

# CARITAS INTERNATIONALIS

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## A Review of the Caritas Internationalis Liaison Agency

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AGUACONSULT

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## Abbreviations used in the Reports

ACEAC	Association des Conférences Episcopales
APHD	Asian Partnership for Human Development
BDD	Bureau Diocésain de Caritas – Développement
BDOM	Bureau Diocésain des Œuvres Médicales
CI	Caritas Internationalis
CAFOD	Catholic Fund for Overseas Development
CES	Caritas El Salvador
CCR	Coordination Committee for Rwanda
CECD	Commission Episcopale Caritas – Développement
CIDSE	Coopération Internationale pour le Développement Socio-Economique
CISA	International Coordination Forum for Follow-up and Accompaniment
CMO	Caritas Member Organisation
CRS	Catholic Relief Services
CSI	Caritas Secours Catholique
DFID	Department for International Development
EAC	Emergency Aid Commission
ECHO	European Community Humanitarian Office
ERST	Emergency Response Support Team
GLWG	Great Lakes Working Group
IASC	Inter Agency Standing Committee
ICC	International Cooperation Committee for Emergencies
ICD	International Cooperation Department
LA	Liaison Agency
MEC	Major Emergencies Committee
MO	Member Organisation
OCHA	Office for the Coordination of Humanitarian Affairs
OD	Organisational Development

OWG	Overseas Working Group
PAD	Partner Agency Dialogue
PC	Partner Caritas
SG	Secretary General
SOA	Special Operations Appeal
STEP	Solidarity Team for Emergency Partnership
TOR	Terms of Reference

## 1. INTRODUCTION

The Liaison Agency (LA) is a coordination mechanism used by the Caritas confederation during major emergencies. The LA is carried out by a Caritas member organisation (MO) that takes on the role of coordination at the request of, and on behalf of, Caritas Internationalis (CI<sup>1</sup>).

In 2000, CI began a process of review of its approaches to responding to emergencies and has since produced new guidelines and new mechanisms. This assessment of the LA model is part of the overall review process. The changing context within which Caritas members are working, the introduction of new mechanisms which affect the functioning and role of the LA and, not least, its contended status, led CI to commission an independent, separate review of the LA mechanism. This document presents the finding of the review of the LA model.

The purpose is “to review the current Caritas Internationalis Liaison Agency model and make clear recommendations to improve it or to recommend a better structure which might be used in CI’s response to major emergencies”. The Terms of Reference (ToR) is attached as Annex I. An external team from the consultancy company AguaConsult was selected to carry out the review by CI in October 2003, following a tendering and interview process.

The report is organised in the following way: sections 2 and 3 provide a description of the review methodology and a background history of the LA model. Sections 4 and 5 describe the LA objectives and activities. Sections 6-10 analyse the effectiveness of the mechanism. The final sections summarise principal findings and present recommendations.

## 2. METHODOLOGY

The main part of the review was conducted between November 2003 and February 2004. The team began the work with an extensive review of all available and relevant internal CI documentation, such as policy documents, previous evaluations, meeting minutes, reports and disaster response guidelines as well as over thirty ToRs for LA agreements and other related types of partnerships.

A Steering Committee of eight Caritas staff members from three regions (Asia, Africa and Europe) as well as CI in Rome was established by CI’s International Cooperation Department (ICD) to provide support, oversight and consultation for the review. The review was managed and facilitated by the ICD.

The primary method for obtaining views and feedback on the LA mechanism was semi-structured interviews. Some 80 people were interviewed, representing 17 Caritas member organisations as well as three external organisations<sup>3</sup>. Ten countries were visited by the team, of which six were represented by existing LA Caritas MOs or previous Las; other LAs were interviewed by telephone. Anecdotal evidence and preliminary inferences have been triangulated with the interviews and secondary documentation in order to optimise the accuracy and fair representation of the final conclusions.

A questionnaire was also sent to all Caritas members, with versions in English, Spanish and French. A limited number of responses (eleven) were received, of which four were from Northern and seven from Southern Caritas member organisations. A summary analysis of the responses is

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<sup>1</sup> Caritas Internationalis (CI) is a global confederation of 162 Catholic organisations. Throughout this report, the term CI refers to the role played by the Head Office in Rome as representatives of the Confederation, specifically the General Secretariat and the International Cooperation Department

<sup>3</sup> See Annex X for a complete list of interviewees

included in Annex VIII. Additionally, the ICD assisted in the identification of key informants who were interviewed by telephone.

Three countries were selected as case studies<sup>4</sup>. The selection of El Salvador, India and the Democratic Republic of Congo (DRC) was made in Rome following consultation with members of the International Cooperation Committee for Emergencies (ICC) and the review team. The principal criteria for selection of these countries was their experience of an LA, including as wide a range of regions as possible within time and budget constraints, availability of key staff and logistical accessibility. A separate report on each country was produced and, along with other sources, forms the basis of the report's findings. The country case study reports are included in Annexes III, IV and V. Desk-based case studies are outlined in Annex VI.

The review team was committed to a process that was participative and consultative. In each of the three field trips, the team held a feedback session with key Caritas staff to discuss the principal findings and potential recommendations. This was done to check for accuracy and as part of a consultative methodology, optimising the feasibility of any recommendations. Throughout the review monthly progress reports were sent to the Steering Committee. Following the completion of field trips and interviews, the preliminary findings and recommendations were drafted in an Aide Mémoire and distributed to six regional or MO representatives for discussion in London. The discussion meeting, held prior to the writing and distribution of the draft report, enabled the review team to "test" and discuss its draft recommendations, maximising the opportunities for an exchange of ideas and was designed to increase the utility of the review.

A draft report was subsequently distributed and discussed with the ICC in Rome, prior to a final edit and completion in mid March 2004.

### **3. THE HISTORY OF THE LIAISON AGENCY MECHANISM**

#### **3.1 *Developing the Role:***

An early version of the Liaison Agency was tried in CHAD in the early 1970s, where weak coordination and the need for a common strategy led Caritas Switzerland to take on a coordination role. It was called, briefly, a Lead Agency, soon modified to LA and was viewed by the Swiss as a service on behalf of CI. The incoming CI Secretary General, who was also from Caritas Switzerland, brought the idea to Rome during the 1980s. The intended LA role was essentially:

- As a platform for information exchange
- For coordination of projects and inputs
- For international representation.

In 1984 the LA mechanism was formally approved by CI's Executive Committee. To be activated it had to be appointed by the local Caritas, the Secretary General (SG) and the Emergency Aid Commission (EAC). It was intended only for "exceptional emergency situations"<sup>5</sup> with a mandate to:

- Coordinate financing
- Permit more efficient work on all levels
- Strengthen structures in developing countries

The LA was to provide information on progress, with the partner having overall responsibility and producing reports.

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<sup>4</sup> It was originally intended to visit Caritas Yugoslavia; however the flight costs were considered prohibitive and the interviews were therefore carried out by telephone

<sup>5</sup> *History of CI Liaison Agency establishment* CI, CI, undated



### 3.2 *Different Interpretations of the Liaison Agency Mandate:*

During this 1980s period, six Member Organisations were sharing 15 LA roles. According to a meeting in Freiberg in 1985 the new LA institution was “considered positive [but] numerous Caritas request an L.A. while only few are available”<sup>6</sup>. Already at this time the LA tasks included both institutional support and emergency response and the “employment of regional personnel should be envisaged”. Discipline issues and concerns that an LA form of coordination would undermine bilateral relations and the authority of CI in Rome were expressed at the meeting. Southern participants stressed the need a “for permanent position” not just support for emergency capacity.

Two years later in Lomé 1987, the Region Afrique sent out a “*Reminder*” of the LA core responsibilities, which included:

- A coordination and information-sharing instrument for Northern Caritas members
- An advocate and mobiliser of resources for the local Caritas
- Should use the coordination systems of the region
- Should cease after the emergency but prepare the partner for other support structures<sup>7</sup>

Concerns surfaced again regarding the mechanism in 1993 at an Overseas Working Group (OWG) meeting<sup>8</sup> where it was suggested that the appointment of the LA should be done according to defined criteria, should demonstrate clear discipline *vis a vis* the ToR, and be based on a mutually defined ToR which was time-bound and annually reviewed. The meeting proposed five levels of LA. These levels became, with only slight modifications, the proposed six LA models described in the document *Caritas Liaison Agencies* produced by CI in 1993/4. The types of tasks range from a high degree of operational involvement at field-level to non-operational support roles:

- An operational LA implementing directly in the absence of a local Caritas
- An LA working operationally alongside the partner “under exceptional pressure”
- An LA providing technical advice, temporary “support” and structural aid to the partner that is implementing the response itself
- Information provision for other MOs
- Coordination of finance at request of the Partner Caritas
- Supporting the local Caritas with international logistics and procurement

The OWG meeting, held in 1994, stated that LA’s are “not needed where the Region itself is active in strengthening its national Caritas”.

### 3.3 *A Changing Coordination Context and the Need for Review*

The repeated concerns and criticisms of the LA mechanism, raised since its inception, focus on a number of consistent themes, including:

- Unclear roles and responsibilities of the LA
- A closed-door selection process that usually excluded the southern partners
- A lack of discipline and respect amongst and between members and, perhaps most of all,
- Different interpretations of capacity and the principle of partnership.

These criticisms raise a number of important questions, such as whether it is the priority to support the partner or do it yourself. Can the partner manage the response itself and who makes this assessment? How the partner and the LA interpret “temporary support in the implementation of

<sup>6</sup> CI 1985. Report on the Liaison Agencies’ Meeting. Freiburg. May 14, 1985

<sup>7</sup> From CI 1987. *Reminder: Liaison Agency*

<sup>8</sup> Freiberg 23.09.93 *Proposal to Operations Working Group: Definition of Tasks for Liaison Agencies*

programmes for a [Partner Caritas] PC under pressure<sup>9</sup> continued to vary widely and be a source of considerable tension. These same tensions have continued until today.

Moreover, particularly since the 1990s, the coordination context has changed and Northern Caritas members have become increasingly operational. The modern scenario includes multiple partnerships and, potentially, several MOs with an in-country presence. The Major Emergencies Committee (MEC) defined “a blueprint for coordination of CI members’ response to major emergencies based on the concept of Coordinating Agency”<sup>10</sup>. This document from the 1990s accepts the right of members to be operational in major emergencies and includes a field level ToR for a “Coordinating Agency”, with which the Coordinating agency has total control of funds sent. The MEC no longer exists but, although contended, this more operational role from northern MOs has placed new coordination demands on both the local Caritas and the LA. Further, the trend in the public and private sector for greater accountability is increasing the need for monitoring and evaluation. New mechanisms must accommodate the changes and manage the results without undermining Caritas’ values and principles of autonomy and subsidiarity.

