Emergent Agency in a Time of Covid-19
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Executive Summary

The ‘Emergent Agency’ research

The outbreak of the COVID-19 pandemic was an unprecedented event in the modern era. Earlier studies demonstrated how ‘critical junctures’, which comprise major historical events and emergencies, often play an essential role in social change. The ‘Emergent Agency in a Time of Covid-19’ sought to explore whether the COVID-19 pandemic would prove to be a similar pivotal moment, and what lessons and insights we could gather for positive social change. The research project was enabled with funding from The Atlantic Fellows for Social and Economic Equity programme (AFSEE) of the London School of Economics.

The research set out to find key insights on how individuals, communities, and organizations in civil society were responding to the pandemic in low-income populations at the intersection of multiple inequalities. These lessons could inform how donors, governments and NGOs might reshape their efforts to reduce emerging or deepening inequalities, and how civil society organisations (CSOs) and community-based organisations (CBOs) could amplify their positive impacts.

Above: Villagers affected by cyclone Amphan in Bangladesh collect safe drinking water from Shushilan, an organization that works with Oxfam in Bangladesh, in May 2020. Photo: Fabeha Monir, Oxfam
Over 18 months, from September 2020 to March 2022, the ‘Emergent Agency’ research convened a global conversation between activists, development practitioners, researchers and academics to better understand the phenomena that were taking place in response to the pandemic. The research collected more than 200 case studies and held a series of webinars and conversations in thematic clusters to uncover what these responses could teach us.

Three core research questions formed the backbone of the data review and conversations:

1. What individual and collective agency is emerging among low-income households and communities across groups at the intersection of multiple inequalities; precarious and informal workers; and non-state actors?

2. How can these experiences reshape how donors and governments understand needs, vulnerabilities and agency, and inform efforts to reduce emerging or deepening inequalities?

3. How can these examples inform how CSOs and CBOs amplify impacts through policy influencing and other efforts to increase their positive impact?

**Findings and insights**

Civil society responded in incredibly rich and varied ways. It repurposed existing work and created new ways to:

- meeting practical needs
- providing safety and emotional support (including to address the increasing gender-based violence during lockdowns)
- providing much needed information and tackling misinformation
- supporting digital access, particularly in education
- building capacity and relations with others for advocacy or service delivery
- protesting and advocating for equality and rights.

When the pandemic hit, most responses initially focused on direct service delivery of basic needs. Travel restrictions and lockdown favoured local response, and the new connection between local action built new coalitions and new opportunities for advocacy. The efficacy of first responses was heavily influenced by pre-existing trust between responders and communities. The pandemic clearly exposed multiple inequalities, with people at lower income, informal workers, carers, and others lacking social protection being more vulnerable to a sudden loss of income. This sparked new initiatives, protests and advocacy.

The increasing reliance on digital technologies further expanded opportunities for international networks and communications. The nature of the response, marked by trust and digital literacy, favoured the emergence of new leadership – particularly women and young activists. But digital becoming a basic necessity for education and work risked exacerbating existing inequalities in digital access and literacy.
Local actors provided faster and more relevant responses

In the pandemic, geography was on the side of localization. The research highlighted that aid institutions and mechanisms were slower to adapt to the fast-moving context of Covid-19. Systems based on lengthy approvals, complicated bureaucracy, and international or centralised capacity were unable to provide fast and targeted responses.

Communities increasingly turned to community leaders or other individuals, faith organisations, CBOs, neighbourhood associations and customary structures to provide an immediate response. Local actors were essential for the C-19 response. They were able to overcome many of the challenges faced by larger organisations thanks to agile and flexible structures, physical proximity and granular knowledge of the community, and, in many cases, trust of the community.

The changing role of civil society and its shifting relationship with the State

The pandemic affected relationships between civil society and authorities. It unearthed new actors, amplified the role of existing players, and altered power dynamics. Where governments were unable to respond to the needs of their citizens, civil society acted as an implementer, with government relying on civil society to collect data and provide direct support.

Particularly in conflict-affected locations where governments were less present, civil society was already playing a significant role. Here, Covid-19 triggered an expansion of existing support services. In other locations, groups had to change roles, with advocacy actors finding themselves being first responders and taking on an additional service delivery role. These sudden shifts can mean long term changes in how the state, civil society, and people interact.

Trust shaped the COVID-19 response

With the normal flow of funds and relationships interrupted, whether by physical isolation, state repression, or sudden poverty, trust became the currency of response. People fell back on the reciprocity and security of their trusted networks – family, friends, neighbours and allies – to get things done amid adversity. Therefore, Covid acted as a wedge, making existing relationships of trust more important in some settings and enabling the use of misinformation and distrust in institutions for political gain.

New relations of trust enabled, and were strengthened, through the new networks and coalitions that became part of civic response. Broader social trust gave public legitimacy to leaders and institutions and their ability to influence in their communities, for examples related to C-19 prevention or mobilising for help.
The pandemic acted as ‘social glue’ for coalition building

The pandemic has pushed networks of activists and organizations to work collaboratively, building coalitions within civil society and with businesses to organize larger-scale and more coordinated responses. Novel links of trust have been created by collaboration of actors at the local level, with trust built through service delivery mutating into opportunities for advocacy and systemic change.

New coalitions have also been favoured by the uptake in digital connectivity and a keenness to learn from others. Sharing stories, documenting successes (and failures), and promoting regular interactions have been an important aspect for testing new strategies and learn from the efforts of others. It also helped sustaining the mental health of many people working in CSOs.

Emergent leadership: women leaders and young actors

New leaders stepped up in the pandemic, particularly women and youth, often with little prior leadership experience. C-19 required digital skills that saw many new youth leaders. New leaders came on the back of a massive surge in activism among informal groups and networks, including women’s organisations. The pandemic gave local actors, at least temporarily, a degree of additional informal power and authority.

Young digital natives were able to capitalize on their digital knowledge to find innovative solutions during the pandemic. Young activists working with peers better understood the issues faced by young communities during lockdown, often finding innovative solutions, and reshaping their role in assisting them.

The realities of exhaustion, stress and financial pressure

Romanticizing the everyday heroes who gave time and energy to feed, comfort, and care for those around them, belies the deep exhaustion and emotional stress that many experienced. The length and scale of the Covid-19 pandemic, and its compounding with pre-existent crisis, has mentally and financially exhausted civil society, NGOs, national donors and communities. Stress of local leaders includes financial worries due to increased need, concern for their own livelihoods, the need to navigate new ways of working, and the emotional strain of leadership responsibilities. Individuals, groups or leaders were spending more time in their role of first responders voluntarily, reducing their own ability to provide for themselves and their families.

Harnessing digital technology risks leaving some behind

The pandemic accelerated the uptake of digital means and online services. It created many opportunities for greater inclusion, connectivity, speed, and scale. Civil society and the aid sector were able to draw on new practices made possible by the new digital spaces, such as knowledge sharing and increased inclusion of those in the most vulnerable situations to be included in the planning and rollout of programmes and solutions. The shift to digital enhanced the importance of information and the dangers of misinformation. Many responses sought to ensure communities had access to accurate and timely information and health advice. But the shift to digital had its downsides. It increased the need for digital literacy and access to the internet and technology, exacerbating pre-existing inequalities.
1. Introduction

As an organization dedicated to promoting progressive social change, Oxfam has had a long interest in how change happens. One lesson of this work is that so-called ‘critical junctures’ – such as wars, economic shocks and other emergencies – often play a pivotal and catalytic role in social change. Historical pandemics, such as the Black Death and the Spanish Flu have proved to be major political and social tipping points. It is therefore worth considering whether the COVID-19 pandemic might prove similar.

Anecdotes from the media, Oxfam colleagues, and other organisations suggested that the nature of civil society organizations (CSOs) was changing in response to the pandemic. More generally, people have been responding to the pandemic by acting, organizing, innovating and learning. We aimed to identify patterns in this ‘emergent agency’ (see: Box 1). We want to understand whether pandemic responses among low-income excluded communities around the world will create new organizations, or even new politics, and whether it will consolidate and validate pre-existing local agency and leadership. We also wanted to investigate how others can support, sustain and amplify their work.

Understanding these trends can help us understand how better to support civil society, not only through emergencies, also in day-to-day operations. They can also help us to better comprehend structural issues in international development. The trends could influence development initiatives and donor practices. Indeed, such trends could potentially inform what ‘building back better’ from the pandemic will look like for international NGOs (INGOs), CSOs, community-based organizations (CBOs) and policymakers.

Box 1. Definition of ‘emergent agency’

We broadly defined ‘emergent agency’ as how individuals, communities and grassroots organisations respond to the new challenges brought by the COVID-19 pandemic, both of the disease and the official response, and how this agency is emerging or changing in its nature.

