



Mitchell Oration

‘Disentangling localization: an imperative to uphold human dignity’.

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Before I delve into the subject, allow me to tell you a bit of how my upbringing has influenced the way I see the world. I was born and grew up in Colombia at a time when the country was engulfed in a wide-ranging armed conflict. My mother – against all odds – completed her high school and university education when she already had three children. For all purposes she was also a single mother. My sisters and I always had a roof on our heads and most of the time food on our plates but knew no luxury. But despite the constraints, we were able to dream and move forward in life because we were never told that there were things we could not do. The ability ‘to do’ – the freedom for humans to act disregarding the circumstances they face – and how this is closely tied with human dignity will be the focus of my talk today.

Fast forwarding to my career, I found myself in Kosovo for my first international humanitarian deployment. The war, which took place from February 1998 to June 1999, caused over 10,000 deaths and displaced around 1.5 million ethnic Albanians from their homes. As a medical doctor and team leader, I was responsible for training medical personnel in trauma care, and for delivering services and basic assistance to those displaced. Before the NATO bombing campaign against Yugoslavia, I travelled with a team to Tirana, the capital of Albania, to assist Kosovar refugees hosted in temporary camps.

One bitterly cold morning, as I made my way down a muddy path, I saw a group of men in their 60’s huddled around a tiny firepit, looking particularly dejected. There are, of course, many reasons to feel sad and sorrowful when you have just been displaced from your home by bombardments, shelling, and killings. Yet, this group had an expression I had not seen before. Accompanied by my translator, I approached them to ask about their concern. Speaking almost in unison, they said, ‘we are all bakers, good ones for that matter. And here, all we do is wait each day for a truck to deliver sliced bread, made in a factory and wrapped in plastic, for our families to eat. This is not what we need. All we need is an oven and flour so ‘we’ can feed our families ourselves.’ These men were not speaking of food security; they were yearning to reclaim their sense of self-worth and purpose. Their roles within their families and their community, their very dignity, had been stripped away not only by the war but also by the way in which aid was being delivered to them.

Human dignity, in this context, refers to the ability to exercise individual autonomy and the right to actively participate in one's own development – a principle that aligns with the United Nations Universal Declaration of Human Rights. Contrarily, what I witnessed was a dependency and a profound lack of control over one's life among these men.

It goes without saying none of the humanitarian agencies working in Kosovo or the surrounding countries had, at that time, flexible budget lines to set up even a rudimentary bakery. Furthermore, a prevalent view back then – and one that persists in many countries today – is that helping refugees or internally displaced people become self-sufficient could encourage their prolonged stay. Sadly, this perspective fails to consider the deep, invisible wounds that the loss of dignity inflicts on humans, the transgenerational trauma that follows when children witness their father or mother crumbled under the weight of impotence.

In the human spirit lies a fundamental urge to act in the face of adversity. Encoded within us is the fight-or-flight response, a survival instinct that usually overrides inaction. While we may sometimes be gripped by inertia, it is our inherent drive to act that prevails. Disasters, war, and social injustices trigger our deepest survival mechanisms, compelling us to extend a helping hand and stand up for those in need, often at the risk of our own safety and well-being. It is this innate impulse to 'act and protect' that stands as a testament to our profound sense of solidarity and care – a testament to our humanity.

As a newly graduated medical doctor in Colombia, I was required to perform what is still called mandatory rural service. This assignment took me to the Amazonian jungle, to a territory where armed conflict, cocaine production, and a stark lack of basic development all coalesced. There I met a young man who had been wounded while fighting for a guerrilla group. I had the opportunity to ask him about his motivation for joining the insurgency. He told me he was the only son of a family of five, living on a farm with his father and sisters – his mother had died in childbirth a few years prior. One day, some guerrilla fighters came to the farm, and walked away with their cows. This family was, like many other Colombians living in remote locations, barely putting food on the table. Losing their cows was therefore a significant blow.

