

'Let communities do their work': the role of mutual aid and self-help groups in the Covid-19 pandemic response

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How to respond quickly, effectively, and sensitively to large-scale crises is debated at length in the aid sector. Institutional focuses on projects and outcomes have led to abundant literature on the efficacy of external interventions, while the actions of individuals and communities to meet their own needs remain under researched. This paper seeks to close the gap by joining global trends and specific case studies to explore the scale, breadth, and characteristics of citizen and community-led responses to the Covid-19 pandemic of 2020–21. Using mixed methods, it argues that mutual aid, self-help, and other spontaneous community measures were vital to the early response to Covid-19 globally. Such endeavours have limitations, however, which can be strengthened with the right national and international support. The paper concludes by calling on authorities and aid actors to widen their understanding of 'first response' and provide meaningful support to mutual aid and local self-help initiatives now and in the future.

Keywords: collective action, community-led, Covid-19, crisis response, humanitarian, mutual aid, protection, self-help, solidarity

Introduction

As Covid-19, and news of it, spread across the world in early 2020, governments, local authorities, organisations, and other institutions began to ask themselves a range of questions. What is this virus? How does it spread? How serious is it? Does this pose a real risk to our country, regions, districts, cities, towns, villages, neighbourhoods, or local rural areas? And increasingly, how should we respond? Depending on available information and very diverse political, socioeconomic, and cultural realities and perceptions, governments, private sector actors, and larger institutions began engaging with what was soon to be declared a pandemic.

As governments, media bodies, and other larger entities scrambled to respond, so too did a great many of us individually and collectively across the world. With apprehension spreading fast, many directed the same basic questions towards friends, family members, and work colleagues, face to face and increasingly by telephone, Zoom, and social media. This early and spontaneous sharing of information (facts,

rumours, beliefs, perceptions, and disinformation), confusion, concerns, anxieties, and fears (right, wrong, and everything in between) amounted to a huge global quest for answers.¹ It was also the first sign of the subsequent outburst of autonomous and immediate mutual aid (Sitrin and Colectiva Sembrar, 2020), self-help, and communal solidarity, which rapidly spread across the planet, often faster than the virus itself.

This paper and study serve three purposes. First, to present a globally recognisable sample of the concrete spontaneous mutual aid and self-help efforts that took place between March and August 2020.² Second, to explore examples of self-help and community-led efforts in Kenya, the occupied Palestine territory (oPt), the Philippines, and Sudan where associates of Local to Global Protection (L2GP) have deep roots at the community level. Third, based on the above, to put forward key findings, lessons, and suggestions to inform future efforts by established aid actors and local authorities to support citizen- and community-led responses.

A couple of cautions must be considered before proceeding. Trying to convey what happened across so many diverse countries and localities over several months should only be seen as a modest attempt to capture something hopefully characteristic in a global perspective. Aspiring to be ‘representative’ would be naive given the scale and scope of the subject; the research and subsequent analysis aims instead to be indicative of wider trends. Furthermore, the authors, reviewers, and readers, all were, and may still be, part of some of these reactions and responses across the world. Readers should be more than usually aware of both ‘observer’ and ‘participant’ bias. Researchers, writers, readers, we are essentially all part and parcel of the experience that this paper seeks to describe.

Lastly, a word on terminology. In several instances, we have chosen to use ‘mutual aid’ as short-hand for a huge variation of actions that could also be described as self-help, citizen- or community-led response, neighbour help, collective action, and local agency. The term ‘mutual aid’ remains very broad and loosely defined and has not yet been picked up and appropriated by international aid actors. As researchers and authors, we have found these qualities to be useful in the context of this particular work—aspects that we examine further below.

Methodology

L2GP has documented examples of community-led action in response to the Covid-19 crisis and its associated risks and challenges across different settings since March 2020. Historically, its action research on what communities and crisis-affected people do to ensure their survival, protection, and recovery has focused on those residing in the Global South. As the pandemic evolved, an abundance of such autonomous self-help, local leadership, and community agency and cohesion emerged across the world, and a collegial network around the L2GP platform³ began exchanging practical examples of community-led crisis response to understand better how people coped. Later, other aid actors⁴ began assessing similar themes.

The purpose of L2GP's research was to document, explore, and share examples to inspire colleagues and community activists, as well as to investigate the importance of mutual aid and how local groups and activists managed to adapt and respond to the crisis. Thus, the questions guiding this research were: how are individuals and families and self-help and community groups responding to the threat of Covid-19; and subsequently, what can be learned from different responses and adaptations?

Data for the research were derived primarily from three sources generated using a methodology highly influenced by the nature of the pandemic. In addition to the many examples of mutual aid brought forth via digital and online media platforms, the impacts of Covid-19 limited our action research and observations to within an existing community of practice that L2GP has coordinated since 2016. The experience that comes with years of collaboration, knowledge, and practice sharing thus guided the initial conversations and contemplation of mutual aid in this context.

An extensive search of articles published by media outlets, non-governmental organisations (NGOs), and academics yielded a database of cases of citizen- and community-led action during the first six months of the pandemic.⁵ Videos, written updates, and short examples were submitted by local NGO actors and freelance researchers associated with L2GP and International Media Support. Prior to data compilation, several indicators of mutual aid were identified based on the experience and knowledge of community-led crisis response produced by the L2GP network over the past decade. The main criteria qualifying each article or source was whether the action or response was led or initiated by communities, individuals, and/or crisis-affected people and went beyond, under, or around state authorities and bodies and established NGOs. This did not, however, exclude actions involving local or religious authorities and facilities such as mosques, churches, schools, neighbourhood groups, medical centres, and small local community-based organisations (CBOs), as these often appeared to be genuine platforms for community-led action and mutual aid. Hence, both the actor behind an action and the action itself determined whether a specific event or example qualified as mutual aid for this research. The early categories and indicators of mutual aid that emerged from the data aided additional data collection, and eventually produced the above-mentioned database of examples.

Qualitative interviews further captured the multifaceted dimensions and characteristics of mutual aid; these were conducted with 19 NGO staff, activists, and self-help group members with whom L2GP has been collaborating on survivor- and community-led crisis response (sclr) for several years—sclr is an approach to promote citizen and community agency that has evolved across different settings over more than 10 years (Corbett, Carstensen, and Di Vicenz, 2021). Insights from the informants on how the pandemic progressed and communities reacted complemented existing documentation on trends and characteristics of mutual aid. Interviewees included volunteers and NGO staff in northern Kenya (the Indigenous Resource Management Organization (IREMO) in Marsabit County), the Nuba Mountains of Sudan (the Kamma Organization for Development Initiatives (KODI)), the oPt (East Jerusalem YMCA (Young Men's Christian Association)), and northern parts of the Philippines

(Ecosystems Work for Essential Benefits (ECOWEB)). Examples of community action in these locations are from specific local contexts and as such, may not always be representative of the wider national setting.