‘Agency’ was defined as ‘the capacity of an individual or group to actively and independently choose and affect change’. Agency can be progressive or negative (e.g., scapegoating minorities). It can be in the direct interest of the agent, or seek to help others (‘proxy agency’). It can propose or resist change. The definition was intentionally broad, as we were keen to look beyond formal politics, aid and civil society organizations to a wider spectrum of grassroots action by individuals and informal groups.

1.1 Rationale

The outbreak of the COVID-19 pandemic was an unprecedented event in the modern era. Governments, organizations and businesses struggled to adapt to challenging events and shifting restrictions. Travel restrictions and lockdowns impacted the ability of most aid organizations to deliver planned work, and caused major shifts in priorities, strategies, and ways of working. It cast into doubt the role of aid in both the short and long terms, whether for programming or advocacy.
For organizations like Oxfam, it was not initially clear what was needed nor how to adapt existing work to deal with social distancing, truncated lines of support and fewer staff. Early in the pandemic, Oxfam bolstered cash transfers and water and sanitation programmes and countered misinformation through learning resources, workshops, and MEAL frameworks. It also campaigned, notably on the People’s Vaccine and the inequality that was leading to vastly different levels of suffering from the pandemic. A real-time review found that offices in countries that already had humanitarian programmes found it easier to adapt quickly. Similarly, offices in countries with pre-existing social protection systems or frameworks with donors on humanitarian programmes found it easier to make rapid changes without lengthy authorization processes.

Over 18 months, many development professionals and activists started sharing stories of how civil society was responding to the pandemic, some of which were collected in Oxfam’s From Poverty to Power blog. We were keen to set up a way to collectively collate and make sense of these stories in more depth. The Atlantic Fellows for Social and Economic Equity programme (AFSEE) of the London School of Economics generously agreed to fund a research project called ‘Emergent Agency in a Time of Covid’ to collate and make sense of these anecdotes.

1.2 Research questions

Three core research questions formed the backbone of the data review and conversations in the context of the coronavirus pandemic and its economic and social fallout:

4. What individual and collective agency is emerging among low-income households and communities across groups at the intersection of multiple inequalities; precarious and informal workers; and non-state actors?

5. How can these experiences reshape how donors and governments understand needs, vulnerabilities and agency, and inform efforts to reduce emerging or deepening inequalities?

6. How can these examples inform how CSOs and CBOs amplify impacts through policy influencing and other efforts to increase their positive impact?

Additional questions emerged throughout the study:

- What new tactics have emerged under restrictions?
- How has devolved leadership changed?
- How should people at all levels care for carers?
- What changed in the dynamics between service provision and advocacy?
- Which elements might be sustained beyond the pandemic, if any?
- In the shift to digital, was there equality in digital inclusion?

And one main consideration on a potential bias:

- Was what we saw as ‘emergent’ truly new phenomena, the pivoting of existing local agency, and/or simply existing local agency becoming visible (to Western eyes)?

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a Furlough schemes were used on a vast scale in 2020–21 in the UK, allowing organizations and businesses to retain staff, with salaries heavily subsidized by the government.
2. Methodology

The ‘Emergent Agency in a Time of COVID-19’ project was conceived as action research that sought to convene a global conversation between activists, development practitioners, researchers and academics to better understand the phenomena that were taking place in response to the pandemic. When we conceived the project, we could only describe an emerging set of phenomena. We thus sought to be adaptive, rather than follow traditional qualitative research conventions.

Our starting point was not a detailed methodology; instead we were guided by a set of key principles (see Box 2) and a flexible framework.

Box 2. Research guiding principles

- Be grounded in lived examples
- Follow cycles of collection, collation, sensemaking
- Adapt – if something does not work, try another approach
- Be agile and open in terms of participants and approaches to data collection and sensemaking
- Balance inclusion and feasibility given limited funds and timing
- Be rooted in global conversations
- Don’t wait for perfection – share work in progress
2.1 Process and research elements

The framework identified four phases of research:

1. **Grounding.** A brief literature review.

2. **Collecting and sorting.** Crowdsourcing as many short examples as we could find and fund more detailed cases including drawing on participants in conversations to share undocumented examples.

3. **Analysis.** Looking for patterns into specific topics and across all the examples.

4. **Uptake.** To ensure that participants could also be end users, we provided webinars for thematic sub-groups.

We put a call out through a blog on *From Poverty to Power* and shared it via various channels on September 9, 2020, asking for academics or practitioners to participate. Over 90 people signed up across 36 countries, including civil society and social movements’ activists, development and INGOs’ professionals, academics, educators, and other interested individuals. We identified topics based on those participants were keen to discuss. We formed nine topic-specific clusters:

- Social movements
- Women’s organizations
- Faith organizations
- Education
- HIV/AIDS
- Children and youth
- Livelihoods
- Informality and the state
- Peacebuilding.

Clusters took on a life of their own, choosing how frequently to meet and what tools to use. Each had one or two volunteer conveners. Some clusters undertook primary data collection, others collating existing material. All clusters were driven by the core research questions (see Section 1.2) and convened sporadically for cross-cluster analysis. They also sought to answer topic-specific questions that emerged.

Our original framework anticipated data collection through the clusters and therefore crowdsourcing, as well as through country-specific primary data collection. The quantity of material we received in the initial phase made evident the need and value of a publicly available database. We created a database of existing case studies to serve as a source of secondary data by finding, tagging, and summarizing more than 200 case studies. The involvement of Dr Laurence Cox at Maynooth University resulted in 53 additional brief cases being documented by students. Oxfam colleagues and partners created new case studies of emergent agency from the Philippines, Somalia, the Democratic Republic of Congo (DRC) and Nigeria towards the end of the research project. The bulk of the research took place between July 2020 and July 2021, with new country case studies emerging into early 2022. This report is a product of the analysis of a database of around 200 case studies, over 30 cluster conversations, 40 blogs and three webinars.
We drew on and collaborated with similar work, such as that by Civicus,\textsuperscript{13} the Carnegie Endowment for International Peace,\textsuperscript{14} the Institute of Development Studies,\textsuperscript{15} Interface\textsuperscript{16} and the Religious Responses to COVID-19 Project.\textsuperscript{17}

Our understanding of the pandemic evolved rapidly from March 2020, both because of the conversations and exchanges in the project, and because of our wider reading and exchanges with similar initiatives elsewhere. That meant that the research questions themselves evolved and changed as the project went on, and boundaries between what was and what was not a ‘finding’ of ‘our’ research was increasingly blurred. Although that might have been a problem for a conventional research methodology, in this case it was embraced as in keeping with the overall approach.

2.2 Caveats

Our outreach capacity was limited. Interest in the project quickly snowballed beyond our own networks, but we had limited time to extend outreach accordingly. This was due to the need to react quickly to engage researchers and collect lived experiences in the first phases of the pandemic, but also due to limited resources that made it difficult to include non-English languages and some significantly different time zones in the project’s conversations.

We struggled to meaningfully engage activists and those working more directly ‘on the ground’. Therefore, the process favoured participants working in academic institutes and larger NGOs, thus risking being extractive in nature. However, some participants have shared the solidarity benefits of these exchanges, especially among local activists from different parts of the world, but also among INGOs. Beyond the participants themselves, most case studies and examples we had access to also encountered similar limitations.

Bureaucratic delays in Oxfam meant that the country-based research did not feed directly into the cluster conversations as initially imagined, but rather emerged later as separate pieces that served to illustrate and nuance the findings of the wider project, including this report.
3. Findings

At the outbreak of the pandemic, China and most governments in Europe and the US responded by imposing strict lockdowns on movement and travel (see Figure 1). With initial infections primarily in these areas, it soon became clear that those strategies would not be necessarily adequate or feasible for many parts of the countries with weaker social protection and precarious livelihoods. Self-isolation, staying at home and sanitizing hands were difficult or impossible in high-density communities, including refugee camps and low-income urban settlements. People with lower incomes, including minorities, women and youth, were hard hit, mostly due to their reliance on the informal economy and manual labour. Restrictions on INGOs meant that systems based on external actors or linkages were often useless. This immediately shifted reliance to local expertise, with an accompanying shift to local networks, knowledge, leadership and resources.

