordaid employee visited Kenya and Ethiopia and reported that "The cattle farmers welcome the rain with open arms, even though the rain does not mean that their cattle recover and start producing milk immediately; this means that food aid is still needed. In some areas, rainfall was scarce and so the people there were forced to slaughter the animals as an emergency measure. Many pastoralists have lost part or most of their livestock to the drought. In most communities traditional solidarity still exists; in other words, the people who can afford it give away some of their animals to help a neighbour.

The rain means that farmers can prepare the land once again. However, many farmers lost their sowing seeds during the drought, so Cordaid's partners provide them with fresh seed. They still need to be given food until the harvest begins (through cash-for-work: e.g. for implementing ponds and water storage tanks)."

The villagers confirm that Cordaid's and its partners' work in recent years to increase their resilience to drought has helped them survive.

#### Haiti

One year after the earthquake, aid still focused on meeting basic necessities. Hardly any reconstruction could begin because of the cholera epidemic, the tropical storms, and the existing political indecisiveness. That is why the decision was taken to extend the emergency aid phase until July 2011. The subsequent reconstruction phase is expected to cover another 3 to 5 years. Following a partner consultation, we decided to geographically focus our efforts on two rural districts (Centre and Northeast) and one urban area (Port-au-Prince, Carrefour, and Leogane).

Haiti received the largest contribution totalling € 9.7 million, a small part of which was designated for the fight against the cholera epidemic. In the course of the year, reconstruction started to play a more prominent role; thus, more houses were built and the programme also paid attention to drainage, water supply, sanitation, housing and land rights, and training the population in disaster prevention. The programmes for basic health care and psychosocial assistance were strengthened with basic medication, which was distributed through hospitals and the franchise-based local 'care shops'. Trauma care was boosted after 14 doctors had received training.

#### **Pakistan**

In 2010, Cordaid received € 4.9 million from a national aid campaign for flood victims. Most of the money was spent in the same year. In 2011, Cordaid continued to give help, with its own financial resources and with contributions from UNICEF and WHO. People were given shelters, latrines were built, and water systems were repaired. Government clinics received assistance in the form of personnel, equipment, and medicines. The mobile medical teams provided their services in remote areas.

When the province of Sindh was affected by floods in 2011, Cordaid was there to help through its Irish sister organisation, Trocaire, with a focus on the distribution of food and hygiene kits in the first phase.

# **Capacity building in the Caritas network**

Cordaid ended its cooperation with Caritas Czech Republic in October. The purpose had been to boost this peer organisation's expertise in climate change. Cordaid and Caritas Czech Republic had been working together for many years; their most recent joint activity was strengthening the emergency aid and DRR capacity of Caritas Czech Republic. Cordaid also supports its peer in Indonesia and elsewhere. One of Cordaid's trainings was about organising media campaigns to enhance the Czech people's awareness about climate change. The manual prepared for this training was also shared with Caritas Europe, Caritas Internationalis, and important member organisations.

# Knowledge development

In order to improve the timeliness and effectiveness of emergency aid after a disaster, a pilot programme was set up in Indonesia, Haiti, and South Sudan. The programme was aimed at building knowledge about how Cordaid and its partners can prepare more adequately for dealing with disasters. Risk analyses have been conducted for 25 countries to serve as the basis for plans on the levels of Cordaid and its partners.

A second knowledge topic is related to housing after disasters, in which Cordaid has gained considerable experience. Cordaid wants to make extra investments in a well-targeted approach; the first step it has taken to achieve this is opening up and systematising its own documentation about housing. In addition, Cordaid is striving for more cooperation with partners who have specific capacities and knowledge regarding housing.

# Lobbying and advocacy

In 2011, the Dutch Humanitarian Platform was created, of which Cordaid is a member. The platform acted as the sector's spokesperson toward the ministry during conversations surrounding the new policy framework for the Dutch Government's Humanitarian Aid. The platform also acts as an advocate toward the Lower Chamber and the EU.



India: The local inhabitants of Orissa repairing the dikes after the flood.

# Results

Country/ partner	Target group	Activities				
Haiti Cordaid with SOE, CPFO, CRS, Habitat for Humanity	Earthquake victims in 2010 and cholera epidemic	Cholera prevention and treatment for 94,000 people; improvement of psychosocial assistance for 21,000 people; construction of transit shelters and disaster-resistant houses (2,000 people).				
Pakistan Cordaid CRS Trocaire	2010: Flood victims 2011: idem in the province of Sindh	2010: shelter for 14,000 people and construction of 750 latrines. Repair of the water supply facilities for 63,000 people. Hygiene kits for 42,000 people. 2011: food distribution (22,000 people) and hygiene kits (39,000). Water supply for 17,000 people and medical care for 4,000 people.				
Horn of Africa Cordaid under its own management and more than 25 partners	Drought victims in Somalia, Ethiopia, and Kenya	Water supply (562,000 people), medical care (360,000), food (270,000), contributions to economic recovery (250,000), construction of 8,000 latrines, and distribution of non food items and hygiene kits (19,000 people).				
India Netcoast, Caritas India, WBVHA, SSDC, Pallishree	Flood victims	Distribution of food for the benefit of 69,000 people and of non food items for 52,000 people.  Medical care for 105,000 people and water supply for 70,000 people. Contribution to the recovery of livelihoods (34,000 people).				
<b>Bangladesh</b> Caritas Bangladesh	Monsoon flood victims	Food packages and plastic sheeting for the benefit of 9,000 people.				
Sudan Trocaire, CRS	Violence in the border area; general humanitarian aid	Food for 2 months for the benefit of 6,000 refugees; distribution of 1,120 NFI kits.  Distribution of NFI and hygiene kits for 7,500 people; strengthening of the emergency aid capacity of 9 local Caritas organisations.				
Indonesia Cordaid with Bina Swadaya, CRS, and Karina	Victims of a volcanic eruption; national level capacity building	Repair of the water supply facilities for 10,000 people and economic activities for 1,000 people.  Training of 7 partners in emergency preparedness & response, and strengthening of the Caritas structure for emergency aid on the national (Karina) and diocesan (22 dioceses) levels.				
Other Emergency Aid (< € 0.1 million per country)	Floods (Cambodia, Colombia, El Salvador); electoral violence (Liberia); hurricane (Philippines); earthquake (Turkey)	Food distribution (45,000 people), water supply (16,000), shelter (18,000), NFI and hygiene kits (21,000), and seed (7,000 farmers).				

# **Emergency Aid office in Sri Lanka closed**

In 2007, Cordaid opened a field office in Sri Lanka to be able to receive the Tamil people displaced and driven away because of war violence. On the most critical days, Cordaid gave food to the displaced families in more than 33 soup kitchens. Psychosocial and medical assistance was provided in the hospitals. Together with local organisations, Cordaid strengthened the voice and position of its partners in a difficult context, advocating with the local governments for the displaced families to return. It also supported this return by building latrines and around 1,000 basic houses, remodelling school buildings, building water wells and village roads, and organising vocational training for young people. The Sri Lankan government praised Cordaid for its work. The emergency measures have now ended and Cordaid therefore closed its office at the end of 2011.

# Evaluation of Cordaid's humanitarian programme in Zimbabwe

A thorough evaluation was made of this programme (November 2009 - December 2010) that aimed at peri-urban and urban food security for around 25,000 people. The programme was funded by the EU and carried out by Cordaid in conjunction with local (Caritas) organisations. The evaluation emphasised the programme's relevance in view of the food scarcity at the time and the target group, which consisted mainly of the elderly, women, children, and persons living with HIV/Aids.

Its main conclusions were:

"Food Vouchers were viewed as a highly relevant and appropriate food relief intervention. The FV's could however have been more appropriate if they had been launched

during the most food insecure months of July to October. Implementation of the voucher system through local supermarket outlets was efficient."

"Participants in horticulture production were satisfied with the outcome. Training provided relevant skills, and ownership of productive assets improved. Income from vegetable production increased from a baseline of USD 4 to USD 40 per month in the season of production."

"Low Input Gardens (LIG's) were appropriately designed. The intended results and impact were achieved. The component could have yielded even better results if inputs were provided in a timely fashion. The household food production was guaranteed year-round. The impact on household income, however, was low."

