
Building Community Capacity During a Crisis: The Response of NGOs, Local Churches, and CBOs to COVID-19 in El Salvador

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In the middle of a compounding health and hunger crisis in El Salvador, church and community leaders have catalyzed their relationships of trust and previous experience in community development to care for the most vulnerable families in their communities. The following paper discusses how staff from a Salvadoran, faith-based, non-governmental organization (NGO) have responded to and worked with leaders from 56 local churches and 92 community-based organizations (CBOs) in El Salvador to manage the complicated and dynamic conditions generated by COVID-19. The paper draws on monitoring data, including surveys of church and community leaders, stakeholder meetings, and staff field visits, to describe the exercise of community capacity by local leaders. The discussion uses Robert Chaskin's operational model of community capacity to identify how local leaders build upon and generate new capacities in the midst of a protracted crisis. There is emerging evidence that the relief and recovery efforts directed by church and community organizations have served to strengthen community capacity in a number of critical areas. The paper closes by describing how NGOs and other third-party organizations can direct programs to strengthen community capacity in the short-term in order to support church and community leaders' efforts for long-term holistic change.

Introduction

The COVID-19 pandemic in El Salvador has significantly altered the routine activities and plans of life and work in a very short period of time. The abrupt change has required organizations involved in the long-term work of holistic transformation to temporarily shelve pre-existing annual plans and to refocus their energies on addressing the critical needs of Salvadorans whose vulnerabilities have been exacerbated by the crisis. For ENLACE, a Salvadoran faith-based, non-government organization (NGO), this has meant suspending all community development projects, such as water and sanitation projects and housing and economic development initiatives, to help church and community leaders identify and care for the growing number of families experiencing food insecurity and health issues. It has been a moment of significant

reorientation as well as an opportunity to evaluate whether the community development work carried out prior to March 12, 2020, has enabled ENLACE staff and community stakeholders to capably address the novel and difficult challenges that have emerged due to the crisis.

The following discussion describes what is occurring in real time as ENLACE's key stakeholders, which consists of leaders from 56 churches and 92 community-based organizations (CBOs), manage the complicated and dynamic conditions generated by COVID-19. The information we present is drawn from participation in weekly staff meetings, from conversations with ENLACE staff about the dynamics of relief efforts, and from a recent survey of church and community stakeholders engaged in the work.¹ The reflections we offer here are not the outcome of a

¹ ENLACE staff trained church and community leaders to collect survey data through digital questionnaires that were collected, processed, and analyzed at the ENLACE offices from April to June 2020. Survey data included socio-demographic, employment, food security, and health-related questions, along with multiple items related to the impacts of the pandemic on participating households. A total of 112 surveys were completed and processed.

formal process of program assessment. Rather, they are observations generated in the short-term that form part of the regular practice of “causal link monitoring,” which directs community development practitioners to pay attention to, identify, and note the processes and contextual factors that shape how a program or project actually develops over time (Britt, Hummelbrunner, and Greene 2017, 8; Huff 2020). The emerging evidence we discuss in this paper is the result of our inductive review of monitoring data that has been collected by ENLACE staff since March 2020.

Notably, this paper is one outcome of a long-term, practitioner-scholar collaborative research project on Pentecostal congregations and community development in El Salvador. Ron Bueno is Co-founder and Executive Director of ENLACE and James Huff has consulted with ENLACE’s research and evaluation program since 2008. Maintaining a long-term and systematic research project that blends organizational insider know-how and evaluation consulting experience has proven beneficial. For example, our status as insiders has made it possible to quickly obtain quality information about the dynamic and changing conditions generated by the pandemic in many different communities across El Salvador. We have also been able to regularly consult with and receive informative feedback from staff and community leaders about the findings explored in this paper.

