COVID-19 RESPONSE TO COMMUNITY NEEDS

(through Strengthening the Role of Local Communities/MZ Project)

Date: 14 April 2020
1. BACKGROUND

The COVID-19 crisis in Bosnia and Herzegovina

On March 11, 2020 the World Health Organization declared COVID-19 a global pandemic. While the disease was slow to spread to Bosnia and Herzegovina and the Western Balkan countries at first, since February 2020 the number of confirmed cases is climbing rapidly. A state of emergency was declared in Bosnia and Herzegovina by both entity governments on 16 March 2020 and at the state level – on 17 March 2020. To date, Bosnia and Herzegovina has reported 606 confirmed cases of COVID-19 within its borders and 24 deaths.

UNDP’s capability to provide support in the crisis

In March 2020 both the Presidency of Bosnia and Herzegovina and subsequently - the Ministry of Security of Bosnia and Herzegovina – in its role as the chair-institution of the Civil Protection and Rescue Coordination Body, addressed UNDP with requests for (i) support in regard to procurement of medical supplies and equipment, (ii) coordination of the overall emergency response assistance, as well as (iii) conducting assessments of the socio-economic impacts of COVID-19 in Bosnia and Herzegovina and early recovery efforts. UNDP, as part of the UN Country Team, and in collaboration with authorities at all government levels, the international community, civil society, the private sector and media, is well prepared to support fast and people-centred COVID-19 disaster response and early recovery. In doing so, UNDP is capitalising on its previous knowledge and experiences accumulated during the 2014 floods response and recovery, as well as on its large presence at the grass-roots level.

In this particular case, UNDP will utilise the Strengthening the Role of Local Communities Project financed by the Government of Sweden and the Government of Switzerland and some of its existing networks and resources to effectively support the COVID-10 crisis from viewpoint of addressing community needs.

The specific challenge we address

With the COVID 19 pandemics, Bosnia and Herzegovina shares global concerns and challenges, additionally fueled by unknown duration of social distancing and health risks, as well as unknown scope of post-crisis economic and social impact. Despite the crisis being managed centrally through entity, cantonal and civic protection authorities, everyday lives of citizens are becoming more and more localized. Movement restrictions make lives of citizens, especially the most vulnerable, almost exclusively dependent on neighborhoods, local networks and voluntary relief services launched locally, often through the anchor of local governments, centers for social work and MZs who at the frontline of crisis response. Local governments, when empowered with adequate degree of resources, are more efficient to serve the most vulnerable than higher government levels since they are closest to people’s needs and directly accountable to their electorates, especially through local communities/mjesne zajednice.

While pandemics is a major societal shock that affects each person in a different manner and intensity level, many thousands of BiH citizens have already felt its immediate impact by losing their livelihoods. This has not only pushed the working poor into deeper poverty but it seriously threatens to push the lower middle and middle class into serious material deprivation. Even though at present not all Project municipalities are

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1 Sources: Government of Republika Srpska, Government of the Federation of Bosnia and Herzegovina.
2 Source: Decision of the Council of Ministers of Bosnia and Herzegovina.
3 6 April 2020.
4 In BiH 25.4% of those who worked were found to be at risk of poverty (Findings of Human Development Report on Social Inclusion, currently in the making)
equally impacted by the actual disease, both economic and social interdependence of municipalities and interruption of services affects everyone. All this, including the blurring of the lines between *traditionally marginalized*, the weakening of *democratization* dividend, the undoing of *gender equality* gains, re-emergence of the *economy of survival*, etc.- calls for a non-linear approach that cuts across disciplines and requires a strong contextualization.

With this in mind, the Project will utilize all existing Project infrastructure to make a quick situation scan and effectively inject a fast-track support to the communities and people who are currently identified as marginalized, underserved, and/or left behind. On a parallel track, by analyzing the emerging societal copying patterns, authentic solutions to emerging challenges and good practices of localized action and solidarity- the Project will *work with the communities* to identify the most efficient ways and methods for boosting societal resilience and to co-create alternative service pathways. In doing so, the Project will seek to explore new avenues for tapping into the capacities and positioning of MZs and reinventing their role in emergency setting and in the recovery period.

There are **145 local governments in the country** - 80 in the Federation of Bosnia and Herzegovina, 64 in Republika Srpska and the autonomous Brčko District. Through the MZ Project, the UNDP has established partnerships with 24 local governments and 136 MZs (local communities) and plans to soon expand partnership to 40 local governments and over 200 MZs. MZs are local governments’ link to the most vulnerable citizens, especially single mothers, elderly and socially excluded.

