

Local Community Preparedness for Covid-19 Pandemic





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Abbreviations

BD	Brčko District
SWC	Social Welfare Centre
FBiH	Federation of Bosnia and Herzegovina
LGU	Local Self-Government Unit
MZ	local communities/mjesne zajednice
CSO	Civil Society Organisations
MRCO	Municipal Red Cross Organisation
MES	Municipal Emergency Staff
RS	Republika Srpska
S.G.	Stari Grad
UNDP	United Nations Development Programme

Introduction and methodology

Needs of the population in Bosnia and Herzegovina is best known to local self-government units (LGUs), mainly through their local communities/mjesne zajednice (MZs). When adequately capacitated with the necessary resources, they are in a position to provide more effective assistance to the most vulnerable.

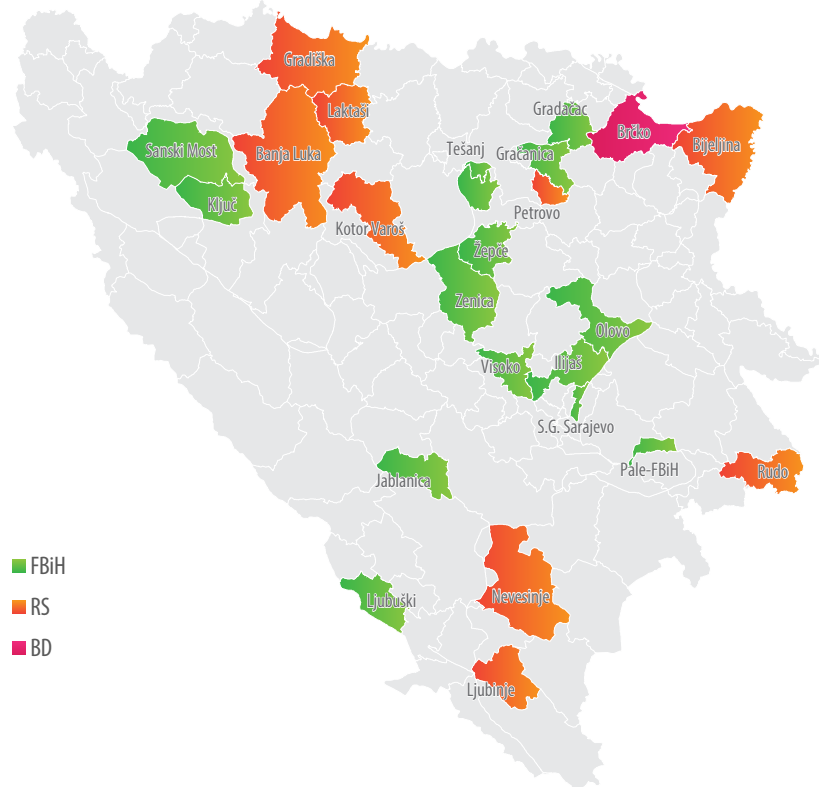
In 2015, UNDP began implementing the project “Strengthening the Role of Local Communities/Mjesne Zajednice (MZs) in Bosnia and Herzegovina” jointly supported by the Government of Switzerland and the Government of Sweden. In March 2020, the project launched its phase two for the period 2020-2024. The end goal of Phase Two of the project is to improve the quality of life of citizens in Bosnia and Herzegovina by strengthening MZs.

As part of the project “Strengthening the Role of MZs in Bosnia and Herzegovina”, UNDP conducted three surveys to examine the impact of Covid-19 on MZs and their response to the challenge. The ultimate objective is for UNDP to improve or adjust its activities through existing projects, whilst taking into account the specific needs of MZs.

The survey covered all partner municipalities/cities from Phase One of the project, that is, 24 LGUs and 136 MZs, and 54 civil society organisations (CSOs). Surveys were e-mailed to MZ Project Coordinators in LGUs on 30 April 2020, with a deadline for responses by 15 May 2020. The deadline was informally extended to 22 May 2020 to facilitate a greater scope. The survey was conducted electronically (via e-mail), with follow-up calls, and additional clarifications provided via e-mail and telephone.

Of the three questionnaires, LGUs showed the highest response rate. Within the deadline, 23 LGUs or 95.8% responded to the survey. The distribution of respondents by Entities and the Brčko District (BD) with associated LGUs is shown in Figure 1.

Figure 1. Distribution of LGUs where surveys took place



*Zenica didn't complete the JLS survey in given timeframe, but MZs and OCDs in Zenica did

When it comes to MZs, the survey included 128 MZs across 24 LGUs, and the response rate was 87.7%.

The survey covered 54 organisations, of which 39 responded to the survey, which is a response rate of 70.4%. The distribution of surveyed CSOs and MZs by LGUs is shown in Table 1.

Table 1. Distribution of surveyed CSOs and MZs by LGUs

Entity	LGU	Number of CSOs	Number of MZs
FBiH	Gračanica	4	6
	Gradačac	3	6
	Ilijaš	0	6
	Jablanica	3	5
	Ključ	3	5
	Ljubuški	0	6
	Olovo	0	6
	Pale FBiH	2	2
	Sanski Most	2	6
	Sarajevo S.G.	1	6
	Tešanj	3	6
	Visoko	2	2
	Zenica	1	6
	Žepče	3	6
Total for Federation of BiH		27	74
RS	Banja Luka	0	6
	Bijeljina	2	6
	Gradiška	1	6
	Kotor Varoš	1	5
	Laktaši	1	6
	Ljubinje	0	4
	Nevesinje	2	5
	Petrovo	1	5
Rudo	3	5	
Total for RS		11	48
BD	Brčko	1	6
Total for BiH		39	128

In Bosnia and Herzegovina, the first case of infection with a novel coronavirus type Covid-19 was recorded in Banja Luka on 5 March 2020. According to the official data of the BiH Civil Affairs Ministry, by 22 May 2020 (informally extended deadline for completing the survey) there were 2,372 confirmed cases, and at the time of writing (13 July) there were 6,981 confirmed cases infected with Covid-19 virus. This is a testament that the needs identified during the survey are still valid and necessary.

The question structure consisted mostly of dichotomous variables (Yes/No answer) and open-ended questions. Numerical variables were used in slightly fewer numbers. In open-type questions, during the analysis, a qualitative method was used in content analysis. The aim was to find appropriate transversal themes from the textual answers, which resulted in development of additional variables.

Just as in the Entities, in BD too there are certain differences in the concept of local self-governance, especially in the organisation of local self-government units¹, the answers were stratified, that is, grouped by the Entity for LGUs survey. In the case of the survey filled out by MZs, the results were stratified by municipalities, for an in-depth show of characteristics by particular municipality. In the case of CSOs, due to a lesser extent of observations, stratification was done for the Entity level and the BD.

Questions containing several sub-questions were separated to allow for a qualitative analysis. Also, a small number of respondents wrote down answers to questions that were not asked, but these answers were not the subject of analysis.

The principle applied in qualitative analysis was that one phrase will not be assigned more than one category, that is, one phrase will not be categorised more than once. For example, if the answer contains the text “helping 65+” and the identified categories are “helping 65+” and “helping socially excluded categories”, only “helping 65+” will be categorised, although category 65+ can also be categorised as socially excluded categories. In this particular case, category 65+ is presented separately from socially excluded categories due to the specificity of the Decree of the Entity Crisis Staffs, which imposed a ban on the movement of those over 65 years of age.

The general experience is that one of the disadvantages of open-ended questions is the lower response rate compared to questions with multiple-answers offered. This means that the person filling out the questionnaire may overlook mentioning something, which does not mean that it did not happen. Thus, for example, in the survey of LGUs, question “32 - How did MZs respond to the new tasks?”, only 3 LGUs pointed out that MZs were engaged in disinfection. And in the question with Yes/No answer offered, 12 LGUs answered that MZs were engaged in disinfection activities. For this reason, the conclusions chapter gives priority to answers to the questions with multiple answers offered.

In the survey intended for MZs, numerical variables referring to the quantities of packages, masks, protective equipment, etc. which were delivered to the population are not included in the analysis for the reason that the question asked for the quantity to be expressed either in kilogrammes or in pieces. Only a handful of MZs indicated in their response whether it was kilogrammes or pieces. Others entered numbers, but it is unclear what the amount is, therefore, these variables were not included in the analysis.

The analysis is expressed in absolute amounts and not as percentages, in order to accurately see the number of LGUs, that is, MZs, while the percentages in smaller samples may lead to a wrong conclusion.

The structure of this report is divided into three sections, the first part which analyses the survey according to the LGU, the second part which deals with the analysis of MZs and the third part which deals with the analysis of CSO questionnaires. Each chapter follows the order of the questions from the survey. Surveys can be found in the Annex. The report ends with a section on Conclusion and recommendations. Recommendations are presented in a matrix and divided into recommendations with shorter and longer deadlines required for implementation.

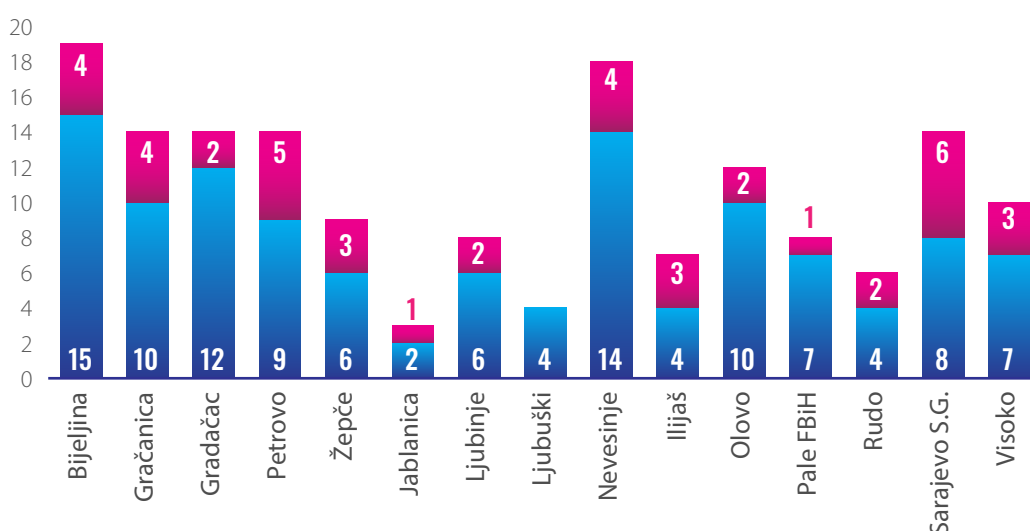
1 Local Self-Governance in Bosnia and Herzegovina, Huškić J., 2017, <https://hrcak.srce.hr/file/266037>

1. Impacts of the coronavirus pandemic on partner LGUs

1.1 Organising LGUs and crisis management during the Covid-19 pandemic

All LGUs have established crisis staffs. In addition to LGU departments, health institutions (8 in FBiH, 5 in RS), Red Cross (8 in FBiH, 4 in RS), civil protection (4 in FBiH, 3 in RS), police (6 in FBiH, 3 in RS, 1 BD), and veterinary clinics (4 in FBiH and 1 in RS) were engaged in crisis staffs. Fewer city assemblies/municipal councils were engaged, as well as social welfare centres, schools and PR services, and local media. Crisis staffs did not have representatives from MZs. Bijeljina had the most members in its crisis staff and Jablanica the least (Figure 2). In each LGU, men dominated the crisis staffs. Overall, 74% of the members of the crisis staff were men.

Figure 2. Members of LGU crisis staffs by gender in LGUs



Note: 15 LGUs out of 23 provided the gender breakdown of their crisis staff.

Crisis staffs mostly met several times a week, daily or were in permanent session (11 out of 13 LGUs in FBiH, 7 out of 9 in RS and BD).

The staffs received guidelines or instructions from a higher level of government, in the RS most frequently from the Entity Crisis Staff (in 8 out of 9 LGUs), and in the FBiH from the cantonal civil protection staffs (10 out of 13 LGUs). BD received instructions from the BiH Ministry of Security.

Table 2. Question 2 - Which higher level body(s) provided instructions to your crisis/emergency staff?

Institution	BD	FBiH	RS
Entity government			3.0
Entity Crisis/Emergency Staff		4.0	8.0
Entity Civil Protection Administration		7.0	4.0
Ministry of Security of BiH	1.0		
Cantonal Civil Protection Staff		10.0	
Cantonal Crisis Staff		2.0	
Other institutions		3.0	4.0

On specific assistance, a total of 9 LGUs stated that they did not receive assistance (6 in FBiH and 3 in RS). The biggest help was in purchasing protective equipment and disinfectants.

LGUs receiving information about the number of infected and tested from higher levels of government was more common in the RS (7 out of 9 LGUs, while in the FBiH this was the case in 9 out of 13 LGUs).

Table 3. Question 2.2 - Does your LGU receive daily information from higher levels of government on the number of infected and those tested?

Answer	BD	FBiH	RS
Yes		9.0	7.0
No	1.0	4.0	2.0
Total	1	13	9

All LGUs were organised in such a way that employees were given new responsibilities and obligations, and three LGUs (2 in FBiH and BD) pointed out that they did not have enough employees engaged in infection prevention activities. Most LGUs attended to certain measures, such as ensuring social distance, and enabled the provision of services to citizens through virtual channels (10 in FBiH and 5 in RS). Some municipalities showed greater proactivity by participating in organising quarantines (2 in FBiH and 1 in RS), forming a mobile team to help the elderly (1 in FBiH), or by assisting other institutions (**Table 4**).

Table 4. Question 3.3 - Describe how reorganisation was done

Answer	BD	FBiH	RS
Reorganisation for the purpose of social distance		10.0	7.0
Permanent engagement of the City Civil Protection Staff/Emergency Staff ...		2.0	2.0
Assistance to other institutions (CP, Mol) in response to the pandemic (e.g. organisation regarding the establishment of quarantine ...)		2.0	1.0
Workplace protection measures (gloves, disinfection ...)		2.0	
A mobile team put in place to help the elderly		1.0	
Operational centre formed		1.0	

Most of the services provided by LGUs during the pandemic were related to access to information (6 in FBiH and 2 in RS) and issuance of documents (1 in FBiH and 3 in RS).

The work of municipal services is mostly organised part-time (11 LGUs) or as work from home (12 LGUs), (Table 5).

Table 5. Question 3.6 - Please describe how municipal services work in times of crisis? [shorter hours (from-to), several groups, teleworking, other...]

Answer	FBiH	RS	BD
Shorter hours	6.0	4.0	1.0
Teams (on-call)	2.0	4.0	
Teleworking	6.0	5.0	1.0
Shift work	2.0	4.0	
Full time		1.0	

In 16 LGUs (BD, 7 in FBiH and 8 in RS) some employees worked from home through *online* modalities.

All LGUs, that is, 23 of them stated that their website was operational, and 61% of them had a surge in website inquiries (7 in FBiH, 6 in RS and BD).

Almost half of LGUs plan to introduce new e-services for citizens (6 in FBiH, 4 in RS and BD). Proposals of LGUs mostly concerned the introduction of *eCitizen*², and digitisation of the registry office (more details in **Table 6**).

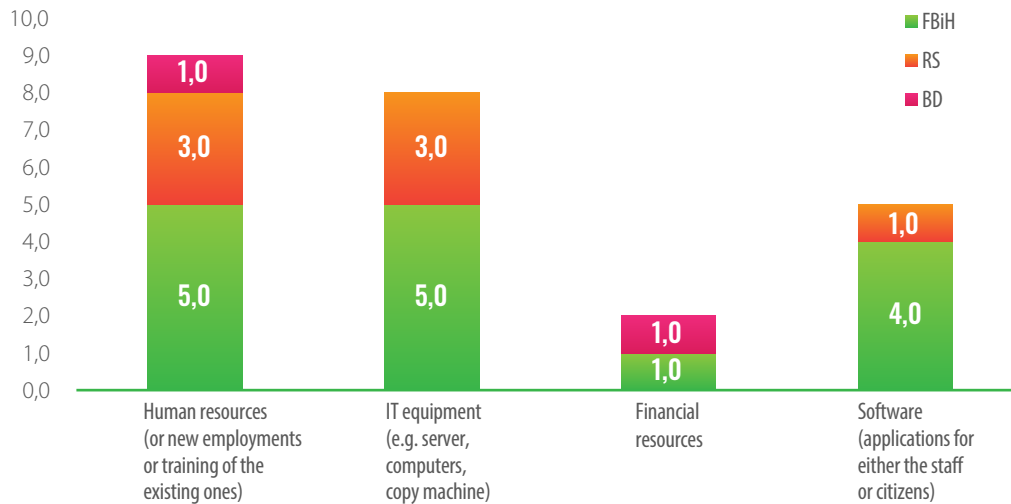
Table 6. Question 3.18 - In case you are considering introducing new services for citizens, which services would be a priority?