#### 4. LIAISON AGENCY TERMS OF REFERENCE AND OBJECTIVES

The objectives of the Liaison Agencies have evolved over time. They are frequently referred to in various documents and interviews as being unclear and poorly defined. Several (documented) attempts have been made to clarify the role and responsibilities of an LA in 1985, 1993 and 2001<sup>11</sup>. The six levels of LA outlined in the 1994 document mentioned above, detail the three main areas of activity for an LA:

1. Full implementation of programmes in the absence of a local Caritas
2. Coordination of the international network, such as the coordination and mobilisation of funds, coordination of large aid shipments and the dissemination of information amongst donor members and other stakeholders
3. “Temporary support” and “structural support” of the partner Caritas that includes advice, technical (staff) support, training, coordination of finance and reporting responsibilities whilst the partner is responsible for needs assessment and implementation of programmes. The key responsibility for the LA is “support of PC”; the meaning of support is undefined and more open to interpretation than in the other descriptions

To establish how these roles are translated into specific situations, the review team examined more than thirty Terms of Reference in order to record the full range of objectives and activities mandated to Liaison Agencies in different countries. The full analysis can be found in Annex IX.

Over half of the ToRs include joint assessments and planning; 60% offer international staff and 50% advice and training from the LA. Some 30% of LAs provide reports for other Caritas members and over two-thirds undertake to coordinate field visits and provide information for donors, press etc.

All of the ToRs define coordination of member’s funds as the role of the LA; but by contrast mention of operational logistics support is rare. The post-1994 ToRs have clearly indicated dates for termination of the mandate, and allow for extension only with the agreement of both parties.

Many of these roles are in line with the 1994 document but tend towards a greater degree of operational intervention, particularly regarding assessment and planning. Roles that are absent or at most only implied in 1994 cover monitoring and in-country management or coordination through a staff presence from the LA, which are included in 20% of the ToRs. Over 30% also include capacity building, which was not an objective in the early (1980s) LA prototypes. Similar to “support”, capacity building is generally not defined and could describe the technical support,

<sup>9</sup> *Caritas Liaison Agencies*. 1994

<sup>10</sup> *Major Emergencies. Protocol for a CI Coordinated Response*. Undated.

<sup>11</sup> At meetings of the OWG and more recently in a meeting in Delhi, 2001. See references.

training and exchange of experience referred to in the 1994 clarifications. But it may also refer to the support that has been developed in more recent types of long-term partnership such as privileged partnerships that emphasise institutional capacity building.

Related to capacity building is the 1994 document's reference to intervention by an LA when the partner is "under exceptional pressure". This too is subject to wide interpretation; it could refer to a competent partner overloaded by a sudden increase in the volume of work, or to an inexperienced Caritas requiring in-country managerial and technical expertise bordering on substitution.

The LA model was intended for major emergencies and this review was asked to address mechanisms for "major emergencies". What constitutes major is broadly interpreted and the LA model is clearly used in many contexts that would not be defined as "major" experiences. For this reason all emergency mechanisms *where there is a need to coordinate other Caritas members* are considered as Liaison Agencies.

## 5. THE TERMS OF REFERENCE IN PRACTICE

How effectively the objectives of the Liaison Agencies were fulfilled in practice is discussed below. In terms of respecting the agreed activities that are set out in the ToRs, most of the case studies showed that the LA's, by and large, did what was outlined in these agreements. Hence the following observation, from Honduras describing Caritas Spain, is fairly typical comment on the functions of the LA: "management of funds and reporting for the SOA [Special Operations Appeal], information dissemination amongst Caritas members, support to strategic planning, monitoring of activities and the establishment of improved administration, finance and logistics systems"<sup>12</sup>.

The key areas where an LA has consistently failed to fulfil the ToR are in relation to strengthening the capacity of the partner, and in unofficial, or informal, extensions of its mandate; i.e. where the LA member organisation extends its presence in the country after the end of the agreed upon period.

In DRC, for example the LA for Caritas Congo may have weakened the local Caritas through substitution rather than support and sought to continue an LA role, regardless of the absence of any official mandate. However, the general lack of indicators for capacity building and support in the ToRs limits a full assessment of the degree of fulfilment of such objectives and the meaningful measurement of impact.

## 6. THE EFFECTIVENESS OF THE LIAISON AGENCY MECHANISM

The need for effective coordination was recognised by all those interviewed. Despite the difficulties, those interviewed commented that the LA model is a marked improvement on the pre-coordination era of the Confederation. The majority of Caritas staff who were consulted by the review team concluded that it is advantageous to have an institutional focal point, acting as a single interlocutor between the local Caritas and the rest of the network. A focal organisation is able to provide crucial, overall leadership and be accountable to members.

### 6.1 *The Overall Advantages and Disadvantages of the Liaison Agency model*

Advantages	Disadvantages
<ul style="list-style-type: none"> <li>• It expands the capacity of CI without necessitating a costly central resource</li> <li>• It mobilises funds; lends (rightly or wrongly) credibility to the Special Operations Appeal (SOA); increases donor member's confidence and hence generates more funds</li> </ul>	<ul style="list-style-type: none"> <li>• It is a single member and can reduce the sense of ownership and commitment to the country in other members</li> <li>• It may control or substitute for the local Caritas and lead to parallel programming</li> <li>• A poorly performing LA may reduce rather</li> </ul>

<sup>12</sup> See Annex IV for the El Salvador and Honduras Case Study

<ul style="list-style-type: none"> <li>• It can increase the coverage for MOs</li> <li>• Reduces the burden on local Caritas for the provision of information, reporting (financial and narrative)</li> <li>• Provides security to the partner through reliable structural support (core costs)</li> <li>• Provides technical advice, support, new systems or skills and increases professionalism and effectiveness</li> <li>• Can support institutional, rather than project-specific capacity building</li> <li>• Acts as advocate for national issues in the international community</li> <li>• Is a reliable supporter; an ally of the partner</li> <li>• Provides additional accountability through third party monitoring of programmes</li> <li>• Is more likely than a national member to be able to control bilateralism from northern members</li> <li>• Has access to European donors</li> <li>• Is (perceived as) neutral in a conflict-related emergency</li> </ul>	<p>than increase (financial) support</p> <ul style="list-style-type: none"> <li>• It may not have the appropriate skills for the particular local Caritas member or emergency</li> <li>• The LA's effectiveness is often determined by the individuals concerned and their organisation's particular approach, than by a clear institutional mandate</li> <li>• It may reduce visibility for other members</li> <li>• It is burdensome for the LA</li> <li>• Although technically a delegated function for CI, it may promote its own interests rather than provide a service to the Confederation as a whole. It may reduce or block involvement</li> <li>• It lacks the authority of CI and can be ignored</li> <li>• Its accountability to members is weak; the "voluntary" nature of the role may lead to reduced professionalism</li> <li>• It either does not leave when it should or it leaves too quickly, increasing vulnerability</li> </ul>
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## 6.2 Coordination:

### *Coordination in the Humanitarian Sector:*

Coordination in the humanitarian sector is variously defined. Commonly expected coordination activities include strategic level coordination such as ensuring shared policy and approach and managing overall coverage to avoid duplication or gaps as well as advocacy activities. Operational forms of coordination include field activity such as monitoring and representation with other humanitarian actors and government authorities<sup>13</sup>.

### *Caritas LA Coordination:*

An LA coordination role is predominantly characterised as operational in nature. It also shares its coordination role with local Caritas' and CI as well with other mechanisms such as Working Groups. For example the local Caritas usually continues to represent Caritas with government and local authorities and CI is more likely to play a mediation role as well as fulfil many of the strategic coordination responsibilities.

CI Statutes and rules state that a Caritas member has autonomy "concerning relationships and operational procedure" but they are to "accept Confederation coordination with relations to their supranational level". Managing the overlap between national and supranational essentially falls to the LA.

According to interviews carried out for this review, the most effective and useful coordination role of an LA is the coordination of the international network: e.g. mobilising funds, managing the SOA, providing information and reports to members and donors and, to some extent, coordinating the visits of Caritas members. Caritas India reported on the benefit during Gujarat of frequent and well co-ordinated information that satisfied (most) MO's needs and reduced the burden of MO visits on the local Caritas. Typically, Caritas members affected by emergencies prefer a single interlocutor. For example India, El Salvador, the dioceses in DRC (though not the national office), SudanAid, Eritrea and Belgrade all expressed the opinion that it is preferable to have a single

<sup>13</sup> See Checklist 1 Annex VII and for example the responsibilities of coordination mechanisms such as the UN Inter Agency Standing Committee (IASC) and the UN Office for the Coordination of Humanitarian Affairs (OCHA)

interlocutor to manage the interface with the international network. Coordination reduces the administration, increases efficiency and reduces duplication.

Although local Caritas' often actively coordinate with local government, international coordination meetings (such as UN meetings during emergencies) tend to be dominated by Northern participants and agendas. As a result, participation by Southern Caritas is often weak, resulting in missed information exchange, profile and advocacy opportunities. The extensive work that the local Caritas may be carrying out is then eclipsed by more vocal actors, which may then have funding implications with in-country donors. In all three of countries visited, Liaison Agencies (or an Emergency Response Support Team (ERST<sup>14</sup>) in the case of India) had often filled this gap.

What was rarely mentioned in interviews or ToRs are the "deeper" coordination activities that extend beyond information provision and support to a partner to a facilitating and even directive role. This could entail ensuring a common vision and approach, the allocation of responsibilities amongst members to avoid inequitable coverage, the establishment of common standards and monitoring against those standards. These responsibilities are at present included in the new Solidarity Team for Emergency Partnership (STEP<sup>15</sup>) mechanism and are partly the responsibility of the ICC. The latter however is concerned with the development of standards, not their implementation.

#### *Problems with Coordination:*

Interviews and evaluation reports (particularly of coordination during the Rwanda crisis) demonstrate what happens when LA coordination does not work well, or at all. This can result in a multitude of bilateral contracts, loss of overall programme strategy and coherence, parallel programmes, a partner overwhelmed by demands for information and visits and diverted from the actual response, double funded projects, poor accountability, funds arriving simultaneously with similar projects and (unattainable) deadlines, conflict between the local Caritas and other Caritas, or between it and the diocese, MOs arriving in the country ill-equipped and ill-informed but seeking visibility.

LAs with limited resources and hence under-investment in the role also fail to provide timely information or establish efficient communications systems for the benefit of all. The demand for increasingly complex and frequent reporting is onerous for the LA, particularly in a climate of increasing reliance on external funding and the resulting variety of donor reporting formats. If this is not taken on by the LA it falls to the local Caritas to provide reports. India was producing generic reports as well as those tailored to specific donors. El Salvador took over the reporting role from its LA and (although preferred) meant that they were often requested to provide separate reports for small amounts of money and generally struggled to deliver timely financial reports to donor members.