**OVERVIEW OF WHAT THE MZ PROJECT IS ALREADY DOING WITH ITS EXISTING RESOURCES AND NETWORKS TO ADDRESS THE COVID-19 SITUATION:**

The MZ project has been monitoring and assessing the situation in its partner 24 local governments and 136 MZ, as well as community hubs, civil society organizations, community champions. The project MZs have ensured that ICT equipment procured through the project, has been given to the most vulnerable children in the community so that they can attend online school, primarily tablets and computers. Some of the community hub facilities, as well as MZ facilities renovated and established through the project have been used as a space for quarantine or isolation. Almost all LGs and then MZs have established crises management groups. All partner MZs, as well as some CSOs, have been engaged in provision of basic commodities, including hygienic supplies, to the most vulnerable in the community. They have also organized volunteers and volunteer groups to help with outreach to rural areas. All MZs have been instrumental in providing critical information to the citizens about the current situation through an online platform and social media. MZs have assisted LG in reporting to the police cases in isolation/quarantine and have continued to communicate with the health centers and police on how best to assist during this time. They have worked together with partner CSOs on crowdfunding to provide computers/tables for pupil in need to attend e-school. Rural MZs have been distributing seed for planting vegetables to ensure there are more local food supplies.

**ADDITIONAL ACTIVITIES WHICH ARE SUGGESTED TO EXPAND THE EMERGENCY RESPONSE AT THE COMMUNITY LEVEL**

The additional efforts regarding the response to the COVID-19 crisis community needs through Strengthening the Role of Local Communities Project will have two pillars. Firstly, the focus will be on screening real-time community needs and sourcing ideas how to address the COVID-19-induced challenges at the grassroot level. Secondly, through a financial facility, the Project will support fast implementation of community ideas and thus stimulate social change and strengthen community resilience.

1. **Initiate real-time voicing of community needs in COVID-19 affected localities (RARE)**
This will be done, in line with the established communication and networking protocols5 initiated by the Project from the onset of COVID-19 crisis. In addition, the soliciting of real-time community needs will be initiated through the existing digital channels and tools such as the MZ web platform6 and the e-Participation portal7 targeting the most vulnerable population8.

This will provide opportunity for affected communities to voice their immediate needs9 as well as ideas that might help addressing the consequences of the crisis. This might include, but not be limited to, temporarily converting Community Hubs into foodbanks to assist those who have suddenly fallen into poverty due to job loss.

Secondly, given the movement restrictions and the intensified value of physical proximity of institutions, a research will determine if and what services/work can be outsourced to MZs, thus empower MZs and ensure communities are more resilient to crisis in difficult times. Hence, second component of research10 will specifically focus on the assessment of unique opportunities to redefine the roles of MZs in crisis and equip them with adequate tools and resources to make communities more socially cohesive and resilient to shocks.

2. The response to the identified community needs will be implemented through a Community Rapid Response Facility (CRRF)

The Community Rapid Response facility will be set up to address the real-life community needs identified by above-described means and methods. While designing CRRF implementation modality, it will put in the center MZs as a unique grass-root level platform. Reports from the field11 confirm that MZs are already at the frontline of the crisis response. Also, CRRF will seek to capitalize on the existing partnerships (including local governments and local level emergency response and rescue teams) and authentic citizen and institutional solutions12 who, often in close cooperation with the Project-supported MZs and other relevant authorities, were started-up to reach out to the most vulnerable.

Project interventions could range from supporting community based social services, through targeted economic packages for those who lost income due to the pandemics and have fallen into poverty, as well as livelihood measures for traditionally most marginalized community members. In line with the already established and effective MZ approach, women will be a particular target group.13 Even though gender is