Figure 1: The multiple effects of COVID-19 on INGOs, development and research contexts

Lockdowns
- Travel restrictions
- End face-to-face interaction

Challenge for INGOs
- Travel restriction for experts, facilitators, etc
- Shift to local knowledge, leadership, resources
- Pivoting strategies

Initial epicentre in countries with stronger social protection
- Inadequate policies for countries with weak social protection
- Shock reverberated through value chains

Individual and group responses to COVID-19 have varied in scale, origin and purpose, with a wide range of forms. Many efforts have grown and changed as needs and opportunities shifted. Over the course of the pandemic, some volunteer groups moved from supplying food and medicine to supporting mental health, or widening to provide multiple forms of support. The levels and scales at which civil society has been responding has ranged from one-on-one practical support to international advocacy.

New mutual aid groups have sprung up in urban neighbourhoods, villages and refugee camps. One example is in Eswatini, where communities came together to meet needs arising from unemployment and other social disruptions. Community-led responses included ‘shared living’ to help make ends meet, with mutual support to obtain and provide services. The activists involved in the response explained how ‘a sense of community came into the frame’. Saferworld has documented similar examples in Yemen, Somalia, South Sudan, Myanmar and Nepal.
In other cases, pre-existing groups ramped up their work, including providing additional support to widows, migrant workers or those at risk of domestic violence. In Lebanon, for example, HIV support network MENA Rosa, seeing a rise in domestic violence, provided additional support and counselling to women. National and global alliances have been another common form of scaling, given the range and reach of efforts needed.

3.1 Path dependence and political context

Civic responses were influenced by national histories of social organization and self-help, state effectiveness, the nature of the social contract, as well as political, social and economic trends. For example, an upsurge in Mexico’s feminist movement in 2019 shifted rapidly into online organizing once the pandemic hit, with online workshops, reading groups, and seminars. The responses of groups in Delhi, India, were built on civil society networks that mobilized during pre-pandemic protests, with actors providing immediate relief and advocacy for those most affected by the lockdown. Nigeria’s #EndSARS movement, which started in 2018 demanding the abolition of the Special Anti-Robbery Squad (SARS) and its brutal practices, gained new traction in October 2020 with nationwide demonstrations and social media actions against police brutality, which were violently repressed.

There are dangers in Western researchers seeing the pandemic as a once in a lifetime health disaster, rather than assessing its significance in each context, especially places with greater endemic insecurity. For example, in Somalia, it was initially seen as the third most important disaster, after drought and locusts. However, by mid-2021, COVID-19’s priority appeared to be shifting, as the extreme inequality of the vaccination rollout led to many rich countries reducing some of its initial pandemic responses, while more contagious variants of the disease led to an alarming growth in lower-income countries and communities.

Much of the civic response was shaped by the actions of the state (see Table 1). In conflict-affected contexts, the state is often absent or predatory, with community groups used to being first responders. COVID-19 seems to have reinforced these roles and authority for local CSOs. Faith organizations, customary authorities, women’s rights organizations hold relationships of trust with communities that authorities need in order to get access for COVID-19 responses and services.

Many governments’ belated responses led some CSOs to distribute personal protection equipment (PPE) and food. For example, groups working on HIV supplied PPE alongside their existing support. Over time, some took part in the vaccine rollout, given that some governments were weaponizing distribution, while long-standing corruption and lack of legitimacy led to a lack of trust in government-distributed vaccines in other places.

History did not stop or focus exclusively on COVID-19. As COVID-19 became the ‘new normal’, the boundaries between pandemic-related and other activities became increasingly blurred. For instance, the pandemic shaped the nature of the protests in response to the coup in Myanmar, #EndSARS in Nigeria and the global Black Lives Matter movement.

While some responses have been novel, others have been grounded in existing organizations or groups. For example, in South Africa, Gender Dynamix, an organization supporting the rights of LGBTQIA+ people, needed to shift focus from advocacy towards service delivery for transgender people. In Argentina, RedTraSex, a network organization focusing on the rights of sex workers, pivoted to address the immediate needs of sex workers facing difficulties because of COVID-19.
Table 1: Roles, relationships and forms identified in case studies

<table>
<thead>
<tr>
<th>Nature of state responses</th>
<th>Forms of civil society interactions</th>
<th>Forms of emergent agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effective</td>
<td>Spotting gaps but largely secondary to state mechanisms</td>
<td>Direct service delivery (independent, co-opted, or in conjunction with state)</td>
</tr>
<tr>
<td>Absent</td>
<td>Self-help delivery</td>
<td>Advocacy to improve state response</td>
</tr>
<tr>
<td>Kleptocratic</td>
<td>Resisting and replacing state mechanisms</td>
<td>Resistance to state attack or theft</td>
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<tr>
<td>Repressive</td>
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<tr>
<td>Populist</td>
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</tbody>
</table>

3.2 The emergent responses

The more ‘emergent’ responses have occurred where previous efforts were non-existent or inadequate, with a void left by government. In principle, social movements are distinguished from other kinds of emergent agency (e.g. protest, resistance, community-based organizing) in that they are conflictual – normally representing a conflict with the state, corporations or dominant groups. This can create particular difficulties in relationships with some donors, states and INGOs. Emergent social movements are a fluid form, however, and in some cases may be met with engagement, concessions or co-option by the state. They may even institutionalize themselves into NGOs, charities or other forms. All these complexities in organising forms and relationships – either with the State or between members – have been heightened during the pandemic, which has been consistently marked by restrictions on people coming together informally.

Some pre-existent organisations have been able to create new networks and leverage their influence to fill in for government inadequacies. For example, through a consortium of health providers, support has been provided to India’s National AIDS Control Organisation (NACO) and State AIDS Control Societies. Alliance India, a non-governmental organisation that supports sustained response to HIV, has been involved in medicine transport to antiretroviral therapy (ART) centres. Project coordinators and staff from care and support centres are also working as supplemental staff at ART centres to help dispense medication. Other forms of support, included PPE and financial support for frontline workers, delivery of ART to the home for people living with HIV stranded or finding it difficult to attend clinics, telephone support on ART adherence and COVID-19 screening, as well as nutritional support.29

Such collaboration with government structures confirms that CSOs can provide vital support for government systems during crises affecting communities. When the pandemic hit Nepal, The Community Self-Reliance Centre (CSRC)30 and the Land Rights Forums (movement-based organisations working to generate participation for policy influence) have leveraged their relationships with communities to provide the government with accurate real-time data and information, and supported the local response by coordinating advocacy from CSOs in support of landless and smallholders peasants.31

Organisations providing important health services needed to adapt to the limitations imposed by strict lockdowns. For instance, HIV-related CSOs needed to be especially innovative because of the need to maintain treatment access – in many cases by scaling up to fill gaps left by weakened health and social systems. Many organizations in the HIV sector advocated for their services to be considered ‘essential’ so they could operate under lockdown rules. Nonetheless, the director of Alive Medical Services32 in Uganda had to present related paperwork to the police to release HIV community workers...
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from arrest for breaching infection control regulations. This example illustrates the difficulty that many CSOs encountered in navigating the social and political environment during the pandemic and the contested space in which CSOs operated.33

3.3 Purposes of adaptation

3.3.1 Meeting practical needs

With the loss of normal sources of income, food, healthcare and education in low- and middle-income countries, finding alternative forms of service delivery became urgent.

Marginalized groups and informal workers were especially affected, for example those who are criminalized, such as sex workers. They do not work legally, so cannot easily access social security programmes for people who have lost their jobs. In addition, transgender people, whose identity cards often do not match their current identities, find it difficult to access government aid programmes. In response, for example, the Networking HIV & AIDS Community of Southern Africa (NACOSA)34 provided food vouchers for sex workers.35

Local healthcare delivery needed alternatives when normal access to medication or qualified healthcare became impossible, or transport became impossible. The HIV/AIDS cluster saw examples of greater autonomy through self-testing, home deliveries and self-administration of HIV treatment and opioid substitution treatment (OST) for people who use drugs, notably in Mizoram, India through the efforts of drug users’ forums. These had long been a demand of activist organizations, but have now been accepted by some governments and shown to work.36 COVID-19 therefore forced innovation and accelerated the resolution of advocacy demands. Similarly, the Alliance for Public Health (APH)37 found that there were a number of innovations to help HIV and TB communities access services, such as home-based laboratory visits in Georgia, electronic prescriptions for long-term take-home supplies of ARVs in St Petersburg, Russia, and increased connectivity with rural areas thanks to online consultations with patients in Kyrgyzstan.38

New needs for PPE meant local sources of masks and handwashing options emerged. In Somaliland, in the face of elite capture of resources, feminist collective Siraad39 hand-delivered face masks, gloves and hand sanitizer to local women. According to Fardous M. Dheere, founder of the Siraad Initiative:

Somaliland received thousands of donations during the pandemic but only government officials, staff members and people of high rank or status had access to these donations. The average woman selling meat or milk in the crowded marketplace knew nothing about the virus and had no access to protective gear. It is for this reason that we chose to serve and support these women.