There is still a general absence of standard reporting formats for either narrative or financial reports that would facilitate the provision of information suitable to meet the needs of all key stakeholders. In India the LA proposed the adoption of the ECHO reporting format as a generic report; this format is comprehensive, meaning that any other information needs can be easily extracted from it. At the same time its level of detail is time-consuming and potentially superfluous. A template for an SOA reporting format was produced in 2002 in response to such criticism. Although a great improvement, it does not always appear to be used and can easily be completed without reference to the detail normally required for good programme monitoring (such as reporting against objectives, activities and indicators stated in the proposal or appeal).

There are often serious problems with individual northern Caritas failing to respect the mandate of the LA and working bilaterally without any coordination at all, e.g. not even sharing information

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<sup>14</sup> The Caritas ERST mechanism is a short-term operational team which responds in major emergencies. It is discussed later in the review.

<sup>15</sup> The STEP is an operational team nominated by the CI Secretary General to follow-up emergencies for up to 6 months.

with local Caritas or other members. For example during Mitch, Caritas Switzerland established an implementing office in Honduras despite the opposition of the local Caritas. In India, despite the coordination mechanisms in place, the LA, ERST, Caritas India and CRS all circulated reports on the same activities. Similarly the LA was unable to fully coordinate the funding of the SOA, resulting in some budget lines being consistently over or under-funded.

The Joint Visits coordination mechanism set up during Gujarat by the LA appears to have worked better later in the programme, when the earthquake had slipped from the limelight. However, even basic operational coordination is ignored when the pressure is on. Member's behaviour in major emergencies in general has been frequently described as a "free for all".

Some northern Caritas point out that a weak local Caritas should not be able to block a response and that it is therefore legitimate to fund dioceses directly, with or without approval. They also point out that the Bishops and the dioceses on occasion play the different Caritas against each other and the local Caritas MOs, in order to increase access to funds<sup>16</sup>.

To a certain extent more directive coordination is inappropriate for a Confederation that emphasises autonomy. However, "recourse to the principle of autonomy carries with it a risk of critically weakening the principle of coordination within the Confederation"<sup>17</sup>. The Caritas Confederation is also part of an international humanitarian community. It is a supporter of the Code of Conduct and Sphere and has global and framework agreements with a further eight international organisations. Although this issue generally exceeds the scope of this review, nonetheless it directly affects the role of a coordinating LA representing CI. The LA may be required to represent the international Caritas (that is an active participant in global humanitarian standards) and the national Caritas; these are different types organisations, some of which may have contradictory views of those standards and approaches.

However, there is apparently little agreement amongst those interviewed as to whether the LA should intervene regarding policy and standards. The Gujarat evaluation, for example, proposed that the LA should have played a stronger role *vis a vis* procurement procedures to avoid the subsequent difficulties encountered there. Conversely, Secours Catholique viewed such tasks as properly the responsibility of the local Caritas. More importantly, partner's experience of LA approaches and standards has been that they are imposed and individual to that organisation, i.e. the LA is not the facilitator of broader humanitarian professional practice or recognisable Caritas principles and practice but rather of its own, particular approach.

The evidence generally suggests that the LA has worked less well in the first phases of a major emergency. This is apparently due to the competing needs for visibility of northern Caritas MOs and the inherent complexities and tensions of establishing a coordination mechanism in the heat of a first phase emergency. The multilateral ERST mechanism has partially resolved this problem and is further discussed below.

In general, coordination weaknesses using the LA relate to poor discipline and an unwillingness or inability of the LA to play a strong leadership role with respect to overall strategy, allocation of responsibilities and accountability (standards, monitoring etc). Good coordination is also highly demanding; it requires time, communications systems and good emergency programme skills. Where it has been done well, the LA has invested significant staff time and money into the process. CAFOD, Caritas Switzerland and Austria all committed at least one full time staff member to one LA role.

Whilst this review cannot assess the impact of poor or absent coordination in terms of programme quality, coherence and coverage, it is likely to be affected by this weakness.

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<sup>16</sup> CordAid regard the problem of weak local Caritas as the Bishop's (who themselves created a local Caritas in order to play a coordination/other role). They claim that bilateral is also the preferred relationship in the dioceses.

<sup>17</sup> Crombrughe et al. Evaluation of the Rwandan Crisis

The review identified four key issues that appear to prevent an LA (or perhaps any) coordination mechanism from functioning well:

1. Member's lack of discipline or willingness to be coordinated, whether by an LA, CI or any other mechanism.
2. The poor quality of coordination such that it does not appear to have added value
3. The lack of recourse to standard formats and guidelines
4. The lack of objective and systematic assessments of capacity such that arguments regarding who should coordinate (i.e. the local Caritas or an external member) are not "muddied" by variable and subjective assessment of capacity

Perhaps the investment required for good coordination is insufficiently recognised in Caritas as a whole. The "voluntary" nature of the LA contract exacerbates this; the context of gratitude makes assessments of competence or performance of the LA politically difficult.

### **6.3 Support to the Local Caritas:**

The interpretation of the "support" function provided by Liaison Agencies varies from the provision of technical advice to the MO taking on aspects of implementation or the provision of core costs by an LA, essential to the development and security of the local Caritas.

As a result the impact has been mixed, with examples of effective support to the partner, as well as examples of undermining local capacity through substitution. Southern partners in general greatly appreciated quality technical support. In El Salvador, the LA representative brought valued skills and tools such as programme planning and management techniques, logical framework tools etc. into the team. In Goma Diocese, a succession of advisors working within the team have brought their financial and management skills to increase Caritas Goma's skills. Whether this kind of support is brought through periodic advisory visits or longer-term field presence varies according to the particular team and seems about evenly split between the two approaches.

By contrast, Secours Catholique (SC) were seen by Caritas India "primarily as a means for linking to the world outside India, but not as an instrument to bring additional knowledge or expertise"<sup>18</sup> a view that SC concurs with, at least in the case of the Gujarat earthquake response.

If the competence of LA personnel in the field is limited or even inappropriate – as has often been the case during emergencies – the "support" they provide is often viewed as a constraint and even as an insult. The contrast in capacity between the different personnel sent to the field by Liaison Agencies suggests the need for the Confederation as a whole to clarify the relevant competencies required and to ensure that staff are assessed or trained accordingly.

#### *Support or Substitution?*

In 1998, when Caritas Congo had very low capacity (or even the potential to develop), the presence of Caritas Belgium (Caritas Secours Catholique, CSI) as LA was greatly appreciated<sup>19</sup>. However, the "reborn" Caritas Congo of 2001 appears to owe little or nothing to CSI for its new found capacity. Rather, this is apparently the result of the replacement of senior management with highly competent personnel, who proceeded to build up Caritas Congo's capacity and profile<sup>20</sup> rather than that of training and other support from the LA. It appears that the LA personnel failed to adapt to a new management team capable of absorbing support by identifying opportunities to work alongside them. They may have lacked the experience or capacity to do so. Instead, they continued to work within a parallel structure, dealing directly with the diocese and

<sup>18</sup> Amman 2001. Gujarat Evaluation

<sup>19</sup> This assessment was expressed by Caritas Congo as well as the Liaison Agency

<sup>20</sup> A clear management approach and strategic thinking by some Caritas Members has also aided this professionalisation; for example Caritas Congo pays competitive salaries to retain staff; some northern Caritas such as Germany have funded key staff positions, such as the Deputy Director/ACEAC regional coordinator

continuing to act as a substitute for Caritas Congo. It is possible that an unintended impact of the LA was to have, in the past, weakened Caritas Congo's capacity through substituting for them and not supporting their development.

The following questionnaire respondent expresses clearly the danger of crossing the line from support to substitution:

“Involving a Liaison Agency brought the experience required specifically in reporting, creating an efficient data base and providing a typical and fruitful assistance.

Though, the Liaison Agency got so implicated in their work they trespassed the responsibilities they were given or agreed upon in the support agreement”.

Not only is the quality and meaning of support open to interpretation and wide variation, but support needs are rarely the result of a joint analysis between the LA and the southern MO partner. This is partly responsible for the fact that substitution for local partners and subjective assessments of competence and capacity are amongst the most contentious aspects of the LA model.

#### **6.4 Capacity Building:**

The impact of capacity building has been largely positive in the four main countries studied, although in many cases it was not planned for in any systematic way. Capacity building often happens informally. The review team found that objectives for capacity building may have been “add-ons” to the first round of emergency response support and the goals and indicators tend to be poorly defined or quantified.

Capacity building is not the sole preserve of the LA. Typically several other MOs may be providing training and support, but through different forms of partnership. The actual or potential added value of an LA's support, according to the southern partners interviewed, is that organisational capacity such as finance, strategic planning etc, rather than project-specific (technical) skills, are more likely to be the focus of the LA's capacity building.

##### *Positive Impact:*

For example, during Mitch in El Salvador, the LA introduced an accounting system, with computers, software and training such that Caritas El Salvador (CES) was able to produce financial reports directly for donor members, rather than via the LA. Improvements of course are still needed: some financial reports mixed expenditure with other donors, did not meet international audit standards and required input from the donor member to complete. Nonetheless, the continued existence of improved CES financial systems and reporting and increased confidence means that CES is committed to implementing and managing finances itself, despite the extremely heavy demands it implies. CES also report a clear impact on their overall emergency response and general capacity in assessment, planning, strategic planning, reporting, evaluation skills, communications and financial management.

A major indicator of this impact is that during the earthquake in 2001, CES took on many of the responsibilities previously held by the LA during Mitch, despite it being a larger response.

Caritas Honduras' assessment is that its capacity in emergency and general assessment, strategic planning, reporting, evaluation skills, financial management and logistic capacities has clearly improved, through its own experience and through the efforts of the LA.

Caritas India's financial capacity has developed continuously over the years and the department now has eight staff and has successfully adopted new formats, such as the ECHO financial reporting framework. Its communications (especially email) capacity has greatly increased. The ERST experience particularly has increased Caritas India's assessment and planning capacity through exposure to new guidelines, the use of Sphere standards etc.



Examples of effective alternatives to LA capacity building through south-south exchange and training were also found, and suggest that this approach may serve as a useful alternative or complement to current capacity building efforts. For example Caritas Congo and CRS are implementing an extensive training programme that trains diocese staff as trainers for other dioceses.

#### *Difficulties with Capacity Building:*

Caritas Bukavu is quite negative about the capacity building activities of its LA's (Caritas Spain). Through a probably unavoidable structural peculiarity due to the war, the Director and Administrator positions were not held by local staff, but were held by one person from Caritas Spain. This alone would tend to prevent the development of Caritas Bukavu's capacity. In addition, it seems that the personality of the Spanish incumbent tended towards centralised control rather than delegation and increased responsibility. Moreover, war and an uncertain future meant that it was not possible to identify, and hence build up, a successor to the Director.

As a consequence, the capacity of Bukavu's senior management has not been greatly increased by Caritas Spain. This story is an example of substitution by an LA, but is also an example of the challenges faced in conflict situations where better alternatives may not always have been available.

