

### Do No Harm Dos and Don'ts for the Covid-19 Crisis

RAFT has developed the following guidelines for all implementing agencies, donors, policy makers and community groups who will be addressing the crisis in Myanmar, to ensure their interventions and responses are sensitive to the context, minimize unintentionally-caused harm or tension and strengthen opportunities for peace and collaboration wherever possible.

#### **Do...**

1. Do consider the possible harm that could result from conducting an activity or intervention that requires bringing people together or going into the communities.

Given the risk of transmission that comes with conducting activities that require people to come together, or interaction with communities, it is important to carefully weigh the benefits of any intended activity with these risks before proceeding, particularly given the potential to overwhelm Myanmar's health care system, as Covid-19 has across the world. Even if we take extra precautions, maintain distance and ensure proper hygiene when we go out to the communities, these may not be sufficient to offset the inherent risks.

2. Do be sensitive to, and build on the pre-existing sources of trust, hope and collaboration within communities and between stakeholders, especially where this is related to health.

To overcome a problem as big as Covid-19, everyone at all levels: <u>domestically and internationally</u>; government and civil society; state and non-state are going to need to work together. There are opportunities for <u>new forms of collaboration to emerge out of this crisis</u>. However, there are gaps in trust between some of these stakeholders and there is potential for the stress and anxiety of the outbreak to exacerbate this. We all have a responsibility to build trust and encourage cooperation wherever we can. Key questions include: How can we build bridges between the people we know well? How can we act as convener, facilitator and catalyst even during times of social distancing?



Even in times of crisis, there will always be issues that have the ability to bring people together and build trust, even between enemies. Communicable diseases don't care about where you live, what your political affiliation is, or your ethnic or religious identity. They can remind us of our shared humanity and our shared vulnerability. They also remind us of the need to protect those who are most at risk in our communities, such as older people, persons with disabilities, or compromised immunities, for their safety and for the safety of all.

This realisation can motivate people to <u>coordinate and cooperate across conflict lines</u> in ways that few other issues can. Everyone wants their family to be safe, everyone wants their communities to be healthy, and these shared concerns can engender strong feelings of empathy and common cause that can motivate people to <u>constructively cooperate with people across perceived divisions</u>.

### 3. Do be flexible with partners, or request the flexibility necessary to deal with complex crises in a sensitive and effective way.

The situation regarding Covid-19 changes very rapidly. In order to effectively respond to a volatile and unpredictable problem like this, it is necessary that <u>funding and partnership mechanisms</u> <u>allow implementing organisations to adapt, react, and respond</u> to the crisis as it unfolds. This may require slightly more work in headquarters on contract amendments and rebudgeting etc., but it is essential to ensure the flexibility necessary to save lives.

Complex crises require coordinated, responsive, and <u>adaptive leadership</u> on all levels. Assumptions that were valid at the start of our response may no longer be accurate months or even weeks later. It is important that all stakeholders do everything they can to encourage, facilitate, and support a reflective and responsive approach. Essential to this will be developing a shared understanding of the changes that are required, articulating this clearly and documenting agreed changes in order to avoid confusion now and in the future.

It is clear from experience across the globe that the Covid-19 crisis is not going to be resolved quickly and the social and economic fallout may last a long time. Adaptation to this newly emerged reality is critical, which means that we cannot carry on with business as usual. Interventions designed to deal with a specific short-term crisis may not able to address the unpredictable long-term social impact, or unforeseen secondary problems that emerge from the current crisis. Effectively addressing this uncertainty will require <u>iterative design processes</u>, <u>flexible governance</u>, and contingency planning.



It is also important to remind partners to be mindful of the needs, not just of their beneficiaries, but also of their own staff and volunteers. Given the unprecedented and rapidly evolving situation, everyone is under considerable stress to adapt to the changes in both their general and work environments. Organisational leadership should be encouraged to take the time to check that their staff are able to cope with the new pressures they are facing, and to extend support and flexibility when needed.