Fardous M. Dheere, founder of the Siraad Initiative40

Mass food distributions were organized in Kibra, Kenya41 by a new network of activists. The cluster conversations revealed how low-income urban women became central to food delivery in the Philippines and Brazil, providing them with both income and nourishment.

Spontaneous efforts to support survival at its most elemental – oxygen – took place, for example, in India, with a very public search for oxygen cylinder. This led to local initiatives raising funds and seeking to get cylinders to the people who needed them in low-income and low-status communities.42
3.3.2 Providing safety and emotional support

Increases in domestic violence were widely reported, with women trapped in confined spaces for extended periods with men venting frustrations on family members.

Feminist activist collectives used social media to create support networks. In Mexico, for example, Las del Aqueilarre Feminista43 opened a support phone line with pro bono professional therapists and secret codes for use by victims of domestic violence unable to contact the emergency services directly.44

In China, a feminist activist support group met every evening on WeChat, bringing a feminist perspective to the lockdown, sharing ways of engaging with social issues, and explored possible strategies to ‘help individuals overcome a sense of vulnerability’.45 This led to an anti-domestic violence campaign to raise public awareness. An open letter was published online calling for an end to domestic violence and encourage people in need to seek support from a hotline. It then encouraged people to post the letter in public spaces in the neighbourhoods. ‘In just a few hours, several thousand people volunteered to become “little vaccines” [volunteers]46 in spreading out this message.

In Nigeria, Education as a Vaccine47 created safe online spaces to share information about services for sexual and reproductive health, and to deal with violence against women and girls. They used radio jingles, helplines and campaigning to have services addressing violence against women and girls classified as essential services.48 The gender team at Frontline AIDS created several resources on the nuances of the relationships between COVID-19, HIV and gender, from information materials for young people living with HIV and their carers,49 to a technical brief on how to respond to pandemics in a gender-just manner.50

Also other minorities were at increased risk during the pandemic. In Uganda, a shelter used by transgender and LGBTQIA+ people as a safe space during the COVID-19 lockdown became a focal point for negative reactions in the neighbourhood. An ensuing police raid forced its relocation to ensure the safety of clients and a safe place to enable adherence to infection control regulations.51

3.3.3 Tackling misinformation

Misinformation about the virus spawned media-related responses from CSOs. Women’s rights organization Sirad Initiative recognized the effects of misinformation and how quickly fake news spreads. Many Somalilanders, including women working in marketplaces the initiative was targeting, believed that the pandemic was like influenza and that Africans were immune to its symptoms. This led people to ignore COVID-19 regulations set in place, so the initiative worked to correct ignorance and misconceptions.

It was not the only case. In Uganda, groups such as women’s Village Savings and Loan Associations are digitizing their services and outreach at far greater speed due to the pandemic. Besides the financial services, they are using technology (video messaging, community radio) to spread much-needed awareness on the outbreak and how communities need to prepare and respond. This kind of messaging from trusted sources is especially important given the stigma.52

CSOs also played the crucial role of providing focused information for specific groups and minorities. In Kenya, Jinsiangu, an organization working to increase safe spaces for intersex, trans and gender non-conforming persons, noted there was little COVID-19 information aimed specifically at gender minorities. Their response was to provide information about safety and staying safe during COVID-19, online and via telephone hotlines53. This approach was mirrored in South Africa by Gender Dynamix54.
In India, misinformation and vaccine hesitancy, together with stigma and discrimination, were keeping marginalized populations (such as migrant workers, sex workers, people living with HIV and LGBTQIA+ people) from accessing COVID-19 vaccines. The Gujarat Network of People Living with HIV/AIDS (GSNP+) reached out to those populations, providing accurate information and a safe place to access vaccines, working in collaboration with the local government.55 A community coordinator working with sex workers explains how she led by example:

There are a lot of rumours around the COVID-19 vaccine, some people said your health condition will deteriorate after taking the vaccine, some said that you might even die. But with all the motivation from GSNP+ and their advocacy activities to break the vaccine hesitancy, they eventually took the decision to have it…. I took the vaccine first to show the rest of the community that it is totally safe and to encourage them to participate in the vaccination camp.

Amrin, community coordinator at Sahvog Mahila Mandal

Tackling misinformation in digital spaces has been an ongoing battle for many young activists, with some building independent platforms during the pandemic. Stowelink57, a youth-led digital enterprise in Kenya, is gathering and disseminating up-to-date, accurate information about COVID-19 in English, Kiswahili and Amharic. To curb fake news and quell panic in South Africa, two recent graduates of the University of Cape Town created Coronapp,58 a website to centralize pandemic-related information.59

### 3.3.4 Protest and advocacy

As government responses to COVID-19 such as social distancing or prolonged lockdowns started to limit the usual forms of civic space, responses started to include protest, as well as advocacy. For example, in the DRC, abusive police have sometimes found themselves violently expelled from neighbourhoods by largely spontaneous citizen action60. The violent implementation of lockdown rules by Uganda’s paramilitary, the so called ‘Local Defence Units’, as well as its serious impact on economic survival, have triggered widespread criticism and resistance in north-west Uganda61. Other times protests have sparked against the mismanagement of resources by governments. For instance, in Jos, Nigeria, crowds stormed government warehouses62 where food and other pandemic-related supplies were being held.

Some forms of advocacy have propagated through cultural customs and identities. In Mozambique, the popular reggae fusion band GranMah released *Esta nas tuas Mãos*63 (‘It’s in Your Hands’), a video with advice on handwashing techniques and alternatives to handshakes. In South Africa, the renowned Ndlovu Youth Choir composed, performed and filmed a musical rendition of the World Health Organization’s COVID-19 safety advice, featuring translations in various South African languages.64

Three main types of advocacy efforts can be identified:

- Defending rights and holding the state to account;
- Demanding policy changes to meet practical needs; and
- Changing social views.

Efforts to defend rights and hold the state to account were a direct response to the centralization and militarization of pandemic responses, which led in some cases to violence and human rights violations. In the K’ara K’ara region of Cochabamba, Bolivia, protestors pacifically took the streets demanding more flexible quarantine rules in a context of hunger and lack of assistance. The protestors finally struck an agreement with local authorities after 10 days of resistance to police repression with tear gas and rubber bullets.65 In Honduras, a state decree66 instituted a state of emergency restricting
the constitutional right to freedom of expression without censorship. However, following pressure by the country’s media and press associations, as well as the appeal of twenty-one civil society organisations, the government re-established constitutional guarantees. In Kenya, a massive public uproar led to the interdiction of multiple officers and murder investigations related to dozens of killings by police while enforcing curfews.88

Other examples of abuse of power and rights violations have been documented in the Rights–Evidence–Action (REAct) tool, a database used by multiple organizations supporting people affected by HIV. CYSRA-Uganda used REAct to document incidents of ‘gender-based violence and general violations against young people living with HIV during the pandemic’. In Ukraine, the Alliance for Public Health used REAct, stating ‘we observed the largest percentage of violations by medical doctors [and the] second group was the police. [We are] internally dealing with each of the cases. But it was happening because of COVID increasing. In most cases, it was refusal in providing services. In other countries there were also brutal violations because of HIV status.’

Demands for policy change to meet practical needs included improving digital access in low-income settlements (see Section 3.3.5), and dealing with the explosion of domestic violence (see Section 3.3.2).

Normative advocacy to change social views most notably focused on gender-based violence.

3.3.5 Supporting digital access

Digital access has become crucial for many aspects of life during the pandemic, and the need for it has itself spawned new responses. Fundraising became digital for efforts such as the Kibra food drive (see Section 3.3.1). Strategizing went digital, as did the organization of protests. Not only was digital a means for advocacy, but it also became its focus. For example, social movements in Argentina began to pay more attention to connectivity and internet issues when virtual education made evident the inequality in digital access, with more than 45 percent of households in Buenos Aires’s barrios populares unable to access the internet. The Libres del Sur social movement organised a sit-in and other demonstrations demanding free Wi-Fi in the barrios, as well as computers for students. Some CSOs provided capacity building to ensure marginalized groups could maximise their digital engagement. In Lebanon, for example, MENA Rosa, working specifically with women affected by HIV in North Africa and the Middle East:

A lot of women are in remote areas – so we asked them to attend online events, so we were reaching more in the end. This is good and bad – for the secretariat it gave us visibility and we could attend the webinar, which broadened our horizons, and we could advocate and talk about sex workers and women. But at the same time, some people were left behind because they don’t have capacity or education or learning. We did sessions on how to use Zoom and Skype. But there is always the need to do more.