# A less successful project and a lesson learned

Emergency aid, particularly food and water, was provided in northern Kenya following a serious drought. The aid was in the form of food vouchers with a certain monetary value, which, in principle, should have made it possible for people to 'buy' enough food. But because of the emergency situation and the resulting scarcity, food prices soared; therefore sufficient food could no longer be bought with the food vouchers. Cordaid has learned to use food vouchers that represent a fixed amount of food.

# 4.3. Health and Well-being

#### Introduction

The programme works in three different fields:

Health Systems Strengthening focuses on fragile contexts. The focus on Results Based Financing (RBF) is included here, as well as trauma care, health insurance, personnel issues, and user involvement and participation.

Women's health focuses on the sexual and reproductive rights of women and girls with informed decision making, non-discrimination, and adequate health care service provision with an emphasis on women and children.

Community care brings together the previously separated programmes for persons living with HIV/Aids and vulnerable groups, and its aim is recognising the value and role of the social and paramedical care provided by local volunteers.

Gender is directly interwoven with these focus topics: the fight against gender inequality, because there are sharp objectives with regard to Informed Decision Making, i.e. the provision of complete and objective information about sexual and reproductive health care and rights; attention is clearly focused on the situation of voluntary caregivers, who are mostly women; and within the efforts surrounding social protection, the problems and needs of girls and women are the starting point.

# Local sanitary towel production in India

Almost 70% of rural women use pieces of cloth during menstruation. During those days, the girls do not go to school, so they start falling behind and often lose their motivation. For formally employed women, this poses problems. Besides this, the use of cloth may cause infections and even infertility. The organisation Women on Wings wants to set up four production units so that around 50,000 women can have access to hygienic and biodegradable sanitary towels. Two hundred women will get a job in the units, which will enjoy financial independence in two years. This project serves several purposes: the girls have better opportunities to go to school, the women can access the labour market without hesitation, the health risks are limited, and 200 women can have a stable income.

Cordaid is active in the MDG and Transition Countries of Ethiopia, Uganda, Malawi, Ghana, Bangladesh, India, the Philippines, and Cameroon.

It is also active in the fragile states of Afghanistan, DR Congo, Central African Republic, Sierra Leone, Zimbabwe, Haiti, South Sudan, and Burundi.

#### Cooperation

Within the Alliance we work with Wemos. Wemos provides insight into international developments and furnishes lobbying knowledge to Cordaid and its partners, while Cordaid supports Wemos' lobbying work with information, practical experiences, and the inputs and participation of

- The programme was active in 16 countries and with 135 partners
- The total amount committed was € 17.2 million in 2011 (outside fragile states)
- 211 contributions were assigned for partners and projects
- The total amount of people reached was 2.5 million

### its partners.

Cordaid works with the Dutch Red Cross on home care in six countries, not only for persons living with HIV/Aids, but to a lesser degree also groups such as the elderly and persons with a disability, with the aim of strengthening the situation and capacities of local volunteers and groups.

Cordaid participates in the Connect for Change Alliance with the purpose of integrating ICT in health care. Cordaid targets three countries (Ghana, Malawi, and Uganda) and aspects such as data management in hospitals, refresher courses using ICT, and enhanced communication between home caregivers and health care institutions using mobile telephone communication and improved reporting.

Since its foundation in 1963, Cordaid has been a member of Medicus Mundi International (MMI) and is also a member of its board. MMI is an official partner of WHO with 15 members. MMI has a website, issues publications, organises learning trajectories and meetings, and lobbies in the fields of *Migration of health workers* and *Health Systems Strengthening*.

The Dutch Coalition on Disability and Development has 25 institutional and 200 individual members and pursues the social participation of persons with a disability. It lobbies

for an inclusive development cooperation policy and for the Dutch government to ratify the UN Convention on the Rights of Persons with Disabilities. There is knowledge sharing by means of newsletters, the website, and country reports.

Cordaid is a member of HelpAge International (HAI), a worldwide network with 88 members that advocates for the rights of vulnerable older people. In the last two years, a secure income for the elderly was its central focus. Cordaid also works with HAI in the field of national and international political influence.

Cordaid is a co-founder of the Dutch Better Care Network (BCN), whose purpose is to offer better care to children who lack parental care. The ultimate goal is to accomplish a transition from institutional care to family and/or community based care.

The Caregivers Action Network (CAN) was co-founded by Cordaid. CAN wants to strengthen the situation of caregivers, who are mostly older women, by means of greater gender equality, enhanced professionalism, and the recognition of their contribution to the formal health care system.

#### **Lessons learned**

Cordaid has made significant investments in Results Based Financing (RBF) in recent years. The results of research and evaluations have been shared in publications. One of the lessons learned is that there is no scientific evidence regarding the extent to which the involvement of grassroots organisations in control of the services provided effectively contributes to strengthening the social contract between governments and citizens. Cordaid has therefore decided to investigate this in fragile regions in the years to come.

The interventions to decrease maternal and child mortality have a limited effect in the short term; in contrast, a combination of interventions on both the supply and demand sides has a strong effect of synergy. This was clear from the evaluation of a project in Ghana, where, over a three-year period, a combined approach led to a drop in maternal mortality by 46% and in child mortality by 20%.

Cordaid prepared the show *Babyboom in Africa* together with NCRV, in which Cordaid's projects were shown when three 'baby boom couples' visited Cameroon. A panel including Dutch celebrities was ready to register new donors. The response was overwhelming: more than 11,000 donors.

# Strategic financing

The amounts committed in MDG and Transition Countries totalled  $\in$  17.2 million. The following countries received amounts over  $\in$  1 million: India ( $\in$  3.6 million), Cameroon ( $\in$  3.1 million), Ghana ( $\in$  2.3 million), Uganda ( $\in$  1.8 million), Malawi ( $\in$  1.6 million), Bangladesh ( $\in$  1.4 million), and the Philippines ( $\in$  1.2 million).

#### Cameroon

The Roman Catholic Church is strongly represented in eastern Cameroon with 32 health care centres. RBF was started at the beginning of 2007; 19 care user associations thus assured involvement of the population in quality control. An evaluation took place halfway through 2010, with a positive assessment of the results. In anticipation of possible World Bank funding, Cordaid continued its

support, adding a centre for persons with a disability and a system to provide medical care to seropositive patients. Around 75% of the activities centre on sexual and reproductive health.

Cordaid and the church authorities decided to introduce RBF in northern Cameroon also in view of the good performance in eastern Cameroon. The diocese of Maroua that manages 14 health care centres was chosen for a pilot. Cordaid provided resources for a feasibility study, capacity building, and implementation during one year; 17,500 people were reached with reproductive health care and 8,600 assisted childbirths took place.

Support was given to four partners involved in providing shelter, training, and reintegrating street children, victims of child trafficking, and AIDS orphans. These partners also lobby for the rights of children. A fifth partner focuses on strengthening handicapped people's self-reliance through education and income generating activities; there are lobbying efforts for their integration into society and for support from the community and the local government.

#### Malawi

Youngsters have hardly any access to reproductive health services and therefore have difficulties protecting themselves against sexually transmitted disease. Contraceptive use is low and women's health is affected by too many pregnancies from an often very early age. Sexual education still mainly targets urban youth. Media organisation SWET (Story Workshop Education Trust) is carrying out an educational programme with support from Cordaid. Since the programmes are broadcasted through national radio stations, two thirds of the population are reached. The villages are reached as well with a mobile movie theatre;

through 'listening clubs', the topics and issues discussed are followed up in the villages. Campaigns (surrounding maternity) are carried out, there is a Facebook page, and the volunteers and street theatre groups receive the necessary training.

### Philippines

With three partners, Cordaid tried to link up to the governmental Conditional Cash Transfers (CCT) programme, under which poor women receive cash if they go to clinics for preand postnatal care or to give birth with assistance, and if they send their children to primary school. The CCT programme is a good mechanism for the organisation and emancipation of indigenous groups. The population monitors the programme and there is a good relationship with the government agency in charge; 20,000 children enjoy better health and go to school; and child protection committees are also set up. Around 6,000 women enjoy better health and enhanced participation, information is provided about family planning, households receive support with small scale economic activities, and a drinking water system is being installed.