5 Field officers are in daily contact with municipalities, civil society organisations, community champions, by phone, email and zoom to keep in contact, consult on developments and monitor the situation in field.
6 https://www.mjesnajednica.ba/: The format of online polling and micro-surveys where data is accumulated, and open and accessible for all will be used.
7 http://www.ukljucise.ba/- ICT solution designed to solicit stories, source solutions by most marginalized and excluded people- to ensure no one is left behind
8 The Project will explore offering support to the most vulnerable community members through a diverse set of social, economic/entrepreneurship initiatives
9 A range of options will be provided, from food, medicine, supplies through more elaborate and innovative support for most vulnerable population groups, mental health support especially the elderly who are alone, single parents who lost a job, etc.
10 A survey with multiple choice and open-ended questions will be used
11 MZ Gornja Orahovica in LG Gračanica jointly with Association of citizens "Ajnur Memić" provides relief packages to the most disadvantaged citizens, MZ supported Center „Dajte nam šansu-Zvjezdice“ from Banja Luka shifted to providing online speech therapy lessons and counseling to parents of children with disabilities, Citizen Associations Kosmos and Dekameron in LG Ključ have partnered with MZs and other authorities to turn a local hostel into quarantine, MZs in cooperation with Women Associations in Sanski Most and Tesanj have redirected production into sewing protective masks for distribution to citizens- to name just a few initiatives.
12 Local networks, voluntary relief services, as well as grassroots initiatives that already started with people-centred crisis response and facilitate social and voluntary actions within communities to alleviate the negative impact of the COVID-19 crisis- that are validated as effective but require additional support to be sustainable.
13 Women of all ages in BiH are a third less likely to participate in the labor force and account for 56.9% of all registered unemployed. They are also overrepresented in informal economy and insecure service jobs that are highly affected by the pandemics.
an important vulnerability factor\textsuperscript{14}, women have unique know-how, perspectives, experiences and
neighbourhood networks and carry unique potential to overcome the consequences of risk\textsuperscript{15}.

This intervention will take into particular account the opportunity to increase local production of basic
products and services with appropriate hygienic measures, especially in rural areas.

Finally, we are all witnessing that necessity is a mother of all innovation- and our ultimate role with this
intervention will be to ensure that ideas and know-how of citizens and institutions are promptly sourced
and cross-fertilised with UNDP know-how to produce authentic social innovation models designed to answer
societal challenges posed by COVID-19.

\textbf{Timeframe of the envisaged additional Project support}

Based on how COVID-19 pandemics evolves, and situation recorded in the field, the Project will provide
medium-term support targeting early social recovery measures in a period of 6 – 8 months, however the
project will also ensure that the lessons learned from this interventions be utilized through the Perception
Survey for expansion, budgeted in the Phase Two of the Project for more in depth citizen analysis.

\textbf{Linkage to the SDGs}

These efforts are directly linked to the \textit{Agenda 2030 and to localization of the Sustainable Development
Goals (SDGs)}, primarily SDGs 5, 6, 11, 16, that are all related to specific aspects of the community governance
– gender equality, equitable service provision.

\begin{itemize}
  \item \textit{SDG 5. Achieve gender equality and empower all women and girls}
  \item \textit{SDG 6. Ensure availability and sustainable management of water and sanitation for all}
  \item \textit{SDG 11. Make cities and human settlements inclusive, safe, resilient and sustainable}
  \item \textit{SDG 16. Promote peaceful and inclusive societies for sustainable development, provide access to
justice for all and build effective, accountable and inclusive institutions at all levels}
\end{itemize}

\textbf{How we plan to do that – partners, resources, methodology}

Rapid Response Assessment (RARE) will be implemented by the UNDP team, with full utilisation of the
network of 24 partner local government contacts, 24 community hubs, 136 MZs and over 24 CSOs,
established during the first phase of the MZ project. Design of the assessment may be supported by the
statistician and data entry clerk. The assessment will be conducted through combination of surveymonkey
tool\textsuperscript{16} and direct phone contacts with relevant stakeholders in 24 partner municipalities. Existing MZ project
team, with support from UNDP Accelerator Lab and WIE teams, will be a driving force for its
implementation. There is an opportunity to extend this intervention through MZ Project Phase 2
perception survey, as well.

Rapid Response Facility (RRF)- is aimed at transforming identified need and priorities into tangible and
concrete actions. It envisages direct support to participating local governments averaging USD 18,000 per
municipality (this may vary depending on the findings of the RARE, size of the municipality, and etc.). RRF

\textsuperscript{14} Especially when intersecting with characteristics such as single parent, disabilities, age, education levels and employment status, residence. Particular vulnerability
emerging from COVID crisis relates to deepened economic dependency becoming compounded by additional unpaid care-work they shoulder due to a close of
structures of daily life and interruption of services

\textsuperscript{15} Experience and lessons learnt from 2014 floods, combined with MZ women as agents of change approach are being applied

\textsuperscript{16} Access to https://www.surveymonkey.com survey and its analytical tool will be provided free-of-charge due to UNDPs annual subscription to
this service
will operate in line with the standard UNDP procedures for procurement of goods and services and methodology for implementation of Low value grants. In terms of procurement, the Rapid Response project will try to, the maximum possible extent benefit from economy of scale and existing UNDP Long term agreements with qualified suppliers (both locally and globally).