They knew that animal theft was rampant, as fighters in the conflict needed food. However, having been raised by his father to believe in justice and the importance of doing the right thing, the son convinced the elderly man to report the theft at the nearest police station. Later, as he recounted the story to me, tears welled up in his eyes while he described how, instead of finding support, they were met with accusations of colluding with the rebel forces. When his frail father stood to rebuke those claims, the policeman manning the station slapped him on the face and the man fell to the floor.

A few weeks later, this young man walked deep into the jungle and joined the insurgency. The drive to do something – to symbolically repair the dignity that had been stripped from his father – was more powerful than his sense of justice or even his sense of survival.

Many of you listening to me today have been deployed in humanitarian crises or worked in low-resource environments, or with communities enduring significant vulnerabilities. Undoubtedly, you have your own stories that underscore the innate human need to take action and the importance of preserving dignity. I urge you to ponder the following questions: are we doing everything possible to provide space for the most at-risk individuals and communities 'to do', to act? Are we creating opportunities for them to be the architects of their own destiny regardless of their adversities? Are we truly localizing aid in a way that upholds human dignity?

The concepts that inform localization, such as community-driven development and local capacity building, are not new and have been part of the development discourse for decades. Yet, for many years, top-down strategies and internationally led interventions have been the norm. It was only in the early 2000s that the development and humanitarian communities began to advocate more vigorously for initiatives led by local actors – in recognition that local knowledge, expertise, and ownership were critical for the effectiveness and sustainability of development work.

The World Humanitarian Summit of 2016 was a pivotal event, bringing together donors, member states, and international and local organizations in Istanbul. A key outcome was the "Grand Bargain," a pact that underscored the importance of bolstering local capacities, with key stakeholders pledging more funds and support to local and national responders. The underlying objective of this commitment was to increase the efficiency and effectiveness of humanitarian and development action.

There has been progress. Across diverse cultural landscapes, from Asia to Europe to Latin America, initiatives are being implemented that respect local traditions and provide communities with the resources they need to steer their recovery and development. This approach acknowledges and strengthens people's fundamental rights and dignity. For instance,

- In the Asia Pacific region, responses to natural disasters are increasingly led by local and national emergency medical teams. And community-managed disaster risk reduction initiatives have been successful in several countries, such as the Philippines and Ethiopia.
- Cash and voucher assistance programs, which are used in situations from armed conflict to natural disasters, allow affected individuals and families to determine their own aid needs. These programs encourage autonomy, protect dignity, and stimulate local economies. Cox's Bazar, in Bangladesh, and Ukraine, offer successful examples in complex emergencies.
- Microfinance initiatives, such as the Grameen Bank in Bangladesh and various community associations globally, engage members in managing financial resources and making credit and savings decisions. These initiatives are based on trust and solidarity lending principles and focus on empowering local communities, especially women.
- There is also a growing body of evidence confirming the higher success rate of localized strategies in fostering resilience to natural disasters, and improved health outcomes in women-led projects across different continents.

- In Australia, there are also important examples. Indigenous communities are increasingly at the forefront of initiatives concerning their land, health, and cultural heritage, blending traditional knowledge with contemporary management practices. Also, community participation is at the centre of the recovery process from the devastating 2019-2020 bushfires.

These examples signal a shift in the humanitarian and development sectors towards more inclusive, participatory, and context-specific approaches. However, there is still a considerable way to go. Moreover, in a world facing simultaneously multiple wars, the looming threat of another pandemic, a stagnating global economy, and the profound effects of climate change, there is also a sense of urgency and the need to act fast. Both, scale, and speed, are needed.

If we examine the COVID-19 pandemic, it highlighted our systemic vulnerabilities. Several supply chains came to a halt due to a lack of manufacturing diversity, humanitarian efforts reliant on international teams suffered, and data systems needed for epidemiological surveillance were not in place in many areas of the world. At human level, we collectively felt the impact of loneliness and the unravelling of vital connections within our social fabric. It also brought us to start recognizing that we are walking towards a mental health pandemic for which we are largely unprepared.