Answer	FBiH	RS	BD
Ask a councillor	1.0		
E-signature	1.0		
Project monitoring	1.0		
Complaints	1.0		
<i>eCitizen</i>	3.0		
Public hearings	1.0		
Monitoring sessions	1.0		
<i>Introducing ChatBot</i>	1.0	1.0	
Authentication of documents		1.0	
Implementation of e-counter support services	1.0		
Information flow		2.0	
Digitisation of the Department of Physical Planning		1.0	1
Digitisation of the Registry Office	1	1.0	1
Exercising social protection rights	1.0		

² *eCitizen* is a project implemented through Municipal Environmental and Economic Governance (MEG). The primary purpose of the *eCitizen* mobile application is to enable simple and transparent communication between citizens and local government. The application allows citizens to submit a complaint or inquiry to the local government, after which they receive a response from the administration within 48 hours. In addition, *eCitizen* mobile application also aims to inform the public in unforeseen and emergency situations, such as service interruptions and service information. More info available at <https://www.ecitizen.ba/>

Of the 11 LGUs considering the introduction of new e-services, only 1 has no need for donors.³ Ten out of 11 LGUs (7 in FBiH, 4 in RS and BD) expressed the need for a donor, most often in financial terms (7 in FBiH, 7 in RS and BD) and in human resources training (5 in FBiH, 4 in RS and BD).

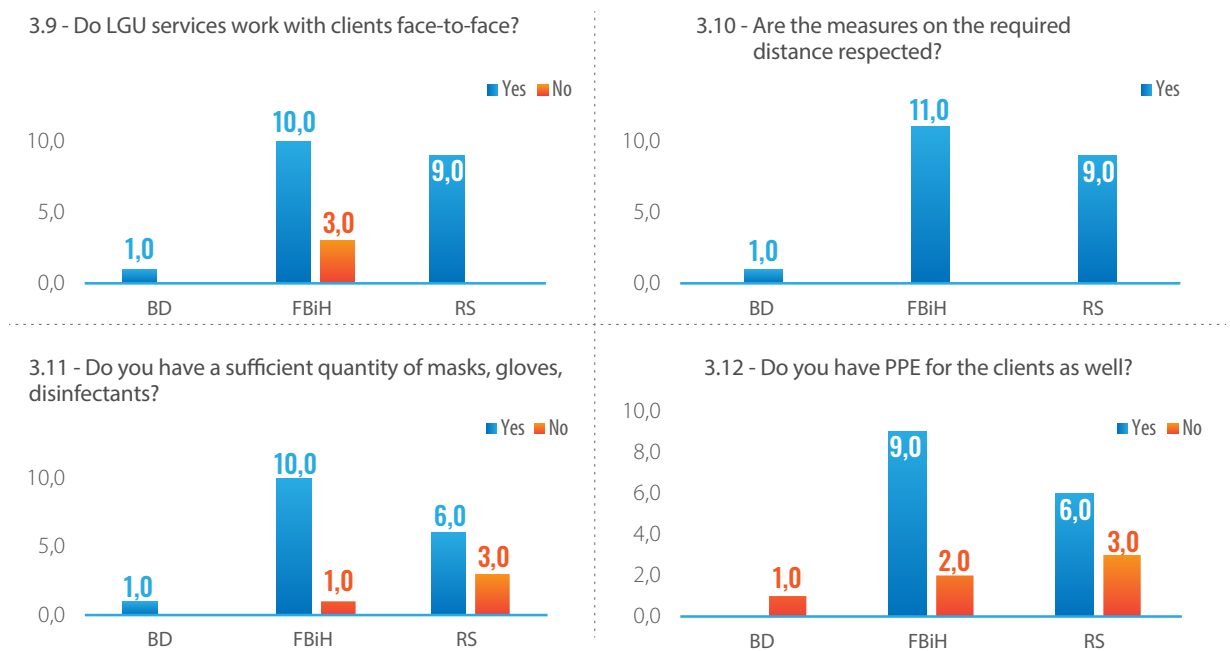
Figure 3. Question 3.19 - What resources does your local government require to enable the introduction of new e-services?



Fourteen LGUs introduced new services in response to the crisis (9 in the FBiH and 5 in the RS), and 8 stopped providing certain services during the pandemic (5 in the FBiH, 2 in the RS and BD).

Of all LGUs, only 3, in the FBiH, did not work with clients face-to-face, while all respected the measures on the required distance. A total of 4 LGUs that worked with clients did not have sufficient protective equipment and disinfectants, and 6 LGUs did not have protective equipment for clients either.

Figure 4. Overview of answers to questions 3.9 throughout 3.12



³ LG Laktaši is a partner in the pilot project "Improvement of municipal services in Serbia and BiH by introducing ChatBot platform", and funds for the implementation of this project have already been provided by a donor (GIZ).

In order to better respond to the pandemic, LGUs showed the greatest need for financial resources (15), and training (10), (Table 7).

Table 7. Question 3.21 - What are the needs of LGUs when it comes to strengthening your pandemic response capacity? (human resources, finance, training, other)

Answer	FBiH	RS	BD
Human resources	1.0	1.0	1.0
Financial	7.0	7.0	1.0
Trainings	5.0	4.0	1.0
Logistics for quarantine (transport, disinfection, protective material, waste management...)		1.0	
Procurement of protective equipment	3.0	1.0	
Disinfectants	2.0		

Seventy percent of LGUs had problems in procuring funds for infection prevention and mitigation (8 in FBiH, 7 in RS and BD). Most of the proposals for overcoming the consequences of the spread of the pandemic focus on adequate planning and ensuring required reserves, as well as those that require a change in the legislative framework, more specifically the introduction of clearer procedures for emergency procurement (Table 8).

Table 8. Question 4.1 - How to overcome procurement difficulties in the future?

Answer	FBiH	RS	BD
Donations	1.0		
Amendments to laws and decisions that have application in emergency situations		2.0	
By planning and establishing commodity reserves (disinfectants, protective equipment, personal hygiene products)	2.0	2.0	
Help from other levels of government and donors		1.0	
Clear procedures for urgent procurement		1.0	1.0
Timely actions	1.0		

1.2 Health measures to prevent pandemic

All LGUs, except 4 in FBiH, had quarantine in place. The greatest needs expressed include beds, pillows, mattresses, blankets and disinfectants (Table 9).

Table 9. Question 5.2 - Do LGUs have additional needs for better functioning/equipping of quarantine?

Answer	FBiH	RS	BD
Protective equipment		1.0	
Disinfection (means, tunnels ...)	1.0	2.0	
Pillow, mattress, blankets, bed	3.0	2.0	1.0
Transport from the border to quarantine		1.0	
Quarantine maintenance (cleaning, food, garbage collection)	1.0	1.0	
Space for quarantine			1.0
Wheelchair	1.0		
Equipment for the functioning of the practice	1.0		1.0

In 87% of LGUs, the police played the leading role in ensuring the implementation of measures. In addition, the municipality itself played an important role (19), especially municipal departments such as: departments for communal inspections, sanitary inspections, economy, department for inspection affairs, general administration and social activities.

Only 2 LGUs (Petrovo and Gradiška) in RS out of a total of 23 respondents stated that MZs were not engaged in the implementation of protection measures. The engagement of MZs primarily focused on informing the population (8 in FBiH, 3 in RS and BD), collecting population-related data, whether it is socially vulnerable to data on the arrival of people from abroad (8 in FBiH and 2 in RS) and distributing parcels FBiH, 5 in RS and BD).

The greatest challenge according to LGUs was the violation of isolation measures, violation of the movement ban and non-wearing of protective masks (Table 10).

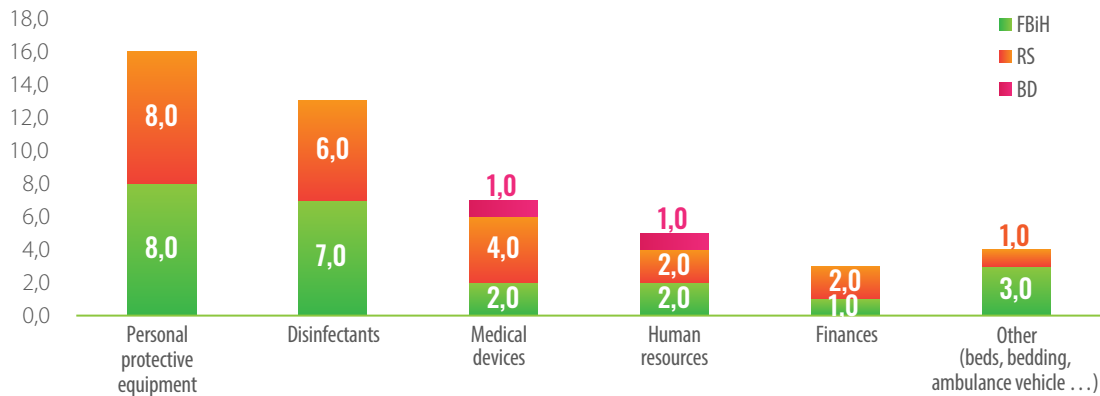
Table 10. Question 5.6 - What are the biggest challenges faced by those responsible for implementing the measures? (indiscipline of the population, non-compliance with work suspension, violation of movement bans, violation of isolation measures...)

Answer	FBiH	RS	BD
Not wearing protective masks	1.0	2.0	
Not maintaining social distance		1.0	
Violation of isolation measures	2.0	2.0	1.0
Violation of the ban on movement	2.0	1.0	
Non-compliance with work suspension	2.0		

LGUs believe that awareness-raising activities (media campaign ...) would help to better comply with the measures, specifically 5 in FBiH, 3 in RS and BD. In addition, LGUs proposed the following activities: procurement of protective equipment and distribution to persons in public areas, education of building managers, use of ICT, clearer penal provisions, but also a letters of appreciation from the mayor.

During the survey period (April 29, 2020 to May 22, 2020), 70% of LGUs stated that they currently have the greatest need for personal protective equipment. In addition, the needs for disinfectants and medical devices were expressed (Figure 5).

Figure 5. Question 6 - What are the current biggest needs of LGUs related to the prevention of the spread of the virus? (personal protective equipment, medical devices, disinfection, staff, other...)



1.3 Vulnerable categories and social protection

New developments also led to the emergence of new vulnerable categories. The needs assessment of vulnerable categories was done by 78% of the surveyed LGUs (13 in FBiH and 5 in RS). The needs assessment was usually done by SWC, either independently or in cooperation with the Red Cross, MZs, CSOs, health centre. Most often, assessments were made on the basis of existing records, which were supplemented in accordance with the legislation in the field of social protection, but also in coordination with the crisis staff.

In two cases in FBiH (Pale FBiH and Sarajevo S.G.) a social map was developed.

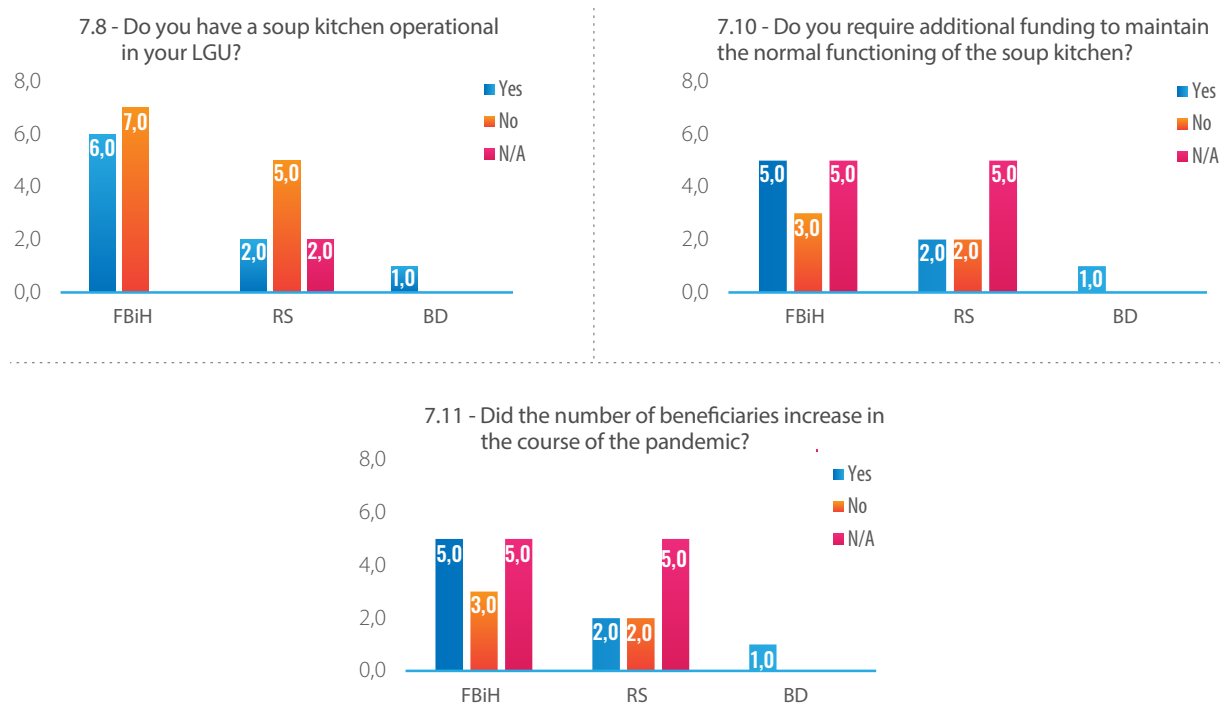
All LGUs (23) stated that they had an updated list of those in social need and that they provided assistance packages to vulnerable categories. The packages were most often delivered by volunteers (10 in FBiH, 6 in RS and BD), either on their own initiative or through non-governmental organisations or volunteer service.

The Red Cross (9 in FBiH, 4 in RS and BD) and MZs (7 in FBiH and 5 in RS) also played a significant role in distribution of packages.

MZs have a significant role in helping vulnerable categories, and LGUs see a key role of local communities in package distribution activities (masks, food, medicines), (10 in FBiH, 6 in RS and BD), as well as mapping of those in need (8 in FBiH and 5 in RS).

Nine of the 23 LGUs stated that they have a soup kitchen operational in their LGU, and 8 stated that they needed additional funds to maintain the normal operation of the soup kitchen, as well as that the number of soup kitchen users increased during the pandemic (**Figure 6**). The average number of soup kitchen users surveyed by LGUs is 249.

Figure 6. Overview of answers to questions 7.8, 7.10 and 7.11



A total of 83% of LGUs (12 in FBiH and 7 in RS) pointed to lack of money as the biggest challenge faced by LGUs in protecting vulnerable categories in this crisis. In addition, LGUs cited other challenges such as (lack of life necessities, lack of staff, and lack of information), (Table 11).

Table 11. Question 7.13 - What are the biggest challenges that your LGU faces in protecting the most vulnerable categories in this crisis?

Odgovor	FBiH	RS
Lack of money	12,0	7,0
Lack of staff	2,0	2,0
Lack of living necessities (food and hygiene)	6,0	3,0
Lack of information	2,0	1,0

Note: BD did not submit its answer to question 7.13.

Seventy percent of LGUs have noticed the emergence of new vulnerable categories that traditionally do not belong to vulnerable categories (10 in FBiH, 5 in RS and BD).

As new vulnerable categories, the FBiH mostly lists the newly unemployed, those affected by movement ban and patients with health risks. When citing the newly unemployed, RS refers to those who have returned to RS, that is, local emigrants who returned to RS due to the Covid-19 virus pandemic.

Only 8 LGUs (7 in FBiH and 1 in RS) have a support system for new vulnerable categories, and 4 LGUs (2 in FBiH and 2 in RS) have stated that they are preparing a support system for new vulnerable categories. LGUs that do not have a support system for new vulnerable categories nor are currently preparing a support system for new vulnerable categories, believe that their needs would be best met through a system of several different measures (work, subsidies, psychological assistance, etc.), (Table 12).

Table 12. Question 7.19 - What is the most beneficial thing to do for new vulnerable categories?

	FBiH	RS	BD
Support system for new vulnerable categories (jobs, subsidies for utilities, psychological assistance ...)	5.0	1.0	
Financial assistance	3.0	2.0	
Database of beneficiaries with their needs (social map ...)	1.0	1.0	1.0
Assistance of volunteers	1.0	1.0	
ICT support	1.0		

Fourteen LGUs (10 in FBiH and 4 in RS) stated that they had undertaken activities so that all children could attend classes remotely, and only 3 LGUs in FBiH stated that they had cooperated with MZs in solving this problem. LGUs (7 in FBiH and 3 in RS) helped by mainly collecting information on needs, and 5 of them (3 in FBiH, 2 in RS) also participated in the procurement of equipment.

As for domestic violence, only 2 LGUs reported an increase in domestic violence during the self-isolation of the population (1 in FBiH and BD). This information should be taken with certain reservations as there is a possibility that the LGUs and crisis staffs themselves were not informed about these cases, which may be partly due to the low participation of women in crisis staffs.

Three LGUs in the FBiH and 6 in the RS stated that they have support services for persons exposed to violence, such as SOS phone-lines, safe houses. In BD there is no support system for people who are exposed to violence, and in RS 2 services are not working.

Thirteen LGUs (8 in FBiH, 4 in RS and BD) have introduced alternative services or support measures, including 24-hour on-call duty, social hubs, and psychological counselling. LGUs that did not introduce alternative services state that the reason is the service is already in place (2 in FBiH and 2 in RS) and that there was no need (1 in FBiH and 1 in RS), and one LGU in FBiH stated lack of finances as a reason.

The private sector (11 in the FBiH and 8 in the RS) also played an important role in helping vulnerable categories. The most frequent role of the private sector was in the procurement and delivery of food packages, hygiene products, protective masks and disinfectants.