This component will also benefit from the experience of the staff already engaged into UNDP BIH task groups for COVID Response such as a) Health System and Supply Chain Strengthening and b) Crisis Management Response.

Rapid response Facility may also an avenue to assist the LG to channel its own resources for procurement of other essentials that are currently unavailable at the market.

**Geographical area of intervention and territorial demarcation with other relevant interventions**

The rapid response, as stated above, will cover the existing MZ Project framework of partners including 24 local governments, 136 MZ, 24 community hubs, as well as at least 24 civil society organizations (one per local government at least).

The interventions for the Rapid Response to COVID-19 project will focus on all partner local governments, but the immediate interventions will go to those 15 currently affected (this number is growing constantly). The support will not be limited only to those directly affected, as the support is needed across the country especially when it comes to awareness raising on prevention and resilience. There are over population 865,385 people residing in the 15 affected partner local governments and the total of 1,028,605 in all 24.

Starting from the third month of implementation the Project may consider expansion to additional 16 local governments and 200 MZs\(^{17}\) (8% of all MZs in the country) that will be selected for the second phase of the MZ Project, but this will depend on the ever changing COVID-19 dynamic in the country.

**Who are the main target groups?**

The project will target 24 partner local governments with a total population of over 1,028,605 people.

\(^{17}\) 120 new MZs will be selected in the 24 old partner local governments and 80 MZs will be selected from the 16 new partner local governments.
To this date, we have confirmed cases of directly affected by COVID-19 in 15 of 24 Phase 1 partner local governments with the population 865,385, as shown below per municipality/city:

<table>
<thead>
<tr>
<th>Partner Local Governments currently affected by COVID-19</th>
<th># of total citizens</th>
</tr>
</thead>
<tbody>
<tr>
<td>Banja Luka</td>
<td>184,257</td>
</tr>
<tr>
<td>Gradiška</td>
<td>49,196</td>
</tr>
<tr>
<td>Laktaši</td>
<td>36,848</td>
</tr>
<tr>
<td>Sarajevo (Stari Grad)</td>
<td>38,925</td>
</tr>
<tr>
<td>Zenica</td>
<td>130,000</td>
</tr>
<tr>
<td>Brčko District</td>
<td>93,028</td>
</tr>
<tr>
<td>Jablanica</td>
<td>10,111</td>
</tr>
<tr>
<td>Bijeljina</td>
<td>107,715</td>
</tr>
<tr>
<td>Kotor Varoš</td>
<td>22,001</td>
</tr>
<tr>
<td>Tešanj</td>
<td>46,135</td>
</tr>
<tr>
<td>Žepče</td>
<td>31,582</td>
</tr>
<tr>
<td>Gračanica</td>
<td>45,220</td>
</tr>
<tr>
<td>Visoko</td>
<td>39,838</td>
</tr>
<tr>
<td>Nevesinje</td>
<td>14,000</td>
</tr>
<tr>
<td>Ilijaš</td>
<td>16,529</td>
</tr>
<tr>
<td><strong>TOTAL 15</strong></td>
<td><strong>865,385</strong></td>
</tr>
</tbody>
</table>

The remaining 9 have also been affected by the COVID-19 just like the rest of the country, even though there haven’t been any confirmed cases just yet. Those include additional 10 following municipalities as shown on the map above: Ljubuški, Ljubinje, Olovo, Pale Praća Federation of Bosnia and Herzegovina, Gradačac, Petrovo, Sanski Most, Ključ and Rudo.

In addition to **those identified as currently** most vulnerable population groups, such as:

- Children under 18 years of age and elderly over 65.
- Single Mothers
- Socially excluded

The project will target the local level partners and institutions of the utmost importance for Crisis response and its staff, such as local governments, MZs, CSOs, who are closest to citizens.

