Civil Society Participation in the COVID-19 Response

Survey Results
April 2020

Presenters:
General Information

• Total of 175 respondents (all completed 100% of survey)
• 56 Different countries (Africa, Asia, Europe, Latin America and the Caribbean)
• 98% Civil Society (2% Governmental Organizations so those response were excluded)
Question One:

Has your government given your organization the opportunity to provide input into the COVID-19 Response?

- Not at all: 38%
- Minor involvement: 31%
- Moderate involvement: 16%
- Substantial involvement: 15%
Has your government given other civil society organizations and communities in your country the opportunity to provide input to the COVID-19 response?

- Not at all: 25%
- Minor involvement: 31%
- Moderate involvement: 25%
- Substantial involvement: 18%
Type of CSO Involvement

• The majority of CSO reported they have been involved in the COVID response but independent from the government. Below are sample activities:
  • Distributing information/awareness materials about COVID
  • Implementing communication campaigns prevention, treatment and isolation
  • Ensuring continuity of care in health facilities for other diseases (HIV/TB/FPRH etc.)
  • Producing and distributing PPE, face masks, handwashing kits, hand sanitizers
  • Sensitizing community and community leaders (IEC)
  • Distributing Food and water (among other essential supplies) to communities in prep for "stay at home" orders
  • Providing psychosocial support to health workers and those isolated/their families
  • Advocating for large-scale testing, PPE and training for CHWs
  • Combating stigma and discrimination
  • Advocating for home use medical abortion
  • Advocating for women who suffer from GBV
  • Fundraising for supplies for the community
Type of CSO Involvement Con’t

• Those that reported working with the governments provided the following examples:
  • Lending technical staff such as ID doctors, lab scientists and researchers to sit on technical/COVID response committees
  • Developing policy recommendations, briefings, relief programmes, analysis on socio economic impact
  • Offering online health assemblies in collaboration with governments
  • Providing governments with funding for COVID response
  • Implementing epidemiological surveillance and identifying hot spots
Question Three

In your opinion, how is the involvement or lack of involvement of your organization and other civil society in your country impacting the COVID-19 response?

• Overall the lack of CSO involvement has resulted-in:
  • The most marginalised being left out and put at risk of transmission
  • Human rights violations (police brutality - people being killed or beaten up if passed curfew)
  • Slow distribution of medical supplies and medicines
  • Lack of knowledge/limited awareness at the community level about the disease (communities turning to myths and not facts)
  • Slowed down the overall response (mainly because governments cannot get to the grassroots communities as quickly as CSO)
  • Lack of a holistic and comprehensive response/strategy
  • Negative impact of quality of death and mourning
  • No social network to support self-reporting and proper isolation, no psychosocial support for caregivers or people in grief
  • Lack of transparency and coordination
  • Centralized government response
  • Disruption of other essential health services (SRH, HIV, TB, Mental Health)
  • Engendered distrust in government response strategies/left communities disengaged
Question Three Con’t

In your opinion, how is the involvement or lack of involvement of your organization and other civil society in your country impacting the COVID-19 response?

• Active CSO involvement has resulted-in:
  • A coordinated response
  • Increased community engagement and risk communication
  • Inclusivity of different sectors of the community in the response
  • CS involvement in advisory/technical committees
Thank you!

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