BUILDING RESILIENCE

Tearfund defines ‘resilience’ as the ability to deal with shocks (for example, an earthquake or flood), stresses (such as long-term climate change) and uncertainty (including unforeseen economic decline). We recognise that disasters, violent conflict and other disruptive changes contribute to keeping people trapped in situations of poverty. In light of this, Tearfund works to support vulnerable individuals, households and communities to plan, prepare and lead their own change, so that they suffer less, recover more quickly, adapt and thrive.

Tearfund’s aim across all its work is to build the capacity of local partners to support local communities to use their own resources to solve problems and leverage their own knowledge of the contexts in which they work. By encouraging local and collectively-owned solutions, individuals and communities reduce their dependence on external support (money, training, handouts) over time, building long-term resilience. The emphasis on building the capacity of local partners is essential to Tearfund’s approach. We have learnt that, although the process of building partner capacity is complex and takes a long time, the benefits are far-reaching.

The world is changing: there are emerging economies which means more middle-income countries have resources to respond to needs. In this sense, Tearfund recognises that our role is gradually changing from one of enabler to ‘knowledge agent’, equipping local agencies to respond themselves. It is only when local partners and communities reach the point where they can be self-sufficient that ‘resilience’ is achieved.

Our resilience work focuses on four main areas:

- **Disaster risk reduction (DRR) and climate change adaptation (CCA)**
  Providing support to communities to enable them to anticipate, prepare for, recover from and adapt to disasters and climate change

- **Sustainable humanitarian response which integrates resilience thinking**
  Aiming to reduce communities’ dependency, supporting them to lead their own development while avoiding harm to natural resources or the local environment; and being careful not to exacerbate the underlying causes of the humanitarian crisis

- **Building social capital**
  Supporting communities to lead their own journey out of poverty including developing their own vision, using their own assets and resources, supporting them in taking their own learning journey, and empowering them to speak out to decision-makers and people in power

- **Contributing to resilience across multiple sectors** and issues by taking a ‘systems’ approach to relief or development

What changes have we seen?
Case studies have been selected to reflect three aspects of our resilience work. The first looks at the impact of a project delivered by a Tearfund partner in India which helped 11 communities to be more disaster-ready through DRR. The second case study looks at the role of local faith communities (LFCs) in building social capital by comparing the experience of two communities in Myanmar’s Ayeyarwady Delta in their recovery six years on from Cyclone Nargis (which hit the area in 2008). The third case study presents the findings of research on SHGs, which are shown to build resilience across sectors (including food security, livelihoods, DRR).
Disaster preparedness saves lives in Odisha, India

India’s eastern states of Odisha and Andhra Pradesh often experience the effects of extreme weather patterns, but the past decade has seen two of the most intense cyclones in the region’s history.

In 1999, India’s strongest cyclone on record struck Odisha with wind speeds of up to 200 miles per hour, affecting more than 19 million people, causing mass destruction and more than 10,000 deaths. Odisha was left paralysed, with most coastal districts flooded for several days, roads impassable, and communications systems and infrastructure in ruins.

In 2006, Tearfund partner Discipleship Centre (DC) began a DFID-funded project in 11 villages in Odisha’s Bhadrak and Balasore districts to improve the disaster preparedness of the affected communities and build resilience to future shocks.

The project supported the formation of Village Disaster Management Committees (VDMCs), community task force groups and the development of Disaster Preparedness Plans. Besides building community capacity, DC networked with local government to access funds and programmes available for its villages. In doing this, it went beyond technical DRR solutions and began advocacy work to keep the local government accountable in providing the resources assigned to communities.

Cyclone Phailin

When news of Cyclone Phailin reached Odisha in 2013, these communities reacted quickly and effectively. Phailin was the region’s second-largest cyclone to date. The VDMCs met to discuss possible issues that might emerge and activated all the groups tasked with different roles. They started to track news and information related to Phailin, gathering information from the radio, TV broadcasts and newspapers, and disseminated it to communities. The task forces identified vulnerable groups within the villages and made sure they were safe. Boats were prepared ready for evacuation, safe shelters were found, and enough food, water and medicine were kept safe. The day before the cyclone, community members evacuated their homes and took shelter in local schools and safe buildings.