#### *Assessing Capacity:*

There is no sign of an evaluation of capacity building objectives written into the LA ToRs; hence measurement of impact is often a very subjective process. Additionally, there is no structured process to assess the capacity of a MO in the first place, thereby establishing a baseline. Without such a framework for reference, it is difficult to ascertain whose analysis counts and how objective the assessments of capacity are that determine other member's intervention and the design of any capacity building programmes. Should not the capacity of the LA also be assessed to ensure it can play the role required?

There was no objective assessment of either Caritas Congo's capacity nor or the capacity and competence of the LA to act in that role or support Caritas Congo's development. During the Gujarat response, earlier doubts about capacity inherited from Orissa led to contradictory assessments. The departure of the ERST was described in the September Caritas evaluation of Gujarat as "a rupture strongly felt"<sup>21</sup>. The LA had had similar doubts and retained an expatriate presence with a highly operational ToR. This extended field presence was perceived by Caritas India as an unnecessary intrusion and, particularly as they arrived un-briefed by the ERST or the LA, "very cumbersome and in no way helpful"<sup>22</sup>.

By contrast, the process of building up capacity in Caritas Goma appears to be a unique one in DRC and our review. In 1996, an evaluation carried out by CAFOD of Caritas Goma found that Caritas Goma's capacity was still low. Following a change in leadership, the new Director requested support from CAFOD and CRS to carry out an organisational assessment (an analysis of structure, systems, capacity etc) in order to restructure Caritas Goma. This has formed the basis of its subsequent training and on-the-job coaching; Caritas Goma now has a baseline and is well placed to identify its own priority needs as well as the approach and timing of such support<sup>23</sup>.

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<sup>21</sup> Assessment of the Emergency Response by the Caritas Network after the Earthquake in Gujarat of January 26, 2001. Report Commissioned by Secours Catholique and Caritas India.

<sup>22</sup> ERST Evaluation. India undated

<sup>23</sup> Management tools such as the clarification of roles and development of job descriptions have also been established and a management guide produced which Caritas Congo has used in other diocese. Indicators of an impact on its capacity is that Caritas Goma carried out much of the response to the 2002 volcano emergency, was able to develop precise ToRs with bilateral partners avoiding ambiguity and tensions and is acting as a trainer for other dioceses.

CAFOD has since funded a series of consultants (expatriates) to support Caritas Goma's efforts to build capacity in areas identified it has prioritised. The impact of this approach has apparently been very positive for Caritas Goma. It seems that effective capacity building must be sought as well as supported; it cannot be imposed.

Examples of capacity assessment in large and complex organisations do exist, as the box below shows from experiences with the International Federation of Red Cross and Red Crescent Societies. This approach is explored more fully in the recommendations and in the checklists provided in Annex VII.

### **Assessing the Capacity of Caritas Members**

In 2000, the International Federation of the Red Cross and Red Crescent (IFRC) initiated a process of self assessment amongst its members. Using a set of benchmarks that defined what the Federation assessed to be a well functioning member, questionnaires were developed for all of its 176 members. The results were confidential to the member and the international Federation (the equivalent of CI Rome); sharing the results with other members was at the discretion of the member completing the questionnaire. The main reason for the project was to help identify organisational development areas needing support from other members, to map progress, share good practice and to formulate policy through identifying emerging trends amongst members.

The process has apparently been generally positive. Some learning points are offered by the IFRC should Caritas be interested in pursuing such a process:

- It has been useful to define the support needed by each member (who identifies its own needs through this process).
- It is now being developed into a potential peer review tool - participating members review each other. The first pair to do this was the Federation in Geneva with a southern partner; this has also helped build trust in the process.
- It is important that the whole staff participate in the self-assessment not just a senior manager or management team.
- It must connect with a broader process of organisational development.

### *Capacity Building or Coordination?*

Some argue that an LA is purely an emergency coordination mechanism that has no business with long-term capacity building. This makes sense, particularly with respect to the real difficulties of building up capacity whilst simultaneously, and rapidly, responding in the first phase of an emergency.

However, a number of factors make this case less than clear-cut. Caritas's principles of subsidiarity, the grey area between emergency and rehabilitation and the fact that so many southern partners with (successful) LA partners want the partnership to continue, albeit in modified form, mean that LA's do have an important role in building up capacity.

The recently published Caritas Handbook for partnership<sup>24</sup> outlines five different categories of partnership appropriate to different contexts. They range from a highly specific relationship between members focusing around, for example, advocacy issues without any material resources exchanged, through to project-based partnerships in which members exchange funds and other resources and the focus is on achieving results, usually in the shorter term. At the other end of the scale are institutional supporters in which "programme performance is not an essential element in the relationship"; the relationship is typically long-term and values mutual exchange and solidarity.

<sup>24</sup> CI 2003 *Caritas Partnership. A Caritas Internationalis Handbook for Reflection and Action*

### *The Capacity and Competence of the Liaison Agency*

An LA may span the entire range of partnership types from an emergency focus on performance to post-emergency institutional support. In the aftermath of Mitch, the relationship with the LA continued by mutual consent and developed into a partnership which was more akin to accompaniment. Caritas Germany has continued to support strategic planning and management skills as well as capacity development in the diocese, particularly the planning and management skills of the diocesan Directors.

At present there are no agreed criteria for the required competences of an LA. Access to resources and historical ties appear to be the dominant factors, rather than, for example the presence of experienced emergency personnel, knowledge of programme skills and support systems etc. This prevents the participation of southern partners with appropriate LA competencies.

A process of review is essential to ensure that there continues to be recognition of developing needs and to ensure that the LA still has the right capacity for the job. An LA with good emergency response skills may lack personnel skilled in organisation development which over time may become the primary basis of the partnership. In DRC, a recent review of the partnership has already partially improved difficulties in the capital; had it been held earlier chronic disagreements could have been reduced or avoided.

#### **6.5 Timeliness**

Whilst there is limited hard evidence of the timeliness of an LA, it appears that the model is not, on its own, a tool for the first phase of an emergency. Although the mechanism can be fairly rapidly established (though often on an ad hoc basis), actually mobilising an LA to cover the first phase, including the needs assessment, appears to be more difficult. Particularly in a large emergency, a single member organisation's capacity to mobilise a team for the field is often overwhelmed.

An LA's ToR may have been written some time after the on-set of the disaster event, or in some cases not at all. The ToR for CSI in DR Congo, for example, was not written nor the role mandated due to the exigencies of the emergency situation; time, apparently, did not permit. Though written, the ToR for Honduras was not completed until sometime into the Mitch disaster.

In Orissa, the overall impression is that the LA intervention was not timely for the relief phase and that its role strengthened over time. The degree to which the LA had an influence on the early phase of programme assessment and design was limited. It was apparently most effective for review and trouble-shooting later in the programme.

By contrast in Gujarat, an ERST was more easily mobilised, had a clearer set of objectives, may have generated more support and funding, and certainly could access a wider range of skills, through its multinational composition, than an LA. This may suggest that an LA is more appropriate to later stages of an emergency and in conjunction with other mechanisms.

In the Goma volcano and elsewhere, a well-functioning LA was seen by the partner as having made its own response to the emergency faster and more effective.

#### **6.6 Coverage**

Most examples suggest that the LA framework accommodated all those who wished to be involved, permitting the inclusion of all members. Where members chose not to be included in the LA's framework, other factors were usually the cause, e.g. perceptions that the LA was weak and would not deliver on needs, or perceptions of a weak national Caritas capacity leading to a donor member directly supporting a diocese.

For example questionnaire respondents as well as several Caritas' visited typically viewed an LA as increasing the involvement of other members, mainly by advocating, mobilising partners (e.g. on the telephone, calling meetings etc) and by adding credibility to the SOA.

However, there were exceptions. Some members were actively excluded from supporting the Iraq response by the LA (and the Iraq Working Group). There is also anecdotal evidence that other members may choose not support a response because the southern partner already has support in the form of an LA. Whilst the latter is a logical risk, it is more to do with an inevitable prioritisation of scarce resources - potential new partners go elsewhere and support members with no existing partners – than as a result of an exclusive or excluding partnership.

## **6.7 Process and Approach**

How the Liaison Agency partnership is established is essential to its success.

The selection of the LA is often based on its access to resources, history, colonial links and old relationships rather than according to competence. The process tends towards informal contacts through telephone calls and meetings rather than to a transparent and professional process of selection.

The establishment of the LA mechanisms for Mitch left much to be desired according to those interviewed. Neither El Salvador nor Honduras felt that they had much say in the selection process; they felt on the receiving end of an allocation made by CI and the Europeans despite the fact that they were present in the meeting. CSI were authorised to be the LA for Caritas Congo without an official mandate from the Secretary General: according to Caritas Congo, the decision was taken through a telephone conference without their participation.

In India, Secours Catholique was viewed as the natural holder of the LA position for Orissa and Gujarat by both parties, because they had a long-established relationship and Caritas India felt that its programme approach was understood by the LA. This knowledge and relationship was valued above the specific competencies of the LA by most of those interviewed.

There are no guidelines for the appropriate steps that should be taken to establish, extend or terminate an LA partnership. This has led to misunderstandings and conflict.

## **6.8 Human Resources:**

As discussed in the section on *Support*, the variable competences of expatriates tend to weaken the effectiveness of the LA and of the overall response. In some cases it may lead to negative impacts. Poor recruitment procedures by the LA and weak human resource procedures in the Confederation as a whole result in incoherent human resource management.

The professional competencies, attitude and interpersonal skills of LA staff are paramount. One Rwandan respondent in the Caritas evaluation of its Rwanda response notes that “what we want is people who respect us and really want to work with us”. Time and again those interviewed for this review commented that the most significant tensions arising from an LA partnership were based on personnel issues, particularly:

- Arrogance and lack of respect (especially linked to an overestimation of the relative value of knowledge from the north and an underestimation of the southern partner's knowledge)
- Limited or no understanding of Caritas principles (especially its church base and principles of solidarity and subsidiarity; these staff have a greater tendency to emphasise “outputs” at the expense of partnership, their “own” Caritas rather than subsidiarity and solidarity)
- Lack of knowledge about the country or region (culture, history, politics)
- Inability to speak the language of the country
- Inexperience generally and limited added value in terms of specific technical skills

There has been a strong tendency in Central Africa for LAs to send Belgian and French ex-military personnel. Such staff are unlikely to have suitable management and professional humanitarian skills or experience. In addition, it is hard to see how an ex-military associated with the colonial history of the region can be perceived as either neutral or appropriate. The same can be said for the nationalities associated with colonial ties in general. The continued fielding of such staff (and other unprofessional recruitments including a current case documented in the DRC report) should have long since been discouraged in an organisation striving to develop professionally. Notwithstanding the very real difficulties in recruiting people with all the appropriate skills and background, changes should be made, given the critical impact that sending the wrong type of LA representative can have on relationships with the host MO.

### **6.9 Cost Effectiveness:**

Although strong doubts have been expressed about the cost-effectiveness of being an LA<sup>25</sup>, in general the review team found that neither individual Caritas nor CI know, nor calculate, the full costs of being an LA. Therefore, there is insufficient hard data for the review team to draw definitive conclusions about cost-effectiveness. Clearly, the fact that an LA removes the need for CI in Rome to create permanent positions for coordination is cost effective.