#### Bangladesh

After Greenpeace donated the legendary *Rainbow Warrior II* to Cordaid's partner, Friendship, Cordaid provided resources to turn the ship into a mobile health care post for the delta region, with its remote islands and sand banks where hardly any basic services are available and where the local population is too poor to travel to the care centres. The ship provides basic health care and also eye, dental, and gynaecological care. Around 60,000 patients receive treatment every year. In 36 villages, health care commit-

tees are set up and trained to monitor the quality of the care provided.

## Capacity building

Within the Connect for Change Alliance, some of our partners in Ghana (2), Malawi (9), and Uganda (4) received assistance for ICT integration. The focus in Uganda is on improved data management, reporting, and accountability, as well as on the introduction of electronic patient files and the use of mobile phones to allow communication between the home caregivers and health care institutions, to conduct patient satisfaction surveys, etcetera. For the years 2011-2015, the idea for Uganda is to have 1,200 ICT trained health workers and around 30 institutions with an improved data system. The benefits of ICT cannot yet be expressed in precise figures, though expectations are that while a hospital in Malawi, for example, used to need five full days to write reports in 2010, it will need hardly one hour to do the same work in 2013.

In Cameroon, Cordaid supports the establishment of medical insurance schemes. To date, there are three insurance programmes in operation, which are all part of the *Plate-forme des Promoteurs de Mutuelles de Santé au Cameroun*. This platform offers assistance to the members and is the contact for the Ministry of Health. Cordaid financed a successful training programme of the platform in 2010; the new project will continue with organising a workshop for 20 people, drafting a manual, and coaching member organisations.

The benchmarking strategy was added to the RBF programme in Tanzania in 2007, with the purpose of

encouraging hospitals to achieve better results. The scores of the different hospitals are compared in order to incite management to improve service delivery. This benchmarking strategy has been assessed positively, which means there are sufficient arguments to continue in this direction in cooperation with the Dutch consultancy firm, Tragpi, which specialises in cost management.

# Knowledge development

Cordaid supports home care programmes in five African and two Asian countries. The programmes were set up in response to the Aids epidemic, with the Roman Catholic Church in a pioneering role. Home care structures were established on the community level with volunteers, who are mostly older women. Since 2005, the programmes have changed or become more professional due to the use of antiretroviral drugs to combat Aids. Still, the home care sector receives insufficient recognition and financing on the national and international levels, while the trained home caregivers do not participate enough in decision making surrounding financial resources, content, quality, and management of their activities. Cordaid intends to improve this situation through an RBF pilot. Trainings and an extensive baseline study have been initiated to this end in three dioceses of Malawi.

# The elderly and their survival strategies

Together with its partners in Ethiopia, Tanzania, Bangladesh, and India, Cordaid and HelpAge International conducted a study in 2010 among 1,000 elderly people. The results were published in 2011 and include:

- most elderly work in the informal sector at low wages and with long working hours;
- the traditional solidarity-based systems have been undermined by the HIV/Aids epidemic and migration of young people; widows are among the most vulnerable, because they often take care of the grandchildren;
- the elderly do not have access to micro credit; they
  only deal with informal loan sharks that charge a
  significantly higher interest rate; the microfinance
  institutions prefer lending to women, which means
  that women sometimes take out loans for their
  husbands;

- to overcome and survive emergency situations, the elderly need multiple resources (their own small vegetable gardens, small livestock, trade, household jobs, lending, help from neighbours, and begging);
- the organisations of the elderly are a means to claim assistance and break through social isolation; women are strongly underrepresented in leadership of the organisations of the elderly.

Various recommendations logically derive from these findings: strengthen the organisations of the elderly, train the elderly for a wide-range livelihood strategy, encourage MFI's to offer customised products, and lobbying the government in order to involve the organisations of the elderly in policymaking and to allow them to claim better government services, such as retirement schemes. The next step was a workshop in Ethiopia that was held in September, in which our partners from five countries prepared action plans focusing on resilience and livelihoods.

the partners had already admitted to this before.

Efficiency: Efficiency was hindered because Cordaid worked with more than one hundred partners in several countries.

Efficiency: Efficiency was hindered because Cordaid worked with more than one hundred partners in several countries. On the other hand, Cordaid has to keep its comparative advantage by working in remote areas where there are few other organisations.

inequality received insufficient attention; both Cordaid and

In three countries, discussions were held regarding the results. Within Cordaid, the evaluation led to the conclusion that there is a need to create links between community based home care and formal health care systems; to continue to give attention to new, innovating small partners; and to provide livelihood support only in cooperation with organisations that have the necessary expertise in that field.

The evaluation of Cordaid's HIV/Aids programme (2007-2010) was based on an assessment of more than 30 partners in five countries. In addition, around 60 partners filled out a questionnaire. The ministry has tagged the report as predominantly 'satisfactory'.

Relevance: The programme was in accordance with national priorities, though it does not focus enough on new risk groups; it reaches many people and offers space for innovation. Cordaid's work is complementary to that of the

government, with a focus on remote areas and specific risk segments.

Effectiveness: The programme improves access to treatment and care. The training of home care volunteers was an important contribution in this regard. Prevention and treatment compliance remained rather in the shadow. The economic activities of and for the target group yielded limited results, and too little account was taken of cultural and social factors when information was provided. Gender

# Research on home based care

In January, a report financed and commissioned by Cordaid was published about home based care in eight African countries (Home Based Care Multi-Country Study, Synthesis Report). Care for persons with HIV/Aids still depends on civil society organisations, of which faith-based organisations are an important part. There is little to no evidence of governments approaching the issue in a structural manner, while most funding still comes from international donors. Thanks to medication. HIV/Aids is now a chronic disease: this means that the persons living with HIV/Aids also need help to generate an income. There is a notable evolution in the sense that a growing number of persons with HIV/ Aids are getting organised for mutual aid and lobbying. The relationship between formal health care and home based care has become stronger; the home caregivers are involved in controlling the use of medication by people with Aids. Home Based Care, HBC, is operating only for persons with HIV/Aids and the 'Orphans and Vulnerable Children' group, while the elderly and persons with a disability are still

largely ignored. The innovation consists of the pilot effort supported by Cordaid to apply RBF in home based care. The final conclusion is that in the HBC sector, too little research is still being conducted as to the most effective approaches. The study also yielded a series of recommendations: the home care policy must offer space for the contributions of all stakeholders; home care has to be adapted to the new needs of persons with HIV/Aids, with a greater cooperation with other sectors; and the home care organisations must be given a place in the national debate on community based care in a broader sense (for multiple vulnerable groups). In Ethiopia and Malawi, the national home care associations are integrating the outcomes of the study in their work plans; in other countries, the study encourages the creation and strengthening of national forums and collective lobbying. A lobbying effort is being prepared for the International AIDS Conference (July 2012 in Washington DC).

# Lobby and advocacy

In Malawi, home care volunteers offer much of the care to the elderly, persons with HIV/Aids, and orphans and other children. Thanks in part to the availability of antiretroviral drugs, the volunteers now provide long term care to persons with HIV/Aids and make sure that they take their medication. This development puts more demands on the volunteers. The National Community Home Based Care Alliance, which started officially in April 2011 with support

from Cordaid, lobbies for official recognition of home care volunteers and for a national standard package of resources for their work.

At the end of July, the Cordaid financed movie 'Who cares...' was premiered; the movie is about the life of home caregivers in Malawi. In a humorous way, we get a good look into the problems these people have to face. The movie is part of a campaign for recognition of the role of home caregivers.



Malawi: As part of an elaborate education programme, media organisation SWET made a movie about home based care.

Roughly estimated, Bangladesh has 16 million people with a disability, most of whom belong to the poorest population groups. There are several programmes for people with a disability, such as scholarships, employment, financial assistance, and resources, but implementation leaves much to be desired. There is a need for these actions to be included into regular programmes. Part of Cordaid's contribution to the still young 4D Foundation (Disability Rights, Disaster Risk Reduction, Democracy, and Development) is for lobbying policymakers and government agencies for an inclusive approach in programmes for disaster prevention, social protection, education, and income generation.

At the International Conference on Family Planning in Dakar, Senegal, Cordaid gave a presentation on the research conducted by Roman Catholic institutions regarding the influence of cultural and religious factors in sexual and reproductive health care. As a result of the

discussions, the decision was taken to initiate an international campaign surrounding 'faith-based organisations and family planning', with Cordaid as one of its pioneers and promoters.