MENA Rosa, Lebanon and region

In the case of HIV, it was critical to maintain counselling and treatment adherence support during the pandemic, and increased use of e-health assisted this. However, the relocation forced on many by COVID-19 meant that, for example, young people from HIV key populations had to leave urban areas to return home and live with their families in more rural areas. Disclosing HIV status or sexual orientation in these situations could present significant challenges, with families not always sympathetic. Additionally, the facilities and privacy required to make use of digital support can be hard to access.
3.3.6 Capacity building

The need to strategize differently around civil society responses created opportunities to build new capacities among CSOs. Specific training emerged in technical areas, including the use of online technology, IT security and social media. In addition, organizations ran sessions on the practicalities of scaling up organizing, creative actions, internal democracy and diversity, and seeking funding or legal advice. South Asia Women’s Foundation74 pivoted from face-to-face reflections, strategizing and mobilizing to working entirely online. This was not without its pitfalls. For example, in Mumbai, large numbers of people had no access to mobile phones. It took the Foundation time to replace service delivery and engagement with virtual means.

3.4 Expansion and innovation

3.4.1 Entrepreneurial creativity

Entrepreneurial creativity started early on. In India, as early as 18 March 2020, before the national lockdown, about 500 women from the Self Employed Women’s Association75 produced half a million facemasks for distribution to its membership of over 1.7 million women workers in the informal sector. Across the 24 states of India, around 65,000 rural women, organized into 15,000 self-help groups,76 produced over 20 million masks by 12 April.77 This decentralized production model made logistics easier for delivery to local hospitals and customers. While these masks may not have been medical-grade PPE, they met an immediate need.78

Some businesses have emerged more slowly. In the Philippines, Veggies for Good79 started as a family humanitarian response that has grown into a social enterprise. It brought agricultural produce, including that of the indigenous Dumagat community to quarantined residential households. It did so by mobilizing impoverished women and displaced male labourers, using social media to match supply and demand and coordinate online purchases. One year after its conception in early-pandemic, its day-to-day operations were handled by urban low-income mothers and provided an alternative livelihood for them and many suppliers’ households adversely affected by prolonged quarantine in many areas in Luzon and Metropolitan Manila. It also connected vegetable farmers directly to consumer markets in the capital.

3.4.2 Collective non-violent responses

Activists found a multitude of peaceful means to speak out. In Palestine, in April 2020, feminists organized balcony protests against the surge of gender-based violence during the pandemic.80 Videos showed Palestinians banging on pots and pans, and hanging signs on their balconies to show solidarity with victims of violence. Climate activists in the Netherlands collected a thousand pairs of shoes81 and filled the square of the House of Representatives in the Hague, as a symbolic protest about the climate crisis while people were unable to meet in groups. In Singapore, young climate activists from the Fridays for Future global school strike movement held solo protests in April 2020 due to restrictions on peaceful assembly.82 In June 2020, human rights groups organized peaceful interventions to denounce the scale of the COVID-19 crisis in Brazil.83 For example, in Brasilia, protesters put up 1,000 crosses paying tribute to COVID-19 victims on the lawns in front of key government buildings, calling out President Jair Bolsonaro for his denials of the pandemic’s gravity.84
3.4.3 Digital organizing

The acceleration of digital uptake and innovation has led to new and, in some cases, more relevant spaces for action. Digital adoption and online presence accelerated in both work and non-work settings, with the digitization of services and greater online presence catalysing remote work, e-commerce, e-health and e-payments. Technology has expanded the scope of relationships with users and other stakeholders.

Civil responses increased the use of digital means for service provision and created new social spaces. Online tools have enabled more efficient organizing, with new opportunities for coalition-building. For example, some innovative responses for life under lockdown include the #ShareTheWifi campaign in Spain, where cyber-activists launched a campaign providing instructions on how to safely share the WiFi with neighbours in need, or the distribution of free solar-powered radios for education in Kenya. Digital spaces enabled many movements, organizations and communities to mobilize people, advocate for change, raise resources, brainstorm and strategize. Examples include the Nepalese activist broadcasting his 167km protest walk on Facebook; domestic workers unionizing via WhatsApp in Brazil; and the Xinka people of Guatemala adopting online tools for organizing - coupled with ancestral practices - to fight mining corporations. Social media influencers, musicians, poets, painters, social and political activists, and television and sports stars used their talents and social platforms to reach out to millions of people for positive social change. In South Africa, NACOSA collaborated with Instagram influencers to share important information with young people and HIV-affected communities on COVID-19 and health services.

However, with social media reshaping mass communication and guaranteeing faster circulation of information, misinformation and fake news has also spread. People’s reliance on social media has made it easier for authoritarian governments to restrict civic space, silence dissent and exercise authoritarian control. As Nampoothiri and Artuso summarised, ‘in 10 African countries, the pandemic was used as an excuse to increase state surveillance, weaponise Covid-19-related disinformation and fake news, implement Internet shutdowns, introduce legislation that reduced digital online privacy, rights and freedoms, and silence dissent from opponents and critics’.

Digital forms of agency have been changing rapidly, continually redefining who is able to engage. The digital divide remains a fundamental issue during the pandemic: between those who have and those who do not have access to technology, skills, literacy and languages necessary to engage online. However, where these barriers are overcome, the pandemic offered new opportunities for engaging in larger conversations. People in rural areas, and those with care responsibilities or disabilities, suddenly had much more scope to get involved than in the past. Ongoing tensions will be inevitable as organizations negotiate not just the question of face-to-face vs digital engagement, but also these tensions between working with somewhat different profiles or finding ways to bridge the gap.

3.5 The relationship between states and civil society

In many contexts, the pandemic has changed the relationship between citizens and states. New actors have emerged and power dynamics have changed. As the pandemic continues to rage around the world, these relationships are still in a state of flux; however, one key trend emerged from our research. Civil society has stepped in to supplement, coordinate or implement the delivery of services where governments have been unable to meet these demands. With civil society playing more prominent role in meeting citizens’ immediate needs, people’s views and expectations of their governments may change. As a result, some governments might feel at liberty to position themselves in a role of overseeing and coordinating, rather than delivering services.
We observed how in places with weaker governments – or in marginalized places such as disputed territories, conflict zones, remote islands and favelas – states have been largely absent. Stronger governments have still been stretched by the sheer extent of need, in some places relying on civil society to supplement or implement government support, or collect data on need. Authoritarian regimes have played a more central role, yet have also left civil society to independently deal with areas not prioritized by the government. These have often included mental health, domestic violence and supporting people living with HIV/AIDS and other long-term health needs. Multiple case studies demonstrate how civil society – existing and emerging, formal and informal stepped up to meet these overlooked needs.95

In conflict-affected places, the state is often absent or predatory, and civil society and community groups were already used to being the first responders. COVID-19 has reinforced that role. That may have bestowed on them a degree of additional power and authority – faith organizations, customary authorities, self-help groups and women's rights organizations traditionally enjoy relationships of trust with communities, and in many cases are now playing an enhanced role in providing services as well.

In some places, the state has used the pandemic to further centralize control, with lockdowns and heavily securitized restrictions. Some states have also clamped down96 on CSOs through increased surveillance, regulation and registration requirements. These restrictions have prompted civic action in the form of protests, coalitions and strikes. As civic action shifted to digital organizing, governments followed, with increasing restrictions on online activity.

Many CSOs over recent decades have shifted away from service delivery towards advocacy and campaigns – holding governments to account for providing services. Therefore, the pandemic has triggered something of a return to previous forms. The Carnegie Endowment97 argues that this move has increased CSOs’ legitimacy with local populations. Our research showed a further twist in this evolution. In some cases, organizations were using service delivery as an entry and meeting point, with increased coordination between individuals and organisations caring for similar needs and issues. In these instances, service delivery became a chance for coalition-building to generate advocacy activities as the pandemic wore on.

3.6 The role of overseas aid and local communities

This project has focused both on exploring the forms of agency that have emerged or become more visible in response to the pandemic, and how such processes can be supported from outside, whether through aid, political support or mutual learning.

The majority view from the clusters was that the aid system has not effectively responded. Participants portrayed aid institutions and mechanisms as inflexible, slow and unable to adapt to fast-moving contexts.

One of the clearest themes has been localization. Long before the pandemic, the international aid system had pledged to channel more resources and decision-making power to local and national organizations. This was seen as both morally right and potentially more effective.