The answer for some of these complex challenges rests on localization, on the very notion that local communities are the ones best placed to respond. In truth, local structures, and individuals, even when unprepared, are invariably the first to respond. Community members act because it is their son or daughter who is buried under the rubble after an earthquake, their father or brother who is wounded in a bomb attack and needs to be taken to a hospital, or the friend's house that is at risk of being swept away by a flood. They respond because acting/doing is a genetic imperative we have as species, because individuals and communities do act and respond when faced with adversity.

As we strive to accelerate progress, we are confronted with a question: given that there are already great examples of localized action, can we simply scale them up to generate a broader impact? Yet, this question reveals a paradox. Effective localization requires a deep understanding of and adaptation to local needs and the lived-in experiences of communities. Conversely, the uniqueness of these tailored strategies makes them challenging to replicate, even within the same region or country.

The main challenges we encounter when trying to scale up community-based initiatives by replication include:

1. Cultural and contextual differences, such as power and gender dynamics, local norms and practices, demographics, specific population needs.
2. Resource constraints – many areas grapple with scarce financial resources, skilled labour, and infrastructure, which can hinder the replication of successful models.

3. Weak governance or insufficient institutional support – certain regions may experience a deficit in political will or institutional capacity to effectively carry out community-based strategies.

These challenges in replication should not be viewed as unsurmountable; rather, they should be recognized as areas needing increased funding, policy attention, and engagement. In some cases, additional knowledge or data might be required.

In addition, there are several overarching or global issues that demand urgent attention. Among these were topics discussed at the Grand Bargain annual meeting in 2023. Despite significant efforts from numerous stakeholders, the reality is that:

- Funding mechanisms are still not fit for purpose,
- Anticipatory action and prevention remain underfunded, and
- The participation of affected people is still too limited.

Let's examine these challenges more closely:

Funding mechanisms are not currently adequate due to both quality and quantity issues. High-quality funding – flexible, predictable, and aligned with the needs of those affected by crises – is insufficient. There is also a shortfall in funding that goes directly to local actors.

Funds from development banks are typically disbursed to national governments, which then allocate them through government agencies or large NGOs. National aid agencies from various donor countries allocate a portion of their budgets to support community-led projects, typically channelling these funds via NGOs, international organizations, or contractors. Foundations and philanthropic entities also contribute to community initiatives, but their support is usually targeted at specific themes or sectors, which may not coincide with the most urgent community needs. Smaller local groups, such as grassroots NGOs or community associations, rarely receive direct funding due to the stringent financial management requirements that are difficult for them to fulfill.

In essence, the existing structures for funding in the humanitarian and development sectors are often inflexible and complex, posing challenges for local initiatives to access and effectively utilize funds to address the immediate and specific needs of their communities. This inflexibility can delay the delivery of aid and reduce its effectiveness, leaving individuals and communities disempowered and lacking the support they need to manage and recover from crises.

Anticipatory action and prevention are underfunded. The lack of investment in these areas undermines the capacity for proactive crisis mitigation. A key obstacle is the challenge of quantifying the impact of crises that have been averted – that is, measuring outcomes that have not occurred or might never occur. Without concrete metrics to demonstrate the value of prevention, garnering support and funding for such initiatives is challenging. Consequently, communities remain vulnerable, often enduring preventable repercussions that could have been lessened with early intervention and a commitment to preparedness.

There is limited participation of affected people. Despite various efforts and pledges, the prevailing model of humanitarian aid still frequently fails to incorporate the perspectives and inputs of the very people it intends to help. When affected individuals are not actively engaged in designing the aid they receive, the risk increases that the support provided won't fully meet their needs or may miss crucial cultural and contextual specifics. This exclusion can foster a sense of disempowerment and can impair the efficacy of the aid delivered.