The proceeding analysis and discussion is informed by three processes: (i) the indicators and categories of mutual aid identified and developed throughout the study; (ii) the observations and contributions from peers and co-workers in this field; and (iii) contributions from theories on such topics as mutual aid, *communitas*, and solidarity, all of which have guided the analytical lens applied to answer our stated research questions.

The pandemic appears to have ignited renewed scrutiny of the mobilising powers and characteristics of mutual aid among activists and academics. Early in the crisis (June 2020), and at the time unnoticed by the authors of this paper, *Pandemic Solidarity* was published (Sitrin and Colectiva Sembrar, 2020), highlighting numerous cases of mutual aid across several continents. While much of the book's introduction and framing of the actual examples is explicitly anti-capitalist and feminist, many of its illustrations of mutual aid appear to be motivated by a mixture of social indignation, disillusion with the state, solidarity, political activism, faith, and/or deep attention to the conditions and unique needs of particular groups of citizens (related to gender, age, sexual orientation/identity, and poverty).

Pandemic Solidarity is an important reminder that while the aid industry at large has not paid much attention to the scale and importance of mutual aid, others have been more open to recognising and valuing such expressions of local agency. Although preferring the term 'communitas', Matthewman and Uekusa (2021) offer a particularly helpful introduction to and reflection on current literature related to what we refer to here as 'mutual aid'.

The explicit political framing of mutual aid in much of the literature on the subject, including Preston and Firth (2020), Sitrin and Colectiva Sembrar (2020), and Solnit (2020), invites reflections, relevant to the research presented in this paper, on the extent to which one may understand spontaneous mutual aid efforts as expressions of particular ideologies or religions. Alternatively, it encourages one to remain open also to understanding many such responses by individuals and groups in a crisis as a characteristic, which tends to criss-cross the globe and arguably transcends borders and differences framed in terms of ethnicity, ideology, class, culture, and religion.⁶ Without neglecting our own biases, we have tried to remain cautious, while being alert to patterns and characteristics, in reading motives for people's action, where that was not explicit.

Findings: global examples and select case studies

A global view of early mutual aid in response to Covid-19

This section seeks to illustrate early mutual aid responses to Covid-19, which L2GP's research collaboration was able to capture between March and August 2020. To provide

a digestible overview of this global scan of examples of mutual aid, responses were divided into the following (inevitably intersecting) categories: ‘information sharing and awareness messaging’; ‘mutual care, sharing, and mobilising own resources’; ‘volunteerism’; ‘collective hygiene and distancing measures’; ‘livelihood coping/adaptation’; ‘self- or community-protection measures’; and ‘uncategorised’. For reasons of length and reflecting the weight of the research, the subsequent text is separated into subsections on ‘information sharing’, ‘mutual care and sharing’, and ‘livelihood coping/adaptation’, but the paper draws on and references cases from all of the subcategories where relevant.

Information sharing and awareness messaging

‘Maintaining cleanliness is a religious duty’ states a mural in the Palestinian West Bank village of Wadi Fukin, one of a number of initiatives by a community protection group seeking to spread awareness of Covid-19. Similar messages appeared across the world as the potential threat posed by the virus began to be understood.

Internet searches for ‘Covid-19’ and ‘Corona’ increased dramatically in March–April 2020.⁷ This was the case globally, including in Kenya, Myanmar, the oPt, the Philippines, and Sudan, with Google search peaks reflecting (and, perhaps, forecasting) the early escalation in infection rates (Peng et al., 2020). From the smallest local community radio stations, across social media, to the largest national and international media outlets, nearly all contributed to raising immediate awareness of Covid-19, such as basic hygiene and distancing measures thought to be effective in mitigating the spread of the virus. Alongside crucial messaging by influential politicians and government figures, personalities from the realms of culture and entertainment, and religious leaders (with some noticeable exceptions, distractions, and deliberate instances of disinformation among all of these categories), citizen- and community-level awareness activities feature prominently in the interviews and the updates from all of the countries researched.

Such local push and contextual ‘translation’ of international- and national-level messaging were perceived by interviewees to be crucial, not least in communities where many are illiterate and have limited/no internet and social media. In Burkina Faso, a member of a local women’s listening club in the village of Gorom Gorom explained how her community group responded: ‘[Through the training] we received images with all the instructions printed on it, [and] we used this image in the door-to-door sensitisation. We elected five, ten persons; everybody kept a one-metre distance to the others and wore facemasks, and with a bucket, soap and water they assisted in this sensitization. They went door-to-door, left to right – there is not a single courtyard where we have not been to raise awareness about COVID-19’ (Kieffer-Døssing, 2020b, p. 7). Similar efforts were undertaken by women’s groups formed around the activities of small local radio stations in Niger, Mali (Kieffer-Døssing, 2020b), and the Central African Republic (Losh, 2020).

In Sudan’s Nuba Mountains, a conflict area where the majority of residents have no telephone or internet access and literacy levels are low, youth volunteers walked

from village to village to disseminate information on basic hygiene and distancing measures. In the Kibera neighbourhood of Nairobi, Kenya, girls adopted a haircut with small multicoloured ‘spikes’—mimicking the look of coronavirus—as a reminder to themselves and adults around them of the new dangers. This ‘Covid hairstyle’ soon reached other parts of the country and East Africa (Associated Press in Nairobi, 2020). In Myanmar, five men temporarily held in a government quarantine centre became an instant social media hit owing to their corona awareness songs (Htoon, 2020b, p. 4). In the absence of effective measures by authorities, drug gangs in some of the *favelas* of Rio de Janeiro, Brazil, used social media and mobile loudspeakers to decree their own curfews, supposedly to reduce the spread of the virus (Baretto Briso and Phillips, 2020).

Alongside the many positive cases of local-level communication to boost helpful responses to the pandemic, it is important to note how the crisis was also used by drug cartels and armed groups in Colombia to impose their own strict interpretation of lockdown measures, backed up with death threats spread via WhatsApp (Daniels, 2020). Examples of Covid-19 and pandemic-related communication being used to further particular economic and power-related interests are plentiful. They are not examined further here but are an important feature to keep in mind (Bognár, 2020; Roth, 2020; Amnesty International, 2021).

Following the guidance of the World Health Organization (WHO), many national and local governments and entities soon began producing and disseminating recommendations on hygiene and distancing. A key message focused on the importance of washing hands for 20 seconds. This prompted a quick response from Darare Gonche, who leads a small community organisation (IREMO) in northwest Kenya: ‘Running water for 20 seconds! When we don’t even have enough drinking water as it is’. This real-life and pragmatic reaction was echoed by others living with severe and chronic water shortages, promoting a quick exchange of solutions among co-researchers, including advice on washing with the crucial soap foam but rinsing with as little as a cup of water, if that is all you have. From Haiti (do it yourself (DIY) ‘Tippy Tap’ hands-free washing stations) to Sudan or Kenya, examples of local adaptations and creativity regarding basic hygiene increased rapidly, as well as in places where the concept of ‘running water’ is still a precious dream. As the use of face masks was mandated, seeking and providing access to and advice on DIY masks trended with respect to google searches, social media posts, and initiatives by self-help groups and NGOs, including creative DIY face masks for individuals with hearing disabilities (allowing one to see peoples’ lips/mouth) (RTÉ and Reuters, 2020).