When COVID-19 struck, previous efforts at localization paid off. For example, Chris Roche, Professor of Development Practice at La Trobe University, said: ‘in the Pacific it is pretty clear that prior investment in local agency and relationships is paying off in terms of resilience built on trust. Those that adapted quickly where those that had skilled local staff who themselves had rich networks and alliances which they were able to mobilise’98
The pandemic also triggered a degree of forced localization – with international aid officials unable to travel, there was little choice but to channel more resources to local organizations. A research programme aimed to uncover lessons for local aid response during COVID-19 in multiple Pacific Island States found that, in the absence of expatriates in the aid sector, Pacific Islanders perceived a more culturally literate work environment resulting in more relational and culturally appropriate ways of working. These included meetings being held in local languages, more systematic inclusion of prayers at the beginning and end of meetings, and less formality in general. Local responders spoke of a more relaxed atmosphere, with more laughter and less sense of surveillance. Moreover, Pacific Islanders pointed to the reduced need to negotiate their professional and personal lives, for instance, with children more commonly present in offices after school. They also noted increased levels of communication and collaboration between local staff, within organizations and across organizations, as competition between agencies had reduced.

However, it is not clear whether the aid system will revert back to ‘business as usual’ once the pandemic is over, driven by its own institutional pressures such as risk management procedures (compliance and safeguarding), some of which have in the past worked to keep money and power in the hands of staff in the headquarters of INGOs in richer countries. During the six months webinar that summarised part of our research findings, some commentators noticed how INGOs are keen to understand what is happening at the grassroots, but without properly resourcing their efforts: ‘A year into COVID-19, our partners are keen on mining data without paying. They have reverted to old bureaucratic ways – mistrust and milking knowledge.’

The pandemic is also offering a lesson and opportunity for donors and partners in richer counties to rethink the links between formal CSOs and social action. CSOs in Southeast Asia reported operational disruptions due to limited mobility, poor contact with constituencies due to the digital divide, poor agility due to lack of flexible funding, and limited funding support for advocacy groups. Similarly, a survey on the impact of COVID-19 on 1,000 African CSOs revealed that ‘55.69% of respondents already experienced a loss of funding, while 66.46% expect to lose funding in the next 3–6 months.’ For CSOs working on HIV, funding was also a key issue, with organisations often forced to seek additional funds to support necessary adaptations in response to COVID-19 – for example food and supplements for communities – or terminate existing initiatives due to lack of funding.

On the other hand, for larger organizations donor flexibility was a major benefit for the rapid repurposing of projects during the COVID-19 pandemic, often towards the need for a stronger focus on humanitarian aid. Some donors provided access to ‘rapid response funds’, separate from other funding streams, for targeted interventions to address issues related to COVID-19. However, some CSOs also reported donors delaying funds or contracts. In addition, the paperwork required to document changes in budgets increased pressure on organizations at a time when they were already dealing with multiple additional problems. This was particularly the case when donors were not experienced in funding humanitarian aid.

This research demonstrates an explosion of grassroots activism around the pandemic, often led by local communities and informal networks, mutual aid, neighbourhood associations and CBOs. These were able to mobilize and respond where larger and more formal CSOs were not, perhaps hobbled by the cumbersome bureaucracies and reporting requirements of the aid system.

b It is unclear how much of this is directly attributable to COVID-19 and how much a consequence of donor cuts to aid budgets for other reasons, with COVID-19 serving as a convenient justification.
4. Cross-cutting reflections

Across the range of responses considered by the clusters, several themes stood out:

- the agility of local responses;
- trust as the basis for social action;
- the rise of coalitions;
- the emergence of new leaders;
- the reality of exhaustion; and
- the downsides of digital innovation and expansion.

4.1 Local actors provided faster and more relevant responses

In the pandemic, geography was on the side of localization. Communities were able to overcome
the challenges faced by larger organizations that could no longer bridge physical distances and
depended on the internet. Based on their knowledge of local communities, these networks and
organizations were able to develop new strategies for service delivery, setting up multiple forms
of mutual aid. One CSO working with LGBTQIA+ people reported strong community-led responses
during the pandemic:

On the ground we saw that the community came together to circumvent problems, if they moved
[house], they would move to another friend or cousin – it was a community led. COVID-19 forced
this spirit of community. People went to get services for other people. We saw people were
pushed out their jobs and had to find alternative ways to make ends meet. One way is shared
living, and the sense of community came into the frame.

Rock of Hope representative, Eswatini

The proximity of CSOs to their communities was an important enabler for rapid and targeted
interventions. This was exemplified by Indian communities and self-help groups – particularly
involving women producers – connecting local farmers and consumers to achieve self-sufficiency,
and mapping vulnerability in their villages to direct government budgets to provide medicines and
food to those in need.

Many CSOs sought alternative ways of sharing information in areas where digital access was
more difficult. For example, in some Brazilian favelas, grassroots media organizations helped raise
awareness of COVID-19’s hygiene and social distancing guidelines by using banners in busy spaces,
audio announcements from cars, and other online and offline initiatives. In Uganda, loudspeakers
were attached to trees near village centres to provide up-to-date health advice. For those without
smartphones, health messages were sent via SMS in Kenya and Eswatini.
Grassroots and other non-state actors in the pandemic have been able to seek funding from local/non-aid sources (for example zakat, or contributions from middle classes or diasporas). Local organizations have used simple and low-budget solutions for mutual aid and introduced online and other forms of fundraising. For instance, our partners in the Philippines reported the economical and easy to set-up initiative of community food pantries, which sprung up in multiple locations after locals were inspired by a first pantry set up in Metro Manila. Online forms of fundraising initiatives have been initiated by the LGBTQIA+ community in Berlin, with Clubs and artists affected by lockdowns seeking funds to care for their communities. This raises the possibility of a shift to domestic funding sources for activism, perhaps backed by smaller pots of more agile, localized aid (e.g. Religions for Peace and their Multi-Religious Humanitarian Fund), especially as increased legislation is creating barriers to overseas funding for local organizations.

At the national level, the pandemic has demonstrated the value of social protection programmes – having a pre-existing system to distribute food or cash makes it much easier to scale up support in an emergency, whereas trying to set up something from scratch in the middle of a pandemic is much more likely to flounder. This seems to be true for both states and civil society. CSOs with pre-existing distribution networks have found it much easier to scale up in the crisis.

4.2 Trust shapes the COVID-19 response

COVID-19 acted as a wedge, heightening the importance of existing trust networks in some settings, and increasing political uses of distrust in others (‘othering’ and scapegoating has been a feature of most previous pandemics, and COVID-19 is proving no exception). It also created new cycles of trust-building, as new networks and coalitions formed as part of civic responses.

When the normal flow of relationships is interrupted, whether by physical isolation, state repression or sudden poverty, people fall back on the reciprocity and security of their trusted networks – family, friends, clans, tribes and allies.

Trust between individuals and institutions has become an invisible shaper of events. In El Salvador, some Faith Based Organisations (FBOs) established relationships with local actors linked to violence to gain access to the poorest neighborhoods and distribute food and aid. This was possible because many members of these violent groups had parents in these faith organisations. Other FBOs, on the other hand, established direct relationships with national authorities, reflecting their ties of trust.
Broader social trust shapes the public legitimacy of institutions and their ability to persuade people to do the right thing, e.g., on vaccination or self-isolation. According to a Kenyan widows’ organization: “Widows are giving “light and hope” to communities – they have become the pillar, the place where people go for help. We are the ones holding society together. Grassroots women leaders are stepping up, giving care, offering support, organizing microfinance, meeting in their houses, sending food to the cities, to their families.”

Similarly, people living with HIV were themselves central to maintaining the care and support of affected people in Senegal, Cote d’Ivoire, DRC, Kenya and many other countries, through such networks of trust. For example, in Zimbabwe, CSO ZLCDN noted that “we are still in the pandemic, and no one knows when it will end. I don’t see people trying to rely on outside help. I see a situation where people need to be empowered so they can always respond to their own needs when outside organisations are out of reach.”

The responses to COVID-19 and other political events appear to have shifted trust further away from formal aid actors (donors and INGOs) towards formal and informal CBOs. New links of trust are being created by new coalition-building exercises, potentially building political and social capital for change, for example when trust built through service delivery mutates into opportunities for advocacy and systemic change.

However, for the Hormoud Women’s Forum in Barwaaqo internally displaced people (IDP) camp in Somalia, trust had to be earned. Despite being elected by their community, its 20 members in the forum were not initially able to convince IDPs to follow COVID-19 prevention protocols:

Distrust in the leadership groups and rumours that the groups were receiving monetary compensation from external agencies for their work initially led the Barwaaqo community to not take COVID-19 prevention seriously... The women’s group tenaciously knocked on people’s doors to advise on social distancing and to distribute the [donated] masks and soap... The group focused on protecting the elderly and the sick members of the camp because they were the most vulnerable. As time passed and the effects of the pandemic started to affect Barwaaqo, the community started to become more open to the [Forum’s] work.