During the pandemic, SWXs contributed the most by mapping needs and delivering packages to vulnerable categories.

1.4 Economy and business

A total of 61% of LGUs assessed the negative impacts of the pandemic on the economy (10 in FBiH and 4 in RS). Administrative data and direct contacts were mainly used for this activity, and in 2 cases (1 in FBiH and 1 in RS) a survey was conducted.

According to estimates of LGUs, there were more economic entities in the RS that discontinued their operation fully (either in absolute or relative values) than in the FBiH. Nevertheless, the estimated number of unemployed is higher in the FBiH than in the RS.

Table 13. Estimates of negative impacts of Covid-19 on employment

Question	FBiH	RS	BD
Question 14. How many business entities in the LGU have completely stopped working? (number)	197	275	
Question 14. How many business entities in the LGU have completely stopped working? (%)	28.14	68.75	50
Question 17. How many lost their jobs? (number)	1.765	947	300

Mitigation strategies for the economy were adopted in 10 LGUs (6 in FBiH, 3 in RS and BD) and in one LGU in FBiH a programme of measures was being developed. In order to mitigate the impacts of the crisis, 65% of LGUs provided incentives to employers (8 in FBiH, 6 in RS and BD).

The most common measures implemented by LGUs included subsidising utility fees, renting billboards, subsidising interest rates (5 in FBiH, 2 in RS), and rent policies owned by LGUs (3 in FBiH and 3 in RS).

Also, 13 LGUs (7 in FBiH, 5 in RS and BD) opted for budget reallocation in order to mitigate the crisis. LGUs responded differently to the question on how they directed their funds. Most often, the funds were directed to help new vulnerable groups, procurement of protective equipment, procurement of medical equipment, assistance to the economy ...)

Nine LGUs also initiated donor fundraising activities.

Best practices: Case study Bijeljina:

The Bijeljina City Administration, following the initiative of the Economic Council of the City of Bijeljina, initiated activities to collect donor funds within a charity activity "A ventilator for Srpska", initiated by a Bijeljina businessman and owner of Elvaco metpro and TRB.

Collected funds were paid to the bank account of the City Organisation of the Bijeljina Red Cross, and were spent on the basis of the needs expressed by the PHI Hospital Sveti vračevi, in meetings of the City Emergency Staff.

Over 100 business entities and public institutions took part in the action, and many individuals joined in.⁴

In 16 LGUs (9 in FBiH, 6 in RS and BD), economic entities reoriented their activities to Covid-19 prevention (production of protective equipment and means).

⁴ By May 4, 2020, a total of BAM 2,649,876.01 was paid to the account of the City Organisation of the Bijeljina Red Cross. The amount was used to purchase: portable ventilator TRILOGY 202 PHILIPS – 1 pc. (Hospital Sv. Vračevi); Vitavue monitor 10 – 5 pcs. (Hospital Sv. Vračevi); monitor Draeger VISTA 120 – 5 pcs. (Hospital Sv. Vračevi); protective suits – 200 pcs., visors – 200 pcs., safety glasses – 100 pcs. (Bijeljina Public Health Centre, Bijeljina Health Centre, Hospital Sv. Vračevi); protective suits – 17 pcs., medical visors – 17 pcs., goggles – 17 pcs. (Bijeljina Health Centre); ventilators AVENTA-M – 50 pcs.; defibrillator CARDIO AID 260B – 1 pc. (Health Centre Bijeljina); laminar chamber Safe Fast Top 212-D – 1 pc. (Hospital Sv. Vračevi).

Nine LGUs (5 in FBiH and 4 in RS) allocated public areas for agriculture (Table 14).

Table 14. Question 23.1 - To whom were public areas allocated for agriculture allocated?

	FBiH	RS
Business entities	4.0	2.0
Individuals	4.0	4.0

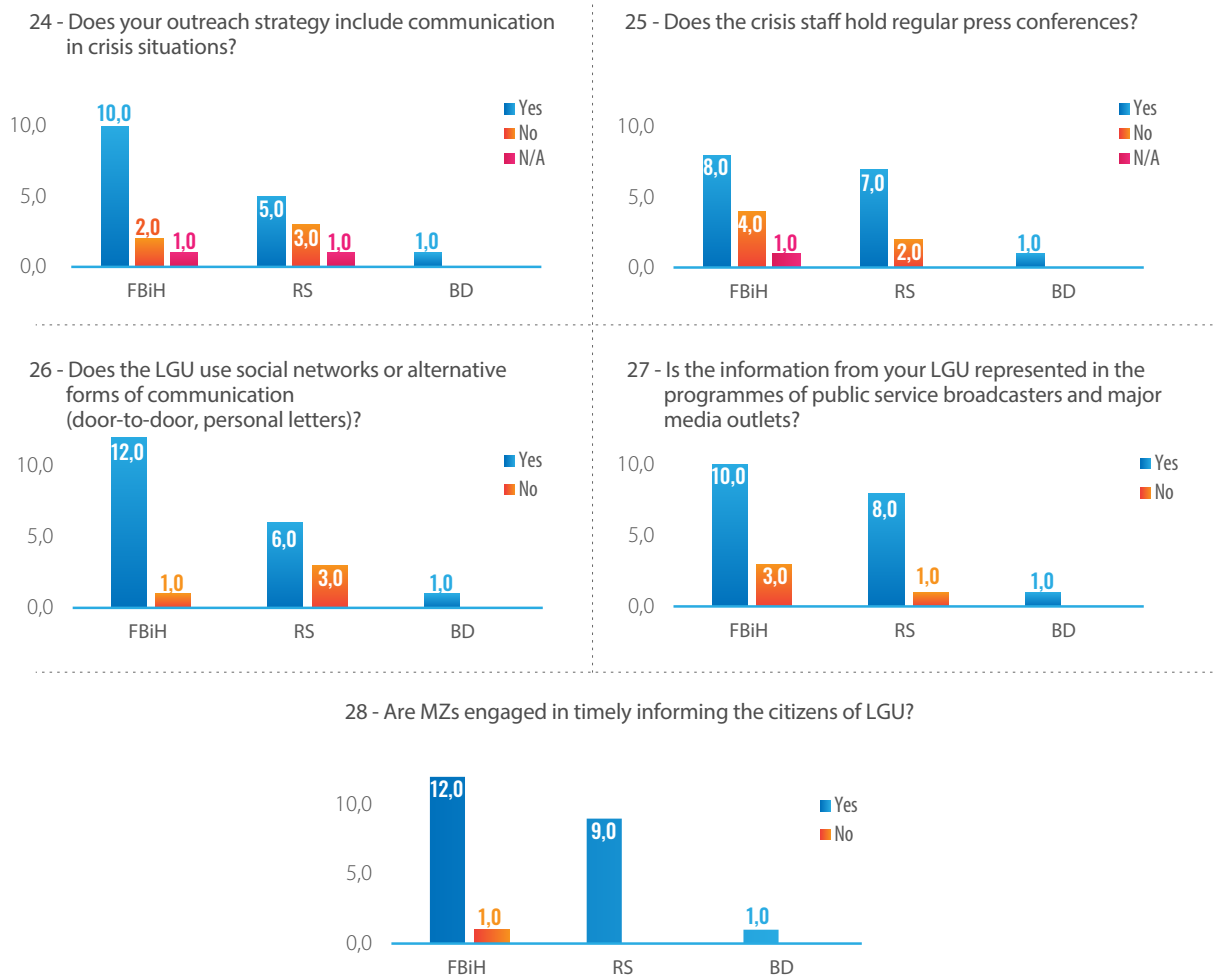
Fifteen LGUs believe that they would benefit from the project’s support, but only three proposals were actually given:

1. Grant for the forming of cooperatives,
2. Assistance to those who are not in the Register of Agricultural Holdings, but are looking to produce,
3. Providing full support from organising production, installing modular greenhouses and adapting these to each household.

1.5 Citizens’ outreach

Seventy percent of LGUs (10 in FBiH, 5 in RS and BD) have an outreach strategy that includes communication in crisis situations. In 16 LGUs, the Crisis Staff regularly held press conferences. Also the use of social networks and other forms of communication is evident in both Entities and present in BD.

Figure 7. Response on the information system by Entities



MZs also played a significant role in informing citizens in a timely manner. All LGUs (1 unanswered) stated that they had engaged MZ, formally by order or orally or by phone.⁵

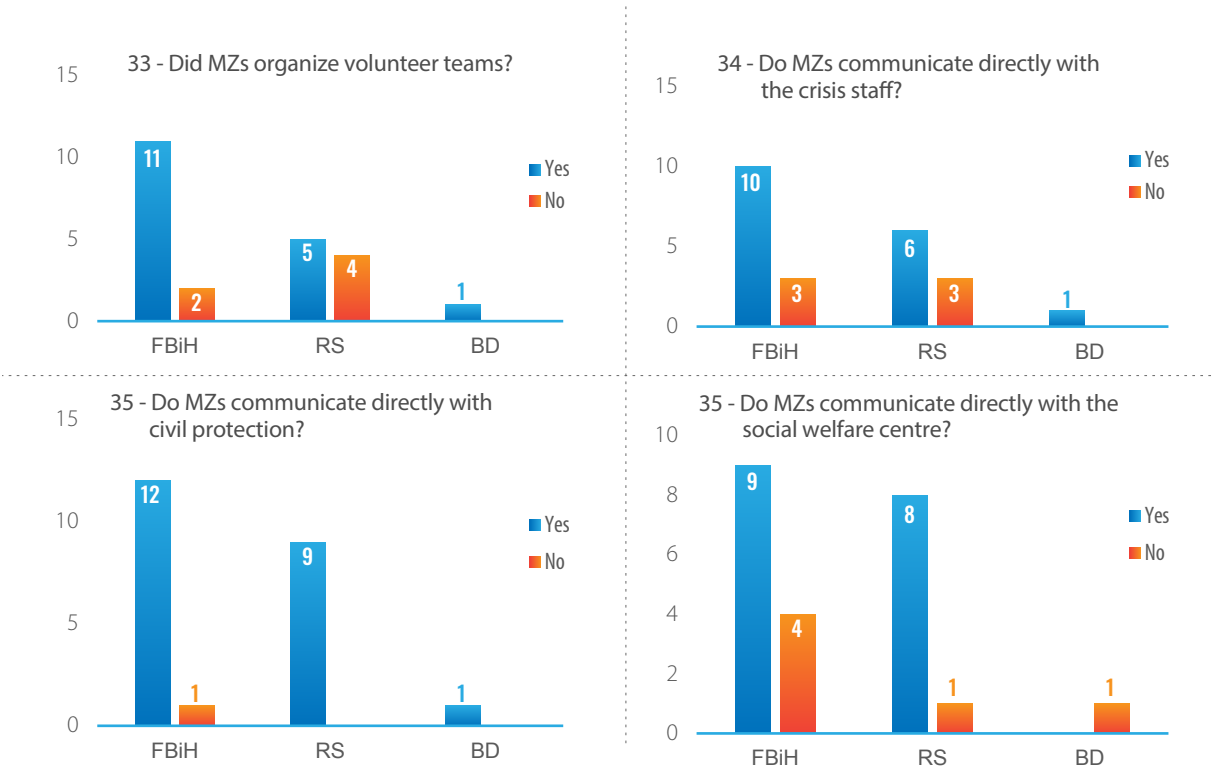
In terms of informing citizens, LGUs identified the most difficulties in inadequate media and social media reporting, which was reflected in superficial reporting and fake news (FBiH 3; RS 2 and BD). Two LGUs (one in each Entity) stated that the orders issued were incomprehensible to the general population as they were written in legal language. Almost half of the respondents, more precisely 11 LGUs (7 in FBiH and 4 in RS) stated that they had problems with misinformation in their LGUs. Most of these problems were overcome with further clarification of information (4 in FBiH, 3 in RS and BD).

1.6 The role of MZs

During the pandemic, MZs were most often involved in activities of mapping vulnerable categories and distributing packages (food, disinfectants, etc.). Most often it was through an order (6 in FBiH and 1 in RS), a decision (4 in FBiH and 2 in RS), instructions (in BD), and instructions (2 in FBiH and 2 in RS). Five LGUs (1 in FBiH and 4 in RS) were informally engaged.

In 17 LGUs (11 in FBiH, 5 in RS and BD) MZs organised volunteer teams. MZs communicated directly with the crisis staffs in 17 LGUs. Ninety-six percent of LGUs stated that MZs communicated with civil protection (12 in FBiH, 9 in RS and BD), and 74% of LGUs stated that MZs communicated directly with SWC (9 in FBiH and 8 in RS), (Figure 8).

Figure 8. Questions 33 to 36



⁵ Many LGUs did not understand the question some responded as if the question was on how the MZs or LGUs informed the public.

In 12 LGUs (7 in FBiH, 4 in RS and BD) MZs were also involved in disinfection activities.

As many as 70% of LGUs have seen cases of women’s leadership or volunteer initiative (9 in FBiH, 6 in RS and BD). Selected examples are shown in Table 15.

Table 15. Selected examples of women’s leadership

FBiH	RS	BD
“Women’s Association for Rural Development has launched an activity to make protective masks for the population where a good deal of useful work has been done and currently all residents moving in public areas can get a mask to avoid sanctions imposed by measures to combat the spread of coronavirus.” (Pale)	“A team of volunteers, Milica Likić, Dragana Kozić, Ljiljana Kozić, Petar Novokmet and Stefan Pepić visited each household and distributed protective masks and gloves as well as leaflets with instructions for citizens on how to behave during the pandemic, as issued by the Municipal Crisis Staff.” (Ljubinja)	“Producing and sewing protective masks as well as donating masks. More people in this at the moment.” (note: more people are currently involved). (BD)

Fourteen LGUs stated that they initiated fundraising/assistance actions within MZs (9 in FBiH, 4 in RS and BD), and for the most part it was about collecting packages (7 in FBiH, 3 in RS and BD) and fund raising (4 in FBiH and 3 in RS).

Additionally, there were other activities such as the provision of technical teaching aids, the engagement of the diaspora, the purchase of difficult-to-obtain medicines, and the sewing of masks.

The flow of information between LGUs and MZs took place directly - informally (phone, mobile application, Viber), (7 in FBiH and 4 in RS), or indirectly (through media, website and social networks), (4 in FBiH and 6 RS). In FBiH, 5 LGUs stated that they communicated directly in writing.

Best practices - Women” Association “EVA”, Rudo

Thanks to the Municipality, we have a large space, thanks to UNDP-RELOAD we have sewing machines and we have undergone training in tailoring and sewing, which meant a lot to us at that moment; we organised quickly and gave our small contribution to everyone and our local community.

Ten LGUs used the community hub during the pandemic (4 in FBiH and 6 in RS), mostly to hold meetings, although some also used it to store packages, distribute vouchers, inform citizens, and organise *online* workshops.

LGUs believe that the most important role of MZs is helping those in need (4 in FBiH, 6 in RS), recording those in need (6 in FBiH, 3 in RS), and the flow of information from LGUs to the population (4 in FBiH, 5 in RS and BD).

There are various responses provided as to how LGUs see the role of MZs but are prevented from performing it. Some of the proposals included setting up and equipping of offices and professionalization of MZs, issuance of documents (1 in FBiH), establishment of volunteerism (1 in FBiH, 1 in RS), control of compliance with measures (1 in RS).

Furthermore, 5 LGUs (3 in FBiH, 1 in RS and BD) believe that MZs should perform certain services such as receiv-

ing certain requests, issuing documents or performing the work of the registry office, collecting documentation under public calls; 2 LGUs in FBiH believe that MZs should take over communal affairs, and one LGU in both Entities believes that MZs should prepare a social map of the population and/or ID card of MZs.

Twelve LGUs (7 in FBiH and 5 in RS) believe that material resources are the greatest need of their MZs, and 10 of them (6 in FBiH, 3 in RS and BD) selected financial resources as the greatest need.

It is interesting to mention the case of one municipality that depicts the success of crisis management: "Before a pandemic was declared, LGU was actively preparing for possible scenarios during the pandemic, which is definitely a positive experience. Active communication with citizens was also positive." (Municipality of Žepče)

2. Impacts of the coronavirus pandemic on partner MZs

2.1 The role of MZs

Eighty percent of MZs stated that LGUs engaged MZs in the prevention of the spread of the virus, most often through an order, decision or instruction.

The most common tasks assigned to MZs are:

1. Monitoring the implementation of measures (22 MZs: Banja Luka 1, Gračanica 1, Gradačac 3, Ključ 1, Laktaši 3, Ljubuški 6, Sanski Most 5, Tešanj 2);
2. Assisting persons affected by movement ban (15 MZs: Sanski Most 5, Brčko 2, Gradiška 2, Brčko 2, Žepče 1, Banja Luka 1, Gradačac 1, Ključ 1, Nevesinje 1);
3. Distribution of packages (15 MZs: Laktaši 5, Gradiška 2, Kotor Varoš 2, Tešanj 2, Banja Luka 1, Gračanica 1, Ljubinje 1, Nevesinje 1).

In addition, MZs were engaged in information dissemination to residents, disinfecting public areas, distributing protective equipment, activities related to encouraging agriculture and distributing funds.