The most contentious area is that of the cost of expatriates. In cases where the LA is functioning well in its headquarters aspect and there is an obvious value-added, the costs are not contested. It is reasonable in these cases to assume that an efficient LA will, through its mobilisation of funds and its actions to reduce duplication by members, be cost effective, particularly as staff working as liaison officers in head office are often existing members of the team<sup>26</sup>.

### **6.10 Financing the Liaison Agency:**

The cost of an LA can be burdensome for the Caritas MO taking on this function. Generally speaking there has been a reluctance to include the full overhead costs of an LA in appeals. This is changing, evidenced by the inclusion of the LA's costs in the Liberia SOA. With diminishing private funds, this will probably be increasingly the trend.

Some LAs are allocating a full-time post to the role (CAFOD has staff mostly or wholly dedicated to supporting the CATE, Burma and SudanAid, and Caritas Austria for Liberia estimates a full time allocation in total). This type of contribution is not normally viewed as support in-kind or reported as such. For example, CRS's significant contributions may not be costed as a result. If an LA always bears the burden of costs, this also prevents (southern) MOs who have insufficient funds to play the role, but who have suitable competencies to be an LA.

### **6.11 Learning, Monitoring and Evaluation:**

Monitoring of the emergency response programme is often perceived as a priority activity for the LA, but largely linked to issues of accountability rather than technical effectiveness. Responses in this review suggest that this is a necessary if not useful role, but one that can be highly contentious if not managed sensitively.

The review team found very little, if any, evidence of monitoring or oversight of the performance of the LA itself, and only one example (Goma) of an evaluation or review being regularly carried out.

<sup>25</sup> For example in a workshop in Lomé documented in *Rapport Atelier Sur les Urgences*. Secrétariat Régional pour l'Afrique (S.E.C.AF.). Lomé du 10 au 12 Septembre 2001.

<sup>26</sup> This finding assumes that the local Caritas in the affected country is unable to play this role: otherwise this is clearly the most cost effective option

More generally, there is little evidence of institutional lesson learning across the Confederation regarding the development of the LA model, its functioning or best practice. For example, many of the recommendations made in the 1995 evaluation of the Rwanda coordination mechanisms apparently have not been acted upon<sup>27</sup>. The same holds true for previous discussions regarding the LA model by the OWG (1993), the African region in Lomé (1997) and the India working group (2000) referred to in section 3.2.

### **6.12 Exit Strategies:**

The timing and process of the disengagement for the LA is often poorly defined, not defined at all, or is not put into practice effectively. This results in either an abrupt departure which leaves a gap in the partner's resources and access to other support, or in the LA staying on without a clear review or revision of its function and mandate. As the nature of the emergency response develops, such indefinite extensions of the LA may be inappropriate.

The structures in place in a southern partner at the end of an emergency are often unsustainable. The capacity may even be weakened, if the LA partner has substituted for the partner, reducing its confidence and excluding it from relations with potential donors in the country.

All the partnerships examined in Goma, Bukavu and Uvira have supported core costs. An unintended impact of this otherwise constructive support is the dependency of the Diocese Caritas on the LA. This is a result of a broader problem of access to funds from south to north, but perhaps more could have been done, or could be done, to mitigate the impact.

Although the ToRs have become progressively better defined over time, many had poorly defined disengagement ("exit") strategies. How the local Caritas would survive when or if the partnership ended was rarely worked out. There are efforts to remedy this, for example CAFOD has implemented a progressive phasing of reduced support (reducing funding support by a planned percentage over a five year period). It is possible that the reputation gained by Goma during the volcano response could translate into future funding, but this is speculation. The reductions are apparently more abrupt elsewhere in DRC.

### **6.13 Links with Rehabilitation and Development<sup>28</sup>:**

Similarly, the review team came across few successful examples of an LA facilitating the transition between an emergency response operation and longer term development programming.

Opportunities in some cases were missed by the northern partner for connecting its partner with alternative funding sources and for building up capacity in external donor's proposal, financial and reporting formats and for progressively reducing staff (foreseen from the outset) to a sustainable level appropriate for longer term programmes. The team considers that this reflects a broader structural problem within the humanitarian sector, linked to weak coherence between relief and development both within agencies and in governments. In the case of Caritas, this incoherence is further complicated by the often weak links with CIDSE whose member organisations could otherwise form a link with Caritas and bridge the partner from emergency to rehabilitation and development.

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<sup>27</sup> Such as clarifying the meaning and functions of coordination and selecting where to reinforce structures, centrally, in the field, regionally or with intermediaries such as Liaison Agencies.

<sup>28</sup> Referred to in the ToR as connectedness

## 7. CROSS CUTTING ISSUES

### 7.1 *Institutional Preparedness:*

As pointed out elsewhere, “the time of disaster is not the right time to work out cooperation and coordination procedures”.<sup>29</sup> The same can be said for assessing capacity, agreeing on required competences, establishing the basic operating protocols and guidelines and ensuring appropriately trained staff.

The review team found little, if any, evidence of training or preparation for potential LA members, with the aim of improving their understanding and performance when taking up the role.

Caritas has relatively few reference documents outlining procedures. Many of the difficulties surrounding staff and programme approach could be mitigated through reference to some basic guidelines, standard operating procedures (SOPs), agreed minimum competencies for staff and emergency response in general, protocols on the process of establishing a LA partnership and general programme implementation guidelines.

There is no single model of coordination that can fit each major emergency response context; coordination mechanisms and institutional partnerships must be defined on a case-by-case basis. The evidence suggests that in almost all cases, the LA partnerships took time to establish a *modus operandi* and to resolve tensions that almost inevitably arise from sudden change and the arrival of new actors in a country. More could be done to begin a process with MOs in high risk countries to analyse what type of support and from who may be appropriate.

### 7.2 *Professionalisation*<sup>30</sup>:

Changes in the context in which Caritas responds to emergencies has also influenced the role expected of an LA. According to interviews, the source of funds for many northern Caritas has had to shift away from diminishing private funds to an increasing percentage of funds from external and secular “back” donors; some member’s private funding has dropped by over 30%. This, in keeping with the experience of many NGOs in the broader humanitarian environment, has increased the need for Caritas members to compete with other humanitarian agencies for funds. Competing effectively means conforming to donor’s increasingly complex demands for professionalism and accountability (including monitoring) as well as particular programme approaches in order to continue to obtain those funds.

This shift places additional demands on both the local Caritas and its northern partner within the context of an LA relationship. It potentially reduces the room for manoeuvre of the local Caritas. The trend is unlikely to reverse. It is also reflected in a broader trend towards increased public sector accountability in the north and a sector-wide trend in the humanitarian field towards minimum standards, increased accountability and professionally recognised competencies.

These changes in the humanitarian operating context are increasing the need for Caritas members to coordinate with each other and for CI to promote centralised generic guidelines. Some Southern members point out that the trend reduces their margin for autonomy and imposed a donor agenda, and to an extent goes against the broader culture of the Caritas Confederation.

A rigid set of rules is inappropriate for a Confederation such as Caritas. However, an LA must act as the link between the programme and the international source of funds. Ensuring that members are meeting minimum standards becomes the job of the LA or MO accountable for the funding and programme effectiveness.

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<sup>29</sup> Amman 2001. Gujarat Evaluation

<sup>30</sup> The term “professionalisation” does not imply any value judgement regarding overall competence, but describes the possession of areas of knowledge related to the humanitarian sector

As well as increasing the mechanics of accountability, such as standards and monitoring, LA's are facing increasing demands to meet those standards themselves. One LA pointed out that they were confronted with complex financial reporting demands for which they were ill-equipped to fulfil. At present, the role of an LA still has a voluntary quality and is not subject to performance assessments. A more professional approach would raise the standards of the mechanism and increase its profile and status in the Confederation.

### **7.3 *Autonomy and Subsidiarity:***

Achieving a balance between respecting the autonomy of the members, Caritas' principles of subsidiarity and the imperatives of coordination during an emergency, is a major challenge and often constrains the success of the LA model.

The LA's role is often undermined by member's bilateralism. During the El Salvador earthquake response, despite protest from the local Caritas, the LA was unable to prevent members arriving for assessments: "They just came". CRS dealt directly with the dioceses and often failed even to consult with Caritas in San Salvador<sup>31</sup>

The LA member itself may prioritise its own programme at the expense of the partners and may undermine the southern partner through substituting for it.

There are few available objective tools with which to resolve these tensions and CI appears to be reluctant to intervene formally and insist that MOs respect the wishes of the local Caritas or the LA. As long as assessments of capacity and competence of MOs remain informal or non-existent, CI cannot insist that MOs support a weak southern partner or intervene when the LA constrains the response. A more objective assessment would enable CI to identify whether MOs are simply undermining a core Caritas principle through poor discipline rather than a rational desire for greater efficacy. Similarly southern partners cannot invoke the principles of autonomy or subsidiarity without demonstrating their ability to respond to the emergency and fulfil the demands incumbent upon accepting the funding.

Autonomy brings with it the responsibility to demonstrate good practice within the framework of professionalism and Caritas principles. The trend towards bilateralism within the Confederation (and elsewhere) needs to be acknowledged but managed such that a Northern member's need for increased visibility and field presence can be accommodated (by the LA or CI) without leading to parallel programmes and substitution. Most of those interviewed felt that CI should play a more robust role to ensure that MOs express the spirit of the Confederation through their practice.

### **7.4 *Role of the Church***

The extent to which the Church supports or undermines coordination and competence appears to fundamentally affect Caritas' effectiveness. As well as mobilising the population, Bishops can decide to dedicate their best or worst church members to key Caritas positions.

In Goma, the Bishop not only mobilised the parishes to support the emergency but also, in response to clear capacity problems raised by the LA, replaced the Caritas Director with an appropriately competent leader. A similar impact was felt in Kinshasa where the leadership was replaced at national level; in both cases this has made a significant – some would say 100% - difference to the capacity and development of those Caritas's.

The reverse is also true. Cases were described of Dioceses with indifferent Caritas leadership (selected by the Bishop), leading to a capacity or development impasse for the whole organisation. In these cases, it was suggested that CI should use its influence to advocate for alternatives wherever possible. In fact, this is a role for which the ICC is mandated to play and suggests a

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<sup>31</sup> CRS now work via the local Caritas in San Salvador with some 65% of their funds



need for a stronger link between the successive chain beginning in the Dioceses, synthesising in the national office and passing on through the regions and to the ICC.

### **7.5 Regionalisation:**

At present, most regional structures are at an early stage in their development and do not have the capacity to play a significant coordination role during an emergency. Some LAs interviewed had little or no knowledge of the role of the regions and no mechanisms for sharing information with them.