Rumours, confusion, wishful thinking, misinformation, and deliberate disinformation remain part of this mixture, including in official communication by some political leaders, supposed health experts, and prominent cultural and religious personalities across the world. Assumptions that the spread of the virus was restricted to certain ethnicities, cultures, or religious beliefs held some sway in the early phase of the pandemic (ACAPS, 2020; Kieffer-Døssing, 2020b; The New Humanitarian, 2020). And so did the belief in various possible ‘cures’ or prevention strategies, such

as anti-malarial drugs, prayers and religious observance, or liquid disinfectants. In Myanmar, a network of ‘netizen volunteers’, including citizens, researchers, and NGO or civil society organisation (CSO) workers created the ‘People’s network to prevent and counteract the rumours about the Coronavirus’ on Facebook, while also crowd-sourcing free overnight options for essential healthcare staff who could not go home (Htoon, 2020c, p. 3). Local media outlets elsewhere equally contributed to such essential messaging, such as Africa’s Voices’ radio shows in Kenya (Georgalla, 2020).

The importance of very local conversation and the role of religious and cultural leaders (Ngaira, 2021) in countering false assumptions and perceptions, and affecting real behavioural change, was emphasised in the second quarter of 2020. As many communities around the world headed into important religious periods such as Ramadan and Easter (Hujale, 2020), social distancing and lockdown measures threatened to collide with religious duties and cultural practice, and the voices of local leaders became crucial. ‘Religious leaders, women leaders, and the radio quickly contributed with raising awareness and assisting people, and then people understood. That really mollified the minds’, a local woman in Ayerou, Niger, explained in May 2020. ‘To some people, it was a religious problem. To them, there was no question that they would [get together in groups] to pray. Many people tried to do so, but the religious leaders said no. . . . [I]f they respected their leaders, they had to listen to them. That is the adopted strategy that has taken us to where we are today. So, well, it was really . . . on [the] one hand it was good and on the other it was difficult’ (Kieffer-Døssing, 2020a, p. 1).

While highlighting the important role and responsibility of local faith leaders, these examples (as well as more collated by Marshall, Wilkinson, and Robinson (2020) at the Berkley Center for Religion, Peace, and World Affairs) demonstrate a more general point: that the critical element of any communication campaign is the final ‘over-the-doorstep’ conversation and context-specific interpretation. Whether through local strategies for dissemination, adaptation of hygiene standards to make them practical for communities, or the support and advice of influential religious and sectarian leaders, the local translation of institutional advice and messaging is vital. This research confirms that it is this final part of any communication that will determine the success or failure of campaigns.

Mutual care, sharing, and mobilising own resources

As authorities responded to Covid-19 with various hygiene, social distancing, and wider lockdown measures, citizens made a range of spontaneous efforts intended to support those particularly vulnerable to the disease—and to mitigate the consequences of the steps taken to limit the spread of the virus. Given the spontaneous and completely decentralised nature of these endeavours, the scale of such responses remains impossible to quantify accurately. Still, our research with key informants, local/national updates, a significant sample of media sources, and additional examples detailed by, for example, Sitrin and Colectiva Sembrar (2020), all indicate that

this kind of mutual aid and communal care has been widespread globally. Indeed, it may have been so widespread that, in the early stages of the pandemic examined here, it constituted a crucial source of immediate support and awareness, evolving alongside what was offered by authorities and healthcare professionals across the world.

Assisting vulnerable neighbours or family members with basic food items, water, interpretation of information, or essential medicine were observed in neighbourhoods in Lagos, Nigeria, (Akinwotu, 2020) and Johannesburg, South Africa (Burke, 2020b). In Cape Town, South Africa, a coalition of activist networks offered basic instructions on safe food and water distribution (Cape Town Together, 2020). Tens of thousands of food parcels and soap were mobilised by a multitude of grassroots groups in *favelas* across Brazil and other parts of Latin America (Phillips, 2020); activist groups used their own resources as well as creative credit arrangements with NGOs to support vulnerable families in the Palestinian West Bank and Gaza. For some, this was just about collecting and delivering a few crucial items for someone in isolation, but for others, substantial amounts of essential resources were shared or redistributed between the less privileged. Often such citizen-led action occurred before government or NGO-sponsored support was launched (Burke, 2020b). While many of these efforts were clearly rooted in faith communities or groups with, for instance, specific shared political ideals or community agendas, other activities appear to have grown as much out of a mixture of moral sense of responsibility to help, coinciding with opportunities (such as access and material or mental resources to share), and the personal connections needed to act. Given the diversity, scale, and frequently ephemeral nature of spontaneous mutual aid across continents, it is not possible, on the basis of our research, to determine whether one or the other motivation dominated mutual aid efforts in the early stages of the pandemic, as argued by some authors (Preston and Firth, 2020; Solnit, 2020). Still, a strong individual and communal sense of ‘responsibility to act’, together with the opportunity to do so, seems to inform all such mutual aid efforts, be they motivated by or presented as answering a faith calling, political activism, solidarity, or simply a strong feeling of ‘shared humanity’.

Equally, the line between individual and self-help group efforts is difficult to draw, since, for instance, individual initiatives quickly mushroomed into more structured collective mutual aid initiatives. In some cases, entirely new groups emerged; in other cases, pre-existing groups and networks were utilised but with a new focus.

The transfer of resources from family members who have moved into towns and cities back to relatives in rural areas is a long-established and documented feature of urbanisation. But in northwest Thailand, for example, the reverse was reported, as Karen villagers brought part of their agricultural produce to be distributed to destitute citizens in the city of Chiang Mai.⁸ Similarly, as Covid-19 was perceived to be spreading rapidly in the Sudanese capital of Khartoum, community leaders in the western region of Darfur asked relatives in the city to refrain from returning to their villages (presumably hoping to find ‘corona shelter’ there). Instead, families in Darfur offered to support temporarily relatives in Khartoum as living conditions there deteriorated.⁹ In a very different context, the Myanmar Seamen’s Federation

found itself offering basic online psychosocial advice to an increasing number of members stuck on board vessels as travel restrictions prevented them from returning home as per usual contracts and regulations. Concurrently, the Federation supplied food and other essential items to retired seafarers in Myanmar to help them cope with deteriorating living conditions related to Covid-19 (Htoon, 2020d, p. 1).