To the greatest extent, the role of MZs was reflected in the following activities:

1. Coordination between MZs and municipalities, MZs and crisis staffs, control of self-isolation (45 MZs, namely: Banja Luka 1, Bijeljina 2, Brčko 3, Gračanica 6, Gradačac 6, Gradiška 3, Ilijaš 4, Jablanica 4, Ključ 5, Kotor Varoš 4, Laktaši 6, Ljubuški 5, Nevesinje 1, Olovo 6, Pale FBiH 2, Petrovo 1, Rudo 1, Sanski Most 6, Stari Grad Sarajevo 6, Tešanj 4, Visoko 2, Zenica 1, Žepče 4);
2. Raising awareness about novel coronavirus, Covid-19 (40 MZs: Banja Luka 2, Brčko 3, Gradačac 2, Gradiška 4, Ilijaš 4, Jablanica 4, Kotor Varoš 2, Laktaši 4, Ljubinje 3, Nevesinje 1, Petrovo 5, Sanski Most 1, Tešanj 2, Zenica 1, Žepče 2).
3. Distribution of packages such as food, disinfectants and protective means and seeds for sowing (39 MZs: Banja Luka 2, Bijeljina 3, Gračanica 3, Gradačac 3, Gradiška 2, Ilijaš 1, Ključ 1, Kotor Varoš 5, Ljubuški 6, Nevesinje 1, Olovo 1, Rudo 3, Sanski Most 1, Stari Grad Sarajevo 3, Tešanj 2, Visoko 2);
4. Assistance to those 65+ such as paying bills, procuring medicines, food (39 MZs: Banja Luka 2, Bijeljina 1, Brčko 3, Gračanica 1, Gradačac 1, Gradiška 2, Ilijaš 1, Jablanica 4, Ključ 4, Kotor Varoš 4, Ljubuški 1, Nevesinje 1, Olovo 1, Rudo 2, Sanski Most 1, Stari Grad Sarajevo 2, Tešanj 2, Visoko 1, Zenica 1 and Žepče 2).

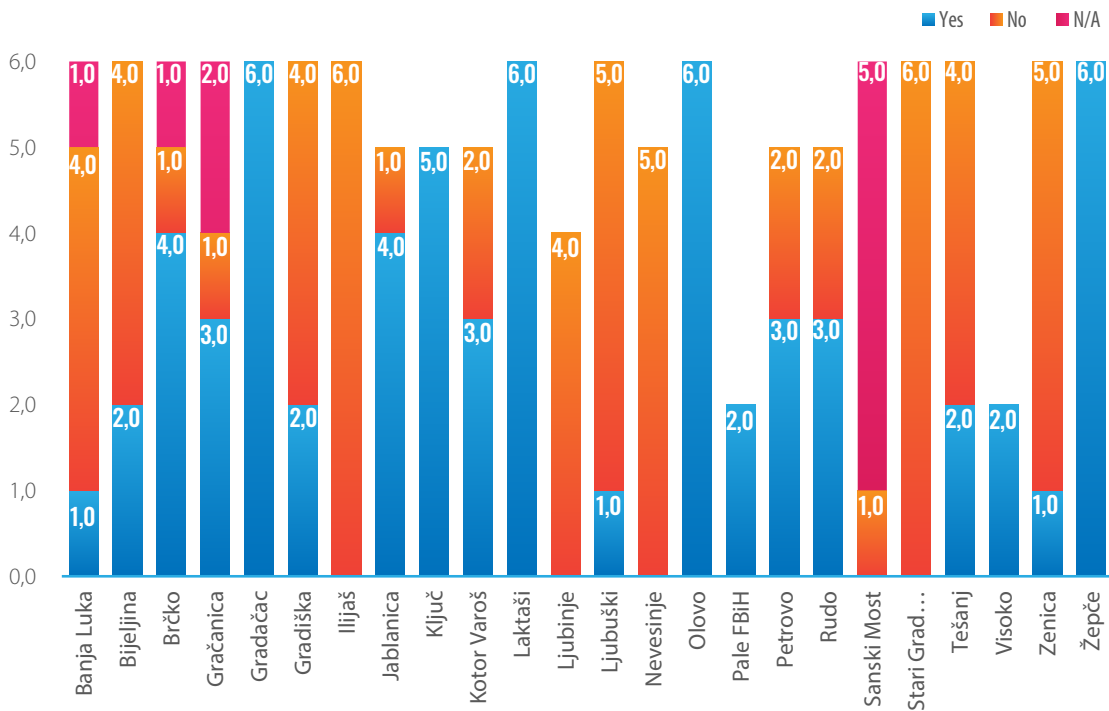
Five MZs were not satisfied with the work of MZs during the pandemic, namely: MZs Karanovac, Lauš II, Krtova, Novo Naselje, Strgačina.

MZs expressed satisfaction with their contribution in terms of package donation (22 MZs), communication and coordination (10 MZs) and the role in raising awareness among citizens and helping the elderly (9 MZs each). In addition, MZs mentioned positive aspects such as: agility of volunteers, respect for measures, proactivity, cooperation with the Civil Protection and/or the Red Cross, timeliness.

A total of 27 MZs expressed negative attitudes towards what was happening during the pandemic. Most of them referred to poor crisis management such as coordination, poor instructions, organisation, unpreparedness (10 MZs: Brčko 1, Laktaši 2, Nevesinje 1, Petrovo 3, Rudo 1, Sanski Most 1, Žepče 1). To a lesser extent, the negative sides included insufficient protective equipment, insufficient protective means, lack of lists of social categories in need.

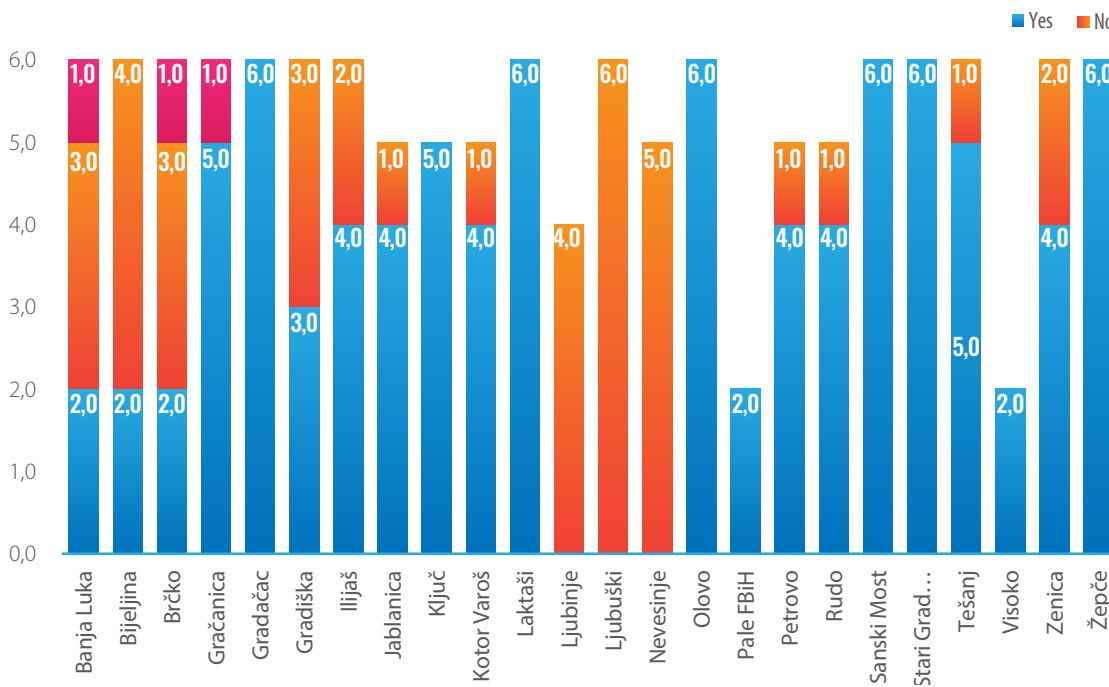
Forty-eight percent of MZs stated that they communicate with the crisis staff for emergency situations (Figure 9).

Figure 9. Question 5 - Does your MZ communicate directly with the crisis staff/ emergency headquarters?



Thirty-seven MZs said they were not helping the work of civil protection. However, cooperation between MZs and civil protection is predominantly present. In three LGUs, all MZs stated that they did not cooperate with the Civil Protection, namely Ljubinje, Ljubuški and Nevesinje (Figure 10).

Figure 10. Question 6 - Does your MZ help the work of the civil protection service in the pandemic?



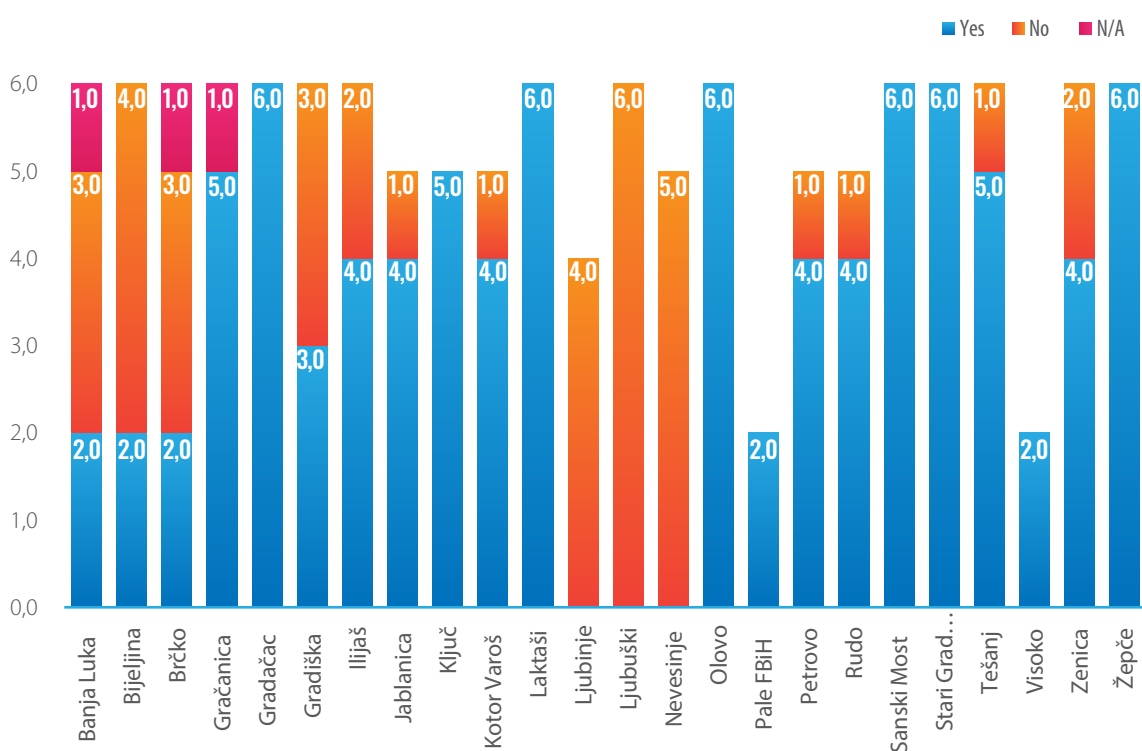
The three most significant examples of cooperation between MZs and civil protections during the pandemic were achieved through:

1. Control of the implementation of measures against groups and individuals (24 MZs);
2. Food distribution (21 MZs);
3. Disinfection activities and distribution of hygiene products (20 MZs).

In addition, the cooperation took place by informing the citizens about the decisions and instructions of the civil protection, monitoring the condition of persons who are subject to social protection and informing the civil protection accordingly. During the pandemic, cooperation also took place on firefighting activities.

A total of 69 MZs cooperated with social welfare centres. LGUs where no cooperation has been achieved in any MZ are Ljubinjje, Ljubuški and Nevesinje.

Figure 11. Question 7 - Has your MZ cooperated with the social welfare centre?



For the most part, the cooperation between MZ and the social welfare centre was achieved through:

1. Compiling and/or updating the lists of socially endangered categories and submitting these to the SWC (45 MZs, namely: Banja Luka 2, Bijeljina 1, Brčko 2, Gračanica 2, Gradačac 2, Gradiška 1, Ilijaš 4, Jablanica 1, Ključ 3, Kotor Varoš 3, Laktaši 4, Ljubinjje 2, Olovo 3, Petrovo 3, Rudo 1, Sanski Most 5, Tešanj 5, Visoko 1);
2. Delivery of packages to social categories (37 MZs: Banja Luka 4, Gračanica 2, Gradačac 4, Gradiška 3, Ključ 3, Kotor Varoš 4, Laktaši 6, Ljubinjje 1, Olovo 1, Pale FBiH 1, Rudo 2, Tešanj 5 and Žepče 1).

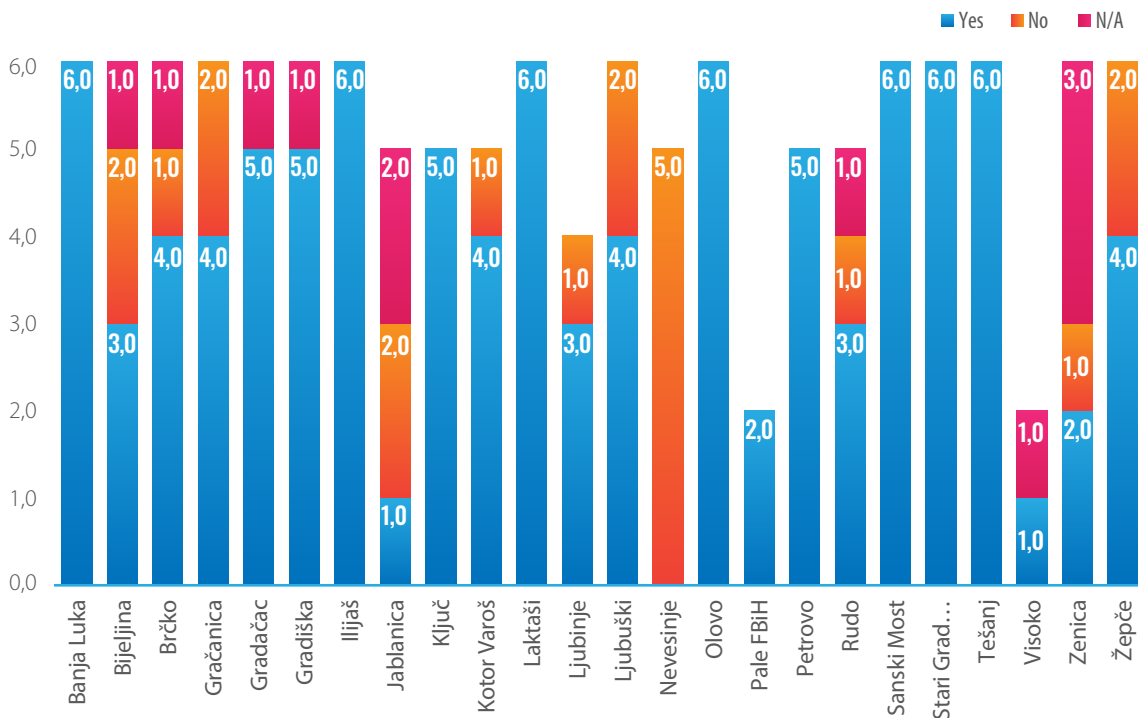
MZs also cooperated with the Red Cross (e.g. consultations on aid distribution, exchange of information on needs ...), police and other inspections (e.g. assistance in registering and visiting persons in self-isolation, monitoring of quarantine compliance and reporting of quarantine violations), public utilities (e.g. disinfection of stairs and entrances ...), health care institutions (e.g. transport of the sick, assistance to pharmacies for the delivery of necessary medicines ...), fire brigades (e.g. disinfection), religious communities (exchange of information ...), municipalities (e.g. keeping lists, informing about needs ...), schools (e.g. distribution of computer equipment for *online* classes).

MZs stated that they most often received information by phone (89), e-mail (63), correspondence (60). In addition, there are media and social networks, Viber, and direct contact also present as a form of communication.

Only 7 MZs did not receive information on the needs of the population in the MZ: 2 in Bijeljina, 2 in Jablanica, 1 in Nevesinje and 1 in Žepče. The most common information about needs comes by phone (92) or directly from an individual (81). In addition, MZs receive information about the needs of the population through Viber (39), social networks (39), and through other individuals (10).

Sixteen percent of MZs did not receive information on vulnerable categories (Figure 12). Nevesinje is the only LGU in which all MZs stated that they do not receive information on vulnerable categories.

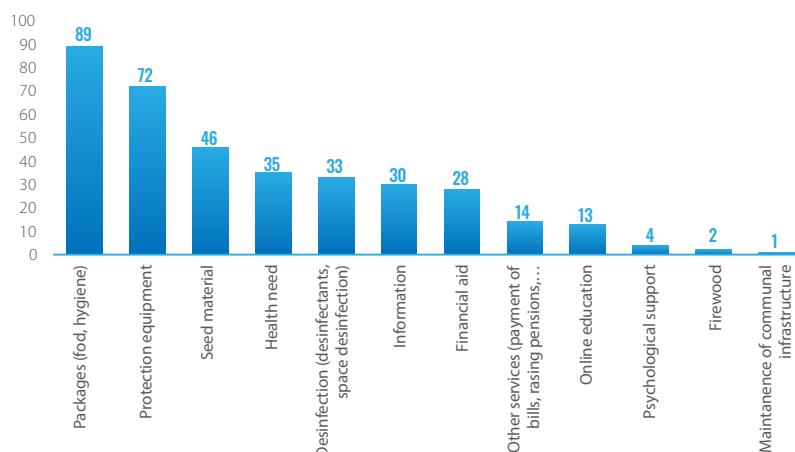
Figure 12. Question 11 - Do you receive information on vulnerable categories?