As I approach my final points, let's consider some of the opportunities we have ahead of us to tackle these global challenges:

1. We must persist in our commitment to promoting and enhancing localization. No one said it was going to be easy, but our efforts must be unwavering. This involves truly engaging with local actors – individuals, families, and organizations – both in terms of decision-making and resource allocation.
2. We must strengthen the participation of affected or impacted communities. This involves not only listening to their needs and feedback but also actively integrating them into the planning and implementation phases of humanitarian action. Beyond integration, it's crucial to progress towards initiatives that are led by the communities themselves.
3. The provision of quality funding at scale is necessary. Such funding should be not just sufficient in amount but also adaptable and attuned to the evolving requirements on the ground.
4. Rapid, sector-wide transformations are needed – changes that ensure coordination and complementarity between humanitarian and development objectives and funding; and that consistently use systems and tools to reduce the risk of leaving those most at risk behind – older persons, women, children, persons with disabilities.

I cannot conclude without addressing the unique challenges of localizing efforts in areas afflicted by armed conflict, where errors can have dire consequences.

In such zones, community-led initiatives are particularly valuable as they often meet local needs more effectively and can contribute to building resilience and even peacebuilding. However, the approach in these areas must be sensitive to the complex dynamics of conflict. Key considerations include:

- Strict adherence to the **do-no-harm principle**: ensuring that actions do not exacerbate tensions or conflict and prioritizing the safety and security of both community members and implementers.
- Building **trust**: initiatives must be rooted in deep engagement with the community, understanding their perspectives, fears, and hopes. This requires building relationships over time, often months and years.
- Ensuring **inclusivity and representation**: this is not easy in these settings as they are often highly fragmented. However, it is crucial to ensure that marginalized and conflict-affected groups, are represented and have a voice in these initiatives.

- Incorporating **flexibility**: armed conflict zones can experience changes rapidly. Programs should therefore be designed with adaptability in mind, including in their monitoring and evaluation mechanisms.
- And finally, if the situation on the ground is too polarized or volatile, or if the local capacities are stretched thin, temporary **external expertise and support** might be necessary. As coined by the Secretary General at the World Humanitarian Summit: ‘as local as possible, as international as needed’. Yet, even in these circumstances, cultural sensitivity and respect for the dignity and agency of individuals are of utmost importance.

To conclude, localization in humanitarian aid and development is more than a mere strategy; it is a profound commitment to upholding the dignity of every person we aim to support. As enshrined in the United Nations Universal Declaration of Human Rights, every person has the right to respect, agency, and the ability to shape their destiny.

The path ahead is to facilitate, not to dictate, and to nurture local resilience and capacity. True localization means placing local voices in charge – valuing and leveraging their wisdom and traditions for sustainable, internally-driven progress. It affirms human dignity, recognizing individuals not as recipients of aid but as architects of their progress. This respect for autonomy addresses the deep-seated human need to act and to be acknowledged and respected.

To truly understand localization, we must immerse ourselves in the communities we serve. This requires a shift from being providers of aid to becoming partners in development. We must work closely with local leaders, civil society, and the people themselves, building trust and understanding. This shift is not only ethical but practical. When local communities are involved in decision-making, the solutions they develop are more likely to be effective, embraced, and sustained.

Finally, localization does not adhere to a universal blueprint; it is a tailor-made process that must be adapted to the diverse cultural landscapes in which we work. At times, when the task seems daunting, remember to focus on the individuals, families, and communities you aim to serve. And if policymaking distances you from those communities, let the memories of compromised dignity guide you to fiercely safeguard it in your decisions.

Let’s work towards a humanitarian and development system where localization is the norm, not just an alternative – a pillar anchored in our shared humanity, which upholds dignity at every juncture and recognizes our innate impulse to act in the face of adversity.

For me, the lesson taught by those Kosovar bakers will continue to guide my actions. I am committed to ensuring that, regardless of the challenges, there will always be space for chapatis, pitas, or local breads to be baked by the hands that know them the best.

Many thanks,