The president of a female listener's club and civil society activist in Gao, Mali, captured much of the sentiment of this global outpouring of mutual aid (Kieffer-Døssing, 2020b, p. 6): 'people felt a responsibility to really care about COVID-19. If a relative of yours is infected, you have to help him in some way, even if you cannot be in [physical] contact with him. People understand that having [physical] contact is [no good], [but] you still have a responsibility to engage, as a citizen, to help him to respect the restrictions, to help him even with his treatment and also to give a lot of advice. And if you have even the tiniest bit of more money than him, help him and also help his wife [economically]. So, people felt very, very responsible. When everybody understood that the disease really did exist, everyone felt a responsibility [to help]'.

Doing true justice to the scope and scale of this global mutual care and support in response to the pandemic in just a few pages is not possible. Readers may wish to pause for a moment to add observations and experience, and to reflect on the true scale and scope of the spontaneous mutual aid displayed during the early months of the crisis.

With just a few noticeable exceptions,¹⁰ most mainstream aid seemed oblivious to the scale, scope, and importance of such spontaneous self-help. This is perhaps not surprising, as the aid industry is organised around, and rewarded by, monitoring and reporting on *its own* activities and results based on pre-intervention project proposals. Much like the blinkers on an easily distracted workhorse, this may help to keep the spotlight on the immediate task at hand, but it leaves the industry unaware of much of what happens beyond that. This project-focused approach also explains why this research has relied more on media coverage than aid sector reporting when tracking and capturing more spontaneous mutual aid efforts.

Livelihood coping/adaptation

Much has been written about how income-earners (employees, self-employed, vendors, and shop owners) were able to shift all or parts of their work and business online, adapting cloud/internet-based solutions, conferencing tools, learning platforms, or online shops. Such coping and adaptation strategies have supported income-earners in many high- and middle-income economies and helped to bridge conflicts between keeping parts of the general economy running and complying with lockdowns and social distancing requirements.

As important as these coping and adaptation strategies have been for some, equally prominent is the fact that for people and economies who depend on direct human interaction in a given physical space, alternative income and livelihood strategies show

up much rarer in the research. However, cases of collective protesting, defying or circumventing lockdown/social distance regulations, do appear in media reports from, *inter alia*, Colombia (Daniels, 2020) and South Africa (Burke, 2020a).

A particularly heavy blow was suffered by migrant workers and their families. Millions of migrant workers lost their jobs due to the restrictions, forcing many to return home to unemployment, renewed debt, and poverty. On top of that, relatives in their countries of origin lost the remittance that they used to send home (WFP, 2020; Ahmed and Montu, 2021). Globally, the World Bank and the World Food Programme (WFP) estimated that by November 2020, that this could lead to an additional 33 million people facing hunger in 2021.

The sense that the Covid-19 pandemic hit poorer people and countries much harder is documented in numerous global-level statements and reports (see, for example, The World Bank, 2020; UN News, 2020; DEC, 2021). Furthermore, poverty and race were identified as issues and general indicators of increased vulnerability in the United Kingdom (Public Health England, 2020) and the United States (CDC, 2021).

Slum-dwellers and internally displaced persons (IDPs) in Bogota, Colombia, told reporters in April 2020 that as people lost their jobs and livelihoods and as neighbours and friends exhausted their ability to help and share, the more vulnerable quickly sank into deep poverty and desperation; the government's compensation measures seemed not to reach them (Rampietti, 2020). Building barricades in poor neighbourhoods was an example of collective action to mitigate the negative economic impacts of externally imposed lockdowns. Another was public advocacy. For instance, the political analyst Ariel Avila stated that Colombia was hit by not one, but three pandemics, 'the coronavirus, hunger and corruption', pointing out that 'what this virus is showing us is just how inequitable and unjust our social and political system is' (Rampietti, 2020). Similarly, South Africa experienced several rounds of street clashes between police and residents in the most destitute urban neighbourhoods as poverty and desperation provoked by continuous lockdowns increased (Burke, 2020a, 2021).

Alongside such examples of mutual aid and spontaneous or organised collective protest and resistance, well-known individual and household crises survival strategies, such as reducing meals, borrowing money,¹¹ and selling one's resources, were reported in Kenya and Myanmar (DCA internal reports June, 2020), among other countries. According to Marsabit County resident Asha Boru: 'The crisis is having a negative economic impact on women. We are forced to adjust our food budget to cater and buy water. The shortage is making life get difficult for us every day' (IREMO, 2020d).

A particular case in point is the connection between school closures (affecting 1.5 billion children at its peak in 2020) and negative effects on children. Not only did children miss out on their education (with a bearing on their futures), but many families also took to sending them to work, often in harsh and dangerous circumstances and for poor pay (Grant et al., 2021), as reported in Afghanistan, Bangladesh, Colombia, Lebanon, and Uganda. The same sources document an increase in early marriage and pregnancy during the pandemic.

More sustainable adaptation and coping mechanisms to deal with a direct loss in income did not appear prominently in our interviews or literature review. However, defying lockdowns (Phillips and Cheibub, 2020), turning to prostitution, mounting drug use, early pregnancy, and spikes in domestic and gender-based violence (University of Birmingham, 2020) were reported in India, Kenya, Malawi, Myanmar, and South Africa, among other countries—all pointing to how Covid-19 dramatically augmented economic and social stress and suffering across the world.

Even if not stated explicitly, many of the examples of spontaneous mutual aid described above depended primarily on volunteerism: individuals or larger group offering time, skills, and resources for the common good. Given the tragic events in Myanmar at the time of writing this paper (April 2021), we conclude this overview with a reference to the work of the hundreds of volunteers who staffed that country's Covid-19 quarantine centres, documented by the Myanmar Pressphoto Agency (Htoon, 2020a), as a token representation of the level and spirit of volunteerism seen there during the early phase of the response to Covid-19. These examples of volunteerism and collaboration between activists and the state in Myanmar in 2020 stand in stark contrast to the realities after the military coup on 1 February 2021, following which volunteerism and cooperation between citizens and the state quickly began to dissipate.

Examples and key characteristics of community-led efforts

Moving from an attempt to capture recognisable trends in citizen and community responses to Covid-19 at the global level, this section presents highlights of the research that focused on examples and characteristics of self-help and community-led efforts in a select number of localities in the Philippines, Kenya, the oPt, and Sudan. These localities were chosen as close associates of L2GP have solid roots in and knowledge of them.

The Philippines

Despite early (and sometimes extreme) local and national government measures to prevent and control the virus in the Philippines (Bainbridge and Vimonsuknopparat, 2020; Ravelo, 2020), informants with the local NGO ECOWEB¹² stressed the importance of the resilience of a Philippine population continuously challenged by crises, such as earthquakes, floods, hurricanes, and political and criminal violence and conflict.

Nanette Antequisa of ECOWEB explained how this resilience, mutual aid, and creativity manifests itself: 'Individuals really help each other. They continue to help others, despite the fact that their own businesses have been closed. The youth is taking a lot of initiative. They are not part of NGOs, but they link with other communities and groups in order to create new networks. So, there really is this capacity within local communities, that will reveal itself in a disaster situation. I truly admire this willingness to share whatever you have. In general, families and relatives took responsibility for each other's survival—it's a part of the culture'.