MZs most often receive information on vulnerable categories from other citizens (49), but also directly (41), through SWC (17), Red Cross (10), LGU (16), civil protection (3), religious organisations (5).

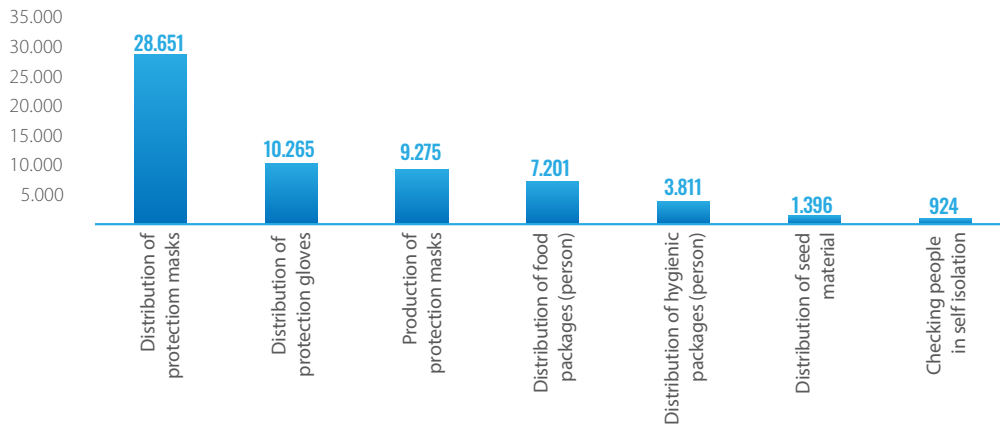
The most common requests/pleas received by MZs from citizens in the pandemic are requests for packages (food and hygiene), protective equipment, requests for necessary products for sowing, health needs (Figure 13).

Figure 13. Figure 13: Question 12 - What are the most common requests/pleas you receive from MZ citizens in the pandemic?



Only 11% (14) of MZs stated that they did not participate in helping vulnerable categories; where they did help, it most often referred to the procurement of food, medicine, and payment of bills, which was most often done through the LGU.

Figure 14. Estimated number of individuals covered by each of the activities carried out by MZs.



Note: for each sub-question from 13.3.1 to 13.3.9 (see Annex) there were on average 75 MZs that did not answer, so it is possible that more were covered by one of the activities.

During the pandemic, the population over the age of 65 was especially endangered due to a temporary ban on movement. MZs most often helped this category by purchasing medicines (48), distributing hygiene and food packages (44) and shopping (41). In addition, they assisted them with counselling, information dissemination (25), financially (5), distribution of protective equipment and disinfectants (11), payment of bills (15), increasing pensions (4), and other services such as assistance at home or transportation (20).

Just over half of the MZ noticed that new vulnerable individuals were emerging who were not traditionally vulnerable. Only 20 MZ responded that there is a support system for these categories, and 42 that there is no such system in place. Thirty-eight percent of MZs stated that, although currently they do not have a support system for the new vulnerable categories, such system is under preparation (Figures 15 and 16 for questions 13.6 and 13.7).

Figure 15. Question 13.6 - Is there a support system for new vulnerable categories?

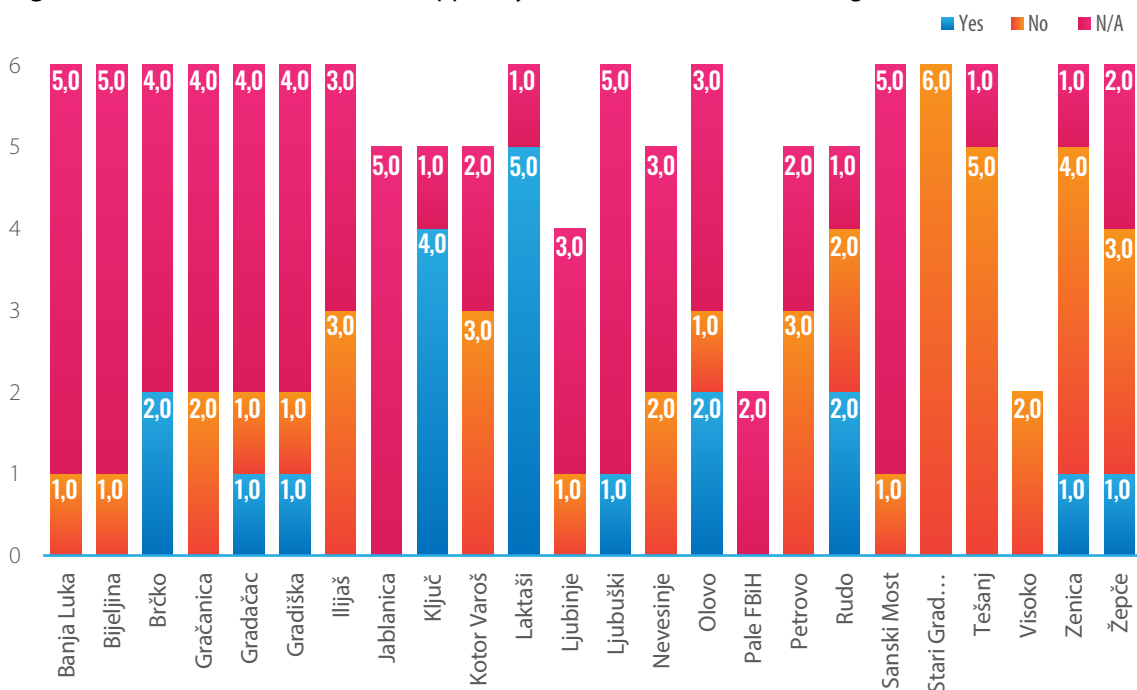
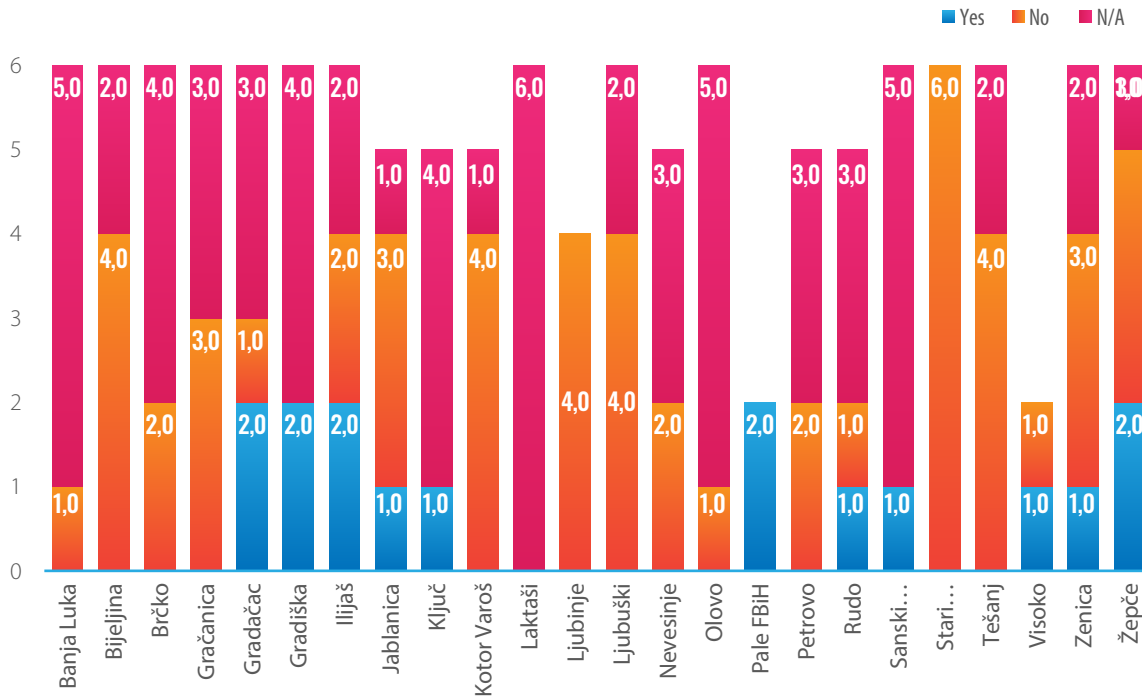


Figure 16. Question 13.7 - Is a support system in preparation for new vulnerable categories?

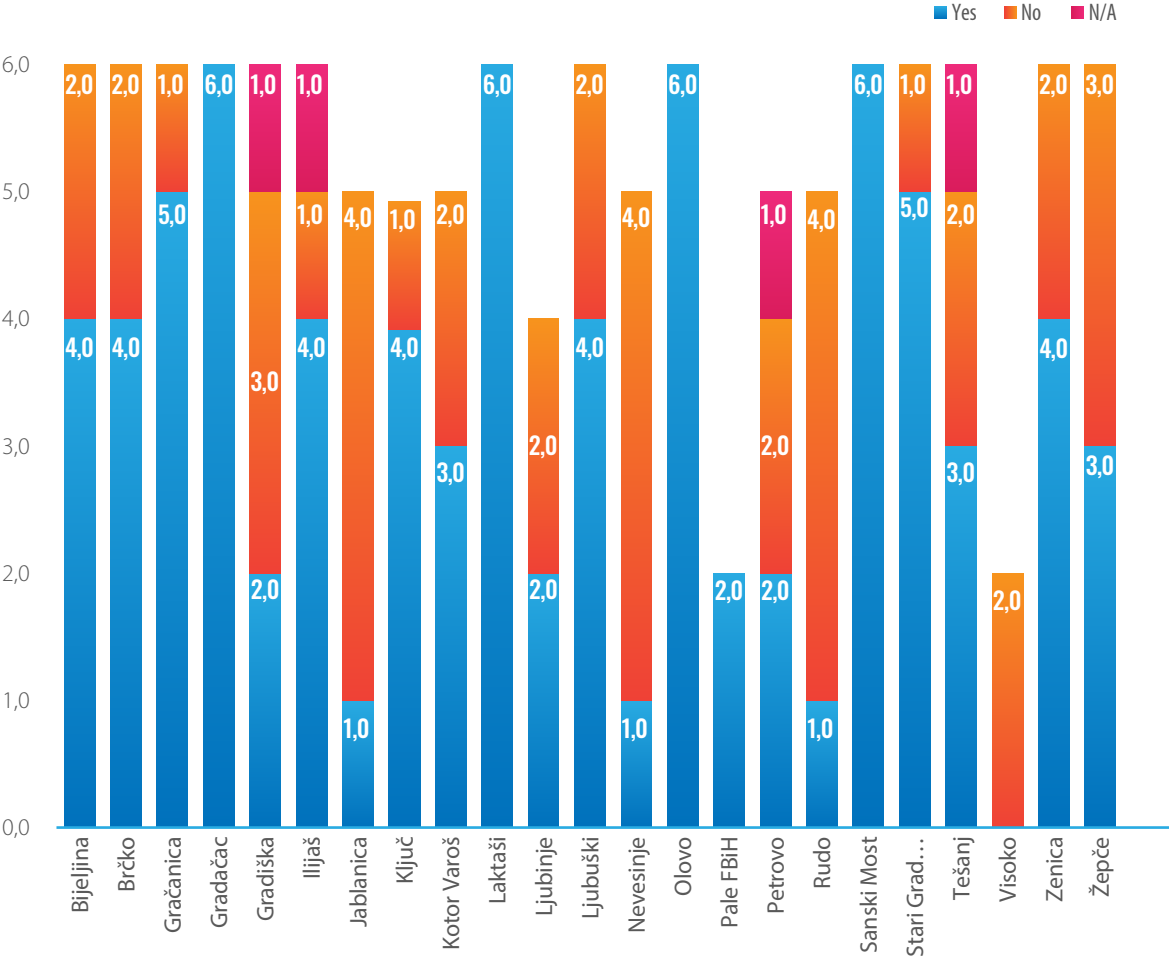


MZs believe that the most useful government support would be in the economy and agriculture (10), procurement of basic foodstuffs (7), labour market (5), psychological counselling (5), ensuring medicine (3), technical support of *online* classes (3).

Thirty-six MZs stated that they help children monitor distance learning in various ways, such as: procurement of technical equipment (27), Internet access (10), coordination of students, schools (6).

A significant role of the MZs during the pandemic was also in the organisation of volunteer teams (82 in total) and they most often delivered aid packages (48), did shopping for those subject to movement ban (23), procured medicines (28). Only MZs in LGU Visoko did not report to have organised volunteer teams.

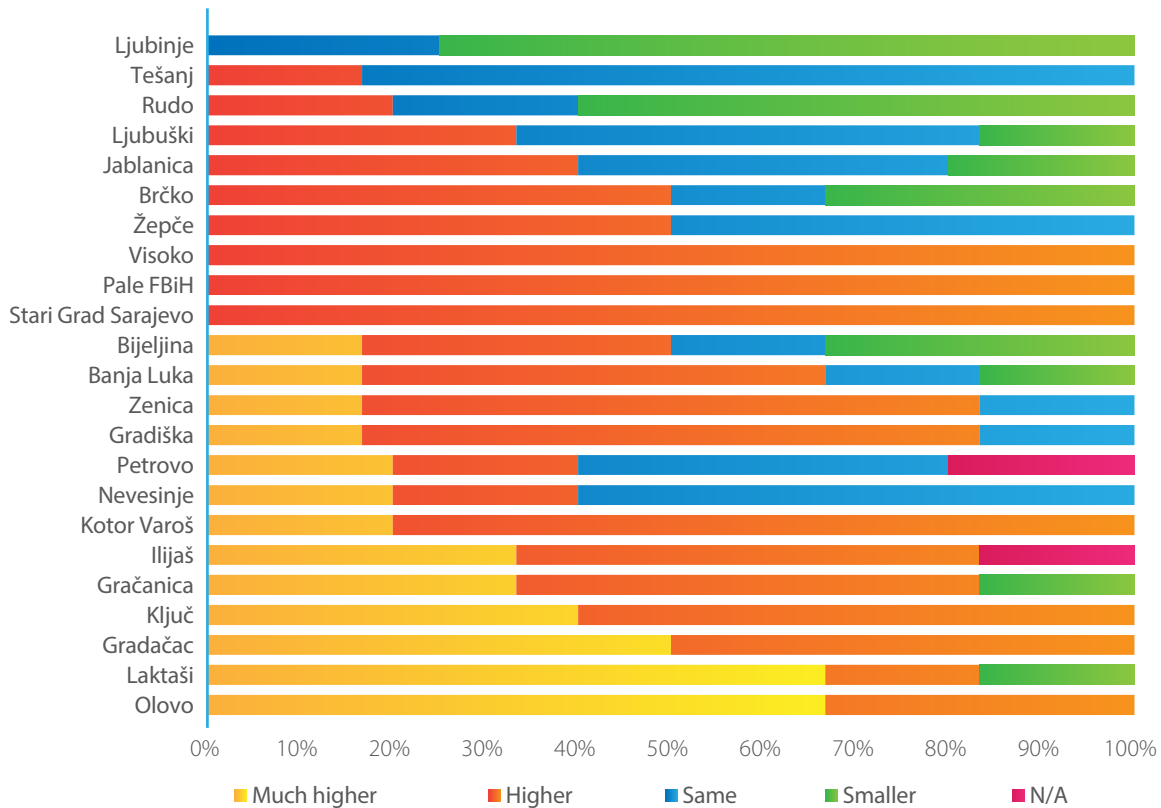
Figure 17. Question 15 - Did you MZ organise volunteer teams?



MZs also played a significant role in informing citizens. Eighty-one percent (104) of MZs informed citizens during the pandemic. Information dissemination was most often done as needed or on a daily basis, and most often through social networks (81).

Sixty-three percent of MZs had increased engagement (Figure 18).

Figure 18. Question 20 - Is the scope of your engagement and activities of MZ in the pandemic, compared to the period before the crisis, much higher, higher, the same, smaller, much smaller?



Most MZs believe that information dissemination and coordinating of activities is the most important role that MZs have (76). In addition, their importance is also in providing supplies such as the delivery of humanitarian aid packages (26), and identification of social categories (12).

Twenty-nine MZs believe that they should also have operational competences such as resolving infrastructural deficiencies, and undertaking certain activities that would facilitate obtaining various certificates, especially in the domain of the registry office (29). These activities are greatly dependent on the geographical position of the MZ itself.

MZs believe that their biggest challenge was how to help those in need, not only in material terms but also in providing psychological support, given the rising fear of uncertainty.

On the positive side, the emphasis is on solidarity among people as well as timely organisation.