Abdiaziz, 2021

Sharing stories, documenting successes (and failures), and promoting regular interactions have been important during the pandemic for the mental health of many people working in CSOs. For Alliance India, working with vulnerable populations affected by HIV and other diseases, ‘sharing our stories was a source of motivation for other people. A lot of stories came from WhatsApp from different corners of the country. That was very much needed because of fears and around mental health. People had stopped going for viral HIV load reviews, or for an HIV test and other screening. Positive stories helped people get out, and social media was really good for that.’

In Mexico, feminist collectives, such as the hacktivist group Luchadoras, coordinated discussions and debates on how the measures implemented to control the pandemic reflected and aggravated socioeconomic, political, geographic and gender inequalities. Despite social distancing, they found that emotional bonds and trust were built by sharing life stories, testimonies of violence, emotions and feelings about the quarantine.

4.3 The pandemic as ‘social glue’ for coalition-building

The pandemic has pushed networks of activists and organizations to work collaboratively, building coalitions within civil society and with businesses to organize larger-scale and more coordinated responses. A coalition of 30 NGOs called Rapid Rural Community Response to helped address this
issue at scale in India. Over 6 million families across 12 states and a network of over 10,000 women's self-help groups collected data about the most vulnerable people, like migrant labourers, and worked alongside local governments and others to provide immediate shelter, food and medical help. The Delhi Relief Collective – a loose association of NGOs and individual volunteers – used social media and Instant Messaging platforms to collate and communicate information about relief work, and generate a database of target beneficiaries – and a list of policy responses and information on the broader context of the growing food (and migrant) crisis. They used this knowledge to build a rights-based discourse around the consequences of the lockdown for informal and migrant workers to focus media and political attention on the situation, and advocate for emergency welfare measures.

Coalitions allow the comparative advantages of different groups to complement one another. Initiatives like Cape Town Together in South Africa or Frena la curva ("Slow the Curve") in Spain are examples of activists, organizations, communities, entrepreneurs and urban ‘laboratories’ organizing community-led responses that raise awareness, build solidarity and provide essential services. Such coalitions have blurred the lines between formal and informal civil society in the pandemic response.

Coalitions have broken with norms in some contexts. In South Africa, with few exceptions, civil society groups were not in the habit of working together on common agendas according to anthropologist Kelly Gillespie:

> There have been post-apartheid attempts at coalition building. None of them has really worked. Often they fall apart because there was not something specific to work on. What is most interesting about this pandemic, [...] is the organic emergence of working groups around particular issues. In those working groups, some people have worked together before, but a lot of people haven’t. And a lot of people haven’t been compelled by a progressive vision of how this is in service of poor and working-class communities. So there is something about the time of crisis and the possibility that the coalition has afforded to have people sit down and actually work together regardless of their differences.

Kelly Gillespie, Senior Lecturer, University of the Western Cape

### 4.4 New leadership

New leaders have stepped up with little or no prior experience, partly as a result of the increased prominence of youth activism and the surge in activism among more informal groups and networks. It is likely that this will be a lasting legacy of the pandemic: a new generation of leaders forged in the COVID-19 crisis, an experience likely to shape their leadership for years to come. It remains to be seen whether this leadership will be more committed to service delivery than their predecessors – and more or less sceptical of aid and formal CSOs.

Young digital natives were able to capitalize on their digital knowledge to find innovative solutions during the pandemic (as described in Section 3.4.3). Young activists working with peers better understood the issues faced by young communities during lockdown, often finding innovative solutions and reshaping their role in assisting them. For instance, in Uganda, a young activist working with peers affected by HIV took on himself the responsibility to deliver ART treatment by bike to peers in need, cycling even 30 miles a day to make his deliveries.

Young leaders also emerged in religious organisations. In Kenya, a young activist from the Religions for Peace Youth Media Team harnessed the vast outreach of social media to share accurate information about the virus and battling misinformation.
4.5 The realities of exhaustion, stress and financial pressure

Romanticizing the everyday heroes who gave time and energy to feed, comfort, earn and care belies the deep exhaustion and stress that many have experienced. While grassroots efforts and organizations can and do step into the breach for a few weeks or even months, after 18 months (when this research came to an end) many people were debilitated. Their stress sprang from financial worries due to increased need and fewer income opportunities and the emotional strain of care work and leadership responsibilities. For many women, including those involved in community responses, sexual abuse has also increased. Stress is naturally exacerbated in fragile contexts with multiple crises, such as conflict and natural disasters.

Burgeoning care responsibilities have included needing to feed more people with fewer options to find supplies. Many have taken over responsibilities held by others – grandparents taking care of children, parents taking over education. An entirely new scale of responsibilities has emerged, with streams of migrant workers losing jobs overnight and returning home on foot and fed by strangers. When illness strikes carers, they themselves need to be cared for, and often have to manage their own illness:

Ruqiya is a member of the Hormoud Women’s Forum in Somalia’s Barwaaqo IDP camp. When she started to show symptoms of the virus, she notified her fellow group members so she and her family could receive immediate support. The group collected money amongst themselves and called a taxi to transport Ruqiya to self-isolate elsewhere. Ruqiya credits her membership [of the group] as potentially saving her life and the lives of those she cares for. While Ruqiya isolated outside of the camp, her family quarantined inside their home for 10 days and received direct support from the women’s group who delivered food and water to the family.

Abdiaziz, 2021

The pandemic has led to sharp rises in gender-based and domestic violence, the rise of teenage pregnancies, and others sexually transmitted diseases, as people did not have access to SRHR services. In India, partner organizations of the South Asia Women’s Foundation India have reported that prolonged periods of being homebound has led to more aggressive sexual demands by men, independent of time or context.

Leaders have had the stress of needing to find new strategies that cannot be face-to-face yet cannot always rely on digital means. They have at times had to deal with backlash (for example, in Somalia, men would verbally push back when they saw initiative members talking to women in their community). In all cases, they have had a new duty of care to other responders, such as in the case of Ruqiya above, and creating space for stressed volunteers to share their emotions, as reported in the Kibra food drives example.

All the innovations introduced by CSOs must be framed within the context of sustainability, and planning for the long term. The financial strain on organizations and communities, masked in the short term in many instances by flexible funding or reprogramming, is likely to be more acute soon, requiring decisions and prioritization. For Alliance Public Health in Ukraine, sustainability ‘requires extra effort. It won’t happen by default. It’s critical to sustain positive changes, but it’s [also] important to invest.’

One poignant finding from the education cluster was that, while teachers and school administrators have been at the forefront of adapting learning to online and blended modalities, these digital ‘innovations’ have come from a place of pure necessity, rather than passion and excitement. Setting up online classrooms and maintaining student engagement and well-being – often with little systematic support or resources – has been incredibly taxing for many teachers; they continued to do so throughout the pandemic because there simply was not an alternative.
4.6 Harnessing digital technology risks leaving some behind

As discussed in Section 3.4.3, the pandemic has accelerated the uptake of digital channels and online services. This shift can improve inclusivity and connectivity, and thus the speed and scope of collaboration and organizing among civil society.

With travel restrictions and the need to ‘go digital’, civil society and the aid sector have experimented with new digital practices. The peacebuilding cluster found that most peacebuilders ‘had always presumed resolving conflict had to be face-to-face. But a lot of organizations have embraced new online approaches, with spaces evolving online to become more inclusive, e.g., via Facebook’.136

Due to their relatively advanced digital literacy, young people have been a key demographic in the COVID-19 response. In Argentina, for example, RedTraSex noted that younger sex workers not usually involved in the movement, became more involved when activities and coordination moved online.138

However, the shift to digital has its downsides. The acceleration in adoption has simultaneously increased the need for digital literacy, access to the internet and technology, exacerbating the pre-existing divide and the risk of isolating people. The digital divide is intersectional, with gender, income, age, and geography all determining who has access and literacy sufficient to reap benefits. Thus, the pandemic exacerbated the divide, exposing the need for greater civic action around this issue.139

The rise of online education and digital learning exemplifies these dynamics. The shift to remote schooling has the potential to increase access to education and improve the dissemination of resources (such as online lectures) to learners in every corner of the globe. However, at the same time, the barriers to accessing these resources are still greatly unequal. In many contexts participation in education is now mediated by access to computers, smartphones and the internet, and the pandemic has only accelerated this shift towards the adoption of digital means in education. This is therefore likely to exclude those young people and adults who are already vulnerable and perhaps most in need of the social mobility that education has the potential to facilitate.

The shift to online spaces also increases the risk of authoritarian control of those spaces. Some governments and politicians used the COVID-19 pandemic as a pretext to limit access to information, but also to silence dissent from opponents and critics, spread misinformation and fake news, and shut off connectivity for already marginalized communities, thus further exacerbating the digital divide.140 Social media algorithms have exacerbated the spread of conspiracy theories and hate speech, while platforms have often been very slow to act against incitement to violence.