Working as researchers with insider status, however, also implies various limitations. For example, the monitoring data generated by ENLACE staff provides real-time information on how approximately sixty different churches are addressing problems caused by the pandemic. The findings we discuss, however, are not necessarily representative of how most Pentecostal churches in El Salvador are presently responding to the crisis. We acknowledge, therefore, that reporting on a relatively small subset of churches limits the external validity of the preliminary findings discussed in this paper. We also recognize that the ongoing and close interpersonal relationships we maintain with staff and community stakeholders (and most notably for Ron Bueno) is both ethnographically productive and ethically challenging (Bornstein 2011).²

Our review of the monitoring and survey data was guided by two central questions. First, is there any evidence that local church and community leaders are leveraging community capacity to respond to the disruptive changes caused by the COVID-19 crisis?

Second, and relatedly, how has ENLACE as a third-party organization adapted its community development efforts to support local leaders’ community capacity as the crisis has unfolded? Our initial, inductive examination suggests that many of ENLACE’s key stakeholders are, in fact, drawing on existing community capacity to work creatively and effectively to mitigate some of the adverse impacts of COVID-19 in their communities.

The paper is organized into four primary sections. The opening section summarizes some basic ideas from the literature on community capacity and community-capacity building. It focuses specifically on Robert Chaskin’s (2001) conceptualization of community capacity. The building of local community capacity is a stated core outcome of ENLACE’s theory of change, and Chaskin’s model provides a helpful framework for identifying the key assumptions embedded within the organization’s work with church and community leaders. The short section that follows summarizes the core elements of ENLACE’s approach to community transformation. Next, we describe the spread and impact of the pandemic in El Salvador and the government’s response since March 2020. The main body of the article utilizes Chaskin’s model to consider how community capacity is being formed and utilized by church and community leaders as they look for practical ways to respond to the needs of vulnerable neighbors. Community capacities are always exercised in complex and changing circumstances, and the pandemic has created unique challenges for local stakeholders who were already managing different development initiatives prior to March. To conclude the paper, we provide three initial learnings that can be applied to the design of relief and recovery initiatives by third-party organizations that could enhance community capacity during a prolonged crisis like COVID 19.

What Is Community Capacity?

Both community capacity and community capacity-building are concepts that have been embraced and promoted by scholars and practitioners working in diverse fields, including public health, urban housing and community development, rural economic development, and social work, to name a few (Beckley, Martz, Nadeau, Wall, and Reimer 2008; Simmons, Reynolds, and Swinburn 2011). Scholars and

² As two anthropologists who are working for (as is the case for Ron Bueno) or with (as is the case for James Huff) ENLACE, we remain aware that our positionality provides us with easy access to observing and documenting internal organizational dynamics that are often unknown or inaccessible to outside researchers. This same positionality also complicates the relationships we create with stakeholders, many of whom are ENLACE employees or participants in ENLACE-supported initiatives. See Lewis and Schuller (2017:639-641) for a helpful discussion about the ethical tensions and methodological challenges posed for researchers who work either for or with NGOs like ENLACE.

practitioners often discuss and debate various definitions and operationalizations of the concepts within their own guild. The development of comprehensive and accessible concepts that can be readily used by practitioners working in diverse fields of social change remains an important goal to achieve.

Simmons, Reynolds, and Swinburn (2011) identified fifteen different definitions of community capacity-building in their systematic review of public health research. They observed three features shared by various definitions of the concept – it is understood to be a process, it is not “one definitive thing but a collection of . . . domains, characteristics, aspects, capabilities or dimensions” and, finally, it assumes an “end point, an outcome, or rationale” (Simmons, et al. 2011, 196-197). For many scholars the concept of community capacity is grounded in the question: “The capacity to do what?” (Beckley, et al 2008, 61). The question suggests that the process of capacity building generates or enhances characteristics or capabilities that are also generative phenomena. For example, programs that focus on strengthening the ability of local leaders to collectively address shared problems could increase access to local health care services, catalyze rural economic growth, or bolster watershed conservation efforts, to name a few common examples.

Chaskin (2001) has developed a comprehensive and accessible definition that can be more readily operationalized by practitioners (see also Chaskin et al. 2001). He describes it as “the interaction of human capital, organizational resources, and social capital existing within a given community that can be leveraged to solve collective problems and improve or maintain the well-being of a given community (2001, 295). Such interactions, for Chaskin, can function as part of “informal social processes” or as part of an “organized effort” of change (Chaskin 2001, 295). Moreover, his use of the term “leverage” to characterize the interactive process of capacity-building is one that incorporates the strengths that already exist within a given community (see also Simmons, et al. 2011, 198).