Where regional structures exist in a more developed form, such as in Central America, they are an invaluable platform for the exchange of information and views and act as an adjunct to the focal point of an LA. For example it was suggested that in an emergency, the Central America, Mexico and Panama (CAMEXPA) region's International Coordination Forum for Follow-up and Accompaniment (CISA) could be the forum for the development of a regional emergency strategy, including an exchange or sharing of human resources and skills. In an emergency in a single country, CISA could coordinate partnerships of a south-south nature.

Some regional offices are developing a capacity-building role and are establishing regional emergency databases for personnel. This trend should support the development of optimal ERST-type teams, which are a mix of regional and local members, as well as other expatriate members only as required. Most regions have not played a role in emergency preparedness although they may be well suited to do so in the future.

A strong regional mechanism is still likely to need a focal point or single interlocutor for the local Caritas. A consensus-based process and geographically dispersed regional membership is unsuitable for first phase emergency decision-making. In addition, communications infrastructure may prohibit access and information distribution to all members at the speed required. Obtaining visas at short-notice can also be problematic. However, if it has the capacity, a region can play a significant role prior to and soon after the emergency.

For example, CISA is viewed as an appropriate mechanism for capacity building in the Central America region. It is the forum that enables discussions regarding the need for increased professionalism in the region, rather than through a distribution mechanism of guidelines etc that are viewed as a northern imposition. Regions can support training in emergency skills in collaboration with an LA. They could also lead on potential processes recommended in this review regarding capacity assessments.

Caritas Europa's forthcoming Strategic Plan will reflect a strong emphasis on subsidiarity with other regions, building up capacity at regional levels. Possible combinations between regional, multinational and LA mechanisms for coordination are explored below in the sections below and in the recommendations.

## **8. LINKING WITH OTHER EMERGENCY MECHANISMS (ERST AND THE STEP)**

Over the last three or four years, CI has developed three other emergency mechanisms or structures, namely: the ICC,<sup>32</sup> the ERST and the STEP. An assessment of any of these mechanisms was not the central focus of this current review, and a review of the ERST was recently conducted by CI. However, the relationship with these new models has changed the role of, and some would say the need for, an LA. It is the link and overlap between the different mechanisms that is the subject of this section.

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<sup>32</sup> The ICC was created as a representative instrument of the Confederation in major emergencies. Its purpose is to make responses inclusive and to improve quality through review, promotion of standards, arbitration and preparedness

## 8.1 **The ERST:**

In common with the recent review of the ERST, this mechanism was largely viewed positively by member Caritas' interviewed and staff in two of the three countries visited, although it is not always well understood. Its mobilisation in the first phase of a response helps to resolve the difficulties of establishing an LA partnership in the heat of an emergency and reduces tensions regarding issues of a single MO becoming operational in the field; in short, it promotes multi-lateral ownership.

The combination of a focal point LA and a multinational ERST team has worked well, offsetting the potential for a single agency bottleneck and perceptions of dominance. It benefits from both broader, multi-lateral involvement and support from member organisations, yet retains a focal point and leadership responsibility. In Gujarat it increased the professionalism of the assessment and first proposals, helped establish a firm foundation and budget for the programme and set up an early connection with in-country coordination fora.

The ERST appears to be a more appropriate first phase emergency mechanism than an LA, directly supporting the partner without installing a single member organisation. It offsets the disadvantages of an LA that result from unilateralism such as the risk of exclusion of other members, longer-term substitution for the local Caritas, the limited availability of experienced emergency staff within one MO, promotion of the interests of one member and the dominance of an LA's particular approach and competence.

Its weaknesses also derive from its multilateral nature. It is managed by CI and its very small team in the ICD and has therefore suffered from limited management resources (such as induction, human resource issues and follow-up). There is some evidence to suggest that a multilateral team is no more likely to represent the Confederation than a single member. For example, interviews stated that the ERST in Pakistan was only nominally a Confederation team; members acted more as representatives of their own member organisation than of the Confederation, concentrating on their own reports and profile for their headquarters, rather than on the ToR of the ERST.

Similarly, there is evidence that MOs bypass the ERST (and CI's) coordination authority and carry out their own assessments<sup>33</sup>. In El Salvador, despite an ERST having been refused, MOs sent staff to carry out their own assessment. In Gujarat, the ERST grew from four members with the appropriate competencies to 15, often with inappropriate staff, reportedly because of a desire for visibility. The absence (or limited involvement) of a focal point tends to diffuse responsibility for problems.

The combination of an ERST with an LA (i.e. multilateral plus unilateral) appears to work better. In India, the ERST was totally equated with the LA, all the more so because the LA headed the ERST. This created a recognisable focal point, clearer accountability as well as continuity between ERST and LA. If the LA is a member of the team and is non-operational itself, it can act as a guardian of Confederation interests.

## 8.2 **The Solidarity Team for Emergency Partnership (STEP)**

Part of the STEP mandate overlaps with those of the LA. Those in common or very similar roles are:

1. The joint development of future programme plans (subsequently to form an SOA if appropriate or to form individually submitted proposals to CI members)
2. The provision of information to CI MOs
3. Staff capacity building

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<sup>33</sup> *International Cooperation Committee Recommendations re: the ERST Mechanism March 2003* recommends that staff of MOs should only go to the field as part of an ERST and reinforces most of the existing ERST ToR found in *Our Response to Major Emergencies, CI Rome*.

The most significant difference is that a STEP is fully field-based, operational and envisages joint implementation with an in-country team, participation in interagency coordination and promotion of operational standards. It does not fulfil the international role of an LA, such as coordination of CI funding, requests and Confederation-wide information dissemination. The only STEP deployment that this review has been able to include is the current one in Liberia. The following findings are therefore tentative.

As a multilateral mechanism, the STEP may prevent the problems of the single-organisation mechanism. From the perspective of senior management in Caritas Congo the risk (and reality in their case) of a bilateral partnership is that the LA can become an unaccountable controlling mechanism that substitutes for the national or diocese Caritas. Since CI cannot, or does not, intervene to resolve dysfunctional (or even destructive) partnerships, the ERST or STEP mechanisms dilute the power of a single MO and:

1. Ensures that the local Caritas has the choice of mechanism it prefers in an emergency
2. Ensures that the emergency mechanism (e.g. a STEP) is strictly confined to the emergency period and does not extend its mandate into another type of post-emergency partnership – unless expressly requested by the local Caritas
3. Allows the establishment of an emergency mechanism appropriate to that emergency, avoiding assumed roles through existing or historical partnerships
4. Develops a precise ToR in which all partners or participants roles and responsibilities are clearly defined

A STEP team also reports to the local Caritas, minimising the risk of substitution. As well as the advantages and risks outlined for the ERST above, there are four particular pitfalls to the STEP:

1. It is difficult to recruit for as members are unlikely to free up experienced staff for an extended period (unlike the ERST for a maximum of six week the STEP is up to six months)
2. It could easily become an operational team that substitutes for the local Caritas
3. It does not provide the focal point that is still required to manage the international network; clarifying responsibilities and accountabilities may be difficult between the local and international MO
4. In the absence of a partner to facilitate a transition and provide partial support, the early departure of a STEP could be destructive and premature or alternatively risks having to overextend if the local Caritas is not ready to assume all responsibilities

In practice, CI cannot cope with the demands of acting as the STEP's coordination backup in Europe or of providing the management support necessary to recruit for and support an expatriate STEP team. Recently, it had to hand over this role for Liberia to Caritas Austria. It is reasonable to assume that this is fairly representative. Without a considerably expanded CI, another member will always have to assume the responsibility not only of managing a STEP but of managing the international coordination.

The model preferred by senior management in DRC is that of an ERST→STEP→Institutional Accompaniment and/or Privileged Partner sequence that has no need of an LA. There is a lot of sense in this. However, it still leaves unanswered the question of which organisation manages the interface with the international network, mobilises and supports the STEP. If the local Caritas is weak or absent, this organisation would also have to provide the accountability and oversight of the STEP otherwise played by the local office. In all cases, this would simply be an LA by another name.

Caritas Austria is a "Coordinating Partner" in Liberia, essentially an LA. It is undertaking typical LA functions and in addition, Caritas Austria manages the STEP, providing guidance, briefing and supplying members, including the Team Leader.

Few members offered personnel for the Liberia ERST or STEP. As a result, Liberia's STEP composition has at times been dominated by the Coordinating Partner's staff. There is a risk that Caritas Austria could become an operational LA substituting for the local Caritas, as happened with a similar structure in Eritrea called the CIST. In Liberia's case the local Caritas is wholly weakened by the war and an operational model is apparently more appropriate. It is quite possible that a combination of an LA with a STEP could function well, bringing the benefits of both models. Lessons can hopefully be drawn from the Liberia experience.

### *Dissemination and Participation*

Many of the staff interviewed in the field knew little about the ERST and even less about the STEP. This gap in awareness is due to the fact that CI appears to distribute literature about the new mechanisms without systematic follow-up, dissemination or training. Staff turnover is another issue that reduces awareness about new initiatives.

In El Salvador, several staff recognised the leaflet but did not understand the new mechanisms nor agree with them. The criticism arises less from the concept of sending a technical support team, than the process by which it is decided and by its membership. The ERST is viewed there, and possibly elsewhere, as a Northern intervention even though the CI leaflet<sup>34</sup> states clearly that local staff should be members of the ERST. Perhaps earlier experiences before this was formalised (such as Gujarat where no Indian staff were included in the pilot ERST) may have left a lasting impression.

A team composed partly of those from the region along with local and international staff worked well in DRC where a type of spontaneous ERST arose in response to the volcano in Goma.

## **9. OTHER PARTNERSHIPS**

Partnership is rooted in Catholic Social Teaching and as such is fundamental to Caritas' organisational approach. The recently published Caritas Handbook for partnership<sup>36</sup> outlines five different categories of partnership appropriate to different contexts. They range from a highly specific relationship between members focusing around, for example, advocacy issues without any material resources exchanged, through project-based partnerships in which partners exchange funds and other resources and the focus is on achieving results, usually in the shorter term. At the other end of the scale are institutional supporters in which "programme performance is not an essential element in the relationship"; the relationship is typically long-term and values mutual exchange and solidarity.

The LA is one amongst several forms of partnership within the Confederation. Over time it often evolves from a partnership emphasising performance to one emphasising institutional support.

### **9.1 Working Groups:**

Working Groups are a popular Caritas mechanism established to "deepen reflection" and "formulate strategies"<sup>37</sup> as well as support publications and advocacy. They focus on specific themes or on a particular country programme and are important mechanisms in many countries including Sri Lanka, Burma, Eritrea, the Great Lakes and Sudan.

Working Groups are unlikely to be appropriate for first phase emergency coordination. The only example that exists of a group-based coordination mechanism was the Coordination Committee for Rwanda (CCR) that, according to the Caritas Rwanda evaluation, had limited support from the General Secretariat and lacked authority. Members tended to pass on the responsibility for difficult

<sup>34</sup> *Our Response to Major Emergencies*

<sup>36</sup> CI 2003. *Caritas Partnership. A Caritas Internationalis Handbook for Reflection and Action*

<sup>37</sup> CI *Working Groups and Task Forces* 2003

decisions or for mistakes to each other. However they appear to be a valuable mechanism for later in an emergency and there are good examples of complementary work between Liaison Agencies and Working Groups.