For the aid sector, the acceleration of digital adoption poses a danger of elite capture. This applies both to the distribution of resources and opportunities for knowledge sharing and advocacy. For instance, questions could be raised over who controls the panels and processes of online consultations, and concerns raised over those excluded on access grounds. It could be argued that this is no different from power disparities in the analogue world, and organizations can still try and counter it. How the shift and accompanying risks are managed will determine the inclusiveness of digitization in the sector.

Finally, privacy and confidentiality are vital for communities that experience discrimination and marginalization. This is relevant for the sharing of data and to taking part in online video consultations, which were especially an issue of concern for criminalized populations like sex workers and LGBTQIA+ people, where exposure could mean arrest, detention and/or violence.
5. Implications for a strong civil society

The pandemic has highlighted how structural inequalities combine to create and amplify layers of suffering. However, it has also revealed the diversity and creativity of local action. It is impossible to say what will survive the pandemic. Those groups that started by meeting basic needs may become more politically active; advocacy organizations that have moved into service delivery may stay there or revert. It seems likely that the civic system will emerge from the pandemic expanded and revitalized, albeit facing the dangers of burnout and exhaustion.

What cannot be doubted is the essential role played by these efforts to meet needs and change systems. There are multiple implications for allies and funders. In particular, where power has shifted accidentally in the right direction through localization enforced by COVID-19 regulations, a return to business as usual would fail to nurture this inspiring work. In this chapter, we suggest four ways that civil society and its allies and funders can do just that.
5.1 Make visible and stay loud

COVID-19 has made the power and creativity of civil society responses to global and local crises visible. Civic action has diversified and become even more critical locally for meeting needs. Those involved have been vocal in exposing the dire structural shortcomings of social security systems and growing inequalities, worsened by the economic consequences of the pandemic. This can be seen in protests about healthcare, labour, women’s solidarity and food.

Those involved in CSOs have learned new skills and, in many instances, gained self-confidence by dealing with rapidly evolving situations, often without support. Senegal’s RNP+, an organization supporting people living with HIV, explained how ‘COVID-19 encouraged us to create, adapt, and be innovative’.

As Pleyers has observed, ‘The COVID-19 outbreak is a battlefield for alternative futures’. He notes an optimism among progressive intellectuals and movements about the opening of opportunities to build a fairer world, one, he cautions, must be tempered by assessing their impacts. Our findings strongly support this view.

Important questions are:

- Under what conditions will pandemic-triggered activism have a sustained impact on the long-term crises of inequality and injustice? (e.g. will gender inequality be redressed with bold policy responses given heightened attention on under- and unpaid care, and gender-based violence?)
- What kind of collaboration between informal civil society and more formalized organizations can strengthen their influence?

5.2 Back creative disruption

COVID-19 has accelerated some trends and innovations. Movement restrictions and their economic repercussions have forced civil society to rethink strategies and modes of action. For example, the home delivery of antiretrovirals during the pandemic, with the removal of the intermediary role of health centres, has demonstrated to healthcare systems that direct delivery is a feasible approach in non-emergency circumstances. Internet reach and data affordability are becoming recognized as basic needs, with grassroots initiatives to reduce the cost of access in urban peripheries as well as rural areas and indigenous territories.

Important questions are:

- Which civil society innovations – tactics, alliances and priorities – will be sustained and why?
- How will organizations’ advocacy priorities be (re)combined with service delivery, and with what benefits or limitations?

5.3 Value digital natives

The pandemic has led to a revaluation of forgotten or undervalued parts of society: local networks, youth, digital connectivity and alliances/coalitions. There are signs of a potential ‘youthquake’, building on their generational advantage as ‘digital natives’. A likely irreversible shift online has occurred, with implications for repertoires more firmly rooted in digital tactics, the politics of organizing and the social contract. It seems likely that the future will be hybrid, ideally keeping useful aspects of the online world in concert with the positive elements of offline work. This phenomenon not only serves progressive movements, of course, and is also evident in and enabling more reactionary responses.
Important questions are:

- Will the explosion of digital activism prompt a long-term shift in power and leadership?
- How will the nature of grassroots digital activism resemble or differ from that of educated elites?

### 5.4 Consider a new social contract

As described in Section 3.5, the pandemic has changed the power relationships between citizens and states. In many contexts, civil society has been playing a significant role in meeting citizens’ needs. Whether this will change the long-term expectations of citizens remains to be seen.

Similarly, mechanisms favoured by the international aid sector were temporarily paused, notably the dominance of non-local expertise and organizations. Overseas aid was forced to move aside to give more prominence to local experts and ways of working. The opportunity beckons to reconfigure this relationship structurally. However, most aid (particularly funding) is still controlled by non-locals, so a sea change in the aid sector will need more than a few positive examples. Such changes include:

- Recognize the importance of shocks as critical junctures in driving change (both good and bad);
- Look beyond the normal actors (states, civil society, transnational corporations) to see where agency is emerging in more fluid and less formal expressions;
- Accept that money may do more harm than good;
- Consider the use of local philanthropy to raise money locally, and how to manage the specific constraints it creates; and
- Expand the INGOs’ repertoire beyond financial support, for example, promoting South-South collaboration, digital capacity building, leadership support for new generations, support for coalition-building and existing coalitions, or support for burnt-out activists.

Important questions are:

- In what ways and contexts will civil society’s work supplementing, coordinating or implementing the delivery of services become permanent?
- Will the aid system prove able and willing to support new forms of agency, or will it (whether through desire or inertia) push the system back towards business as usual, replete with power imbalances and colonial baggage?
5.5 Conclusion

This research project sought to understand the responses of civil society to the global pandemic and what those keen to support such responses can learn.

A vast diversity of individual and collective agency emerged among low-income households and communities across groups at the intersection of multiple inequalities. We found many examples of the consequences for and responses of unpaid carers, precarious and informal workers – needing and offering direct needs, advocacy, safety, and information. Some of this response was emergent in the sense of being novel. But a substantial number of responses involved redirecting efforts by existing groups and communities to meet different and more needs in novel ways.

The responses stood out in terms of their agility and speed, becoming spaces in which new leaders became active and new collaborations were created. Born from solidarity, the social action that ensued relied strongly on relationships of trust. However, exhaustion became increasingly evident, financially and emotionally, due to the scale and duration of efforts. And while digital innovation was widespread, it was not accessible to all and could not fully replace what direct contact enables.

If civil society efforts are the pathways of survival for so many, what can this mean for donors and international NGOs? If they cannot be in touch with the needs and vulnerabilities of people, how can they better support the presence and power of local civil society responses? Without a doubt, a hard look is needed at the aid systems through which civil society is supported. In a separate research brief, we have collated key points from the research of importance for those working in international and national NGOs, and donor agencies. Many speak to themes that have long been discussed within international development but have not yet shifted how it works.

COVID-19 is not just a global health crisis, but could be a critical juncture allowing a positive system shift for those in aid agencies or other international organizations who value and wish to promote the role of civil society. However, it not yet clear whether donors and INGOs can stand back from their set menu and protocols.

The key to ‘not letting a crisis go to waste’ will be watching, learning and following. We must shift power and resources to ensure that international support becomes and remains an ally of social change – and never attempts to be its master.
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Endnotes

All links last accessed 30 January 2022, except where specified.


4 The People’s Vaccine https://peoplesvaccine.org/


7 From Poverty to Power: Emergent Agency https://oxfamapps.org/fp2p/category/emergent-agency/


11 Using Zotero as a repository, the dataset of 200 case studies is publicly available and licensed under a Creative Commons Attribution 4.0 International License (CC BY 4.0). https://www.zotero.org/groups/2530988/emergent_agency_in_a_time_of_covid-19/library


20 MENA Rosa https://menarosa.org/


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Ndlovu Youth Choir. (2020). Ndlovu Youth Choir - We’ve Got This - Fight against Coronavirus/Covid-19 (Video). YouTube, March 11. https://www.youtube.com/watch?v=GN94PZqP1Rc


MENA Rosa https://menarosa.org/

South Asia Women Foundation India https://sawfindia.org/

SEWA India https://www.sewa.org/


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120 Luchadoras, Colectiva feminista https://luchadoras.mx/


122 Rapid Rural Community Response (RCRC) India https://www.rcrc.in/


124 Delhi Relief Collective (Facebook page) https://www.facebook.com/DelhiRelief/


126 Cape Town Together https://capetowntogether.net

127 Frena La Curva https://frenalacurva.net/


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