Chaskin’s operational model identifies four fundamental characteristics that comprise community capacity. These include: “(1) a sense of community, (2) a level of commitment among community members, (3) the ability to solve problems, and (4) access to resources” (2001, 295-296). He defines a sense of community as a “degree of connectedness” that members share, which can be expressed affectively or

instrumentally, and that enables them to work together towards common goals (Chaskin 2001, 296). How much responsibility “individuals, groups, or organizations take for what happens in the community” describes the level of commitment characteristic (Chaskin 2001, 296). Commitment level implies that there are people who in fact consider themselves to be stakeholders in the “collective well-being” of the community and who embody a willingness to “participate actively in that role” (2001, 296). The third characteristic, the ability to solve problems, simply refers to the process by which community members turn “commitment into action,” which can be exercised through “formal or informal means, spontaneously or through planned action” (Chaskin 2001, 297). The final characteristic of community capacity concerns the level of access that community members have to economic, human, physical, and political resources, both within and beyond their immediate place of residence (Chaskin 2001, 297).³

In this paper, we utilize these four primary characteristics to analyze and evaluate the dynamics of community capacity observed in our work with church and community leaders during their response to the pandemic. To be sure, Chaskin’s definition incorporates terms that also warrant further clarification (e.g., social capital). Nevertheless, we find his operationalization to be especially useful, due to his development of a relational and multidimensional model that makes it possible for organizations like ENLACE to better clarify and articulate the theory of change that guides their strategic choices and investment of resources.

ENLACE’s Approach of Community Capacity-Building

ENLACE is a faith based, non-profit organization established in El Salvador in 1993. The organization’s stated mission is to train and resource local evangelical and Pentecostal congregations to partner effectively with community-based organizations to alleviate spiritual and physical poverty. ENLACE staff train and coach church leaders for seven to ten years to envision and mobilize church members to engage in community transformation. Staff spend multiple hours two to three times per month with leaders from each church, facilitating Bible studies, conducting workshops on how to interview or work with CBOs and leaders,

³ Chaskin’s operational model also assumes that interactions that occur within multiple, interrelated dimensions. One of these dimensions is especially germane to our discussion. It concerns the domains and social contexts where the characteristics of community capacity (e.g., sense of community, etc.) are embedded. The model identifies three different and interrelated “levels of social agency” within which these characteristics emerge and develop, including the individual, organizational, and network levels (Chaskin, 2001, 297-298). Our focus in this paper is on the individual and organizational levels.

participating in community meetings with church and community leaders, and helping the church and community identify, design and oversee local development projects. ENLACE's theory of change incorporates key elements of Chaskin's model. Namely, it assumes that enhancing local leaders' community capacity to define community problems, identify local resources, and design and implement initiatives is fundamental to improving the socio-economic, health, and environmental conditions of the communities they inhabit.

ENLACE's approach focuses on training church leaders to partner effectively with community-based organizations to strengthen community capacity to address multidimensional poverty. ENLACE staff train church leaders on how to approach, strengthen, and work with community leaders and CBOs, such as an *Asociación de Desarrollo Comunitario* (Community Development Association, ADESCO), local water boards, parent-teacher organizations (PTOs), and health committees. The staff focus on building leaders' capacities in various areas, including the identification of community problems through baseline research; the design, implementation, and evaluation of community-led initiatives; and the mobilization of local and external resources from private and public sources. At the time of the research, ENLACE was working with 63 churches who were partnering with over 200 CBOs in 224 different communities in El Salvador. These church partners have been working with local CBOs to strengthen their sense of community, to exercise a joint commitment to community well-being, and to mobilize resources to address shared problems prior to the onset of the pandemic. This ongoing work was abruptly interrupted in March with the onset of the COVID-19 crisis, leading us to ask the central question of this paper: how would previous processes of community capacity-building develop in the changing and disruptive conditions created by the pandemic?