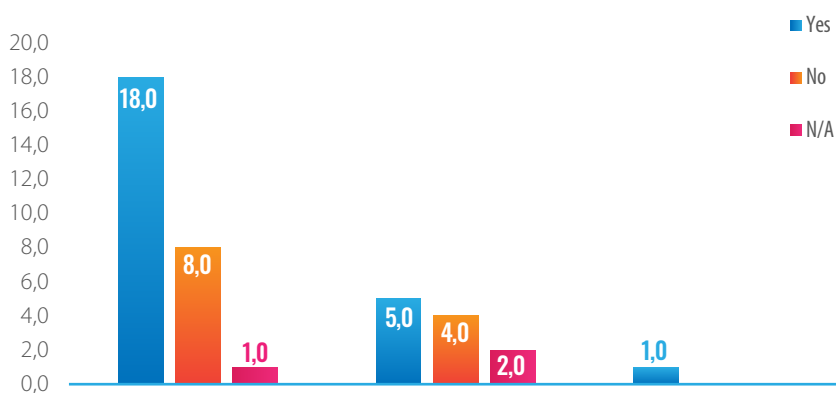
MZs cited the following negative experiences that affected their work during the pandemic: severe depression, misinformation, violation of regulations on mandatory wearing of masks and maintaining social distance by decision makers, failure to deliver announced protective equipment, delay in support of higher levels of government, lack of volunteers, lack and inaccuracy of tests, formal non-involvement of MZs in the protection and rescue system, undefined role of MZs, lack of communication between LGU and MZs, lack of food supplies, non-compliance with isolation and other measures, lack of any assistance, hampered access to health services, those over the age of 65, lack of transparency in spending.

3. Impacts of the Covid-19 pandemic: CSOs

The scope of activities of the surveyed CSOs is support for youth, culture, assistance to vulnerable categories, gender equality, agriculture, civic participation (citizen participation in the decision-making process), sports and ecology. A small number of surveys also included CSOs dealing with public information dissemination, protection and rescue, tourism and health.

For most organisations (62%), women’s empowerment is one of the fields of activity of CSOs (18 in FBiH, 5 in RS and 1 in BD), but only in 3 CSOs in both entities is women’s empowerment the main field of activity (Figure 19).

Figure 19. Question 6 - Is women’s empowerment one of the fields of action of your CSO?



The average annual budget of the surveyed CSOs is 27,738 thousand BAM (median is 10,000 BAM), and the average number of members is 149 (median 72.5).

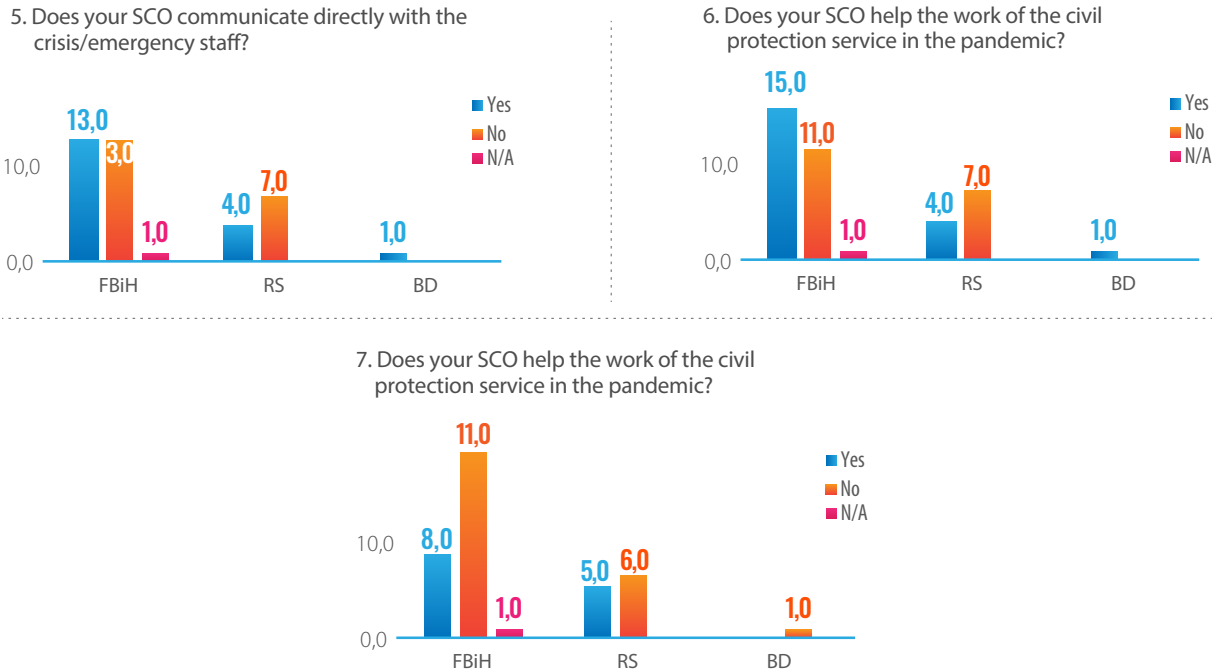
CSOs were mainly engaged in preventing the spread of the virus on their own initiative and with their own funds (19 in FBiH, 6 in RS and 1 in BD), and to a lesser extent LGUs engaged CSOs in virus prevention activities (13 in FBiH, 3 in RS, 1 in BD). Engagement took place mainly in an informal way, orally or following on an initiative (4 in FBiH, 2 in RS and 1 in BD). Most of the activities carried out by CSOs included procurement of basic necessities (5 in FBiH, 2 in RS), collection, sewing and distribution of protective equipment (5 in FBiH and 1 in RS), and assistance to the population over 65+, people in isolation and the sick (6 in FBiH and 1 in RS).

In addition, CSOs participated in equipping isolation wards, activities to preserve psychophysical health, equipping schools, that is, procurement of aids for students and disinfection of public areas.

Most CSOs are satisfied with how they responded to the challenges and especially emphasise the timeliness and good organisation. Only 5 organisations shared their opinion on what could have been done better. Thus, a CSO from RS believes that *communication between the Municipal Emergency Staff and the Municipal Red Cross* should be improved. *In addition, this CSO believes that it is necessary to make clearer decisions and orders of the Municipal Emergency Staff regarding the content and manner of distribution of assistance in order to meet the needs of the most vulnerable.* The other four opinions were given by CSOs from FBiH and believe that the spending of funds could have been better, that the lists in MZs were lacking, as was protective equipment, and that there was stigmatization of Covid patients.

Figure 20 shows that most CSOs in the FBiH have communicated with civil protection (15) and the least with social welfare centres (8). As far as CSOs in RS are concerned, most of them have achieved cooperation with social welfare centres (5). In BD, cooperation was established with the crisis staff and civil protection, but not with the Social Welfare Centre.

Figure 20. Overview of questions 5 to 7



Activities carried out by CSOs during the pandemic varied. Most CSOs carried out humanitarian package delivery activities (2 in FBiH and 6 in RS). In addition, they carried out other activities such as: distribution of protective equipment, online education, providing psychological support, visits to the vulnerable, flow of information.

Some NGOs organised the sewing of masks on their own initiative, which were necessary but difficult to find at the time. Some CSOs were also engaged by the crisis staff, since, thanks to their work and activities, they have already been recognised as CSOs that could provide some assistance.

It is necessary to stress the importance of CSOs, especially in those cases where they have implemented their activities under the principle of “no one left behind”.

The first example of best practice we cite is interesting because the Crisis Staff recognised the importance of CSOs thanks to their local action and involved them in some pandemic mitigation activities. CSOs independently undertook activities that led to their recognition throughout Bosnia and Herzegovina.

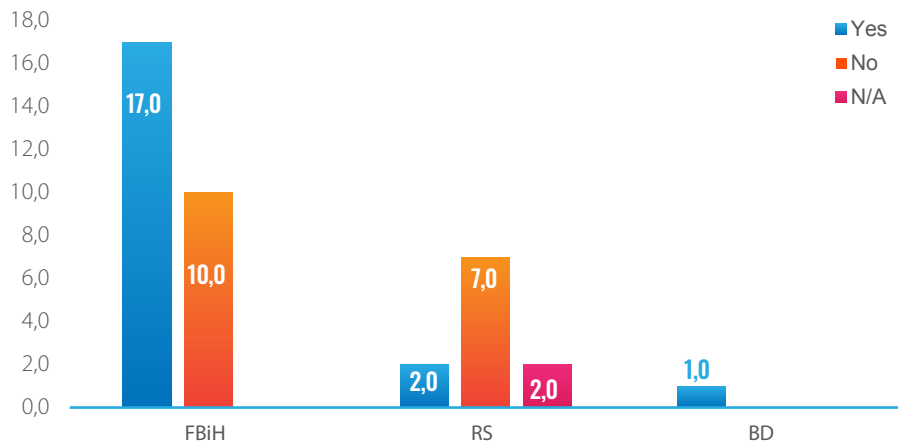
Another example shows how several previously implemented projects have made CSO beneficial to the community in which it operates.

Best practices - Association “Generation”, Sarajevo

Initially, we started recording exercises for physical health improvement, which we posted on our Facebook profile and pages, then on our Instagram profile, and from March 30, every working day, the exercises were broadcast live on TVSA, and from April 9, every weekend on BHT1. In late March, we started recording health lectures on various topics and publishing once a week ... In addition to the above activities, the daily work was going to the field where we brought health products to beneficiaries every day, picked up the prescribed therapies and bought groceries that we delivered to their home address.

In addition to the crisis staff and the social welfare centres, organisations also cooperated with other NGOs, health centres, schools, utilities, and the police. Significant cooperation took place with MZs (17 in FBiH, 2 in RS and BD).

Figure 21. Question 9 - Has your CSO established cooperation with MZs in LGU on infection prevention?



Most of the activities were related to the flow of information, distribution of protective material, assistance to the elderly and vulnerable groups, regardless of the Entity.

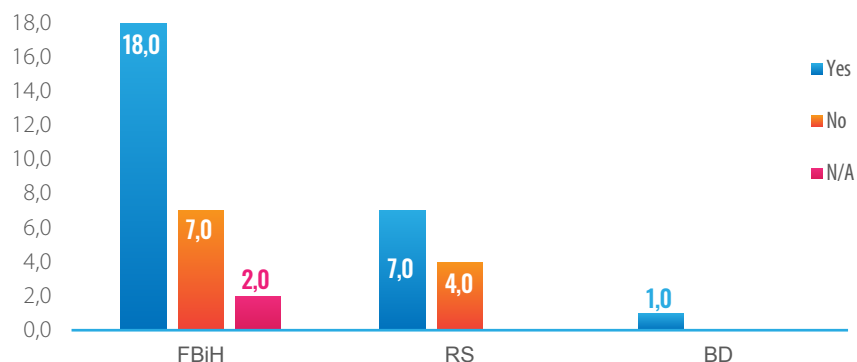
Fifteen CSOs stated that they were aware of infection prevention measures.

CSOs mainly use indirect means of informing citizens about their activities in terms of helping during the pandemic (24 in FBiH, 6 in RS, in BD) such as social networks, Viber groups, TV, distribution of leaflets, but also directly (19 in FBiH and 3 in RS) such as phones and personal visits. CSOs receive information on the needs of the population both indirectly (23 in FBiH, 8 in RS and BD), but also directly (22 in FBiH, 6 in RS and BD).

Most CSOs receive information from local communities (15 in FBiH and 1 in RS), from citizens (14 in FBiH and 1 in RS), social welfare centres (9 in FBiH and 4 in RS), LGUs (6 in FBiH and 2 in RS), but also from crisis staffs (total 3), health institutions (total 1), police (total 1).

A total of 26 CSOs observed that people who traditionally do not belong to vulnerable groups become vulnerable (Figure 22). This mostly included people whose social exclusion was caused by job loss, movement ban for those over 65 and under 18, school age for access to education and all citizens for mental problems such as fear, anxiety, helplessness.

Figure 22. Question 14 - Have you noticed that people who traditionally do not belong to vulnerable categories become vulnerable?

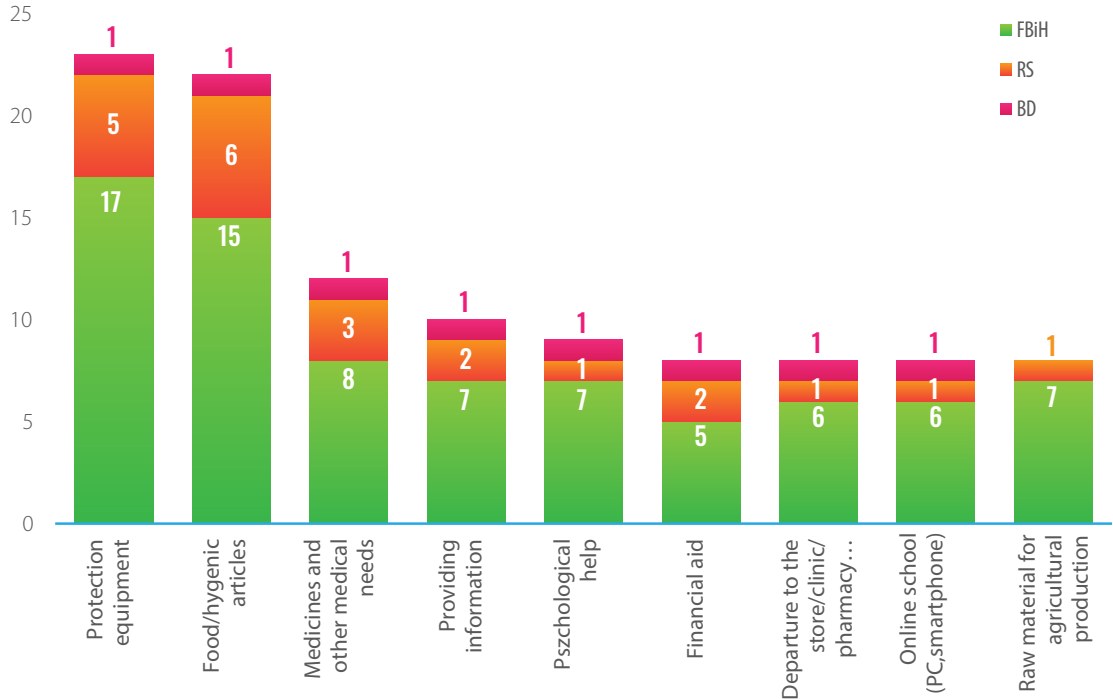


CSOs believe that in most cases there is no support system for new vulnerable categories (12 in FBiH and 6 in RS). Only in 4 cases, that is, two in both Entities stated that CSOs are currently preparing a support system for new vulnerable categories.

CSOs believe that it is most useful to include socially excluded people in normal social flows (8 in FBiH and 2 in RS). Many also mentioned various benefits through the activities of SWCs, health care facilities and institutions, financial assistance (5 in FBiH, 1 in RS), psychological support (4 in FBiH and 2 in RS), employment support (4 in FBiH and 2 in RS).

The most common requests that CSOs received were requests for food packages, protective equipment, medicines (Figure 23).

Figure 23. Question 15 - What are the most common requests/pleas you receive from citizens in the pandemic?



Twenty-six CSOs participated in providing assistance to vulnerable categories (18 in FBiH, 7 in RS and 1 in BD), most often through the distribution of aid packages (12 in FBiH, 7 in RS), distribution of protective equipment (8 in FBiH, 4 in RS and 1 in BD), providing health support in the form of procurement of medicines, transport to the clinic, providing health care (4 in FBiH, 3 in RS and 1 in BD).

Of all respondents, 6 CSOs stated that they help children in LGUs to follow distance learning (in FBiH 5, in RS 1). This assistance was reflected in the purchase of laptops (5 in FBiH), and enabling connection (3 in FBiH and 1 in RS).

A total of 20 CSOs organised volunteer teams in the pandemic (12 in FBiH, 7 in RS and 1 in BD). On average (median), organisations hired 18 volunteers. Volunteers were mostly engaged in food and package delivery (8 in FBiH, 2 in RS and 1 in BD), and made purchases for those subjected to movement ban (4 in FBiH, 2 in RS and 1 in BD).

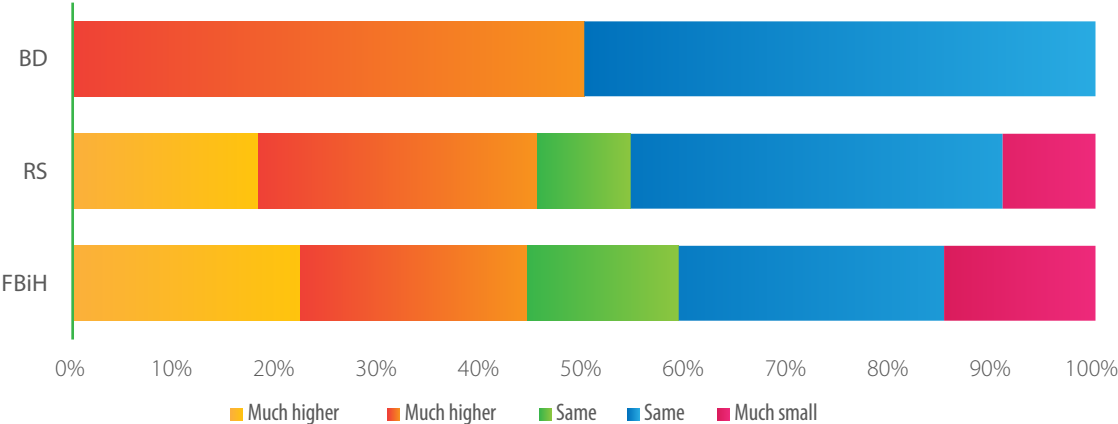
Nine CSOs in the FBiH and 2 in the RS participated in fundraising. They collected funds from their members, the diaspora, monetary donations from citizens, by setting up a humanitarian basket, donations from private companies. Most of the funds were used to procure food.