As a participant in the Caregivers Action Network, Cordaid was involved in the lobbying letter sent to the UN (UNAIDS, WHO, and Unicef) about the limited attention still paid to HIV/Aids care within the UN approach towards the epidemic. The letter yielded results, as was clear from a first response of the WHO from the director of the HIV/Aids department: "The WHO has very much appreciated the recent role played by many of the letters' signatories in the development of draft Global Health Sector Strategy on HIV(...). Please note that we have briefed the Director General on this important engagement, and on the components of the draft strategy that specifically relate to HIV care and support."

# Civil society engagement

Cordaid's programme for Health and Well-being enjoys extensive support. The Cordaid fund, Memisa, receives support from 133,000 regular donors who are kept up-to-date by means of newsletters, meetings, and Memisa's website. Every year, Memisa organises several campaigns. Both private foundations and companies make contributions to Memisa, while the banks consider Memisa a good cause. A few dozen private initiatives in the Netherlands contact Cordaid to co-finance small projects.

Some examples include:

A Rotary Club is supporting the Ghanaian Bawku
 Presbyterian Hospital to buy three sets of operating
 equipment. The Rotary Club and Cordaid share the costs.

- In Ethiopia, a Lions Club is working on better ear care by training doctors and nurses. The Lions are covering 60% of the costs.
- Innerwheel Schiedam's chosen charity was the
   Stichting Hebi foundation, which manufactures the
   Hebi incubator developed around 1970 specifically for
   use in developing countries. It is a simple, solid, and
   affordable incubator (€ 325 per piece) that can be
   assembled and maintained locally. At the moment,
   around 1,200 incubators are in use (even the first
   30-year old incubators are still being used). Innerwheel
   provides € 2,385, and Cordaid an additional amount of
   up to € 4,174.

# Multi-stakeholder processes/ Communities of Change Millennium Agreement MDG5: fighting maternal mortality

The MDG5 network comprises more than 30 organisations from the Netherlands, Sierra Leone, and Afghanistan; Cordaid coordinates the activities. Several NGO's, pharmaceutical companies, semi public institutions, scientists, and unions have joined the initiative on the Dutch side. There are projects to train midwives, as well as awareness raising about maternal mortality, exchanges between training institutes in the North and South, research concerning best practices in maternal care, and the strengthening of organisations of midwives and obstetricians.

A mid-term review of the process conducted in Sierra Leone reached positive conclusions, though improvements are still needed in terms of enhancing coherence among the different plans. Despite all limitations and risks, we continued to train midwives in Afghanistan: 12 young

women from Uruzgan completed their training and are now working in the rural clinics. A new drug appeared for the oxytocin project to fight bleeding after childbirth, which can be inhaled and presents temperature stability. Negotiations are underway with the pharmaceutical industry and universities in the Netherlands and Australia to further develop this variant. The network manages the Maternal Health Portal, which provides information about projects, scientific literature, meetings, news, and weblogs.

More than 3,000 midwives and experts from 111 countries attended the 29th congress of the International Confederation of Midwives in Durban. The MDG5 network took advantage of this forum to draw attention to its work. For 25 Dutch and 25 Sierra Leonean midwives, the congress was very special; they participated in a twinning programme of the Royal Dutch Organisation of Midwives and the Sierra Leone Association of Midwives. The MDG5 partners feel supported by the *State of the World's Midwifery Report 2011*, which emphasises the need for more training and more midwives for rural areas, for recognition of this occupation in laws and regulations, and for strong professional associations.

#### Caregivers Action Network (CAN)

Cordaid is one of the main promoters of the network, which is aimed at strengthening the position of caregivers, including through recognition of their contribution to the formal health care system. CAN brings together around 570 members and maintains contacts with international policymakers and fund providers. The activities range from lobbying and advocacy on the (inter)national level to policymaking, knowledge development, and home care

programmes. CAN prepared well to exercise influence in the UN High Level Meeting on HIV (in June); the role of community caregivers was included in five articles of the final declaration, in part thanks to its efforts. Cordaid supported the development of national alliances and in this regard, one of its activities was training the alliances of Malawi and Zambia. Both countries continue to work on the development of local associations of female home caregivers, so that their voices can be heard more in the national alliance and other spaces. On 2 April, the National Community Home Based Care Alliance was officially proclaimed in Malawi, and the Minister of Health gave the go ahead.

## Results

- Sixteen months after the introduction of Results Based Financing in the Central African Republic, use of the care services went up by 30% to reach 50%. In the health care centre of Bobangui, for example, the number of consultations increased from 60 to 200 and the number of assisted childbirths from 12 to 22 per month. The quality has improved and the tariffs decreased by 30-50%.
- In northern Bangladesh, Cordaid supports partner Rangpur Dinajpur Rural Service (RDRS) for better maternal and infant care. One of the actions within this framework is to train traditional midwives. Results: pregnant women visit the prenatal clinics earlier and maternal mortality has gone down spectacularly to 76 deaths per 100,000 births, compared to the national average of 150 deaths.
- Cordaid gave support to the Private Nurses Midwives

- Association of Tanzania, which has 51 clinics under its care. Since 2007, the number of assisted childbirths has increased from 800 to 4,400 per year.
- In the diocese of Batouri in eastern Cameroon, RBF started in 2006. The results booked by a church-related health care institution were presented in a conference. The number of new consultations grew from 600 in 2005 to 1,400 in 2011. No childbirths were assisted in 2005; in 2011, almost 400 assisted childbirths were registered. Prenatal consultations increased from 594 to 1,400. The 'revenues' increased from € 26,000 to € 91,000.

# The Cordaid HIV and Aids Award 2011 winners

The winners were honoured on World AIDS Day. They won because of the adequate way in which their programmes were aligned with the formal health care system in their countries.

The Ugandan *Giramatsiko* is a grassroots organisation made up of 490 women living with HIV. One of its important features is its direct link with health care centres, so that infected women can have access to care faster. They will use the prize money - € 10,000 - to purchase first-aid kits to be used when infected women give birth, because with proper hygiene it is possible to prevent the baby from becoming HIV positive during childbirth.

Cambodian HIV/AIDS Education and Care (CHEC) informs and counsels HIV patients, communities, and the general public. They will use the money to ensure better links with formal health care. This is particularly important because more and more donors are withdrawing in view of Cambodia's success in reducing the prevalence of HIV.

Other projects have failed to perform so well, have been closed earlier than planned, or could even be regarded as failures.

- The Kitovu Community Health Insurance Scheme (KCHIS) has an active radius of almost 40 kilometres around the hospital of Kitovu in Uganda. Since 2007, Cordaid has supported an extension in order to include more people (15,000) in the insurance, at the same time thus helping the health care facilities to have a reliable source of income. For several reasons, including, but not limited to, the increasing costs of living, a partially failed harvest, and inadequate management, Cordaid decided to end its cooperation with KCHIS. Cordaid provided a last contribution to avoid problems for the hospital resulting from the overdue payments owed by KCHIS.
- In the French-speaking part of Cameroon, Cordaid supports eight organisations that work with street children, orphans, and children with a disability. The idea was to set up a national network for lobbying and advocacy with like-minded organisations in the English-speaking part of the country. Unfortunately, this has not been possible so far because of competence disputes between the English-speaking and French-speaking organisations. In 2012, Cordaid and the other parties involved will make one last attempt at mediation to build a national network.

# 4.4. Entrepreneurship

### Introduction

The programme focuses on the following two topics: *Improve the situation of small rural producers*. The activities centre on farming as a business, strengthening producer organisations, enhancing their negotiation capacity, and achieving cooperation with other stakeholders in the chain. Their produce is sold in local and regional markets. Priority is given to interventions that contribute to the empowerment of women; there is no funding for interventions that have a negative impact on the situation of women.

The second topic is access to credit. Because there are few possibilities to access credit, Cordaid gives priority to supporting rural microfinance institutions (MFI's), the development of adequate financial services (savings products and insurance, including for harvest), and loans for small businesses. Cordaid complies with 'client protection principles' in order to protect the borrowers. At the moment, there is a loan fund of € 59 million available.