Compounding health and economic crisis in El Salvador

El Salvador is one of the poorest countries in the Western hemisphere. 36.5 percent of its population of 6.1 million people live in extreme poverty. Seventy-five percent of Salvadorans are un- or underemployed working in the informal sector. More than half of all households in El Salvador experience some level of food shortages. Seventy percent of the population only have access to public health services, which are limited and primarily provide first-level medical attention.

As of September 2020, the total number of recorded COVID-19 cases in El Salvador was just under 27,000, and 774 Salvadorans had died because of the virus (Johns Hopkins Coronavirus Resource Center 2020). Obtaining reliable morbidity and

mortality figures for the virus in El Salvador has proven difficult. Ministry of Health officials, for example, acknowledged that deaths caused by the virus were very likely being undercounted (Calderon, June 1, 2020). The number of hospital beds is far less than is required, so the vast number of patients are being treated or are in recovery at home.

The national government's response to the pandemic, and specifically the directives issued from President Nayib Bukele's administration, has been described by one observer as an "improvised strategy" (El Salvador Perspectives, June 28, 2020). The administration's aggressive approach was officially enacted with an executive order (*Estado de Emergencia Nacional, Estado de Calamidad Pública y Desastre Nacional*) on March 11, which mandated a national quarantine consisting of airport and border closures, the suspension of all educational activities, and the establishment of quarantine centers for people who had been exposed to the virus or who had violated stay-at-home orders ("At 100-Day Mark," June 28, 2020).

By early April, the national government unveiled a plan to mitigate the negative economic impacts of the national quarantine. This included a subsidy payment of \$300 per household, and a temporary suspension on mortgage and utilities payments and on loans and tax obligations ("El Salvador under Quarantine," April 3, 2020). Although the initial rollout of the subsidy payment did not occur smoothly, and there were widespread reports of households not receiving the payment, the government eventually delivered the subsidy to approximately 480,000 households for a total of nearly \$144 million ("El Salvador under Quarantine," April 3, 2020). When COVID-19 cases began to steadily increase, President Bukele announced the implementation of more aggressive lockdown measures to prevent its spread. These included stay-at-home restrictions that allowed Salvadorans to only leave their homes twice weekly to purchase food and medicine ("Lockdown," May 5, 2020). As lockdown measures remained in place, the government also attempted to address the increase in food insecurity. It eventually distributed 2.7 million baskets of basic foodstuffs to Salvadoran households.

The impacts of the pandemic, along with the effects generated by measures to prevent the spread of the virus, are significant for all Salvadorans, and especially for families residing in the rural and semi-rural communities where ENLACE's church and community partners work. A preliminary report generated by ENLACE staff, which draws on interview data with 83 church and community leaders from 34 rural, semi-rural, and urban communities, makes clear the acute difficulties that many Salvadorans presently face.

Interview participants identified five primary economic problems generated by the crisis. First, there has been a significant loss of income for many households. This has been especially the case for communities located near industrial zones, where many residents ordinarily receive an income through formal sector employment. Members of these same households have not been able to supplement the household economy through work in other income-generating activities (e.g., working temporarily in the agricultural sector).

Second, quarantine-related restrictions have made it very difficult, and in many cases entirely impossible, for people in informal sectors to carry out the work that ordinarily sustains their families. This impact is especially important given that 47% of the Salvadoran economy operates in the informal sector, and is expected to grow significantly over the next 15 months. The implementation of social distancing protocols required the closure of commercial centers, of industrial parks, and of most service-oriented worksites across the country.

A third problem that was reported was that many families have been unable to obtain basic foodstuffs. In some cases, interviewees explained that this was caused by lack of supply (e.g., in local stores supplies in some locales are not adequately stocked due to supply chain interruptions); in other cases, families reported not having adequate income to purchase the foods that are needed by household members.

Fourth, some families in rural areas reported that they have not been able to carry out the ordinary routines of agricultural work. Farmers have reported that the planting season has been disrupted because government-supplied inputs have not arrived and, therefore, crops could not be planted.

