

## BRIDGING THE GAP

CAERUS - EVIDENCE BASED POLICY FOR POST CRISIS STABILITY

CAERUS – The role of health, education and data in paving the way from crisis to stability

Session 2: CAERUS in context – Roundtable discussion on managing transition

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## Setting the scene

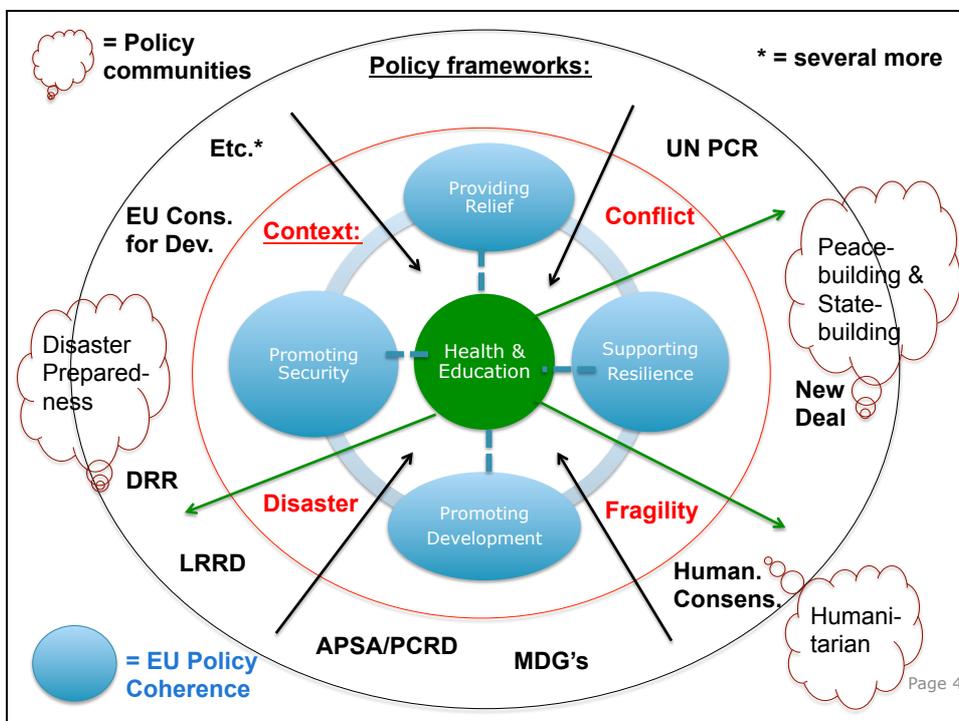
*How do health and education contribute to stability, peacebuilding and statebuilding?*

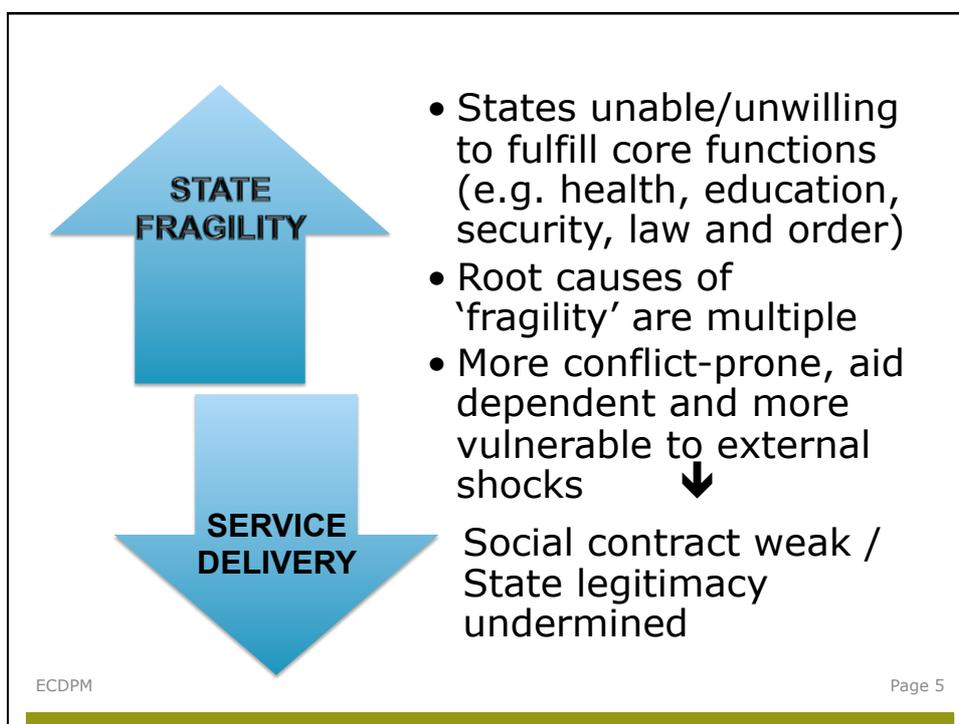
*Drawing on the experiences of international partners, what are the key policy and operational challenges to linking health and education to the broader governance agenda?*