In the early months of the crisis, when the virus had not yet reached rural areas,¹³ we saw examples of resource sharing that went beyond helping immediate neighbours, with rural farmers seeking to aid those most affected in neighbouring urban areas. For instance, a vegetable farmer donated one million pesos (approximately USD 20,000) for the generation and transport of fresh produce to numerous provinces across Cordillera Region (Aro, 2020). This was just one of several examples in the local media of people voluntarily sharing their resources with those beyond their immediate village or neighbourhood.

According to ECOWEB staff, community-level groups in parts of Mindanao and the northern Philippines showed a high level of self-organisation in their responses to the Covid-19 crisis. Local mechanisms of self-containment, isolation, and community protection were reported in the news (Degawan, 2020; Lapniten, 2020) and observed by national NGO staff. Members of existing community self-help groups in the north of the island of Mindanao engaged in alternative livelihoods activities, including creating and selling face masks and establishing urban gardens. Some of the items from these urban gardens were subsequently distributed during ECOWEB's Covid-19 response projects. Additional examples include urban and backyard gardening in Iligan City (Arceno, 2020b), manufacturing and distributing locally-made face masks by all-women self-help groups (Arceno, 2020a), climate-focused community-based groups (Codas, 2020a), and local production of ethyl alcohol for sanitisers (Codas, 2020b).

One year into the Covid-19 crisis, informants reported that mutual aid, volunteerism, and other coping mechanisms were continuing, but that examples were fewer and less positive. An impression emerged of people and groups struggling to survive a protracted pandemic and its associated challenges, including ongoing severe economic and social stress. As Nanette Antequisa remarked in March 2021: 'In the early stage of the pandemic people found a way to share food and other necessary resources. Private citizens and individual were distributing their own resources to the more vulnerable community members. But when everybody suffers from scarcity of resources, negative coping strategies eventually emerge and increase. So, families are trying to adapt to the resource scarcity'.

Among those struggling the hardest are individuals and families displaced following conflicts and flooding three years ago. They are now faced with the challenges created by the pandemic as well as continued tension with host communities, increased risk of land reclamation, and further displacement, resulting in greater levels of uncertainty and anxiety. After a year of lockdown, organisations in the Philippines are seeing an increase in reported anxiety and suicide attempts among children and youths (UNICEF, 2020).

Kenya

Kosi Banchale, a village resident in Marsabit County, northern Kenya, underlined how many people faced multiple competing crises throughout 2020: 'We are not concerned about when this disease will end . . . we are more concerned about water scarcity' (IREMO, 2020a). On top of persistent drought and sudden flooding, as well as a locust

infestation, Covid-19 is just another crisis straining already fragile and grossly under-resourced systems and structures. Early in the pandemic, Kenya had a comparatively high (in the African context) known caseload of infected individuals (Owino, 2020).

Despite the challenges and direct risks associated with the burgeoning pandemic, the spirit of '*harambee*'—that is, people uniting in times of crisis and need—was indeed prominent in Kenyans taking action to support their fellow citizens (Laiboni, 2020). From Marsabit County, Darare Gonche, the Director of the local NGO IREMO, reflected that even though people have few resources, *harambee* in the form of communal support is common: '[together] with surrounding villages and your neighbours, you are in a position to know who needs help, then you give it'. Numerous examples of local-level philanthropy were reported among families across Kenya, involving community networks and grassroots groups, as well as local businesses, fundraising platforms, and the private sector (Laiboni, 2020). While a government assistance scheme took time to be established in villages in the northern plains of Marsabit Country, social and cultural networks, including many led by youths (Honwana and Honwana, 2020), provided a source of social protection to residents.

In Marsabit's Hurri Hills, village volunteer Boniface Wario commented on how local measures were implemented where authorities failed: 'Police rarely come for patrols. They just pass by and leave immediately. Instead of police officers, chiefs are the ones enforcing curfew. The chiefs are the ones emphasising government directives in this part of the country' (IREMO, 2020c). People in Marsabit have long relied on resilient ways of living due to decades of poverty, resource scarcity, the limited capacity of local authorities, and major climatic risks. As the pandemic spread, and with that the introduction of numerous restrictions and degrees of lockdown, existing village-level self-help groups identified new roles for themselves in responding to the virus, as well as developing alternative opportunities for income generation.¹⁴ Groups, including people with disabilities and women, were quick to produce their own face masks and source hand sanitisers for sale and distribution.

Shifts in earning power between men and women were reported, with the latter, especially those belonging to self-help entities, benefitting from group activities, which helped to sustain their households during the early stages of the crisis. Kosi Banchale in Adhi Huka spoke about how his wife had sustained their family of 10: 'I lost my farmland due to tribal clashes and the little I have [left] isn't enough for cultivation. The livestock market has been shut down—we have no access to major markets. We are suffering because of the fear of this pandemic; we are using the little savings that we have—soon it will be over. Our only hope is my lovely wife . . . she is in a women's group which lends her emergency loans to sustain us through this pandemic' (IREMO, 2020c). This is significant given existing traditions and gender norms among many pastoralist communities in Marsabit.

Prior to the pandemic, brokers would travel to villages such as Hurri Hills and purchase small numbers of livestock for onward sale at distant markets to make a profit. With access restricted following the crisis, brokers stopped visiting and local youths working with a women's group took up the opportunity.

Additional reports shared by IREMO outlined how community members brought health information to distant and isolated villages and pastoralist groups—an important service for people who rely primarily on word-of-mouth information sharing. At a crucial point in the government's efforts to prevent the spread of the virus, members of self-organised community groups volunteered to accompany health professionals and officials managing curfews and quarantines, demonstrating willingness to boost local authority capacity. Several community groups also engaged in installing water tanks and building communal latrines in support of mounting sanitation requirements to prevent infection. Members of existing village loan and saving schemes agreed to lower (or remove altogether) interest rates and push back payback timelines as people lost income as the pandemic continued.

In March 2021, informants in Marsabit County stressed how coping mechanisms geared towards multiple crises are nearly exhausted in some communities. Financial reserves are almost depleted with families and individuals sliding into deeper than usual debt at this time of the year. Idle schoolchildren increasingly engage in alcohol and drug use and criminal actions, and early sexual activity and teenage pregnancy rates are rising (Mersie, 2020; University of Birmingham, 2020). Continued stress, frustration, and deepening poverty have manifested themselves in increased rates of domestic and sexual violence, locally in Marsabit and nationally (University of Birmingham, 2020). On a more positive note, more handwashing and better hygiene (prompted by the pandemic) have reportedly led to decreased rates of cholera and typhoid (IREMO, 2020b).