Finally, interview participants noted reports of declines in financial support (e.g., remittances) coming from family members living in places like the U.S.

Responding to the Crisis: Leveraging Community Capacity

Within a few days of the borders being closed, church and community leaders were reaching out to ENLACE staff to explore how to respond to the growing crisis. Local leaders stated that the number of families in need of basic food supplies was increasing daily. They were worried that the needs were too big for them to address without excluding families and damaging relationships.

ENLACE staff's initial response was to work with local leaders to design a new set of tools to identify and prioritize the most vulnerable families in their communities. ENLACE developed Google forms, for example, that could be completed online by local leaders. ENLACE also staff gathered and organized the

data into lists of families by levels of priority. Local leaders then verified and used the lists to solicit resources and food supplies from mayors' offices, NGOs, and other private sources. ENLACE staff also provided food and hygiene aid for local leaders to distribute to identified families.

ENLACE staff have also created several other virtual tools for local leaders to identify and respond to subsequent areas of need during the initial months of the crisis. One tool was created, for example, to identify families with members who are chronically ill or have other issues that make them more vulnerable. Interview schedules were created for leaders to survey how public and private organizations were responding to the crisis in order to solicit funds. Tools were also created for local leaders to identify the needs of subsistence farmers, micro and small business owners, and other emotional and spiritual needs. The use of the tools by local leaders along with their collective action fostered a sense of community, strengthened their commitment to engage and lead the relief effort, increased their capacity to identify and address community problems, and contributed to their ability to mobilize local and external resources.

Sense of Community

This first characteristic of community capacity recognizes that the existence of strong relational bonds between members of a particular community is an important factor in enabling the work of collective problem-solving. Each of the rural and semi-urban communities where ENLACE works has their own unique set of local relationships and histories, which are shaped by the diverse and changing environments they inhabit. ENLACE's approach to community capacity-building affirms the unique attributes of each local community. It also recognizes that these attributes will shape the process of capacity-building in such a way that each community will have its own unique experience of change over time.

At the same time, ENLACE staff have observed several general patterns in the structure and organization of local communities that influence how the process of building a sense of community unfolds across all communities. First, in both rural and semi-urban areas, residents usually possess a shared understanding of the geographic and territorial boundaries that define the particular community space they inhabit (Smith 1986). Nevertheless, they vary considerably in how they define a shared sense of place and in how they see themselves in relationship to other neighbors who reside within those same territorial boundaries. Second, communities located in rural areas are frequently composed of a few extended family groups. Members of each extended family network often maintain a sense of community belonging (i.e.

their family), even though the strength of relationship that exists between each family member varies considerably. This feeling of belonging is not necessarily shared with other community residents who are not a part of the extended family network, however. Finally, residents in rural and semi-urban communities can, and often do, share a general sense of mutual circumstance and recognition of shared needs. At the same time, they vary in their perspectives on the causes and effects of shared problems. Moreover, they often have very different ideas about the scope or incidence level of a given problem. Even when residents demonstrate a shared understanding of community needs this only occasionally corresponds with a shared commitment or capacity to act collectively to address or solve such problems. Such patterns simply remind us that local responses to the pandemic developed within diverse communities wherein residents develop and sustain different stocks and threshold levels of their sense of community (Bueno 2019).

Local leaders have responded in diverse ways to the changes generated by the pandemic and by the federal government's executive order on March 11. In some communities, local churches and community leaders have waited to see what resources will be allocated to them by other congregations, NGOs, and local and federal governments. Other church leaders have focused on mobilizing relief services for church members or for non-members with whom they had an existing relationship. A smaller number of church and community leaders have worked quickly to meet virtually in order to discuss community needs and identify ways to address them collectively. In these communities, local leaders began to mobilize their own resources to respond to the most vulnerable families. In a few of these cases church and community leaders also reached out to local mayor's offices and to NGOs, such as ENLACE, from the outset to mobilize assistance.