Only 6 CSOs stated (4 in FBiH and 2 in RS) that they received some financial assistance. In 3 cases, they were LGUs (2 in FBiH and 1 in RS), but also from the diaspora (2 in FBiH and 1 in RS), private companies (2 in FBiH and 1 in RS). Organisations also received assistance with material resources (8 in FBiH, 6 in RS and 1 in BD).

Organisations stated that they have the greatest needs for funds (9 in FBiH, 4 in RS and 1 in BD), protective equipment (6 in RS, 5 in FBiH and 1 in BD) and technical means (4 in FBiH and 1 in RS).

In their answers to the question **“Where do you see the needs in society and what else would you do that you cannot do due to lack of funds, staff, expertise and the like?”** organisations mostly stated the needs to boost agriculture (4 in FBiH, and 2 in RS) and procurement of supplies (4 in FBiH and 1 in RS). Other proposals included: establishing a network of volunteers, providing psychological support, stimulating the employment of the socially excluded, helping households with a person with a disability as their member, promoting healthy habits, and procuring supplies.

Figure 24. Is the scope of your engagement and activities of CSO in the pandemic, compared to the period before the crisis, much higher, higher, the same, smaller, much smaller?



Most CSOs have temporarily suspended their regular activities and projects due to the pandemic (20 in FBiH and 8 in RS).

Sixteen CSOs cooperated with other LGUs in addition to their LGUs (10 in FBiH and 6 in RS), and established cooperation with other CSOs (12 in FBiH, 9 in RS and 1 in BD).

Conclusion and recommendations

Given the uncertainty of the pandemic, LGUs managed to organise their work with the clients to a certain extent, to form crisis staffs, to pass on information to the general public, but also to help socially endangered categories. Less women participated in crisis staffs, and in some LGUs women were not members of the crisis staff. A greater role for women in crisis management processes is needed, bearing in mind that women could more adequately address some of the consequences of a pandemic (e.g. domestic violence).

As one of the obstacles in better addressing the pandemic, LGUs stated the lack of protective equipment and the increased number of socially endangered categories. As for the positive sides, they stress the cooperation of citizens in terms of compliance with measures.

It is interesting to mention the case of a LGU that illustrates the success of crisis management: "Before a pandemic was declared, LGU was actively preparing for possible scenarios during the pandemic, which is definitely a positive experience. Active communication with citizens was also positive." (Municipality of Žepče)

MZs have played a key role in reducing the negative impacts of the pandemic, because they have the best insight into the needs of the local population. Although SWCs have data on socially vulnerable categories, and those who exercise some of the legal rights in the field of social protection, MZs also know those residents who, although in social need, do not exercise their rights.⁶ Their biggest challenge was how to help people in need, not only materially, but also in providing psychological support, as they feared uncertainty. They played an active role in making lists of the population in various needs (those over 65, children attending *online* classes, population of more modest financial standing ...). In addition, MZs distributed packages (food, disinfection, protection), and were involved in disinfection activities in public areas. They also played an active role in raising public awareness and providing timely information.

On the positive side, MZs emphasise solidarity among people as well as timely organisation.

Most CSOs were satisfied with the response to the pandemic, as it was a new challenge that hit the whole world, so some problems that were on a global scale (lack of masks ...) were successfully solved because some responded quickly, they organised and started sewing masks and distributed masks to those who needed them.

Many believe that they had good cooperation with local institutions, that the decisions of the crisis staff were timely and that CSOs helped where they could – most frequently helping the most vulnerable groups. CSOs also point out that the key role in preventing the spread of the infection, but also in helping vulnerable categories, was played by the local population, which showed solidarity but also adhered to the measures.

In some cases, certain problems have been reported, such as late support to the private sector, delayed support to agriculture, poor coordination with higher levels of government, poor risk management, misinformation and more.

Several organisations also mentioned that they were dissatisfied with how the health system responded to the pandemic in terms of supporting people with disabilities, the chronically ill, but also other patients who needed medical care but could not get any because of the pandemic.

As one of the negative aspects of the Covid-19 crisis, it was also mentioned that CSOs were not directed to organised action, and they also expressed concern for their own survival due to the pandemic and the suspension of their regular activities.

The important role of volunteers should be especially emphasised, so it is necessary to strengthen their role in the future, especially in crisis situations.

⁶ This phenomenon is common when certain rights require extensive documentation for which fees are paid, and in families who live in remote MZs and do not have the transport possibility to exercise their rights, or are simply not informed about their rights.

Recommendations for MZs, LGUs and SWCs

Table: Recommendation matrix

Deadline	Type of support	Recommendation	LGU	MZ	CSO
Short-term	Logistics	Provide LGUs and MZs with packages containing food, masks and disinfectants.	x	x	
		Provide quarantines with medical and protective equipment (masks, disinfection tunnels ...) and other equipment (beds, pillows, bedding).	x	x	
Medium to long-term	Outreach	Redefine the role of MZs, LGUs, SWCs, media, etc. in the event of a pandemic. All existing outreach plans and strategies need to be revised. In the absence of an outreach strategy, its development needs to be supported. New plans/strategies would also look at communication in crisis situations.	x	x	
	Crisis management	Consider introducing required contingencies in LGU so that they can respond to crises.	x		
		Promote the role of women during the crisis (crisis management, proactivity, increase the participation of women on board of the crisis staff).	x	x	x
		Improve crisis management (train all participants in the local community how to better respond to problems): decision-making, respect for decisions by decision-makers, transparency in crisis situations, procurement.	x	x	
		Develop an organisational plan / guidelines / protocol in case of a pandemic or other crisis situation with a clearly defined role of LGU, SWC, MZs, media and CSOs.	x	x	x
		Organise a training on crisis management.	x	x	x
		Develop social maps with a needs assessment in order to act as quickly as possible when it comes to vulnerable groups.	x	x	x
		Extension of MZ competences (operational competencies)	1. MZs should expand the scope of their activities. Thus, it is necessary to consider the role of MZs in undertaking certain activities that facilitate the obtaining of documents in the field of registry offices, in accordance with the relevant laws.	x	x
	2. In some cases, MZs should take certain actions to address infrastructure deficiencies. This primarily refers to those MZs that are further away from their municipality, where the utility service itself would be faster and more affordable if it is managed by an MZ.		x	x	
	3. MZs should have activities such as “collecting” medicines and performing similar activities for their residents, especially in those MZs that are far from health and other institutions and that have underdeveloped transport infrastructure.			x	

Deadline	Type of support	Recommendation	LGU	MZ	CSO
	Digital transformation	1. Develop a system of services in the case of social distancing for all (SWC in the case of socially vulnerable, LGUs in the case of citizens ...).	x		
		2. To digitalise the work of municipal services to citizens as much as possible, but also to enable work from home to as many employees of the municipality as possible, so that in similar crises the work would be uninterrupted.	x	x	x
	Volunteerism	Supporting volunteerism through establishing a network of volunteers, forming teams, equipping teams.	x	x	x
	Coordination	Adaptability of providing social services by strengthening communication between SWCs, MZs and CSOs related to the emergence of new vulnerable groups, but also the exchange of information on those who are otherwise excluded, especially in the case of multiple exclusion.	x	x	x
	Training	It is necessary to continuously educate the members of the MZ in order to have the MZ better and more efficiently operating.		x	
	Exchange of good practices	1. It is necessary to devise a way(s) through which members of different MZs would exchange their good practices, ways in which they overcame certain obstacles and other issues. Many MZs have similar challenges; therefore, ways to overcome these challenges could be applicable in several MZs.			
	Project support	1. Support for projects aimed at psychological support to the population, support for projects that support agriculture, new employment, inclusion of children and the inclusion of the elderly, and health prevention; 2. Support for projects implemented under the 'no one left behind' principle. This refers to the fact that the implementation of the project needs also to be related to those areas that are more difficult to access.	x	x	x

Annex

LGUs: Questionnaire on impacts of the coronavirus pandemic on partner LGUs and MZs within the project “Strengthening the Role of MZs in Bosnia and Herzegovina”

1. BASIC DATA

LGUs: _____

_____ *City / Municipality*

Contact person: _____ Phone: _____

Date of submission: _____ E-mail: _____

2. CRISIS MANAGEMENT IN LGUS

1.	Has a crisis/emergency staff (or similar body) been established in your LGU to manage the crisis?	YES <input type="checkbox"/> NO <input type="checkbox"/>
	1.1 If the answer is “YES” - please write which institutions are part of the crisis/emergency staff? Please indicate in parentheses after each institution the gender and age of the person from that institution, e.g. (F, 45), (M, 52)	
	1.2 How often does the crisis/emergency staff meet? <i>(constantly in session, several times a day, once a day, virtual meetings, other)</i>	
2.	Which higher level authority(ies) provides instructions to your crisis/emergency staff?	
	2.1 What kind of assistance did the LGU receive from higher levels of government? What levels of government? <i>(BiH, RS/FBiH, canton ..)</i>	
	2.2 Does your LGU receive daily information on the number of patients and those tested by higher levels of government?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.	Have LGU employees been given new responsibilities and obligations in order to prevent the spread of the infection?	YES <input type="checkbox"/> NO <input type="checkbox"/>
	3.1 Are there enough LGU employees engaged in infection prevention activities?	YES <input type="checkbox"/> NO <input type="checkbox"/>

3.2 Has your LGU reorganised in line with the new reality?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.3 If the answer to 3.2 is "YES" - please write how the reorganisation was performed.	
3.4 Has the LGU enabled the provision of services to citizens virtually/electronically?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.5 If the answer to 3.4 is "YES" - please write more details:	
3.6 Please describe how the LGU services work in times of crisis? [<i>shorter hours (from-to), several groups, teleworking, other...</i>]	
3.7 Has the LGU introduced any new services in response to the crisis?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.8 Did the LGU stop providing any services during the pandemic?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.9 Do LGU services work with clients face-to-face?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.10 If the answer to 3.9 is "YES" - are the measures on the required distance respected?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.11 If the answer to 3.9 is "YES" - do you have a sufficient quantity of masks, gloves, disinfectants?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.12 If the answer to 3.11 is "YES" - do you have protective means for clients as well?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.13 Do some employees work from home through <i>online</i> modalities?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.14 Is your LGU website operational?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.15 If the answer to 3.14 is "YES" - has there been an increase in queries via the website?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.16 If the answer to 3.14 is "YES" - are more staff hired to respond quickly to queries?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.17 Given the situation, are you considering the introduction of new e-services for citizens?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.18 3.18 If the answer to 3.17 is "YES" - which services would be a priority?	

3.19 If the answer to 3.17 is "YES" - what resources does your LGU need to enable the introduction of new e-services?	
3.20 If the answer to 3.17 is "YES" - would donor assistance be helpful?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.21 What are the needs of LGUs when it comes to strengthening your capacity to respond to a pandemic? (human resources, finances, training, other)	
4. Did the LGU have difficulties in procuring funds for mitigation/prevention of infection?	YES <input type="checkbox"/> NO <input type="checkbox"/>
4.1 If the answer is "YES" - how to overcome (such) difficulties in procurement in the future?	

3. HEALTH MEASURES FOR PANDEMIC PREVENTION

5. Is quarantine established in your LGU?	YES <input type="checkbox"/> NO <input type="checkbox"/>
	Is quarantine established in your LGU at the border crossing (if applicable to your LGU)?
	YES <input type="checkbox"/> NO <input type="checkbox"/>
5.1 If the answer is "YES" - please note which facility(s) were used for quarantine?	
5.2 If the answer under 5. is "YES" - does the LGU have additional needs for better functioning/equipping of quarantine? (<i>extra beds, bedding, hygiene/cleaning products, food, other... if "yes" - estimate quantities...</i>)	

<p>5.3 Which services ensure compliance with the adopted measures for natural/legal persons? <i>(quarantine/isolation, curfew, suspension of business entities...)</i></p>	
<p>5.4 Are MZs engaged in implementing measures to protect against the spread of the virus?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
<p>5.5 If the answer is "YES" - please describe the role of MZs in the implementation of infection protection measures in LGU.</p>	
<p>5.6 What are the biggest challenges faced by the authorities in implementing the measures? <i>(indiscipline of the population, non-compliance of suspension of businesses, violation of movement bans, violation of isolation measures...).</i> What can help to better respect the introduced measures? <i>(more rigorous criminal regulations, media campaign, awareness raising, modern technologies (GPS, face recognition, other...)</i></p>	
<p>6. Do you have an estimate of how many people in your LGU lost their jobs? <i>(personal protective equipment, medical devices, disinfection, staff, other...)</i></p>	

4. VULNERABLE CATEGORIES AND SOCIAL PROTECTION

7.	Has your LGU assessed the needs of vulnerable categories during a pandemic?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	7.1 If the answer is "YES" – please explain which institution did the assessment and how?		
	7.2 Do you have an updated list of those in social need?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	7.3 Has the LGU provided financial assistance to vulnerable categories?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	7.4 Has the LGU provided assistance packages to vulnerable categories?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	7.5 If the answer to 7.4 is "YES" – who provided packages to vulnerable categories? (<i>social welfare centre, volunteers, MZ...</i>)		
	7.6 Are MZs engaged in helping vulnerable categories?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	7.7 If the answer is "YES" - please describe the role of MZs in helping vulnerable categories.		
	7.8 Do you have a soup kitchen operational in your LGU?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	7.9 If the answer is "YES" - what is the number of beneficiaries of the soup kitchen? (enter number →)		
	7.10 Do you require additional funding to maintain the normal functioning of the soup kitchen?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	7.11 Did the number of beneficiaries increase in the course of the pandemic?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	7.12 If the answer to 7.11 is "YES" – please assess the percentage of increase (enter percentage →)		%
	7.13 What are the biggest challenges faced by your LGU in protecting the most vulnerable categories in this crisis? (<i>population apathy, lack of money, lack of hygiene/food packages, lack of staff/volunteers, lack of information, other...</i>).		

7.14 What are the current biggest needs of LGUs for helping vulnerable people? (<i>psychological assistance, financial resources, assistance packages, personal assistants, medicines, home care, other...</i>)	
7.15 Have you noticed that people who traditionally do not belong to vulnerable categories become vulnerable?	YES <input type="checkbox"/> NO <input type="checkbox"/>
7.16 If the answer to 7.15 is "YES" – what are the characteristics of new vulnerable categories?	
7.17 If the answer to 7.15 is "YES" - is there a support system for new vulnerable categories?	YES <input type="checkbox"/> NO <input type="checkbox"/>
7.18 If the answer to 7.17 is "NO" - is a support system in place for new vulnerable categories?	YES <input type="checkbox"/> NO <input type="checkbox"/>
7.19 If the answer to 7.18 is "NO" - what is the most useful thing to do for new vulnerable categories?	
8. Has the LGU undertaken concrete activities so that all children can attend classes remotely?	YES <input type="checkbox"/> NO <input type="checkbox"/>
8.1 If the answer is "YES" - please describe the activities undertaken (<i>whether there is cooperation with schools in identifying persons and needs, whether MZs help, whether assistance was provided in the form of procurement of necessary equipment, other ...</i>)	
9. Has there been an increase in domestic violence during the self-isolation of the population?	YES <input type="checkbox"/> NO <input type="checkbox"/>
10. Do you have support services for those who are exposed to violence? (SOS phones, safe houses ...)	
10.1 If the answer to 10. is "YES" – are these in function?	YES <input type="checkbox"/> NO <input type="checkbox"/>
10.2 If the answer to 10.1 is "YES" - do these services work in the pandemic?	YES <input type="checkbox"/> NO <input type="checkbox"/>
10.3 Has the LGU introduced (in partnership with NGOs, social welfare centre or other actors) alternative services or support?	YES <input type="checkbox"/> NO <input type="checkbox"/>
10.4 If the answer to 10.3 is "YES" - please indicate which:	

10.5 If the answer to 10.3 is "NO" - please indicate why no alternative services or support measures have been introduced?	
10.6 If you have knowledge of the existence of alternative services or support measures, please list and describe them:	
11.	Has the private sector helped the most vulnerable categories of society? YES <input type="checkbox"/> NO <input type="checkbox"/>
11.1 If the answer is "YES" - please write more details (<i>what kind of assistance, how many interventions ...</i>)	
12.	Please describe the role of the social welfare centre during the pandemic, and the cooperation between the SWC, the crisis staff, LGU bodies and citizens. Was the communication satisfactory? What is the difference compared to the regular activities of the SWC?