The oPt

The implications of the pandemic in the oPt are unique, given that they are situated on top of multiple pre-existing layers of restrictions on movement, internal and external trade, and most other exchanges across the territories occupied by Israel. Still, Palestinian informants indicate that the 'double challenge' resulting from the prevailing walls and fences and other Israeli restrictions, and then Covid-19 lockdown and social distancing measures, did not stop Palestinian community and civil society activists from trying to engineer creative solutions during the first six months of the pandemic. Nor did this 'double lockdown' quell the (often slightly cynical) humour often found in Palestine, as evident in this off-hand remark by a life-long resident of Gaza: 'lockdown . . . how can you apply a lockdown in a place which is already the world's largest prison?'

Informants working with national and international NGOs in the oPt report how the resilience of citizens showed itself during the pandemic. Mai Jarrar of the East Jerusalem YMCA explained how the pandemic underscored the strength of citizen action but also the limitations of, for instance, NGOs: 'Covid-19 proved that we [NGOs, international organisations, and local organisations] can't always reach communities on time, we can't be the first responders. Covid-19 taught us to take a step back and let communities do their work'.

The same informants highlighted how in particular established self-help groups (known as protection, resilience, emergency, or CREC (community resilience enhancement committee) groups)¹⁵ took on new and additional roles pertinent to the Covid-19 crisis. These included crucial ‘over-the-doorstep’ awareness raising and health messaging, leading in sanitising communal areas, and ensuring the supply of vital food provisions and other basic necessities to vulnerable families, as well as disseminating hygiene kits, medical supplies (including oxygen support equipment), and prescriptions as they coordinated support to those in quarantine and self-isolation. Funding for these self-help activities came from several sources, such as community members themselves, local authorities, NGOs, and the private sector. Global fundraising platforms (Rebuilding Alliance, n.d.) and connections with the diaspora (El-Farra, 2020) also helped resource groups and institutions with securing resources, notably medicine and healthcare equipment.

Self-help groups engaged in sharing information with the Palestinian authorities, including advocating for additional support for families in isolation. Village groups monitored who in their communities was infected and helped them to isolate. In particular, as many residents depend on working in Israel where infection rates were high, group members monitored the entrance to their communities and advised individuals on the need to isolate in case they might be infected. Lastly, some of these groups helped local groceries that themselves were trying to adapt and remain open for business, using social media to find out what people were seeking, diversifying their products, and making direct deliveries to customers (Zahran, 2020).

Self-help group members in Beit Mirsim, Birin, and Umm al-Khair in the West Bank highlighted that several families established house gardens early in the crisis as a means of supplementing their food supplies. This is a strategy forged over time: the occupation has led many Palestinian families and neighbourhoods to develop such coping mechanisms. In Gaza, Ahmed Sourani¹⁶ reported that farmers had reverted to selling their produce directly from donkey carts and street stalls to make up for income loss owing to the closure of conventional shops and markets—another coping strategy adopted from previous crises.

‘Generally, in Gaza, social cohesion is one of the important coping strategies especially in [a] crisis situation, where people are used to support each other to overcome the crisis’, reflected Nidal Hamdouna from Gaza¹⁷—an observation repeated by other colleagues across the oPt. Mai Jarrar (East Jerusalem YMCA) emphasised the importance of existing solidarity systems, underscoring the importance of *Takaful* and other forms of anonymous giving promoted within Islam. Given its unspecified nature, it is impossible to know the full scale of this support. However, Mai Jarrar said that ‘we must anticipate that during Covid-19, *Takaful* and similar traditional ways of discreet support is working well’.

Many of these community- and citizen-led responses are continuing one year later, but to a lesser extent. The duration of the pandemic, economic and social exhaustion, and fear of infection and the associated income loss and stigma have slowed down or halted activities by some groups.

*Nuba Mountains, South Kordofan, and Blue Nile, Sudan*¹⁸

Life for the population in opposition-controlled Nuba Mountains and parts of Blue Nile state is difficult at the best of times: people have been effectively isolated and cut off from the rest of Sudan since conflict broke out in 2011. Around 1.8 million people have survived in these areas for 10 years without support from state and national government services and the vast majority of external aid agencies otherwise present in Sudan.

During the research period (March–August 2020) no cases of Covid-19 were officially registered in the areas, although meagre health services available here did not have the means to test for Covid-19. By April 2021, the Government of Sudan and WHO still had not been able to supply them with even the most basic testing kits due to political complications.

Still, local authorities (the civil administration wings of the Sudan People's Liberation Movement – North (al-Hilu)) imposed fairly strict lockdown measures during the third week of March 2020 and established isolation/quarantine facilities and handwashing stations at all official entry points to the areas. Schools and markets were closed and movement across and between Sudan, South Sudan, and Ethiopia was further limited. With few exceptions, these restrictions remained in place until October 2020, when schools reopened. The closure of markets and cross-border and cross-line trade served to exacerbate an already dire humanitarian situation (SKBN Coordination Unit, 2020).

With limited radio coverage and mostly non-existent telephone and internet communication at the household or village level, spreading essential hygiene and social distancing awareness relied heavily on direct interaction. Awareness messages were disseminated by local authorities working closely with local NGO staff and youth volunteers—120 students had already been trained in disseminating Covid-19 awareness and advice by April 2020. They would often walk long distances and collaborate with village-level leaders and pre-existing networks of protection groups to ensure that core information, regulations, and advice reached individual households. This work was supported by local radio stations and handouts and visual aids.

Youth members of local peace committees quickly adapted to the new challenges. Prior to the outbreak of Covid-19, these groups focused on reaching across ethnic divides near frontlines and borders, engaging in dialogue with youths on peace and containment of conflict. As restrictions on movement intensified, they refocused their work on sustaining peace in their own localities. They actively identified and supported particularly vulnerable families and sought to improve hygiene practices in their communities through increased availability of water and latrines.

Women, who make up the majority of the members of pre-existing protection groups, used their skills to sew face masks and reinforce messages concerning handwashing. Other groups strengthened their usual farming practices and tried to diversify their sources of income by producing handicrafts. Where successful, profits from these activities were shared among the group. Abdalla Kodi of the local NGO Kamma Organization for Development Initiative (KODI)¹⁹ explained how this influenced

the perception of women in the community: ‘men are starting to recognise the role of women, and how successful they are and can be. Where men depend only on agriculture, women are doing different things, trying different things. The groups that have more women try more alternatives and are more successful’.

Traditional sharing, borrowing (food, salt, soap, and money), and other forms of mutual aid were additional ways of trying to mitigate the negative impacts of Covid-19. As in many other contexts, these coping strategies centred on making do with what was there in situations where truly compensating for loss of income and the increasing price of essential commodities, such as food and soap, was not possible for most people.

Key findings and suggestions to inform future programming by aid actors

Drawing on the research presented above, this section briefly draws out some key findings from citizen- and community-led responses to the challenges posed by Covid-19. This is followed by lessons to inform the efforts of aid actors and local authorities in this and future calamities.

Just another crisis

While Covid-19 quickly became a, if not ‘the’, primary concern of governments and citizens alike in most parts of the world, key informants in more remote parts of Kenya, the oPt, the Philippines, and Sudan all stressed that to them and their communities, it was ‘just another crisis’ to be dealt with and balanced against other problems and challenges.