Church leaders reached out to local leaders from various CBOs, including local ADESCOs, water boards, or PTO boards, with varying levels of success to respond collectively to the pandemic. In most churches the coordination proceeded accordingly: a few leaders within the church reached out to a small number of community leaders with whom they had built some level of trust. These already existing forms of bridging capital, which connected individual leaders from different church and community networks, were first accessed by leaders to identify the most vulnerable families. They then leveraged relationships within their respective networks (e.g. bonding capital with other church members or among other community leaders) to distribute food and agricultural supplies to vulnerable households (Huff 2020; Bueno 2019).

Notably, many of the ordinary practices that leaders previously used to meet, organize, and discuss

project plans could not be exercised because of lockdown mandates and social distancing requirements. Nevertheless, church and community leaders have built on their already existing relationships to adapt to changing conditions and create new ways to meet and maintain contact with one another (e.g. through cell phones and Facebook group pages). They have also met while standing outside of each other's homes, in outdoor spaces, and even while sitting in their cars with the windows closed.

Conversations that ENLACE staff have had with various church and community leaders since the beginning of the national quarantine are suggestive of some patterns that are worth highlighting. For example, leaders have indicated that the work of organizing a collective response to the pandemic has cultivated a new sense of community. Church leaders have noted that they have befriended families that they did not previously know. Several have also indicated that they became more aware of the scope of needs that exist within their community. Others have expressed that the experience has enabled them to better understand and, to some degree, better empathize with the situations and circumstances of their vulnerable neighbors. Similar observations have also been shared by community leaders. Altogether, such emerging patterns suggest that leaders are actively building on an already existing sense of "connectedness" to develop a more robust and shared "recognition of mutuality of circumstance" (Chaskin 2001). This observation is not meant to understate the very real challenges that local leaders and their fellow community residents continue to confront, of course. But we are discovering that the work the leaders are doing in response to the crisis has contributed to a perceived increase in a shared sense of community.

Commitment

This second characteristic of community capacity indicates that community members understand themselves as vested stakeholders in the well-being of the community and, correspondingly, work towards achieving and sustaining community well-being. The preceding section makes clear that various church and community leaders have worked together to identify and provide aid to the most vulnerable households in their community. In some cases, their coordinated efforts were already underway before receiving assistance from ENLACE; other leaders moved forward with a collaborative response upon receiving support from ENLACE. In either case, such patterns of response suggest that leaders see themselves as community stakeholders who are willing to work on behalf of the well-being of other community residents.

Since mid-March ENLACE staff have noted various patterns of local leader engagement that

demonstrate a significant level of commitment to community well-being. For example, leaders have attempted to learn more about the incidence and patterning of local needs by interviewing families by phone or through home visits. They worked with ENLACE staff to process the results of their interviews and to generate lists that prioritize families by the following criteria: age, marital status, dependency ratio, and employment. These lists were then used by leader groups to approach mayor's offices, NGOs, and local businesses to mobilize resources; they were also used to ensure that provisions (e.g. food and hygiene aid) supplied by external sources were getting to the most vulnerable families in the community.

In addition to advocating on behalf of the needs of vulnerable households to local governments and external NGOs, church and community leaders have also mobilized resources and raised funds at the local level. One group of leaders, for example, reported that they fished in local ponds and included their catch in food aid distributions. Others reached out to raise funds from Salvadoran family members and friends living in the USA; these leaders also noted that they sent pictures and copies of receipts to their expat contacts.

In April and May, local leaders started to work with ENLACE to create mid-term plans in order to address problems related to food insecurity and poor health. As we note in the next section, some local leaders are looking beyond immediate relief efforts in order to identify the medium- and long-term needs of neighbors whose livelihoods depend on subsistence farming. In May, some leaders began to work with farmers to access agricultural inputs, and, by doing so, recognized the need to draft 15-month, agricultural development plans.⁴

Ability to Solve Problems and Mobilize Resources

To conclude this section, we consider both of the remaining characteristics of community capacity, including the ability to problem-solve and the mobilization of resources. The ability to translate commitment into problem-solving action is often expressed in local leaders' capacity to assess and analyze a particular community problem (or opportunity) and to take concrete steps to work for the well-being of community residents (Chaskin, 2001). Since mid-March local church and community leaders have demonstrated their ability to problem-solve and to identify and mobilize aid resources in new and creative ways. Their efforts are especially notable given that

access to important aid resources has been greatly complicated by the pandemic.