Risks
### Risks Mitigation Measures

<table>
<thead>
<tr>
<th>Risks</th>
<th>Mitigation Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Restriction of movement and social distancing</td>
<td>Maximised use of ICT tools in order to reduce need for physical contact and communication to the minimum</td>
</tr>
<tr>
<td>Lack of goods or services at the local and international market</td>
<td>Intensive market research and use of the UNDP corporate Long-Term Agreements with local and global providers</td>
</tr>
<tr>
<td>Effects of CORONA-19 on project and service providers staff engaged in Project implementation</td>
<td>Full compliance with recommended protocols and equipping staff with protective equipment and disinfectants</td>
</tr>
</tbody>
</table>

#### IMPLEMENTATION AND MANAGEMENT

UNDP in BiH will assume full responsibility and accountability for the overall Project management, including monitoring and evaluation of Project interventions, achieving of project outputs and specified results, and the efficient and effective use of resources.

Due to the short duration the project will have a simplified institutional structure that will consist of **Project Management and the Project Team**, interacting in a broader project context with partners and all interested stakeholders.

UNDP and donors’ representatives will meet/communicate on a regular basis to discuss Project progress, issues and developments, as well as opportunities, arising during the project implementation.

Project manager role will be assigned to the UNDP Project Manager of the MZ Project. S/He will be responsible for day-to-day management and will ensure that the project reflects the detailed strategy and work plans, mindful of all required corporate standards, and within the constraints of time and cost. S/He will also communicate unexpected opportunities or challenges to the Project Board for situational awareness and consideration.

UNDP Gender Advisor/ICT Specialist will provide expert advisory services to the project team.

The Core project team will consist of the existing MZ Project team with support of the Women in Elections team and if needed be staff from other projects within the sector. Role of **five (5) Field/Supporting Officers** placed in the respective UNDP regional offices, will be of the importance. Their role will be to facilitate field processes and communication with local governments and MZs, interaction and mentoring of CSOs/NGOs, as well as ensure close oversight and monitoring of field activities, including assurance of activities implemented at the local level.

The Project support will be ensured via administrative and Quality Assurance support provided by the Social Inclusion Program Associate.

In addition, the project will deploy several key short-term national specialists to support project implementation, if funds allow, among whom experts in statistics, social–economic research and analysis, web programmers etc.
Project will also benefit from the knowledge of the UNDP Accelerator Lab in Bosnia and Herzegovina (as part of an innovative global network) particularly in the design and dissemination of the planned surveys and assessments and in attempt to identify some new approaches and scalable solutions.

**Financial implications and proposed arrangements**

In response to the current situation and the upcoming activity period, the project intends to use the MZ Phase 2 Project funds in the form they are available right now to the extent possible, while adjusting implementation modality. The rapid assessment and response represent the opportunity for the project to continue the work on affirming the role of MZs during the time of crises in the support of a community as a whole, while further increasing project visibility.

Below is proposed budget for activities directly linked to COVID-19 response that have not been budgeted in the MZ Project Phase two.
**BUDGET AND DURATION:** The total budget for this intervention is US$ 343,440 for 6 months.

### OUTPUT: COVID-19 RESPONSE TO COMMUNITY NEEDS

<table>
<thead>
<tr>
<th>Activity/Result: Activity/Result</th>
<th>Action</th>
<th>Budget line description</th>
<th>Unit description / Number of Units</th>
<th>Unit price (USD)</th>
<th>Amount (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Rapid Response Assessment (RARE)</td>
<td>1. Questionnaire development and deployment of the assessment (“living research” to be updated bi-weekly)</td>
<td>1. Analysis of Data and recommendations for immediate interventions made</td>
<td>Statistician</td>
<td>Lump Sum</td>
<td>4,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2. Criteria for distribution of the assistance developed and agreed with stakeholders</td>
<td>Socio-economic analyst</td>
<td>Lump Sum</td>
<td>6,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3. Adaptation of the web based solutions</td>
<td>IT Expert</td>
<td>Lump Sum</td>
<td>4,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Survey tools and web solutions</td>
<td>Lump sum</td>
<td>4,000</td>
</tr>
<tr>
<td><strong>Total for Activity/Result 1</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>18,000</strong></td>
</tr>
<tr>
<td>2. Rapid Response Community Facility</td>
<td>Procurement of Goods/services/works in line with identified needs and agreed criteria</td>
<td>Contracts for goods/services/works</td>
<td>Per LG/24</td>
<td>12,500</td>
<td>300,000</td>
</tr>
<tr>
<td><strong>Total for Activity/Result 2</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>300,000</strong></td>
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<tr>
<td><strong>General Management Support (8%)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>25,440</strong></td>
</tr>
<tr>
<td><strong>GRAND TOTAL</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>343,440</strong></td>
</tr>
</tbody>
</table>