# 4. Do be sensitive to the complexity of Myanmar's governance arrangements and linguistic diversity

The primary responsibility for dealing with this crisis lies with the government of Myanmar. However, everyone will need to work together for the response to be effective. There are many parts of the country where the MOHS and other departments and ministries cannot reach. In these areas, local civil society, disabled people's organisations, and ethnic and community based health and social service delivery organisations support the communities who live there. It is important that any support or funding that is offered as part of the Covid-19 response should take this into consideration to ensure that interventions are conflict sensitive and that communities in these areas do not fall through the cracks, particularly when they request for assistance. It is vital that this is not perceived as "bypassing" the government, so all communication about these modalities should express respect for the sovereignty of the government, and adhere to the principles of respect, accountability, fairness and transparency.

Furthermore, many communities in Myanmar may not have access to reliable information about Covid-19, preventative measures, or other aspects of the response in their native language. In order not to exacerbate the confusion, mistrust, and risk of misinformation that this entails, implementing agencies should do all they can to ensure the information is accessible. This includes translating information into local languages, or in modes for those with difficulty seeing or hearing, and/or work with local partners with local language skills and context knowledge.

# 5. Do encourage context-appropriate, sustainable solutions to control transmission that are actually viable in local communities.

The Covid-19 outbreak will <u>affect different people in different ways</u>. For example, many people may not be able to self-isolate or <u>wash their hands under running water with soap</u>. It is vital that messages around these practices take the audience into consideration, and that additional



information or adaptations are made for people living in difficult circumstances (there are always options). Local knowledge is particularly crucial in ensuring that social distancing or hygiene knowledge is contextual, effective, does not do harm, and also helps mitigate risks facing those who may be blamed for the pandemic. This applies to authorities, affected groups, partners and beneficiaries, as well as your own staff and volunteers.

Communities have to understand the logic of transmission control measures in order for the measures to be effective and for communities to comply voluntarily. One of the key ways to build trust with communities is by providing factual and accessible information about Covid-19, how it spreads and how to control transmission, through trusted interlocutors. Once there is a common understanding about the risks involved, consulting with communities on locally-acceptable ways to prevent transmission and identify measures that are suitable and appropriate given the specific conditions of the area (e.g. will a lockdown be viable or not, are there alternative measures to a lockdown) can promote voluntary compliance. Health workers could also consult with community members to better understand the social factors at play when it comes to community transmission, such as patterns of mobility, and specific risk factors. Consulting with women is particularly critical as they are often the primary caregivers and have a significant role in the provision of community health services.

6. Do consult with communities to ensure that all decisions, actions, and communication are based on a genuine sense of empathy and understanding of those who are suffering, excluded and most vulnerable as a result of the situation.

The Covid-19 crisis is not just a public health crisis. It has profound <u>social</u>, <u>economic</u>, <u>gender and psychosocial implications</u>. The suggestion that people can stay at home for 2-3 weeks is masking a lot of assumptions about those people's income, food security and level of safety in their home. Given Myanmar's socio-economic diversity, <u>a one size fits all approach is unlikely to be effective and may even be dangerous</u>.

It is therefore important to ensure that analysis disaggregate information and include women, older people, LGBTQI, people with disabilities, those living in IDP camps, unemployed and others that are potentially disadvantaged in order to understand their different experiences, challenges, and needs and develop response systems that reflect these. The situation of migrants, refugees, and stateless people is particularly precarious, and so it is essential that their rights and experiences are protected during this time. Many groups also have different sources and access



to information, services, and resources. <u>Understanding how Covid-19 and the response to it</u> affects them is critical to ensuring that our interventions do not do harm.

While Myanmar is at the beginning stages of a countrywide response to Covid-19, it may be necessary to consider interventions aimed at mitigating the socio-economic, gender, and psychosocial implications, not just of the virus but also the policies that may be implemented to address it (e.g. temporary shutdown of businesses, expected increase in unemployment rates, increasing instances of food insecurity, expected increase in domestic violence cases, water crises and the expected community tensions arising from competition over water resources, etc.). Given the potential for long-term implications of these Covid-19 measures, it is particularly crucial that attention is given to ensure that responses and policies respect, protect, and fulfill the rights of those marginalized and disadvantaged, and are gender sensitive.

#### 7. Do amplify women's voices and leadership during times of crisis.

Approximately 75% of Myanmar's health workforce are women; majority of nursing professionals and over half the medical practitioners are women. This is an opportunity to recognise the role women have not only in leading the response to the pandemic but also in the overall provision of healthcare in Myanmar. It is crucial to acknowledge this redefinition of gender norms related to leadership roles in times of crisis.