The process of identifying and mobilizing aid resources to vulnerable households was complicated from the outset by various factors. As we have noted, leaders could not meet together as they were accustomed to doing because of the lockdown and social distancing requirements. The spread of disinformation about COVID-19, along with the lack of reliable public health information, also made some leaders uncertain about how to best respond. Upon recognizing the limitations of their existing problem-solving strategies, they worked together (and with ENLACE's assistance) to devise new solutions for gathering information that was needed for effective aid distribution. Local leaders utilized the new tools that were created in consultation with ENLACE staff to interview local families and mobilize resources for over 20,000 families.

Church and community leaders recognized early on that the supply of local resources they were mobilizing to support and aid vulnerable neighbors was decreasing quickly. Most leaders, moreover, were experiencing the same economic problems as the families they were trying to assist. Many were furloughed or lost their jobs; others were unable to farm or be hired on by neighboring farms. To address these problems, many leaders sought out food aid from local mayors' offices and non-profit organizations. They were also able to secure resources through external relationships and networks, including from private sources (e.g., gifts from family or friends in the U.S.) and external NGOs, to offer additional assistance to families in need.

Local leaders' problem-solving efforts were further complicated by the sometimes limited or uneven responses of federal and local government agencies. Some local government officials opted to work with local leaders in the selection and distribution of aid. The majority of local and federal government agencies, however, provided aid directly to communities through the military or other national departments without consulting local leaders. When federal agencies provided aid directly, it became difficult for local leaders to verify whether aid reached the most vulnerable households. In the cases where local leaders were included in the distribution process by local mayors' offices, they were able to ensure that families of greatest need were served first.

As of September 22, 2020, 56 churches had worked with 92 CBOs from 170 different communities

⁴ In all but three communities, community leaders had not prioritized economic development nor food security plans in previous years. They were not seen as a "project" that could be worked on by the community. As food insecurity becomes more pronounced in El Salvador, church and community leaders are exploring new ways to assist farmers through sustainable agriculture and other initiatives such as home gardens and chicken coops.

to identify and serve over 20,000 families with food, hygiene and agricultural inputs. This effort has involved 238 church leaders and 224 community leaders who worked together to provide food and hygiene aid supplies to 20,339 families across El Salvador. A total of 3,050,850 meals were distributed to families over six months. Notably, leaders mobilized and utilized local resources for 14,875 of these families (73% of total meals), and used external resources, which were supplied and administered by ENLACE, for the remaining 5,464 families (27% of the total meals). Local leaders were also able to provide agricultural inputs to 1,157 families to support the restarting of local farming activities and agricultural production.

Initial Learnings for Community Capacity-Building Practice

It has been observed that community capacity is not something that “simply happen[s]... rather, it is developed or formed, or diminished and lost through response to changing conditions” (Beckley, et al 2008, 63). The adverse effects of COVID-19, along with the various restrictions induced by lockdown measures, have created a unique set of dynamic and difficult conditions for all Salvadorans. A basic aim of the preceding discussion has been to examine how community capacity is being “developed or formed, or diminished and lost” as ENLACE’s church and community stakeholders attempt to respond to these uniquely challenging circumstances.

Drawing on Chaskin’s operational model of community capacity, we have detailed how local stakeholders are accessing existing networks and drawing on emerging forms of social connectedness to problem-solve and mobilize resources to address the immediate needs of their vulnerable neighbors. The data discussed in this paper are the initial results of reviewing monitoring data and informal interviews with stakeholders since March, 2020. This data has generated valuable inductive findings that are important to helping ENLACE and its church and community partners respond capably and adaptively to the changing conditions created by the COVID-19 pandemic. The data also highlights the need for additional empirical research to examine whether ENLACE’s investments into training local church and community leaders contributes to strengthening community capacity as conceptualized by Chaskin’s model.