*What role for data in facilitating that process?*

## ECDPM's Policy Framework Paper

- Are Policies Linking Up**
  - Reconciling Short and Long Term
  - Role of Health & Education in peace and statebuilding
- Context & Endogenous Processes**
  - Use of context and conflict analysis
  - Linking up with national policies, systems, processes
  - Working with local communities to promote resilience
- From Policy to Practice**
  - Barriers and incentives to carrying forward policy into practice
  - The role of data





### How social service provision relates to resilience, peacebuilding and statebuilding

- Requires looking beyond humanitarian objectives
  - Health and education as drivers of peacebuilding & statebuilding
    - Peace dividends
    - Mending societal fractures and addressing grievances underlying conflict (e.g. opportunities for dialogue, identifying and building on shared interests/priorities)
    - (Re)building state legitimacy and accountability
    - Strengthening core national capacity
  - Community resilience
    - Strengthen ability to manage risk and recover from shocks
    - Drivers for equality of opportunities
  - Role of data systems for better responses
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## Political economy and conflict sensitivity of service delivery

- Understanding context and power relations - critical for service delivery :
  - Interventions for stability can compromise participation, equity and non-discrimination
  - Discontent can be politically manipulated, undermining peacebuilding & statebuilding efforts
  - Where political orders are contested, provision of services can be part of strategies to 'buy' support
- Conflict-sensitive approaches and political economy analysis not yet systematic practice among donors, and does not necessarily translate into planning, programming and budgeting processes
- Supporting endogenous processes/institutions: Donors recognise need, but remain cautious and lack adequate tools, guidelines and timeframes

## Towards coherence: What the international community is **saying**

- Calls for greater coordination and comprehensive strategies in support of transition processes
  - EU's LRRD concept (1996, 2001)
  - OECD Principles for good international engagement in fragile states & situations (2007)
  - New Deal for Engagement in Fragile States (2011)
- But many actors lack coherent vision on impact of health and education for peacebuilding & statebuilding, and vice versa
- Some donors (EU, Norway, UK, US) have outlined comprehensive approaches to health sector in humanitarian aid, peacebuilding and development strategies

## Towards coherence: What the international community is **doing**

### Good practices (some exs; not exhaustive):

- UNICEF's Learning for peace initiative
- WHO's Health as a bridge for Peace Initiative
- Global Partnership for Education prioritising fragile states, bridging the gap between emergency and development

### Challenges:

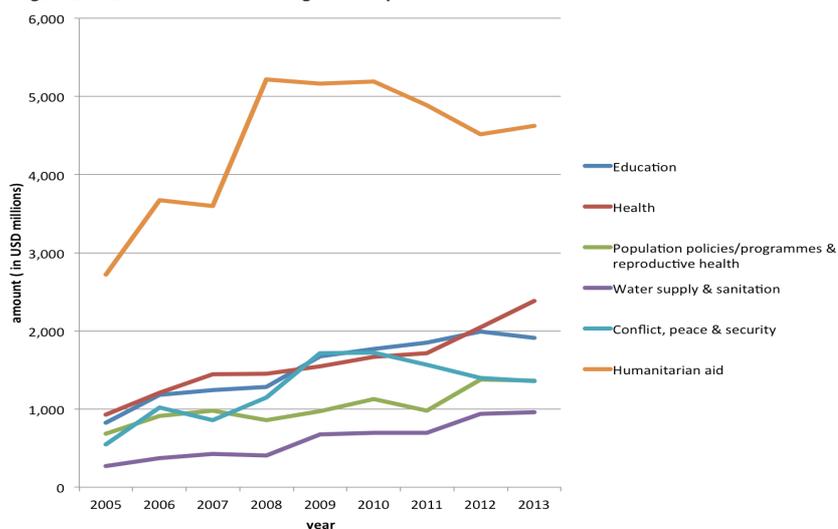
- Despite evidence of contribution of health/education to conflict prevention, resilience and development, peacebuilding approaches not mainstreamed in humanitarian and development
- Beyond emergency health services, social services are not always a priority when engaging in post-conflict settings
- Funding is volatile, short term and poorly harmonized
- Pooling of funds from across donors offers opportunities, but applied only in few cases

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## ODA flows per sector in fragile states

Figure 2 - ODA disbursements to fragile states per sector



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## Towards coherence (1)

### Challenges

- Practice lags behind policy rhetoric
- Lack of coherent vision on implications of health/education for peacebuilding & statebuilding (and vice versa) → fragmented approaches by different actors
- Fragile states lagging behind on MDG health and education indicators, yet H&E not prioritised in these contexts
- Funding in crisis-affected countries not always synchronised with needs
- Incompatibilities in funding instruments, rules, mechanisms and frameworks

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## Towards coherence (2)

### OPPORTUNITIES

- Use of pooled funding
- Comprehensive approaches to health and education in fragile environments
- Joint use of analytical tools (e.g. PEA and conflict analysis increasingly used)

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