Women are often well-positioned to identify and understand trends at the local level and it is critical that women's knowledge and understanding are incorporated into the planning and response related to Covid-19. Everything possible should be done to ensure that women's leading role in the response to Covid-19 should carry on after the crisis, to leading roles in dealing with other problems such as the economic fallout of the pandemic and <u>resolving Myanmar's many conflicts</u>.

### 8. Do recognise, encourage and support opportunities for peace and collaboration that emerge as a result of the crisis.

In response to the UN Secretary General's call for a global ceasefire during the pandemic, numerous conflicts have been paused around the world to allow conflict parties to focus on the Covid19 response. In Myanmar, a number of ethnic armed organisations have requested for a nationwide ceasefire to concentrate on addressing Covid-19. These statements can be used to demonstrate to the greater public the ethnic armed organisations' sense of unity and



cooperation in the face of a countrywide risk. This is a unique opportunity to create the foundations for lasting peace.

Peacebuilders (whether formal or informal; experienced or new) have a critical role to play during a pandemic. During times of crisis, peacebuilders can use their skills, experience and relationships to <u>reduce panic</u>, <u>minimize stigma</u>, <u>build connections and repair relations</u>. We will all face <u>opportunities and challenges</u> in doing this over the coming weeks and months.

#### Don't...

1. Don't exacerbate pre-existing sources of tension and suspicion through your intervention to support the Covid-19 response.

Many communities, especially those affected by violence and armed conflict, are often characterized by social, political and ethnic divisions, mistrust of others and a feeling of relative deprivation and marginalization. Communities beset by fear are likely to see the Covid-19 response through a lens affected by these perceptions and experiences. It is therefore not possible to implement a purely "technical" or "neutral" response, since any response will inevitably be interpreted as political in terms of who gets what, when, and how. Taking this into account during the design and implementation of any intervention will help to mitigate risks and increase the effectiveness of the response. The recent controversy around the Covid-19 awareness mural in Myitkyina shows how we may be intervening in a context where mistrust and tension lie below the surface, so we need to be very careful in the steps we take.

2. Don't undermine pre-existing support structures such as self-help groups, community leaders, women's groups, faith-based organisations or other community-level networks.

Everyone will be tense, stressed and overwhelmed with the Covid-19 response. In times of crisis, people will turn to the respected people, organizations and institutions in their community for help, guidance, and leadership. These people can play an essential role in building trust between communities, governments, and CSOs/NGOs. However, if they are prevented from playing this role, or left out of the process, this will be a missed opportunity for the kind of inclusive, constructive collaboration that will be necessary to respond to the crisis. It is therefore important that any interventions acknowledge, support and build on local support mechanisms, rather than overburden or undermine them.



Whilst the principles of social inclusion and participation of local structures remains of paramount importance, we must also be mindful of the need for social distancing. Most community structures work on the basis of communal meetings, with no technological options for 'virtual' meetings. Excessive demands for active participation of large numbers of people can be harmful in the long run for restricting the spread of the Covid virus. This is one of the challenging balances we will need to find in the coming weeks and months.

## 3. Don't unintentionally exclude, stigmatize or legitimize negative stereotypes through the modalities, media and messages that you use.

Crises usually heighten people's tendency to view with suspicion and mistrust those who they consider as "others", or who do not belong to their conception of their community. Given how the narrative around Covid-19 has developed in both global and local media and from government statements, the fear of being a carrier has heightened the fear of "others", which in the Myanmar context will likely include people practicing different religions, coming from unfamiliar ethnic groups, foreigners and those traveling from other countries, or anyone who is perceived to be behaving or acting in ways that put ourselves and our families at risk. It is essential that all interventions, messages (explicit and implicit) and communication take this into account in order to mitigate the risk of unintentionally exacerbating fears, tensions or suspicion. The language we use when talking about Covid-19 is also important as this can perpetuate stereotypes, or strengthen false associations between the virus and other factors (e.g. use of "migrant virus" or the "China virus"; use of Covid-19 "suspects").

There is a danger that social media can reinforce or legitimize negative stereotyping and that this in turn can result in a backlash either against the people who are being stereotyped or the people who are stereotyping (e.g. be mindful of any visual materials produced and which ethnic groups are being portrayed and which ones are being left out). In times of high anxiety like a pandemic, the risk of violence can never be ruled out. Given the rapid increase in people's access to social media in Myanmar in recent years, the prevalence of unreliable information and the ability for rumors and messages to spread uncontrollably, ensuring that our communications and messages are conflict-sensitive is essential. Many groups in Myanmar will already be stigmatized, and we all have a responsibility to do all we can to ensure we do not contribute to this through our responses, words or actions.