A Working Group is not necessarily participatory and representative however. CISECA, an earlier regional mechanism in Central America was criticised for being dominated by the two participating Liaison Agencies who tended to make all the key decisions. Similarly, the Working Group for Iraq excluded other MOs seeking to support the response.

## **9.2 Intermediary Agencies**

CAFOD has the mandate to coordinate the Caritas Advisory Team for Eritrea (CATE), acting as an "Intermediary Agency" (IA). The ToR of the IA is similar to a Liaison Agency functioning at the non-operational end of the spectrum, carrying out tasks such as information focal point, disseminating and sharing reports and planned activities as well as ensuring that members are delegated to follow up certain agreed pieces of work or support. It also plays an administrative role, organising and minuting meetings and tracking the CATE funds. CAFOD has committed between 50-120 staff days per year to the CATE. The advantages of such a multinational group of eight Caritas members combined with a coordinating focal point are essentially the benefits of a multilateral group (offsetting the disadvantages of an LA) without losing the clarity and simplicity offered by a single interlocutor often preferred by a local Caritas.

## **9.3 A Rotating Chair**

A variation on the multinational-single coordinator model is Afghanistan where four MOs share the role of "Chair", with each member taking the position for six months. It is too early to assess how well this has worked and opinions seem mixed. Some members questioned the disruption to continuity and potential to blame the predecessor. Others commented that it was a mechanism that allowed for shared responsibility and provided visibility, reports, media stories, a timely SOA and more integrated programming for all participating Caritas.

The same issue of individual MOs prioritising their own programmes and profiles was also raised however. Initially, CI recruited a media person who was external and able to provide suitable media coverage for all the members. She was replaced by a Chair member's media officer who was reported to be concentrating on her organisation's coverage at the expense of the Confederation.

In summary, each context requires different mechanisms; the findings suggest that a combination of unilateral and multilateral is optimal.

## **10. THE ROLE OF CARITAS INTERNATIONALIS**

CI is generally viewed as an honest broker on behalf of its members and on the limited occasions when it chooses to intervene, appears to be very effective. It has demonstrated clear leadership in the development of new emergency mechanisms and the promotion of new tools such as financial procedures and SOA report formats.

The Liaison Agency is a delegated CI coordination role; i.e. it is a Confederation role that would otherwise be played by CI itself. In order to function well and mitigate its disadvantages, CI still needs to be closely involved with the LA organisation and its performance. Virtually all those interviewed felt that there has generally been insufficient oversight, or pro-active facilitation of the LA process on the part of CI to support the model and resolve operational problems.

A lack of leadership was emphasised in several cases. Although CI successfully avoids an inappropriately heavy-handed approach, it may refrain too much from demanding fundamental levels of discipline amongst members. CI was criticised in the Rwanda crisis for failing to intervene

and resolve the problems with Caritas Belgium and the Diocese. Despite a clear breach of Confederation principles and rules, including requests by the Bishop and local Caritas to leave, the LA continued to implement programmes. In many of the cases documented in this review, members have clearly ignored fundamental principles if not the Statutes of the Confederation, apparently with impunity.

Many of the other weaknesses described by those interviewed derive from CI's limited capacity to provide management support. CI's capacity in Rome is kept to a minimum; the ICD is made up of three team members covering the whole world. As a result, adequate managerial coordination is impossible leading to:

- Weak monitoring of an LA's performance
- The limited availability of standardised guidelines, protocols and procedures
- An incomplete knowledge about member's programme funding activities in each country
- Difficulties in fully promoting and following-up new mechanisms and systems (such as the ERST and STEP and the SOA formats and financial standards), rather than simply distributing information
- Lack of capacity to carry out a systematic analysis, assessment and review of member's capacity
- Quickly being overwhelmed when expected to manage operational teams (ERST and STEP)
- A reliance on quick but opaque transactions with a small number of MOs
- Limited involvement or promotion of institutional emergency preparedness

Although no one recommended a fully centralised organisational structure based on a much-strengthened CI, a number of interviewees felt that CI should play a considerably stronger role. This strengthening mostly related to intervention for major breaches of conduct, and to respond to the type of additional activities implied by resolving the weaknesses outlined above.

In some cases respondents sought greater CI activity but rejected an increase in its capacity, a contradiction that may indicate the MO's general discomfort with centralisation and a potential reduction in autonomy or simply a tendency to conflate management capacity with an operational role and excessive power. Some of those interviewed feared that a small number of strong European members would dominate a centralised structure and reduce the CI's representative status.

## 11. SUMMARY OF PRINCIPAL FINDINGS

Based on overall findings of review we can highlight a number of key lessons regarding the Liaison Agency model:

Within the context of a decentralised Confederation structure that seeks to retain a minimum headquarters presence, the Liaison Agency model is a logical mechanism for providing coordination and support to members without creating an expensive and centralised organisational structure. It is a major improvement on the pre-LA coordination situation and the majority of those interviewed viewed it as constructive and worth retaining, albeit with great improvements.

The main weaknesses of the LA derive from its management and implementation more than its structure per se. Significant but feasible changes are urgently needed to increase its effectiveness.

- The review findings strongly highlight the need for or advantages of international coordination during a major emergency
- The review findings strongly highlight the need for or advantages of a single interlocutor acting as a focal point and providing leadership during a major emergency
- The review findings strongly highlight the need for or desirability for CI to take a more pro-

- active role in its management of the mechanism
- The LA role should be professionalized and its value and importance recognised
- The process of establishing the Liaison Agency is based on historical and resource links rather than a transparent process based on competences. The current mechanism precludes Southern members taking on the role; this needn't be the case
- There is a need, and logic, for increasing regional involvement and encouraging greater "southern" MO participation
- Lack of discipline amongst members undermines the LA model; it would also undermine any coordination mechanism
- Operational activities by the LA were the most contentious; LA personnel were criticised for inappropriate competences and behaviour, often substituting for the local Caritas
- The LA model alone is insufficient for the first phase of an emergency  
There is no blue-print model for responding to major emergencies but a mix of LA and a multilateral mechanism appears to work well depending on the needs
- With increasing accountability and professionalisation, there is now an absolute need for better defined guidelines, SOPs and professional, trained LA staff
- There is no systematic or objective process with which to assess the emergency management capacity of the local Caritas nor of the LA's capacity to support it
- The capacity building and "support" objectives frequently found in LA ToRs are lacking in clear indicators and timeframes
- The institutional capacity building carried out between an LA and a partner is often successful and essential for core support to the member
- There is no systematic process of review of LA partnerships to optimise performance and ensure that it remains appropriate for a changing context

## 12. RECOMMENDATIONS

### 12.1 *Main Recommendations*

Any actual or proposed emergency coordination mechanism must work within the constraints inherent to Caritas' decentralised organisational structure, including the strongly held principles of autonomy, subsidiarity and partnership. Based on the review findings, the team identified two main alternative models that could improve Caritas's coordination in significant emergencies; in summary these are as follows:

1. Replace the Liaison Agency mechanism with a much strengthened CI capable of fulfilling all required elements of the coordination and information functions of this model.
2. Retain the Liaison Agency mechanism but carry out a series of improvements, modifications and clarifications of procedure, and combine this with a more proactive management role on the part of CI to support and monitor the performance of a Liaison Agency.

#### ***Alternative 1: Replace the Liaison Agency with CI as Coordinator***

Several of the disadvantages of the LA model would be resolved if CI retained the role directly and carried out the main coordination and information functions currently done by the LA. Unilateralism, a failure to represent the Confederation above organisational interests, exclusiveness and diffuse accountability could all be removed or improved upon with this alternative.

In order for CI to play this role fully it would have to massively increase its capacity to cover all the recruitment, personnel management, donor contracts, networking, monitoring and review

functions<sup>38</sup>. None of the MOs interviewed had envisaged, or would accept, a fully operational CI capable of taking over coordination due to concerns about overly-centralised power and authority as well as increased costs.

For this reason, this option has not been considered as feasible or desirable and is therefore not recommended by the review team.

### ***Alternative 2: Retaining the Liaison Agency***

This model is premised upon the finding that, albeit needing significant improvements, the LA is still viewed as a suitable coordination mechanism by the majority of members who participated in the review. In short, its advantages outweigh its disadvantages or can be improved upon.

Other alternative mechanisms such as the ERST and STEP, as discussed above, do not substitute for all the needs of coordination and still demand an interlocutor with the international network and a manager. The most significant weaknesses in terms of the effectiveness of the LA model have more to do with its management and implementation, rather than in the mechanism *per se*.

On this basis, the review team recommends retaining the Liaison Agency model as an appropriate coordination mechanism in major emergencies. Given the negative connotations associated with the title "Liaison Agency" for some members of the Confederation, the review team suggests that CI may want to consider formulating a new name for this model.

The recommendation by the review team to follow the above second alternative was discussed at length with a broad group of Caritas representatives as part of the review process during a meeting in London in mid-February 2004.

## **12.2 Detailed Recommendations**

The following recommendations are aimed at resolving, or at least minimising, the weaknesses and problems associated with the LA model that have been highlighted by the review. Many of the overall and specific recommendations can and should be done prior to an emergency as part of preparedness and institutional efforts. The proposed Workplan in Annex II outlines some of the actions that can be taken in the next 12 to 24 months. Checklists are also included for several of the recommended processes in Annex VII.

### **12.2.1 Annex VII Checklists:**

1. *Liaison Agency competencies and functions*
2. *Capacity Assessment Indicators (for self assessment or peer review)*
3. *Checklist for assessing appropriate mechanisms for each context*
4. *Process for the Selection of a Liaison Agency*
5. *Outline report formats*
6. *Example needs assessment*

### **12.2.2 Capacity Assessment and Building:**

- CI should support the implementation of a process of organisational capacity assessments for all Caritas members. This should be participatory in nature and be aimed at strengthened emergency preparedness. A basic checklist of competencies and capacities for emergencies, as well as organisational infrastructure and systems should be developed.

