



JHU - CERTI UPDATE

The Johns Hopkins University (JHU), Center for Refugee and Disaster Studies
Linking Complex Emergency Relief and Transition Initiative (CERTI)



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ABOUT JHU-CERTI

The **Johns Hopkins University (JHU)** School of Public Health, Center for Refugee and Disaster Studies is a **CERTI** collaborating institution. **CERTI** is an acronym for the "Linking Complex Emergency Response and Transition Initiative," an interagency initiative funded in part by **USAID**. To learn more about **CERTI**, visit the **CERTI** web page at:

<http://payson.tulane.edu/CERTI/default.htm>

and visit the **Center for Refugee and Disaster Studies** web site:

<http://www.jhsph.edu/refugee/default.html>

ANALYSIS: PVOs CONSIDER FUNDING RESTRICTIONS A MAJOR BARRIER TO PROVIDING EFFECTIVE TRANSITION PROGRAMS

Two separate assessments carried out by **JHU-CERTI** point to funding restrictions by donors as a major barrier to effective programming during transition periods. Transition is defined here as the period between the acute phase of an emergency and recovery.

In the first assessment, 16 headquarters staff and 16 field staff from 11 US PVOs responded to the following open-ended question, "*What problems do you face in working with transitional populations?*" [Each respondent was referred to us or self-identified as having experience with transition programs].

The problem most frequently mentioned was about **funding**. Two major themes were described in the responses about funding. First, PVO staff felt that the funding available for transition programs is short-term when longer-term funding may be needed. In other words, donor support diminishes once the emergency is over, but longer-term programs are often felt to be needed

during transition.

The second theme that emerged from the responses was about the inflexibility of funding. The major complaint raised was that donors placed restrictions against activities that those in the field saw as often needed during transition:

"One of the greatest challenges is the flexibility of the funding and what is considered to be an 'emergency, transition, or development' intervention. Certain activities are not allowed by the donor with the result being that an organization cannot always respond with the most appropriate and relevant intervention." [headquarters staff]

"It is never easy to find flexible funding for integrated, holistic programming, but this is exactly what is needed when the social 'task' for the populations involved is to form a new synthesis that will survive into the future." [field staff]

"It is hard to consider how to best be alert to returnees' future under [donor office] where any hint of development isn't allowed." [field worker]

The second assessment was an evaluation of **JHU-CERTI's Training in Qualitative Research Methods for PVOs/NGOs**. Prior to the evaluation, field-tests of the training course were carried out in Angola, Mozambique and Sudan between August 1998 and August 1999. In each of the field tests, participants were involved in an actual qualitative study providing experience in collecting, managing and analyzing qualitative (i.e., textual) data. Each study was hosted by a PVO and located in a current or proposed PVO program area. The first two field-tests focused on health issues. In the final field-test in Sudan, we studied the perceived needs of internally displaced persons (IDPs) living in a resettlement community outside of Khartoum.

We carried out the evaluation six months following the final training. One of the questions on the evaluation form was, "*How has the training affected program priorities?*" The response from the PVO hosting the Sudan training and study reinforces the points made above:

"Organizationally, [name of PVO] intends to shift program priorities from emergency relief to long-term development program for IDPs. The qualitative study carried out during the training, has emphasized the community priorities as 'moving from free handouts to self-help'... Unfortunately, the current political environment and donor restrictions on Sudan do not allow NGOs to shift program priorities based on the needs of the community."

Editorial note:

The comments by PVO staff working with transition populations suggest that funding and programs during transition may need to be more flexible, longer-term and better adapted to the local context than they are currently. In the emergency phase, the priority for programs and standards has been preventing 'excess mortality.' Since by definition there is not 'excess mortality' in the transition following the acute phase of an emergency, the question arises as to what are the priorities during transition or, more importantly, who should decide what these priorities are.

It is our opinion that the process of establishing priorities during transition can begin with information about priorities of the transition population. It is also our opinion that the methods used to identify population priorities should, as much as possible, be participatory and engage the views of persons of different gender, age and ethnicity.

The report of the training evaluation mentioned above and other materials developed for participatory assessment of transition population priorities and local context can be obtained for free at:

<http://www.jhsph.edu/refugee/resources.html>

The **JHU-CERTI UPDATE** is published by the JHU Center for Refugee and Disaster Studies. If you have questions or comments about this *Update*, please contact Bill Weiss at bweiss@jhsph.edu or 1-410-614-6172.