The Covid-19 outbreak is likely to widen the gap between those with access to resources and information and those who do not. People who may have been able to access online sources of information may no longer be able to afford the data if they lose their jobs. We must be sensitive



to the risk that we can contribute to this. For example, shifting to online platforms is a great way to overcome the barriers created by the need for social distancing. However, whenever these innovative approaches are being designed, it is important to ask the question: who will not be able to use this? What will be the long-term impact if we allow access to some groups and not others, and the crisis goes on for months? And what are some mitigation strategies we could consider?

### 4. Don't allow the crisis to distract us from other serious problems or unfair situations in the country.

Many people were suffering in Myanmar before the Covid-19 crisis started. This does not mean that these issues should be put on hold, it rather requires us to balance these priorities in a way that is responsible. To illustrate this, the armed conflict in Rakhine State continues to intensify in the midst of the Government of Myanmar's preparations to address the threat of Covid-19 nationwide. Some humanitarian actors have proceeded to integrate Covid-19 messaging and interventions with other essential humanitarian and protection services. But government policy aimed at combating Covid-19, such as the importance of information campaigns on proper hygiene is directly contradicted by the continuing mobile internet ban in Paletwa, Buthidaung, Rathedaung, Maungdaw, Kyauktaw, Mrauk U, Ponnagyun, Myebon, and Minbya.

# 5. Don't forget to keep a sense of perspective, and remain critical about temporary restrictions on civic rights and freedoms.

It is normal that some of our liberties are temporarily limited during times of emergency. However, it is important that we do not allow this to creep into long term changes or serious abuses. We will need to find a balance between understanding the urgency of the situation, and respect for the basic principles that make a society fair, free and inclusive. We need to be careful to ensure that urgent reactions to deal with a crisis do not become institutionalized as discriminatory or insensitive practices. This will remain important for a long time, as we adapt to the 'new normal' of what living with this protracted crisis means for social life, politics and civil society.

It is important to maintain a sense of perspective when some civic liberties need to be temporarily constrained, in order to remain vigilant against rollback of democratic freedoms that can persist beyond the crisis. Monitoring the situation in other countries can be helpful for this. It is however also important that as peacebuilders, we continue to ensure that we pay specific attention to those whose rights are already more constrained than most, and are at higher risk



of violence and in need of additional protection mechanisms (e.g. LGBTQI, women, girls and boys, older people).

6. Don't reduce the support to social problems, burdens, violence and abuse, and health services that specifically support women, girls, persons with disabilities, and LGBTQI.

During a crisis such as the Covid-19 outbreak, many needed resources are often redirected to address the immediate health and social concerns related to the pandemic. The pressures of quarantine, social distancing, and the economic and social challenges that result from the Covid-19 response often leave those already vulnerable to gender-based violence or abuse, including women, children, persons with disabilities, and members of the LGBTQI community, at an even higher risk of violence. It is critical that continued care is available for those at risk of GBV, intimate partner violence, or abuse and that referral pathways that reflect Covid-19 safety measures are updated and disseminated. Furthermore, continued care for pregnant women and new mothers and children during this crisis should be continued.

Furthermore, making assumptions about self-quarantine, social distancing and other measures that fail to recognise the trends related to increased pressure and workload on women, as well as <u>domestic abuse against women and children seen during other pandemics</u> increases the risk of unintentional harm. Ensuring that responses and interventions are <u>inclusive of women's voices</u> is a bare minimum for this.

#### **About RAFT**

Our Mission is to enhance learning and capacity among national and international actors to ensure that their work does not unintentionally increase division and tension but instead effectively promotes inclusion, peace and positive change.

For further information about RAFT's work and the services we provide, please contact <a href="mailto:ksimbulan@raftmyanmar.org">ksimbulan@raftmyanmar.org</a> for any Rakhine-specific inquires, and <a href="mailto:apadilla@raftmyanmar.org">apadilla@raftmyanmar.org</a> for inquiries related to other parts of the country. Please get in touch with us should you have any questions about ensuring your Covid-19 response is conflict sensitive.