The programme developed activities in 10 countries. In Africa, the programme was active in Ethiopia, Ghana, Malawi, Tanzania, and Zambia; in Asia, in the Philippines, India, and Vietnam; and in Latin America, in Bolivia and Honduras.

We examined the possibilities of working in fragile countries/ contexts in the DR Congo, South Sudan, Haiti, and Sierra Leone.

# Cooperation

Cordaid works with the Dutch Agri-ProFocus network, the platform for corporate social responsibility, the Sustainable Trade Initiative for the herbs and spices chain, and the Participatory Land Use Planning (PLUP) network.

Cordaid is part of MicroNed together with Hivos, Oxfam Novib, and the Rabobank Foundation regarding policy-making, training, lobbying, etc. In 2012, MicroNed will probably merge with the Netherlands Platform for Microfinance, which has another 12 members besides the MicroNed members, including several banks and the Dutch government. The platform mainly works in the fields of research, training, lobbying, and knowledge sharing.

Cordaid is one of the founders of the Social Microfinance Foundation (2010) that engages in capacity building of African and Asian MFI's.

Cordaid is a shareholder and board member of various



Philippines: Deforestation due to mining is a major threat to the local economy on the island of Mindoro. Cordaid partner KPLN, as part of the NTFP network, stands up for the rights of the Manayan, the local population of Mindoro.

- The programme was active in 10 countries and with 151 partners
- In 2011, the total amount committed was € 10.7 million (outside fragile states)
- 96 contributions were assigned for partners and projects
- Reaching 165,000 people directly and 825,000 indirectly

funds: In-Return, Pyme Capital, Social Equity Fund, and the Rabo Rural Fund.

### Lessons learned

A workshop in India last March concerning disaster risk reduction underscored the use of this method for agriculture when mapping risks and taking adequate measures for protection.

Since most small farmers still lack sufficient access to adequate financial services, and also in view of the intended synergy with the issue of sustainable agriculture, we have to focus more sharply on rural and agricultural (micro)finance.

# Strategic financing

In the reporting year, € 10.7 million were used in MDG and Transition Countries. Bolivia (€ 3.0 million), India (€ 2.5 million), and Tanzania (€ 1.9 million) were the leading countries in financial terms.

## Malawi

The government's policies emphasise food production and have been successful in this sense; from being a food importer the country has now become a food exporter. But land reform is not getting off the ground; the big investors are claiming more and more land for biofuel and other industrial crops. Training Support for Partners gives assistance to NGO's and grassroots organisations regarding the ownership and management of natural resources, with the purpose of securing land use for 20,000 rural households in two years' time and minimising the consequences of climate change with adapted agricultural methods and reforestation. The subsistence of female-headed households is improved with the introduction of poultry and beekeeping.

In Malawi, the Centre for Social Concern (CSC) is acknowledged as a knowledge institute. It contributes to the social debate with research and public information. One of CSC's activities is conducting a monthly study about the cost of living, and its outcomes are widely distributed and used for lobbying purposes. There are also studies about local and regional trade and the position of small producers in this field. Special attention is paid to the youth in view of the high unemployment rate among them.

The National Association of Farmers in Malawi (NASFAM) has 108,000 small farmers who are in turn part of smaller groups. Through these structures, the farmers are trained and they receive market information so their rice, peanuts, sesame, and corn crops can find their way to the buyers. For some years now, NASFAM has been exporting peanuts to Europe under the Fair Trade label. In 2011, Cordaid covered 20% of the costs of a peanut processing factory at

the initiative of NASFAM and its European trade partner. The farmers will become the owners of 1/3 of the factory. Presently, NASFAM buys peanuts from 12,000 farmers; with the factory, this will go up to 25,000. Since it is mainly women who produce peanuts, they will be the chief beneficiaries. The farmers will share in the profits as co owners. As a shareholder in the company, Cordaid ensures compliance with the company's fair trade mission.

#### India

Zameen Organic works with almost 7,000 small cotton growers by processing their harvest for the international market. Part of Zameen's profits flows back to the farmers; in the longer term, the farmers will become shareholders in Zameen. For the years 2010-2011, Zameen expects to buy 4,500 tons of organic cotton, for which it needs a prefinancing amount of more than USD 750,000. This amount will be made available by Cordaid and the Rabobank Foundation in the form of a guarantee to YES Bank; YES Bank itself takes on a risk of USD 250,000 in this operation. The advantages for the farmers include the lower costs, higher prices (up to 30% more), guaranteed sales with timely payments, and a future participation in Zameen's shares.

In recent years, the borrowers' interests have often been secondary to the aim of maximising profits. Nonetheless, there are still MFI's that have remained faithful to their principles, such as Nanayasurabhi Development Financial Services (NDFS) in Tamil Nadu. Besides micro credit, NDFS also provides retirement schemes and health care insurance. The institution had reached more than 65,000 women by the end of 2010. In view of the crisis in the microfinance sector.

the Indian banks are very reluctant to grant loan capital to MFI's. Although NDFS has not contributed to the crisis, it does feel the consequences. Cordaid has therefore decided to grant a five-year loan, with which NDFS in turn can grant approximately 12,000 small loans to women.

# The social side of microfinance

Micro credit granting has been going on for more than 30 years now. Over this period, the social side of microfinancing has remained partly out of sight; the most damaging effect of this evolution is that the borrowers have ended up in an unbearable debt position. Within the framework of its mission, Cordaid feels very strongly about the social side of microfinance. Together with its partners, it is working on integrating Social Performance Management in the operations of Microfinance Institutions. In 2010, in consultation and collaboration with Dutch and European investors, Cordaid developed a Social Performance Assessment tool, which was introduced for all new investments following a testing period in 2011.

## Bolivia

The forest slash-and-burn method to prepare the land for agriculture (soybean and cattle) continues to be the dominant practice. The project supported by Cordaid takes a different direction, with a focus on sustainable forest management and the sustainable development of farming communities. The target group of 900 women and men has

more than 1,000 hectares of community land, mainly forest. The forest yields economic benefits with wild cacao, coffee, fruit, and honey. The following goals were set for the first year: increase agroecological production by almost 15%; agroforestry (40 hectares, 50% under female management), 30 beekeepers (50% women), and two producer organisations with sales contracts and with a good performance in lobbying for the protection of wild cacao.

# **Rabo Rural Fund BV**

This Fund is a joint effort of Cordaid and the Rabobank Foundation to grant loans to producer organisations and cooperatives that are too small to obtain funding from commercial banks, and too big to access micro credit (the missing middle). After signing a shareholders' agreement, € 10.5 million was put into the fund. The intention is to reach € 40 million. The Fund will chiefly finance working capital for farmer cooperatives (coffee, cotton, honey, and spices), and also for the organisations involved in processing.

# **Knowledge development**

Indonesia is the number one exporter of cinnamon to Europe and the US. Around 85% of the export products come from the Kerinci region in Sumatra. Cassia Coop, a Dutch company, is planning to set up a processing plant for sustainably produced cinnamon in Kerinci. The elements of sustainability include training for the farmers, organic certification, replanting and crop diversification, as well as

the processing of secondary products (e.g. timber from the cinnamon trees). Cordaid and Both ENDS both participate in the Sustainable Spices Initiative of the Sustainable Trade Initiative and, as such, are interested in Cassia Coop's business model. It has been decided that the first step will be a feasibility study and a value chain analysis.

Analog forestry is a method used to restore degraded ecosystems. The method was developed in Sri Lanka and is now being used worldwide. To continue promoting Analog forestry, in-depth studies of its economic and ecological feasibility are required. The first step is to strengthen the International Analog Forestry Network (IAFN) as a global coalition of 27 organisations with centres in Sri Lanka, Costa Rica, and Cameroon. Alliance partner Both ENDS has been supporting the network for many years. Cordaid makes funds available to better equip the network in knowledge development and exchange.

# Lobby and advocacy

The *Indonesiëberaad* council (chaired by Cordaid) has had a lobbying group since 2011, and some of its members include ICCO, Both ENDS, the International Union for Conservation of Nature, Hivos, Oxfam Novib, and Mensen met een Missie. Its lobbying is aimed at the Dutch government and promotes policies for Indonesia based on sustainable economic development, with attention for social aspects, biodiversity, and respect for human rights. Within this framework, position papers are drafted and consultative meetings are held with the ministry.