Volunteerism, youth, women, local leadership, and pre-existing groups

With regard to all of the findings discussed in this section, volunteerism and frequently cooperation among volunteers, authorities, NGOs, and CBOs was a significant element of many efforts to mitigate the spread of Covid-19 and an important ‘stepping stone’ in addressing some of the difficulties stemming from social distancing and lockdowns.

The significant role of women and youths stands out, as do the parts played by local (formal and informal) leaders—be they from the political, administrative, religious, or cultural sphere. While authorities and NGOs in many cases struggled with accessing communities and vulnerable households (because of a lockdown and fear of increasing the level of infection), community groups and volunteers frequently tried to fill this vacuum.

Although this research did not explore explicitly possible differences in the role of women and men in response to the pandemic, or changes in gender norms, the centrality of actions taken by women, and women-led self-help groups, was prominent in the research presented earlier. Previous L2GP analysis has found that women are

strongly represented within local collective action in a crisis situation (Corbett, Carstensen, and Di Vicenz, 2021), and that overall, social inclusion is often strengthened, beyond gender—linked to this is Richardson et al. (2014)'s work on the transformational element of *communitas*. The case studies from Kenya, the oPt, the Philippines, and Sudan relevant to Covid-19 point to a finding also common in other community-led crisis response actions: self-help groups with a large proportion of women appear not only to react very fast, but also to determine alternative and innovative livelihood, income generation, and sharing strategies.

While new groups and collaborations emerged from the Covid-19 crisis, this research demonstrates how pre-existing groups (protection, women, youth, and neighbourhood) were able to respond within hours or days to evolving threats and challenges. Utilising existing contacts and networks, including social media contacts, groups with prior experience of their own citizen- and community-led responses were able to leverage established trust, presence, access, and contextual knowledge (of vulnerabilities, specific behaviours, and customs) to considerable effect. In the case of the sclr groups in Kenya, the oPt, the Philippines, and Sudan, pre-established ways of working, encompassing, for instance, routines pertaining to inclusion, vulnerability, assessments, and accountable practices for managing group cash transfers, enabled responses that otherwise would not have been possible due to lockdowns and restrictions.

Information, awareness, and changing behaviour

Contributions by citizens and self-help groups to spreading and 'translating' Covid-19 information and advice were found to be crucial in relation to the global and local dimensions of the research. Initiatives by local media and leaders and grassroots volunteers were vital, particularly in engaging in 'over-the-doorstep' communication and effecting actual behavioural change by individuals, households, and communities.

Mutual aid: caring, sharing, and the limitations

The research presented in the opening two sections of this paper documents how many parts of the world witnessed a very considerable outpouring of immediate and spontaneous mutual aid, care within and beyond families, and sharing of essential resources with those less fortunate and/or more vulnerable to the Covid-19 crisis.

In contrast to much of the government and aid sector support that followed in some cases, citizen- and community-led responses were fast and flexible. They did not have to wait for proposals and funding approval processes, upon which 'bigger' actors are largely dependent. Much spontaneous mutual aid happened within hours and days, while established bodies often needed weeks or months to get responses under way. It remains impossible to quantify properly this early outpouring of mutual aid, care (kindness), and voluntary redistribution of resources, but all indicators point to it having a very significant scale and impact across the globe. It was crucial not only in the period needed by governments and the aid sector to mount their responses, but also later when it continued to help fill unavoidable gaps in activities by these larger

entities. In several cases, the latter were able to build on and take advantage of the experience harnessed by mutual aid and other grassroots initiatives as their more institutionalised responses gathered speed. As Matthewman and Uekusa (2021, p. 14) concluded in their paper: ‘community groups often succeed where governments fail’. The potential, therefore, for communities to ‘build back better’ means that it should be enhanced. Also suggested in reports from the Philippines, the Myanmar–Thailand border, and Sudan are changes to the usual urban–rural power dynamics, in light of rural communities taking it upon themselves to support citizens in worse affected urban areas.

Another, less explicitly captured, but crucial aspect of the spontaneous and voluntary responses to Covid-19 is the basic mental healthcare implicit in much of this work. Checking in on single households or isolated individuals and families—over the doorstep, through a window, or via telephone and social media, sharing a few words, exchanging news, and expressing words of encouragement—took place in numerous neighbourhoods and communities as the virus spread across the world. Yet, it is rarely mentioned by key informants nor described in detail in the literature reviewed. Perhaps it is just taken for granted. Seen through a psychosocial support lens, such contributions are likely to have been extremely important and at a scale and frequency beyond our immediate understanding. Research in the UK (Bowe et al., 2021) indicates that the positive mental healthcare stemming from mutual aid not only benefits the individual receiving such help and attention, but also may often contribute to the mental well-being of the individuals and groups engaged in offering such support. L2GP’s work with survivor and community-led crisis responses (Corbett, Carstensen, and Di Vicenz, 2021) demonstrated similar two-way social, psychological, and mental health benefits derived from citizen- and community-led responses in a number of other emergencies.

Voluntary mutual aid, care, and sharing were reported to have continued beyond the time period researched. However, key informants in Kenya, the oPt, the Philippines, and Sudan reported that although they were ongoing, sharing of resources (food, money, and water) had decreased by early 2021. Such responses became unsustainable as individuals exhausted their means. This may be connected to another finding: while much mutual aid essentially centred on sharing and redistributing available resources in a given setting, strategies for developing sustainable alternative income sources did not appear prominently.

Lastly, the research did not produce evidence of strong citizen- and community-led responses to other negative consequences (as well as some coping strategies), such as increases in gender-based and domestic violence, early marriage and pregnancy, dropping out of school, and drug abuse.

Suggestions to aid actors and authorities

Based on the findings above and substantiated in the previous sections of this paper, established aid actors and relevant national and local authorities need, at long last, to recognise, understand, and internalise (for instance, build into existing mission

statements, policies, institutional guidance, and training) the crucial part that citizens and community groups (in all their diversity) played as first responders during the Covid-19 pandemic.

The role of mutual aid by grassroots actors documented here underscores what L2GP and others have reported in other crises (Bennett, Foley, and Pantuliano, 2016; Corbett, Carstensen, and Di Vicenz, 2021; Ramalingam, Gray, and Cerruti, 2012; South and Harragin, with J. Corbet et al., 2012). Successful responses to major crises depend on the actions of and relationship between people and groups affected by the event, local and national authorities, and local, national, and international aid actors. Responses by external entities, therefore, can only benefit from being based on a deep understanding of, and respect for, the role played by and the contribution made by each component of this 'response chain' in a given context.