When the cyclone struck, community members from these 11 villages were housed in the safe shelters along with their cattle, and no one was killed. Abdul, a resident in one of the villages, shares his experience:

‘I heard about Phailin through the task force on the early warning system. They advised the community to move to the nearby school as floods were expected. I moved there with my family and spent nearly 15 days in the school. We took dry food, rice, fuel and candles. We were able to save our lives.’

The overall impact of Cyclone Phailin was less damaging when compared to the previous cyclone whose winds were 40km/h stronger. Twenty-three lives were lost in Odisha as a result of Cyclone Phailin, approximately half of the total of 45 fatalities; this is a significant reduction from the 1999 cyclone which caused more than 10,000 deaths. This reduced impact can be attributed to the preparedness activities of communities, including those encouraged by DC, as well as the support of the government of India which worked hard to implement DRR policy with pressure from NGOs.

Influencing disaster management policy

Tearfund has also supported EFICOR, a national organisation in India engaged in advocacy efforts on the issue of DRR/CCA. EFICOR has worked with the government of India’s National Disaster Management Authority to develop community-based Disaster Management Plans at district level and humanitarian response guidelines at national level. The approaches of both EFICOR and DC work beyond technical DRR solutions and also build social capital by encouraging community access to information and collective preparation for disasters.
Cyclone Nargis struck Myanmar’s Ayeyarwady Delta in May 2008, killing more than 140,000 people and affecting at least 2.4 million – the country’s deadliest disaster on record. Seven years later, the affected communities have recovered to varying degrees, with some still suffering from the effects of the disaster.

A research project was commissioned by Tearfund in 2014 to compare the recovery levels of two affected villages (Village A and Village B) in the Delta. Both villages have Christian and Buddhist residents. Tearfund did not support these villages directly but has supported the partner who is working in this area. The purpose of the research was to understand the role of local faith communities (LFCs), particularly that of the local Christian church, in supporting the resilience and coping strategies of the villages, and to identify the characteristics of the local churches which either support or hinder the growth of social capital.

### Comparing two villages

When Nargis hit the Delta, Village A was a small remote community only accessible by boat with a population of 50 poor households; 87 residents were lost to the cyclone, but the village served as a relief centre for five surrounding villages in the aftermath of the disaster, and the population grew to 62 households as a result. Village B was a slightly larger community of 80 households, also only accessible by boat and reliant on the same livelihoods activities as Village A. Nargis killed 400 people in Village B, 80 per cent of whom were women; every home and boat was destroyed.

The research compared the two villages six years after the disaster, and found stark differences in their levels of recovery and resilience. Village A had recovered extremely well; the population had grown to 70 households and the community was highly organised with improved infrastructure including raised walking paths and a new road connecting it with the main dock, which improved access to nearby islands. In contrast, Village B showed very few signs of resilience; most shelters had not been improved in six years, and the village was still only accessible by boat. This slow pace of infrastructure reconstruction indicated a lack of resources and inability to organise collectively for recovery.

### The role of the local church

The research correlated these differences in recovery levels with the nature of the local church in each of the villages. The church in Village A was very inclusive of the Buddhist community, which fostered a sense of unity; the pastor was committed to equality and acceptance regardless of religious differences. In contrast, the church in Village B encouraged suspicion of the Buddhist community, which led to social segregation and damaged any hope of building a sense of community. The different leadership styles of the pastors was also seen as significant; Village A’s pastor was community-focused, encouraging collective action, while Village B’s was more authoritarian: he maintained power by refusing to share information and making autonomous decisions.

The strong sense of community in Village A led to good relationships with other nearby villages and external agencies; these networks enabled access to social support including education, a health clinic, loans and boats for emergencies. Village B’s segregation led to a situation where the prospect of sharing resources gained by external sources across religious groups was unlikely. This resulted in poor overall recovery for Village B.