In the Netherlands, Cordaid supports the *Eerlijke Bankwijzer* (Fair Banking Guide), aimed at promoting Corporate Social Responsibility among the Dutch banks with help from the consumers. Investments in the arms trade, the acceptance of 'blood money', and laundering the illacquired wealth of dictators are all exposed. Based on studies and information, consumers are encouraged to choose responsibly.

# Multi-stakeholder processes/ Communities of Change

The programme comprises several Communities of Change (CoC's). Stakeholders in the North and South (NGO's, target group organisations, government institutions, companies, knowledge institutions, and lobbying clubs) work together on an agenda for change. Each stakeholder does this based on its own role, expertise, and resources. Cordaid's role has expanded; it is no longer a fund provider only, but also a facilitator, a knowledge broker, a networker, and a lobbyist.

#### Rich Forests

This CoC combines Non Timber Forest Products (NTFP) with initiatives in the field of Analog forestry. The core entities are Cordaid, Both ENDS, the NTFP network in Asia, and the International Analog Forestry Network. The aim of this CoC is to contribute to the sustainable development of small producers, including indigenous peoples, the conservation of biodiversity and natural resources, and the restoration of degraded land. Cordaid supports projects in Indonesia, India, the Philippines, Tanzania, Central America, and Bolivia, while using the experience gained for (inter) national lobbying and knowledge development.

### GRASP (Global and Regional Advocacy for Small Producers)

This lobby-based CoC comprises partners in Malawi, Tanzania, Uganda, Ghana, and Zambia; the secretariat is headquartered in Malawi. Several research institutes in Tanzania and Malawi are part of this CoC that intends to improve the position enjoyed by small farmers in national, regional (African Union), and international agricultural policy.

# Agri-ProFocus Zambia and Uganda

Both CoC's consist of Agri-ProFocus members in the Netherlands and their partners in Zambia and Uganda. In Zambia, four Cordaid partners participate in the alliance, and in Uganda three. Cordaid is the topical coordinator regarding the provision of financial services to small producers in Uganda.

The objectives refer to a more inclusive economic system, strengthening of the farmers' entrepreneurship, a better match between the demands of the farmer organisations and the supply of financial services (banks and MFI's), and an improved provision of market information.

#### Plan Bee

This CoC is presently being developed with participants from Ethiopia, Zambia, Uganda, Indonesia, India, the Philippines, Honduras, and Bolivia. In the Netherlands, the participants are Cordaid and Both ENDS. The international partners are Apimondia, Apitrade, Bees for Development UK, and SNV Africa. The objective is to contribute to an improvement and increase of small beekeepers' honey production, the development of small scale climate-smart agriculture, and the conservation and enrichment of biodiversity.

# Sustainable Spices Initiative of the Sustainable Trade Initiative

Cordaid, Both ENDS, knowledge institutions, seven companies, and the Rainforest Alliance are working together on development of the small scale spices sector. Cordaid facilitates contacts between companies and partners and farmer organisations in Indonesia and contributes to setting up an investment fund for pilot projects. The idea is to develop a sustainable production, processing, and trade of, for the moment, seven spices from Indonesia, Vietnam, and India.

# A less successful or failed project

Since 1995, Cheetah Malawi Ltd had a contract harvest agreement for paprika with thousands of small farmers. Some years ago, Cordaid had made resources available to expand the fair trade export operations. The project risk rating was 'high' because of the ups and downs in the paprika harvests. For Cordaid, the project was a first experience with a combined aid package that involved a loan, subsidy, and bank guarantee.

During implementation it became clear that the farmers, whom Cheetah supported with inputs and technical assistance, sold their harvest to competitors who offered a higher price, which was possible for them since they did not have to spend anything on technical assistance and guidance. Cheetah's revenues therefore declined and repayment of the loans granted to the farmers was seriously compromised.

The main lesson that Cordaid learned is that to fund agrichains, the roles of the different parties should be clear. Cordaid financed technical assistance, loans, and

marketing for Cheetah, thus overburdening a company that was still in the growth phase. Cordaid will now separate the different functions in the chain more clearly: credit granting by microfinance institutions, support for small and medium-sized companies through local fund structures that have the capacity to exercise close monitoring and control, and technical assistance through farmer associations, advisory services, or NGO's.

# 4.5. Urban Matters

#### Introduction

At the end of 2010, the decision was taken to transform the Urban Matters (UM) programme into a business unit. UM focuses on slum improvement in Cape Town, San Salvador, and Kisumu (Kenya). Links are built between private and public partners from the North (the Netherlands) and stakeholders from the South, such as neighbourhood organisations, NGO's, public utility companies, and (local) governments. This is done within the framework of a multistakeholder approach with a joint responsibility for planning, financing, and implementation. Cordaid is no longer the funder, though it does facilitate the process.

There are EU funds available for Port-au-Prince (Haiti) and Guatemala City (Guatemala), and so starting in 2012 we will also work on neighbourhood improvement in those cities. The cities of Santa Cruz in Bolivia, Nairobi in Kenya, and Addis Abeba in Ethiopia are also part of the UM network.

# Strategic financing

In 2011, the activities centred on conducting preliminary studies, planning, and signing agreements. Steps were also taken to finance the plans and projects (housing, water and sanitation, employment generation, and security).

In Cape Town, together with the *City of Capetown*, a plan has been prepared for the development of the Philippi slum; a youth programme is also currently being implemented. A master plan for water and sanitation was devel-

oped for Kisumu together with the municipal government, public utility companies, Dutch partners, and others. In the Salvadorean sub-municipalities of Soyapango and Mejicanos, which are ravaged by violence and gangs, a housing complex that also encompasses a recreational complex was developed. Dutch parties were involved in these plans and the idea is to realise the funding in 2012.

# Capacity building

The idea behind capacity building is to develop an integrated neighbourhood approach based on plans and funding proposals. Dialogue and cooperation among the different parties involved have been promoted with training and simulation games, with different MoU's as a result. In each city, between 4 and 5 meetings were held with local stakeholders. The Dutch companies contributed technological knowledge related to, for example, urban development and water and sanitation.

Involvement of Kisumu's population in neighbour-hood development was strengthened. 126 researchers were trained and then made an inventory of the local situation with regards to the make-up of the population, housing, water and sanitation, health, education, etc. We now have a baseline study and GIS maps. The researchers have also organised meetings with the population to set the priorities in neighbourhood development, which are later discussed in meetings with the stakeholders.

- The programme was active in 3 countries and with 63 partners
- The total amount committed in 2011 was € 1.3 million
- 26 contributions were assigned for partners and projects
- Reaching 380,000 people

# Knowledge development

With the purpose of enhancing neighbourhood development in Kanapé Vert in Port-au-Prince, a Haitian mission paid a visit to El Salvador to see how reconstruction was going there after the earthquake; next, the mission prepared a series of recommendations for the Haitian government.

In September, a group of NGO's and local governments from Cape Town, Kisumu, Nairobi, Addis Abeba, San Salvador, Guatemala City, and Santa Cruz met in Nairobi to share lessons learned and prepare a proposal to continue improving the network and to set up a digital knowledge platform (www.cordaidurbanmatters.com).

CRDA's research (James Taylor) about neighbourhood improvement in Kisumi, Kenya, has been treated before (Section 3.7).

# Lobby and advocacy

Lobbying targets the world of donors and companies, with UM bearing the responsibility to show that its approach effectively leads to concrete improvements. There is lobbying of the EU, major private funds, and UN-HABITAT to demand more attention for urban issues and the UM methodology.

# Youth violence

At the end of January, there were conferences on two consecutive days about Urban Youth Matters, with 70 and then 115 participants from the Netherlands, El Salvador, and Honduras. Youth violence was seen primarily as an expression of social rejection. Young people seek social recognition after having been rejected for many years by schools, friends, social workers, and even their parents who, in the case of Central America, often migrate to the US in pursuit of a better life. Young people in the Netherlands are discriminated because of the colour of their skin and their cultural background, and in El Salvador because of their gang-related tattoos.

For young people with a criminal record (gangs), it is extremely difficult to find a 'normal' job. Hence, they often drop back into delinquency.