Spontaneous, often volunteer-led mutual aid constituted an important *first response* during the early days, weeks, and months of the Covid-19 crisis, and in some cases offered response strategies and channels, from which subsequent responders (authorities and aid agencies) profited. Women and youths regularly assume prominent roles in such an early response. Supporting and encouraging the formation of strong, resilient, and independently active self-help groups with diverse representation should be an *ongoing* priority for authorities and aid organisations before, during, and after disasters. Years of groundwork with 'sclr groups' in Kenya, the oPt, the Philippines, and Sudan, as well as the 'listeners' clubs' formed around community radio stations in the Sahel, proved to be strong foundations for both immediate mutual aid and subsequent collaboration between these groups, local authorities, and aid actors. The experience, guidance, tools, and approaches (for one example, see Corbett, Carstensen, and Di Vicenz, 2021) to engage meaningfully with citizen and community responses during all phases of a crisis (and between them) are readily available to external aid bodies. Only their will to accept citizens and communities affected by crisis as genuine first responders and to interact accordingly seems to be missing.

Finally, the research points to the importance of understanding the limitations of volunteerism and mutual aid, both in terms of what areas and needs it may be able to address and the time span in which affected individuals and groups can sustain their own responses. Related to such limitations, our research demonstrates how, on the one hand, the pandemic has triggered a crucial, very diverse, and in many ways inspiring and global display of 'shared humanity', volunteerism and mutual aid, yet, on the other, is a brutal reminder and reinforcer of the existing (grotesque) levels of local and global inequality and injustice (Neate, 2020)—against which mutual aid and volunteerism can only do so much.

Conclusion

Quantifying impact is always difficult, but as the evidence of this paper reveals, mutual aid and citizen-led self-help groups made a significant contribution around the world early in the Covid-19 crisis.

The mutual aid efforts identified here are characterised by a considerable amount of volunteerism, spontaneous mobilisation, and sharing of locally available resources. They were particularly important in the initial stages of the pandemic when local groups were able to mobilise rapidly or redirect their focus in response to the emerging situation. Groups drew heavily on traditional methods of organising through meetings and word-of-mouth information dissemination, and they capitalised on newer forms of digital communication and social networking, where this was possible. They filled a vital lacuna as authorities and larger national and international NGOs reacted more slowly, taking weeks or months to implement programmes.

L2GP's research also shows that citizen- and community-led groups leverage the collective power of all members of society, with women and youths at the forefront of many mutual aid initiatives, and formal and informal community and faith leaders playing a vital part. Although they can continue to close gaps in support left by larger-scale operations, this paper also documents some of the limitations in terms of scope, scale, and sustainability of mutual aid and volunteerism, particularly in the face of a protracted emergency.

This research into citizen and community responses to Covid-19 underscores that it is more than time for the aid sector to put its money where its mouth is and provide critical and meaningful backing to citizen-led responses. Since the World Humanitarian Summit and Grand Bargain in 2016, government after government and a vast majority of larger aid agencies have committed to 'localisation' and 'participation' in countless fora and policy statements. Elaborate and well proven ways of supporting mutual aid and community self-help efforts are readily available (Corbett, Carstensen, and Di Vicenz, 2021). Yet, established aid actors remain reluctant to relinquish real power and real control of resources to community first-level responders.²⁰ Mutual aid and self-help groups have been fundamental to the Covid-19 response and established aid actors must now make good on their commitments and deliver tangible progress with respect to transfer of agency, or to put it bluntly, money and power to community-level first responders.

The evidence presented here makes clear that it is critical that relevant authorities and aid entities acknowledge and proactively support and encourage new and existing self-help groups and community-led responses, both to sustain ongoing work and to prepare for future crises. Although there is wide variation in Covid-19 responses across contexts, mutual aid by citizens and self-help groups have made a significant contribution throughout the world.

To return to the apt comment made earlier by Mai Jarrar of the East Jerusalem YMCA: 'Covid-19 proved that we can't always reach communities on time, we can't be the first responders. Covid-19 taught us to take a step back and let communities do their work'.

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Data availability statement

The data that support the findings of this study are openly available at <https://www.local2global.info/research/covid-19/>.

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Endnotes

- ¹ Google search statistics for 'Covid-19' surged globally in March, while peaking in August 2020. See <https://trends.google.com/trends/explore?date=2020-01-01%202020-12-31&q=Covid-19> (last accessed on 31 October 2021)
- ² As L2GP's research into mutual aid to Covid-19 only started in March 2020 and given that it does not have access to independent/reliable data on community-led activities in China, mutual aid in that country was not covered.
- ³ For more information on L2GP's action research on Covid-19, see <https://www.local2global.info/research/covid-19/> (last accessed on 21 October 2021).
- ⁴ See Oxfam's research on emergent agency at <https://oxfamblogs.org/fp2p/launching-a-new-research-and-action-programme-on-emergent-agency-in-a-time-of-covid-want-to-join-us/> and the Overseas Development Institute (ODI)'s work at <https://theodi.org/topic/covid-19/> (last accessed on 21 October 2021) and the resulting paper by Barbelet, Bryant, and Spencer (2020).
- ⁵ The database of examples of community-level action is available on L2GP's Covid-19 research page at <https://www.local2global.info/research/covid-19/> (last accessed on 22 October 2021).
- ⁶ See the community characteristics identified in Matthewman and Uekusa's (2021) paper on disaster communities.
- ⁷ See Google search statistics for the term 'Covid-19', which surged globally between March and May 2020. <https://trends.google.com/trends/explore?date=2020-01-01%202020-12-31&q=Covid-19> (last accessed on 31 October 2021).
- ⁸ Reported from Chiang Mai, Thailand, by Victoria Vorreiter on 30 April 2020.
- ⁹ Reported by key informant after interviews with community leaders in Darfur, Sudan, June 2020.
- ¹⁰ As mentioned in endnote 4, see the Covid-19 research by Oxfam and ODI.
- ¹¹ DanChurchAid (Myanmar) internal report, June 2020.
- ¹² For more information, see <https://ecowebph.org/> (last accessed on 22 October 2021).
- ¹³ As per the *Covid-19 Humanitarian Response Plan: Philippines* (UN OCHA, 2020), approximately 79 per cent of cases originated in Calabrazon, Central Visayas, and the National Capital Region.
- ¹⁴ Numerous videos produced by IREMO are available at <https://www.local2global.info/research/covid-19/> (last accessed on 23 October 2021).
- ¹⁵ These groups have prior experience of what is known as 'survivor- and community-led crisis response' (sclr), and exist under different names in more than 25 communities in the oPt. For more information, see Grundin and Saadeh (2018) and Jarar, Sourani, and Jubran (2020).

- ¹⁶ Comment made to Ahmed Sourani, consultant to Christian Aid, based in Gaza.
- ¹⁷ Comment made to Nidal Hamdouna, senior staff member with DanChurchAid and Norwegian Church Aid, based in Gaza.
- ¹⁸ Subsection informed by local NGO collaborators and the South Kordofan Blue Nile Coordination Unit (SKBN, 2020).
- ¹⁹ For more information, see <https://sigmatechnologies.wixsite.com/kodi> (last accessed on 23 October 2021).
- ²⁰ For more information, see Els (2020) and Metcalfe-Hough (2020).

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