Tearfund’s approach of working with LFCs is rooted in the knowledge that religious communities are increasingly important generators of social capital through their potential to build networks and trust between groups. This research has highlighted the key principles for LFCs in building resilience, principles which Tearfund encourages through the CCM process.
Self-help groups (SHGs) building resilience across multiple sectors in Ethiopia

In 2002, Tearfund helped introduce the SHG approach to Ethiopia through a local partner organisation. The first five SHGs were started by 100 women in Nazareth (Adama) town in central Ethiopia; as of 2013, the number of SHGs as part of Tearfund-funded programmes had increased to more than 12,000 across the country, impacting more than 1 million people – which equates to one in 80 people in the whole country. This growth happened primarily because local churches have embraced SHGs, taking on an inclusive approach, replicating the model using their own resources.9 As such, the cost of replication has been very low; in total, the programme cost an average of £50 per SHG member, or £10 per beneficiary.10

SHGs have had profound impacts on their members and demonstrate a good model for building resilience across multiple sectors (food security, livelihoods, DRR). Relationships are at the core of the model and are critical to the programme’s success; members speak consistently about increased confidence and skills, the ability to relate better to one another, and the sense of support that they feel from one another. At the same time, the benefits are also monetary. SHG members start to save small amounts each week and as their savings grow, they are able to start to give out loans. Initially, loans are typically taken to pay for school expenses, health costs; as the SHG matures, loans are used predominantly for income generation. As their income-generating activities grow, SHG members are able to increase their expenditure: evidence shows that school enrolment levels increase, use of private doctors and clinics increases, the amount spent on food (both quality and quantity) and clothing increases, and more families are able to buy their own houses.

Working together for change

Simultaneously, the SHG members work together to learn about issues facing their community, and they take action. In this sense, the SHG acts as an agent for social change; women have become more empowered in their relationship with their husbands and the wider community, and also have begun to speak out on practices such as female genital cutting. Environmental issues have become more prominent as people take action to reverse degradation and clean up polluted areas, and women have become more engaged in political processes.

The SHG model delivers both humanitarian and development gains. The initiative was conceived as and remains a development programme, and it is creating long-term transformational change.

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9 Although the SHG approach has been supported by local churches, groups include community members from all religious and non-religious backgrounds.
10 To see the full cost benefit analysis report, follow this link or visit our TILZ site (http://tilz.tearfund.org).
Findings from Ethiopia indicate that communities can cope better with droughts and other shocks as a result of their internal 'safety nets', even within the first few years of SHGs being set up. This means that relationships of trust are built up between SHG members, creating a support system which avoids reliance on outsiders – donors, NGOs or moneylenders – for support in times of crisis. This is ultimately a sign of a resilient community.

A cost benefit analysis (CBA) of these SHGs was commissioned by Tearfund in 2013 and found that the model delivers very high returns, as much as £173 for every £1 spent, and is demonstrating transformational change. In fact, these are some of the highest returns in the development and risk reduction literature on CBA.

‘Before I was a beggar with my children and lived under a tree. I was sick and we just took what we could get. We heard about this project from the facilitators. Now we are able to work, feed our children and send them to school. We started saving 25 cents (£0.01) per week and today I sell hot pepper and oil. Before, we were called ‘garbage’ but now we have names that show respect. We are able to afford clothes, keep clean, work alongside others and send our children to school. I used to eat only when I got food but today I can eat shiro [a lentil stew] with chopped onion and oil.’

SHG member, Ethiopia

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Key Lessons

- Working through partnerships takes longer and is harder, but is essential as the scale of need increases and because local people know their context better than NGOs or outside agencies do.

  Resilience is about communities learning how to help themselves and being less dependent on external inputs (money, training and handouts).

- DRR and CCA responses on their own are no longer sufficient to help communities become genuinely resilient.

  To ensure they are truly resilient, Tearfund supports communities to work out their own solutions. Tearfund recognises the need to help reduce dependency by encouraging use of local resources (assets) and skills (capacities), and providing access to information. In addition, Tearfund encourages individuals and communities to innovate and support each other (for example through SHGs). Through this, specific DRR and CCA principles and approaches can be applied as and when they are seen fit within each context.

- Encouraging dialogue within communities across divides (ethnic, religious or other) and with government is crucial for building resilience as this lays the groundwork for dealing collectively with problems.

  Division and segregation is detrimental to building resilience within communities as it deters collective action in finding solutions to problems.

- Developing ways to build community relationships and trust is essential for building resilience.

  Without this, our work becomes a series of short-lived projects without ongoing sustainability.