The option of repression versus prevention was discussed as well. One Dutch participant's position of isolating and locking up the leaders of criminal groups was met with considerable opposition. Two Salvadorean organisations said that the criminal leaders rather should receive special attention; their transformation into role models has a much deeper impact since the members of their gang will follow them with complaisance.

# Multi-stakeholder processes/ Communities of Change

UM chiefly follows a multi-stakeholder approach; the programme links partners from the North and South, coordinates and facilitates cooperation and the involvement and input of partners, and launches projects to encourage and enhance cooperation. One example is Kisumu.

One of the main problems in the Manyatta slum in Kisumu, the third largest city of Kenya, is the shortage of safe drinking water, which leads to many serious public health problems and periodic cholera outbreaks. In order to address this issue, Cordaid has brought together water companies, governments, and civil society organisations from the Netherlands and Kenya to improve the provision of water and sanitation for 35,000 people. On the Kenyan side, the municipality of Kisumu, drinking water company

The companies are the spearheads; therefore, UM makes an effort to show that there are investment possibilities in slums. Advantage was taken of World Habitat Day, 3 October, to organise a meeting with Dutch companies and organisations. In his inaugural address, René Grotenhuis underscored the importance of a multi-stakeholder approach when addressing complex urban issues. In their presentations about urban planning and water and waste management, Arcadis and Waste emphasised the importance of multi-sectoral thinking, ownership, and South-South relations.



South Africa: In Cape Town, Cordaid Urban Matters focuses on youth in the slum of Philippi.



On World Habitat Day, Cordaid Urban Matters brought together 60 different organisations and businesses to be inspired about the opportunities in slums.

Kiwasco, the Lake Victoria South Water Services Board, the NGO's SANA International and Umande Trust, and the slum dwellers' associations were involved in the initiative; on the Dutch side, the participants are Vitens Evides International (drinking water), the district water board Hoogheemraadschap De Stichtse Rijnlanden (drainage), and Cordaid. The cooperation was formalised at the end of May through a Memorandum of Understanding. This marks the beginning for Manyatta to build water pipe systems, 300 biolatrines, 5 kilometres of rainwater drainage canals, and water collection systems, and also to plant 3,000 trees.

With an EU contribution, we are taking the first step toward a multi-stakeholder process in Kanapé Vert, Haiti, a community of 24,000 people in Port-au-Prince that was hit very hard by the earthquake. Local government agencies, public utility companies, and neighbourhood organisations will work together to improve the infrastructure, public services, land property title deeds, and resilience to natural disasters.

# 4.6. Programme in the Netherlands

#### Introduction

Cordaid's Programme in the Netherlands addresses four different areas:

Financing and co-financing of the *private initiatives* (PI's) of Dutch organisations, such as service clubs, foundations, parish groups, and networks of immigrants, with 200 member organisations. Funding for private initiatives occurs in alignment with the countries and topics of Cordaid, which means that the immigrant organisations' work is complementary to Cordaid's interventions in Ghana and India, and that work surrounding Resolution 1325 takes place in Sudan, Burundi, and other countries.

Cordaid is the only aid agency with a programme on *poverty reduction and social exclusion in the Netherlands* which targets the homeless, refugees and asylum seekers, victims of domestic violence, and children living in poverty. Cordaid participates in the consultative bodies that address poverty in the Netherlands, works with aid funds, and takes part in lobbying actions with others. It also provides financial support to civil society institutions that help vulnerable groups, and it works together with Muslim organisations on the subject of the Ramadan/ Feast of Sacrifice.

The 'Vastenaktie' Lenten Campaign for fundraising and religion: The programme is further involved in the organisation of the yearly Lenten Campaign, using the funds raised for projects of parishes, dioceses, and missionaries in developing countries.

Immigration is a subject that is related to several sectors and focus topics. These include Conflict Transformation, e.g. trafficking in women; Health, e.g. brain drain/gain; Entrepreneurship, e.g. social entrepreneurship among immigrants; the return to countries of origin; and poverty and social exclusion in the Netherlands. Cordaid is part of the immigration task forces of Caritas Europe and CONCORD. It works with other organisations regarding the return of asylum seekers and refugees who were rejected after having followed all possible legal procedures.

#### **Lessons learned**

Since 2010 and especially since 2011, the number of PI's is declining steeply. A first analysis revealed that this is a general trend that is possibly related to two factors, namely the general scepticism toward development cooperation and a shift in the attention to poverty projects in our own country. In view of this trend, Cordaid decided to mould the support and guidance of PI's much more in the form of a multi annual cooperation and joint financing of projects in the South. Special attention is paid to immigrant organisations in this regard. This modality has proven to be successful and we are now building a multi-annual cooperation with a growing number of organisations.

# Strategic financing

Fund commitments totalled  $\leqslant$  9.0 million, including  $\leqslant$  2.1 million from private initiatives. In 2011, Cordaid (co-) financed 344 projects, while more than 200 households received a one-time amount of money to overcome an acute emergency situation.

- The programme contributed to the funding of 352 private initiatives
- It worked in this together with 234 partners
- The total amount committed in 2011 was € 9.0 million (included under the programmes)
- 296 contributions were assigned for partners and projects
- Teaching packages were used by more than 446,000 students

# By way of illustration:

Although there may be more than 100,000 undocumented women and children living in the Netherlands, only 2,000 women are actually 'visible' for aid provision. Cordaid is supporting a project that distributes information about the assistance provided to undocumented women and children, and that will also make an inventory of the existing aid agencies, as well as of the rights and regulations provided for in Dutch legislation.

# Knowledge development

In 2011, knowledge was gathered about the conditions that allow immigrants to make a temporary contribution to the development of their countries of origin, and about how the existing regulations, facilities, and programmes are conducive to this. At the same time, we have laid down criteria for making a successful match between the immigrants' expertise and the demands of local organisations.

Commissioned by the Muslim organisation, *Samenwerk-ende Moslims Hulp Organisaties* (SHMO), and with financial assistance from Cordaid, a study was conducted about



The Hague: Protest against the penalisation of illegal residency, because Cordaid believes that a person can never be illegal.

how Muslim and Christian organisations are dealing with poverty reduction. Three outcomes should be noted: there are significant coincidences between Christianity and Islam in terms of their practices of fasting and solidarity with the poor; raising awareness in this sense has to start in primary school; and the Lenten Campaign has ample experience with teaching packages, which SHMO can use to distribute its own teaching packages on the subject of Ramadan in Islamic schools.

The penalisation of illegal residence and other factors put a growing pressure on persons living illegally in the Netherlands. At the same time, their return to their countries of origin is plagued with difficulties. Hardly any research has been conducted on the significance of social networks for international immigration in relation to returning (motivations, barriers, and support from the network). A study about transnational networks for returning immigrants, conducted by the Erasmus University in Rotterdam, is expected to fill this knowledge gap.

# Lobbying and advocacy

The cries of distress from the church's social work sector related to poverty in the Netherlands gave rise to the *Armoedesignaal 2011* (Poverty Signal 2011), a publication commissioned by Cordaid and others. Almost 70 aid organisations participated in the survey. Its main outcomes were that the requests for assistance are increasingly related to primary necessities, the debt issue and red tape in government agencies are standing in the way of finding adequate solutions, and the diaconal organisations' spending on aid has increased by an average of 25%. The report was discussed during a conversation with the Secretary of State for Social Affairs.