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<sup>38</sup> The Secretariat of the International Federation of the Red Cross and Red Crescent would be an indicator



- The assessments should cover human resource capacity, logistics, administration, finance systems, history of audits and review, partnerships, previous experience of emergencies, size etc and should be carried out prior to an emergency
- The assessments can be used by members to carry out a self-assessment, leading to a clearer identification of Liaison Agencies with the appropriate capacities for the job, the identification of capacity building needs of southern partners, and an assessment of support needs in the event of an emergency. A suggested format is included in Annex VII
- It is recommended that CI take the lead in carrying out a self-assessment of its own capacity, perhaps through a peer review process with a regional office. The region could then develop and implement the process as appropriate
- Peer review of assessment in general may well suit the Caritas culture of partnership. It is recommended that CI discuss its experience of a similar process with the International Federation of the Red Cross and Red Crescent Societies in Geneva
- Where the LA can address capacity building needs relating to emergency preparedness this should be encouraged. However, the longer-term institutional capacity building needs should be considered separately, and may be more appropriate to other forms of support partnerships, particularly if the LA does not have organisational development skills or cannot buy them in
- Capacity building needs and impact should be regularly reviewed. A significant milestone should be at the end of the LA mandate and upon completion of the SOA.
- The output of such self and peer-assessments could be and or all of the following:
  - A basis for determining likely support needs in an emergency
  - A basis for joint definition of capacity building support
  - A process of increasing awareness of capacity and potential
  - A capacity map of the Confederation members to support CI strategic plans
- CI could combine the self assessments with other capacity information from bilateral partners, Working Groups and its own knowledge of members capacity based on criteria such as the quality of SOAs submitted by a member to create an overall picture of a member's needs. This can be used as a type of *Solidarity Plan* that details support and training needs or member's specialisms.

### **12.2.3 Professionalisation:**

- All members should be expected to attain certain minimum standards in core functions (described in more detail in Annex VII). Liaison Agencies who meet these standards should support and coordinate the introduction of the same standards to other members and offer appropriate support to increase their capacity.
- The LA model must be professionalized. The tasks and expectations of the LA should be better defined and strengthened through improved protocols and guidelines, ToRs, procedures in logistics, procurement, administrative and finance, reporting formats, description of roles and responsibilities.
- The performance of the LA should be measured against agreed objectives and competencies. This would increase accountability to members and the status of the role
- The LA should not implement its own programmes or be financially supporting local Caritas' operational projects. Its investment should concentrate wholly on coordination and institutional support to avoid a conflict between performance and coordination interests. It should receive full

recognition for the service offered

- The costs of coordination for the LA model should be automatically included in the SOA for an emergency response to reinforce its professional nature and ensure that costs do not act as a barrier to the participation of resource-poor members.
- Opening out participation in the LA model should spread the burden; members can revolve the role either rapidly (if Afghanistan's model is effective) or on a longer time scale to ensure the service and responsibility are more evenly spread
- Southern MOs should be exposed to the standards of external donors, financial audits etc in order to facilitate their autonomy and ability to seek funds outside the Confederation, thereby contributing to their financial sustainability

#### **12.2.4 CI Role, Leadership and Management**

- If the LA model is to act as a true representative of CI, the management capacity of CI should be strengthened to provide greater backing and more proactive oversight to support facilitation and mediation during emergency responses, to ensure quality coordination by the LA, to resolve conflicts and to mitigate poor coordination at a political level (e.g. Caritas members operating bi-laterally)
- Additional staff should be recruited for CI, or seconded from member Caritas, on an emergency management profile to fulfil the functions outlined in these recommendations. It is estimated that two additional staff would be required at least initially, during the development and roll-out of the recommendations of this review. An indicative Work Plan for CI is discussed below and included in Annex II
- CI should play a strategic management role with respect to the LA: e.g. lead on the initial analysis and assessment of an appropriate LA, its review and evaluation. More open support and involvement in the LA from CI will add greater credibility to the performance of the LA.
- CI should assert greater authority in cases of significant breaches of conduct by members: CI should establish a small number of "bottom lines" such as a willingness to be coordinated and applying subsidiarity in practice not just in theory (subject to the capacity of either partner having been established as adequate)
- If the local Caritas in the affected country has the proven ability to manage a response (or at minimum to rapidly absorb additional capacity), the Caritas principles of subsidiarity must be non-negotiable. Members should support the local Caritas as a partner and be subject to sanction by CI if they substitute for it or establish parallel programmes
- If the LA has the proven ability to coordinate member's support to the local Caritas, other MOs must accept minimum coordination protocols, such as basic information sharing and the avoidance of duplication or gaps; this must be non-negotiable.
- CI should support the implementation of process of capacity assessments for all Caritas members as described in the preceding recommendations.
- CI should take the lead in the process of establishing generic guidelines etc outlined above
- CI should actively lobby Bishops who are responsible for allocating weak Caritas staff members who have become a block to development and are unwilling or unable to absorb support

- Low morale regarding the LA role needs addressing. The review's recommended process of professionalisation and full support from CI would do much to increase its status and value. This includes improving the respect for its mandate and backing by CI in recognition that a service is being provided for the benefit of the Confederation as a whole and coordination is not optional

*Process and Approach:*

- The selection of the LA need not be based purely on northern financial and other material resources. The priority is the appropriate set of competencies for coordination and support. This may be achieved through a combined southern-regional-northern model that links the resources and skills of a northern Caritas with the human resources (experience, know-how, regional knowledge etc) of a southern Caritas.
- The selection of the Caritas MO best suited to perform the LA function and what other mechanisms it should be linked with, if any, should be based on a diagnosis of agreed criteria outlined above. This process should be carried out jointly with the local Caritas and the region and be coordinated by CI. Zone leaders, not CI, should be responsible for consulting regional members as appropriate to avoid making the process cumbersome and ineffective.
- Members wishing to play an LA role should prepare an Expression of Interest or submit a tender, outlining their appropriateness for the role and their approach; this can be evaluated by CI and recommendations put to the recipient MO
- The performance of the LA should be subject to regular review. Whether this would be a participatory review between the two principle partners or a wider evaluation, should be the result of formal discussions between the partners and CI
- The termination of the LA partnership should be automatic at the end of the original agreement to avoid the issue becoming confused. Extensions and developments into new forms of relationship must be formally agreed with CI and the ToR be revised in line with lessons learned through the review process as well as be being adapted to meet the developing needs of a changed, post-emergency context. In no case should the role of the LA be left to transform informally or without due consideration of the change in needs over time
- Mechanisms must be put in place to ensure that the affected Caritas is able to fully participate in decision-making about the activation or extension of an LA (or other mechanism) and the mandate of such a support mechanism. See Annex VII
- The application of the LA model would benefit from better trained and prepared individuals in both southern members and the potential LA Caritas. Therefore, CI should support the development of a training and awareness programme relating to the functions and procedures of establishing an LA
- Liaison Agencies could do more to facilitate a partner's stability and independence, following the end of the partnership through, at the minimum, better defined exit strategies and support to create a more diversified funding base

**12.2.5 Combining the Liaison Agency with other CI Emergency Response Mechanisms:**

The Liaison Agency mechanism (as a single focal point) should, whenever possible, be linked to a multinational model, such as an ERST in the first phase and subsequently with working groups (or more rarely a STEP). This will reduce the risk of dominance or restriction by one member and ensures the benefit of a wider set of competencies and experience from a broader group of members. Further recommendations include:

- During the on-set of a major emergency an ESRT should be activated, but wherever possible, both local and regional staff should be included as team members.
- Wherever possible, the LA should lead the ERST team, or at least be a member, to ensure a smooth transition, continuity and overall responsibility for effectiveness.
- The development of regional ERST capacity to respond to emergencies should be encouraged and supported. However, there will still be a need for donor coordination at the international level i.e. an LA
- Although there is very limited experience with the STEP, the review team recommends that this mechanism should only be employed where there is either no local Caritas, or where this is a very weak institution to avoid substitution and prolonged field presence

### **12.2.6 Regionalisation:**

- Although there may be the potential for more direct involvement of regional structures in major emergency responses in the future (and this is in line with current CI policy), the review team does not recommend emergency coordination as a regional role at the present moment.
- However, in order to broaden the ownership and acceptance of a modified LA model, the team recommends that CI establishes a pilot project to work in two regions over the next 24 months to promote a southern MO in playing the role of an LA. The relevant regional structure should be actively involved in planning and managing this pilot. See Annex II for the Workplan
- The review team recommends that regional structures should be strongly involved in emergency preparedness activities, especially in the establishment of regional ERST, capacity assessment and capacity building exercises, and also for information dissemination and possibly training in new procedures and guidelines
- CI and the Regions should collaborate to share and disseminate lessons learned through reviews (for example through each region contributing a small number of key learning issues annually, to be disseminated by CI)
- The review strongly supports the forthcoming plans of Caritas Europa to increase its support to regional subsidiarity. CI should fully endorse and support this approach

### **12.2.7 Procedures and Protocols:**

See Annex VII for more details and suggestions.

*ToRs:*

- ToRs for the LA model should include a detailed description of the process of disengagement, which should be phased in nature and take into account the changing nature of the emergency context.
- ToRs for the LA model should include the process of review or evaluation of the partnership under a prescribed format and methodology.

- Concepts such as “support” and capacity building must be more clearly defined and indicators should be developed to measure the impact and progress of a LA. Capacity building objectives should be “SMART<sup>40</sup>” with clear indicators and targets to enable performance management and monitoring of progress

#### *Guidelines and Formats:*

See above under Professionalisation and further in Annex VII

#### *Human Resources:*

- Human resource guidelines including recruitment and induction procedures and rules and guidance on the Caritas approach of subsidiarity must be standardised and implemented. See Annex VII for suggestions.
- Staff for emergencies must be recruited according to appropriate competencies e.g. technical skills, experience, attitude and interpersonal skills, knowledge of the region, language skills, respect for Caritas core principles etc. They should be prioritised to show those that are essential and those that are desirable. More suggestions are included in Annex VII.
- LA staff recruited for the field should be approved by the local Caritas prior to deployment whenever possible. In the first phase of an emergency joint recruitment and full consultation would be impractical, but at the minimum CVs should be sent in advance and contracts be subject to a probationary period. In later phases, the local Caritas should participate directly or at least through full consultation in the recruitment
- If the essential competencies of LA staff cannot be met (often the case in major emergencies), compromises should be discussed with the local Caritas. Serious shortfalls should result in no one being deployed until alternatives are found.

### **13. INDICATIVE WORK PLAN**

At the request of the Liaison Agency Review’s Steering Committee during the London meeting, an outline Workplan is included in Annex II. The Work Plan references several tools and proposed checklists contained in the Annexes, particularly regarding the capacity assessment, selection procedures and guidelines.

The principal tasks included concern CI primarily and, to a lesser extent, the Regions.

#### ***OUTLINE OF WORKPLAN:***

1. Recruitment of additional staff to CI to carry out recommendations
2. Orientation in and dissemination of the Review findings and recommendations
3. Capacity Assessment Process implemented in six stages
4. Revise *Our Response to Major Emergencies* to reflect LA changes and include protocols
5. Develop standardised generic guidelines, SOPs
6. Institutional Preparedness (pilot a Southern-Northern alliance LA, training for Caritas members in high risk countries, develop *Solidarity Plans* for high risk countries)
7. Regional supported for capacity building based on the findings of the self/peer-assessments as well as long-term needs

<sup>40</sup> SMART is an acronym for Specific, Measurable, Appropriate, Realistic and Time bound and is commonly applied to activities and indicators in programme plans and tools such as Logical Frameworks