5. ECONOMY

13.	Has the LGU assessed the negative impacts of the pandemic on the economy in the LGU? YES <input type="checkbox"/> NO <input type="checkbox"/>
13.1 If the answer is "YES" - how did you come to the assessment? (<i>survey, direct contact ... describe</i>)	
14.	How many business entities in the LGU have completely stopped working? (give an estimate number or percentage →)
15.	How many business entities in the local self-government perform in reduced capacity? (give an estimate number or percentage →)
16.	How many business entities in the LGU perform in their full capacity? (give an estimate number or percentage →)
17.	Do you have an estimate of how many people in the LGU lost their jobs? (give an estimate number or percentage →)
18.	Has the LGU developed a strategy for mitigating the consequences on the economy in the LGU? YES <input type="checkbox"/> NO <input type="checkbox"/>

19.	Does the LGU provide incentives to employers to mitigate the impacts of the crisis?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
19.1 If the answer is "YES" - please indicate which types of incentives?			
20.	Did the LGU reallocate the budget in order to mitigate the crisis?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
20.1 If the answer is "YES" - please indicate for what purpose the reallocation was done?			
21.	Has the LGU initiated donor fundraising activities?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
21.1 If the answer is "YES" - is there a plan for spending the collected funds and who participated in the development of the plan?			
22.	Have economic entities, where possible, shifted to the production of protective equipment and means?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
23.	Has the LGU allocated public areas for agriculture?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
23.1 If the answer to 23. is "YES" - please write the categories of beneficiaries (<i>individuals, cooperatives, businesses</i>)			
23.2 If the answer to 23. is "YES" - please indicate the manner in which the award was made? (Were there any conditions, criteria...? Please note how was the turnout of beneficiaries.			
23.3 Would project support be useful?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
23.4 If the answer to 23.3 is "YES" - please note what kind of support (<i>education, cash for work schemes so that part of the food grown is distributed to the poor, for example, grants for the formation of cooperatives and delivery of products to households, hospitals, tools, seeds</i>)			

6. CITIZENS' OUTREACH

24.	Does your outreach strategy include communication in crisis situations?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
25.	Does the crisis staff hold regular press conferences?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
26.	Does the LGU use social networks or alternative forms of communication (<i>door-to-door, personal letters</i>)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
27.	Is the information from your LGU represented in the programmes of public service broadcasters and major media outlets?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
28.	Are MZs engaged in timely informing of citizens of LGU?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	28.1 If the answer is "YES" - how?		
29.	What difficulties were identified in communicating with the citizens by the LGU during the pandemic? (specify)		
30.	Were there any problems with misinformation in your LGU?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	30.1 If the answer is „YES“ - describe what are the problems and how did you overcome these.		

7. THE ROLE OF MZs

31. Did the LGU engage MZs during the pandemic?	YES <input type="checkbox"/> NO <input type="checkbox"/>
31.1 If the answer is "YES" - for which activities and tasks and in what way were these tasks assigned? <i>(decision, order, instruction, other)</i>	
32. If the answer under 31. "YES" - how did MZs respond to the new tasks?	
33. Did MZs organize volunteer teams?	YES <input type="checkbox"/> NO <input type="checkbox"/>
34. Do MZs communicate directly with the crisis staff?	YES <input type="checkbox"/> NO <input type="checkbox"/>
35. Do MZs communicate directly with the civil protection?	YES <input type="checkbox"/> NO <input type="checkbox"/>
36. Do MZs communicate directly with the social welfare centre?	YES <input type="checkbox"/> NO <input type="checkbox"/>
37. Is MZ involved in disinfection activities?	YES <input type="checkbox"/> NO <input type="checkbox"/>
38. Has there been an example of women's leadership or volunteer initiative among citizens in your LGU?	YES <input type="checkbox"/> NO <input type="checkbox"/>
38.1 If the answer is "YES" - give an example and please write the contact details of the person(s)	
39. How does the LGU coordinate the work of the MZ in this crisis situation? <i>(specify)</i>	
40. Have fundraising/assistance activities been initiated within the MZ?	
40.1 If the answer is "YES" - what types of actions? <i>(raising money, collecting packages, help from the diaspora...)</i>	

41.	How do LGUs provide information to MZs and CSOs? <i>(specify)</i>	
42.	Do you use the community hub during a pandemic?	YES <input type="checkbox"/> NO <input type="checkbox"/>
42.1 If the answer is "YES" - describe for what purposes?		
43.	What is the most important and critical role of MZs in the emerging situation?	
44.	In your opinion, where is the most important thing for MZs to do, but they cannot because of lack of funds, competences or other reasons?	
45.	If part of the activity could currently be transferred from LGUs to MZs, what service or role would it be?	
46.	What are the biggest needs of your MZs at the moment? <i>(finances, material resources, human resources, information, mental health support, other... specify)</i>	

8. YOUR TAKE ON THE SITUATION SO FAR

47. Please share your take on the crisis so far, the response of LGUs and MZs to the pandemic (*list the biggest challenges and your positive and negative experiences*)

48. If more than one person / service / institution participated in completing this survey, please list them:

MZ: Questionnaire on the impacts of the coronavirus pandemic on partner MZs within the project “Strengthening the Role of MZs in Bosnia and Herzegovina”

1. BASIC DATA

MZ name: _____

LGUs: _____

City / Municipality

Submitted by: _____ Role in the MZ: _____
(Name and surname) (President, a member of an MZ body, activist)

Date: _____ Phone: _____

2. THE ROLE OF MZs

1.	Is your MZ engaged in preventing the spread of the virus?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
2.	Has the LGU engaged your MZ to prevent the spread of the virus?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	2.1 If the answer is “YES” - what tasks are assigned to your MZ and how? <i>(decision, order, instruction, other.) Please also describe how the LGU coordinates the work of MZs in this crisis situation.</i>		
3.	If the answer under 1. is “YES” - please describe your role and activities in preventing the spread of the virus.		
4.	If the answer under 2. “YES” - rate and describe how your MZ responded to the new tasks. <i>(What do you think was done well? What could be better?)</i>		

5.	Does your MZ communicate directly with the crisis/emergency staff?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
6.	Does your MZ help the work of the civil protection service in the pandemic?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	6.1 If the answer is "YES" - describe in what way? (What are your activities, what are the requirements of the Civil Protection, etc...)		
7.	Does your MZ help the work of the social welfare centre in the pandemic?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	7.1 If the answer is "YES" - describe in what way? (What are your activities. What are the requests/pleases of the centre for social welfare, etc.)		
8.	If your MZ has supported the work of other services/institutions, please list them and describe your activities.		
9.	How does the LGU provide information to MZs? (<i>letter, phone, e-mail... describe...</i>)		
10.	Do you get information about the needs of the population in MZ? If "YES", specify all ways (<i>direct contact, phone, Viber, Facebook, e-mail, other ways...</i>)		

11.	Do you get information about vulnerable categories? (Beneficiaries of social assistance, Roma, persons with disabilities...) If "YES", state from whom? (direct contact, from the social welfare centre, from citizens, from LGU, other...)	
12.	What are the most common requests/pleas you receive from citizens in your MZ in the pandemic? (<i>hygiene/food packages, protective equipment, disinfectants, support in following online classes, sowing products, psychological assistance, other health needs, financial resources, human resources, information, other... list all</i>)	
13.	Does your MZ participate in providing assistance to vulnerable categories?	YES <input type="checkbox"/> NO <input type="checkbox"/>
	13.1 If the answer is "YES" - what kind of assistance do you provide and in what way?	
	13.2 If the answer to 13. is "YES" - how do you help the population over 65?	

13.3 If the answer to 13. is “YES” - please write/estimate the number of delivered packages / distributed masks / made masks / kilograms of seed material / ... and other activities that your MZ carries out in the pandemic. Please estimate the number of those benefiting from your activity, consider situations such as if one package was delivered to a family of two or if more than one mask (five/ten) was delivered to one person and the like. NOTE: write down the activities that take place in your MZ, but are not listed in the table below.

ACTIVITY	DATA (piece, kilogramme, facility, area in m2)	NUMBER OF BENEFICIARIES (persons)
Example: Distribution of packages	1000	1500
13.3.1 Distribution of food packages		
13.3.2 Distribution of hygiene packages		
13.3.3 Distribution of protective masks		
13.3.4 Making protective masks		
13.3.5 Distribution of protective gloves		
13.3.6 Disinfection of facilities		
13.3.7 Disinfection of streets/public spaces		
13.3.8 Distribution of seed material		
13.3.9 Checking in on persons in self-isolation		
13.3.10		
13.3.11		

13.4 Have you noticed that people who traditionally do not belong to vulnerable categories become vulnerable?	YES <input type="checkbox"/> NO <input type="checkbox"/>
13.5 If the answer to 13.4 is "YES" – what are the characteristics of new vulnerable categories?	
13.6 If the answer to 13.4 is "YES" - is there a support system for new vulnerable categories?	YES <input type="checkbox"/> NO <input type="checkbox"/>
13.7 If the answer to 13.6 is "NO" - is a support system in place for new vulnerable categories?	YES <input type="checkbox"/> NO <input type="checkbox"/>
13.8 If the answer to 13.7 is "NO" - what is the most useful thing to do for new vulnerable categories?	
14. Does your MZ help children in MZ to follow online classes?	YES <input type="checkbox"/> NO <input type="checkbox"/>
14.1 If the answer is "YES" - how? (<i>procurement of equipment, provision of internet access, information to LGU, other...</i>)	
15. Has your MZ organised volunteer teams in the pandemic?	YES <input type="checkbox"/> NO <input type="checkbox"/>
15.1 If the answer is "YES" - what is the number of volunteers? (enter number →	
15.2 If the answer to 15. is "YES" - for which activities were the volunteers of your MZ engaged? (specify...)	

16.	Has there been an exceptional example of women's leadership or volunteer initiative recorded in your MZ?	YES <input type="checkbox"/> NO <input type="checkbox"/>
16.1 If the answer is "YES" - give an example and please write the contact details of the person(s)		
17.	Does your MZ inform citizens about the prescribed protection measures?	YES <input type="checkbox"/> NO <input type="checkbox"/>
17.1 If the answer is "YES" - how often do you inform citizens? (<i>daily, two-day, when needed, other...</i>)		
17.2 If the answer to question 17 is "YES" - how do you inform citizens [direct contact, phone, Viber, posters, social networks (list all social networks you use), e-mail, other...]		
18.	Do the citizens of your MZ use the community center during a pandemic?	YES <input type="checkbox"/> NO <input type="checkbox"/>
18.1 If the answer is "YES" - describe for what purposes.		
19.	Does your MZ cooperate with civil society organisations on the prevention of the spread of the virus?	YES <input type="checkbox"/> NO <input type="checkbox"/>
19.1 If the answer is "YES" - please provide the names of the organisations?		
20.	Is the scope of your engagement and MZ activities in the pandemic, compared to the period before the crisis:	
SMALLER <input type="checkbox"/> SAME <input type="checkbox"/> HIGHER <input type="checkbox"/> SIGNIFICANTLY HIGHER <input type="checkbox"/>		

21.	What is the most important and critical role of MZs in the emerging situation?
22.	In your opinion, where is the most important thing for MZs to do, but they cannot because of lack of funds, competences or other reasons?
23.	If part of the activities/services could currently be transferred from LGUs to MZs, which activities/ services would those be?

3. YOUR TAKE ON THE CRISIS SO FAR

24.	Please share your take on the crisis so far, the response of LGUs and yours and others' MZs to the pandemic (<i>list the biggest challenges and your positive and negative experiences</i>)

CSO: Questionnaire on impacts of the coronavirus pandemic on partner CSOs (Civil Society Organisations) within the project “Strengthening the Role of MZs in Bosnia and Herzegovina”

1. BASIC DATA

CSO name: _____

LGU: _____

City / Municipality

Submitted by: _____ Role in the CSO: _____
(Name and surname) *(management, board member, member, activist)*

Date: _____ Phone: _____

Please list the key areas of activity of your CSO:

Is WOMEN’S EMPOWERMENT one of the fields of action of your CSOs? **YES** **NO**

If the answer is “YES” – women’s empowerment for your CSO is:
MAIN FIELD OF ACTION **MAJOR FIELD OF ACTION** **OCCASIONALLY / PARTIALLY**

Annual budget of CSO: _____ Number of CSO members: _____
(enter the number of active members)

2. THE ROLE OF CIVIL SOCIETY ORGANISATION

1.	Is your CSO engaged in preventing the spread of the virus, on its own initiative and with its own resources?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
2.	Has the LGU engaged your CSO to prevent the spread of the virus?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
2.1	If the answer is “YES” - what tasks are assigned to your CSO and how? <i>(decision, order, instruction, other...)</i>		

3.	If the answer under 1. is "YES" - please describe your role and activities in preventing the spread of the virus.
4.	If the answer under 2. is "YES" - rate and describe how your CSO responded to the new tasks. <i>(What do you think was done well? What could be better?)</i>
5.	Does your CSO communicate directly with the crisis/emergency staff? YES <input type="checkbox"/> NO <input type="checkbox"/>
6.	Does your CSO help the work of the civil protection service in the pandemic? YES <input type="checkbox"/> NO <input type="checkbox"/>
6.1 If the answer is "YES" - describe in what way? (What are your activities, what are the requirements of the Civil Protection, etc...)	
7.	Does your CSO help the work of the social welfare centre in the pandemic? YES <input type="checkbox"/> NO <input type="checkbox"/>
7.1 If the answer is "YES" - describe in what way? (What are your activities. What are the requests/pleases of the social welfare centre, etc.)	

8.	If your CSO has supported the work of other services/institutions, please list them and describe your activities.
9.	Has your CSO established cooperation with MZs in LGU on infection prevention? YES <input type="checkbox"/> NO <input type="checkbox"/>
9.1 If the answer is "YES" - please provide the names of MZs and describe your cooperation.	
10.	If you are familiar with an example of an infection prevention initiative or engagement in your community (e.g. team of volunteers, social welfare centre, civic initiative, etc.) please specify (regardless of whether or not your CSO is directly involved)
11.	How do you inform citizens about your pandemic activities/assistance? (direct contact, phone, Viber, social networks, other.... describe...)
12.	How do you get information about the needs of the population? (<i>direct contact, phone, Viber, Facebook, e-mail, other ways... specify all</i>)

13.	How do you get information on vulnerable categories, that is, beneficiaries of social assistance, Roma, people with disabilities and others ...? (direct contact, from the social welfare centre, from citizens, from LGU, from MZs, other...)		
14.	Have you noticed that people who traditionally do not belong to vulnerable categories become vulnerable?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	14.1 If the answer to 14. is "YES" – what are the characteristics of the new vulnerable categories?		
	14.2 If the answer to 14. is "YES" – is there a support system for new vulnerable categories?		YES <input type="checkbox"/> NO <input type="checkbox"/>
	14.3 If the answer to 14.2 is "NO" - is a support system in place for new vulnerable categories?		YES <input type="checkbox"/> NO <input type="checkbox"/>
	14.4 If the answer to 14.3 is "NO" - what is the most useful thing to do for new vulnerable categories?		
15.	What are the most common requests/pleas you receive from citizens in the pandemic? (<i>hygiene/ food packages, protective equipment, disinfectants, support in following online classes, sowing products, psychological assistance, other health needs, financial resources, human resources, information, other... list all</i>)		
16.	Does your CSO participate in providing assistance to vulnerable categories?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	16.1 If the answer is "YES" - what kind of assistance do you provide and in what way?		

16.2 If the answer to 16. is "YES" - how do you help the population over 65?		
17.	Does your CSO help children in LGU to follow online classes?	YES <input type="checkbox"/> NO <input type="checkbox"/>
17.1 If the answer is "YES" - how? (<i>procurement of equipment, provision of internet access, information to LGU/MZ, other...</i>)		
18.	Has your CSO organised volunteer teams in the pandemic?	YES <input type="checkbox"/> NO <input type="checkbox"/>
18.1 1 If the answer is "YES" - what is the number of volunteers? (enter number →		
18.2 If the answer to 18. is "YES" - for which activities were the volunteers of your CSO engaged? (specify...)		
19.	Has there been an example of women's leadership or volunteer initiative in your LGU?	YES <input type="checkbox"/> NO <input type="checkbox"/>
19.1 If the answer is "YES" - give an example and please write the contact details of the person(s) (in case you have any)		
20.	Has your CSO organised a fundraiser? (humanitarian actions, crowdfunding ...)	YES <input type="checkbox"/> NO <input type="checkbox"/>
20.1 If the answer is "YES" - please indicate how and from whom the fundraising took place and for what purpose?		

21.	Have you received any financial assistance?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	21.1 If the answer is "YES" - who provided you with the assistance? (LGU, higher levels, private companies, citizens, diaspora, <i>other</i>)		
22.	Did you receive help with materials/funds?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	22.1 If the answer is "YES" - who provided you with the assistance? (LGU, higher levels, private companies, citizens, diaspora, <i>other</i>)		
23.	What are the biggest needs of your CSO currently? (...describe...)		
24.	Where do you see the needs in society and what else would you do that you cannot do due to lack of funds, staff, expertise and the like...		
25.	Is the scope of your engagement and CSO activities in the pandemic, compared to the period before the crisis:		
	SIGNIFICANTLY SMALLER <input type="checkbox"/> SMALLER <input type="checkbox"/> SAME <input type="checkbox"/> HIGHER <input type="checkbox"/> MUCH HIGHER <input type="checkbox"/>		
26.	Have you temporarily suspended your regular activities and projects due to the pandemic?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
27.	Does your CSO provide assistance/support outside of your LGU?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
28.	Has your CSO, since the beginning of the pandemic, established cooperation with other CSOs?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

3. YOUR TAKE ON THE CRISIS SO FAR

29. Please share your take on the crisis so far, the response of LGU, MZs, your CSO, but also other CSOs to the pandemic (*list the biggest challenges and your positive and negative experiences*).