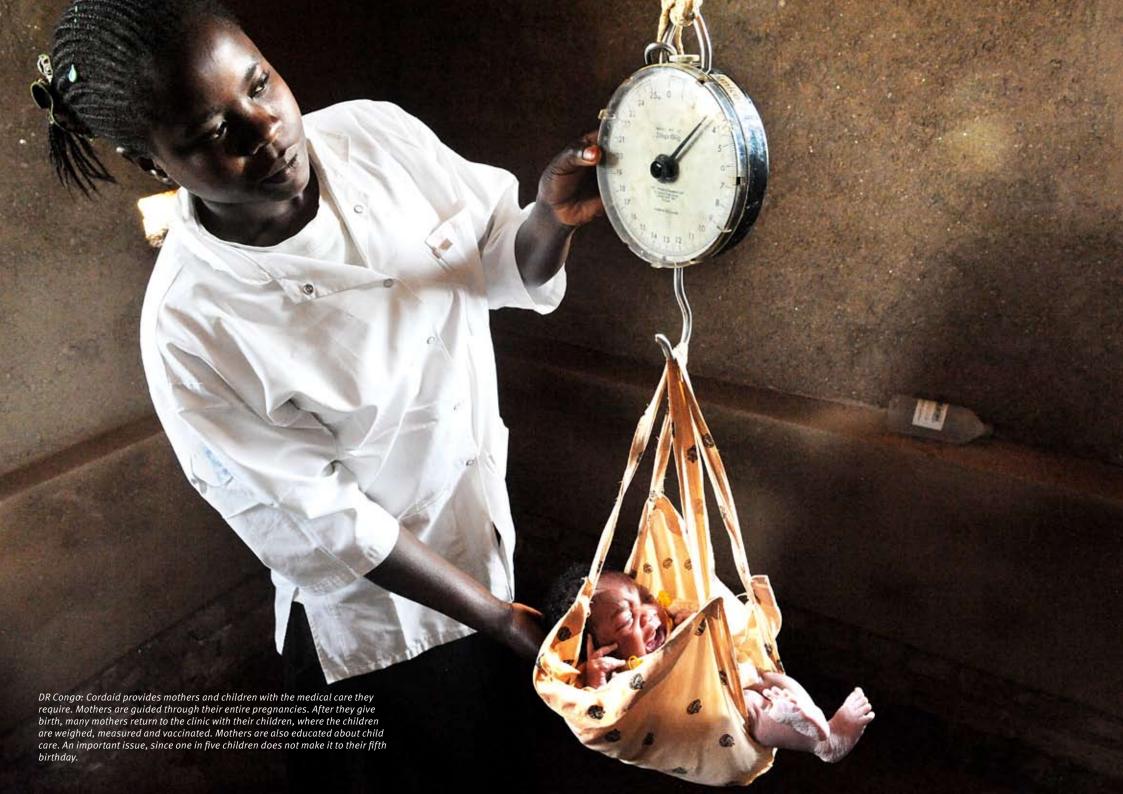
Together with Justitia & Pax, we continued lobbying against the penalisation of illegal residence and for providing assistance to illegal residents. Within the framework of our cooperation with Justitia & Pax, attention was also paid to the UN Human Rights Council *Second Universal Periodic Review* of the Netherlands concerning the treatment of illegal residents, refugees, and asylum seekers.

# A call against the penalisation of illegal residence

*9 March:* The penalisation of illegal residence proposed by cabinet does not contribute to a greater security and public order, but rather increases tensions between groups and is a violation of human rights. This was the declaration made by a large number of churches, trade unions, municipalities, and child rights and migrant organisations. Cordaid was one of the signatories of the declaration.

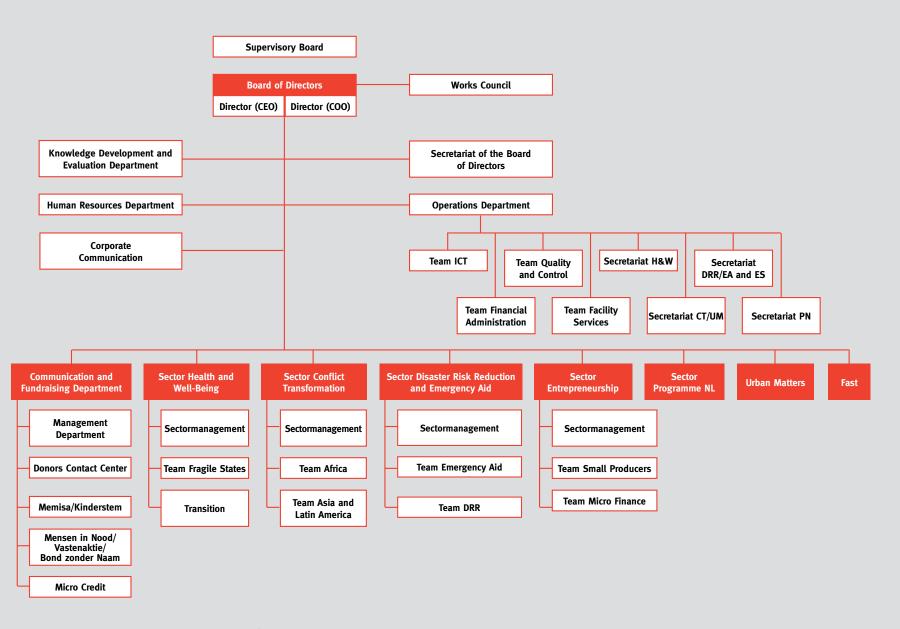
14 December: The Upper Chamber approves a bill to penalise illegal residence in the Netherlands. Many of the undocumented foreigners residing in the Netherlands are

at risk of having to pay a heavy fine or spend up to six months in prison. In Cordaid's opinion, penalisation is a disproportionately strong measure. The illegal residents will hide even better and become the victims of extortion and human trafficking. They will hesitate to go to the doctor or to send their children to school. In Cordaid's opinion, the new law is also contrary to the European Return Directive, which offers guarantees for the protection of foreigners and provides for maximum detention terms for foreigners.



# 1 Appendix

Organisational Chart and explanation



# 2 Appendix

Overview of concentration countries, programmes and spending

(in € million, and > € o.1 million)

The regions and countries in italics are fragile contexts/ conflict regions

Spending of the Programme in the Netherlands is included in the other programmes' spending

	1	2a	2b	3	4	5	Others	Total
Africa	Conflict Transformation	Disaster Risk Reduction *	Emergency Aid	Health & Well- being**	Entrepreneurship	Urban Matters		
Burundi	2,4							2,4
Central African Rep.	2,0							2,0
DR Congo	9,5							9,5
Ethiopia	0,9	1,4	2,3	0,6	0,3			5,5
Ghana				2,3	0,9			3,2
Cameroon				3,1				3,1
Kenya	0,5	2,3	2,7	0,3		0,5		6,3
Malawi		0,2		1,6	0,4			2,2
Nigeria	0,3							0,3
Uganda		0,8		1,8				2,6
Sierra Leone	2,4			0,2				2,6
(South) Sudan	3,6		0,4					4,0
Tanzania				0,8	1,9			2,7
Zambia		0,5			0,4			0,9
Zimbabwe	7,7							7,7
South Africa						0,4		0,4
subtotal	29,3	5,2	5,4	10,7	3,9	0,9		55,4

	1	2a	2b	3	4	5	Others	Total
Asia	Conflict Transformation	Disaster Risk Reduction *	Emergency Aid	Health & Well- being**	Entrepreneurship	Urban Matters		
Afghanistan	9,9							9,9
Bangladesh		0,5	0,2	1,4				2,1
Philippines	0,5		0,1	1,2	0,2			2,0
India	0,9	0,8	0,6	3,6	2,5			8,4
Indonesia	- 0,3***	0,7	0,2	0,3				0,9
Palestinian Territories/ Israel	0,5							0,5
Sri Lanka	0,1		- 0,5***					- 0,4
Vietnam					0,7			0,7
Pakistan			5,3					5,3
subtotal	11,6	2,0	5,9	6,5	3,4			29,4

	1	<b>2</b> a	2b	3	4	5	Others	Total
Latin Am.	Conflict Transformation	Disaster Risk Reduction *	Emergency Aid	Health & Well- being**	Entrepreneurship	Urban Matters		
Bolivia					3,0			3,0
Colombia	0,5							0,5
El Salvador		0,2				0,5		0,7
Guatemala	0,3	0,4						0,7
Haiti	1,7		9,7					11,4
Honduras	0,4	0,1			0,4			0,9
subtotal	2,9	0,7	9,7		3,4	0,5		17,2
Others							2,8	2,8
TOTAL	43,8	7,9	21,0	17,2	10,7	1,4	2,8	104,8

<sup>\*</sup> includes commitments through the Partners for Resilience alliance;

<sup>\*\*</sup> idem through the Connect for Change alliance;

<sup>\*\*\*</sup> the negative amounts are the result of reversed commitments because of the balances at closure or interim adjustments in project implementation. For example, in Sri Lanka a significant commitment for a resettlement project was reversed because the government took too long in granting permission and so the time that remained until Cordaid left the country (and closed its supervisory field office) was no longer sufficient for full implementation; this situation became worse due to the partly deficient performance of the local partners involved.