What the preceding observations demonstrate is the value of sustaining a good practice of “causal link monitoring,” which directs community development practitioners to pay attention to the processes and contextual factors that actually shape how a project or program actually develops in real time (Britt, Hummelbrunner, and Greene 2017, 8). By being

attentive to how local leaders are exercising different aspects of community capacity in the present crisis, we can learn how to best support their efforts in ways that reinforce and enhance those same capacities. What have we learned along the way?

Responding to Local Community Leaders

In a time of crisis or humanitarian disaster, third-party organizations, including NGOs like ENLACE, often acquire and provide immediate assistance through local networks. The observations we offer in this paper suggest that a vital role for third party organizations in such situations is to listen and respond to local leaders as they design and implement relief and recovery initiatives. This can be a challenge for NGOs because relief efforts tend to be a set of standard technical responses that require urgent action. Moreover, when communities have been decimated physically, organizationally, and socially, it can be difficult to identify and coordinate responses with local leaders. It obviously helps if the organization has built these types of relationships with local leaders prior to the crisis. Nevertheless, if those relationships do not exist, it becomes imperative to develop clear and efficient processes and tools to identify and evaluate local leaders and organizations that are committed and capable of responding collectively to implement relief efforts. Listening to and responding to local leaders can serve to strengthen community capacity during and after the response to the crisis.

Even in a prolonged crisis like the COVID-19 pandemic, where information is limited, confusing, and uncertain, third party organizations can work together with local leaders to develop tools to understand emerging problems and to identify resources for the response. Tools should be clear and user-friendly; most importantly, they should be designed so that local leaders are able to drive the process of collecting and analyzing data on community needs. Third party organizations can assist in the technical aspects of collecting, analyzing, and reporting of data. However, data should be reported quickly and in ways that are accessible to local leaders. In the specific case of ENLACE’s response, it was important that the tools be created and approved by both church and community leaders so that they could divide up the work of gathering the data in order to collectively understand and respond to the crisis.

Facilitating Community Plans

The final product of listening, gathering, and analyzing data should be a short- to mid-term community plan that guides collective action and resource mobilization. The creation of community plans made it possible for church and community leaders to identify and prioritize the needs of the most

vulnerable families. Community plan documents also served as a tool for guiding discussion among church and community leaders and they helped to facilitate consensus-building regarding which families to help first. Leaders quickly realized that the situation of many families would change as the months of lockdown continued; they recognized the importance of having a tool that could regularly be utilized over time in order to validate and update the lists of people in need and to make adjustments to their relief efforts along the way.

Community plans also provided local leaders with a transparent and fair way of communicating their collective response to the needs of vulnerable families. Since the plan documented the shared discussion that leaders had, and it described the commitments they shared, it made it possible to sustain a response by a relatively large and diverse group of leaders. Notably, the use of a community plan has encouraged leaders to remain engaged in the recovery process without becoming discouraged or frustrated by the hard work of sustaining consensus and managing conflict in the middle of a prolonged crisis.

Each community plan has also been instrumental in mobilizing internal and external resources. Many church and community leaders turned the plan into verbal or written requests for assistance and help, which were then shared with people and organizations from both inside and outside the community. Local leaders presented the plans to local mayors' offices, NGOs, businesses, and expats. In several cases, the mayors' offices actually used the community plans generated by ENLACE's church and community leaders to coordinate and provide aid. For some leaders, the plan was also used to track resources that were being raised along the way; others also utilized the community plan to identify additional fundraising needs. In these cases, the use of the community plan strengthened local leaders' sense of ownership and control over the process of leading the pandemic response in their communities.

Local leaders not only used their plan to identify which families would need immediate assistance for shorter periods of time; they also employed it to designate households that would need food and hygiene supplies for an extended period. The plan also helped them to identify families that needed immediate help with agricultural inputs for their final cultivation cycle of the season, and they used it to determine the ongoing need of farmers for the next planting season. Many local leaders, with assistance from ENLACE, have already started to create longer term agricultural plans for 2021.

Finally, the research processes that corresponded with the development of community plans have also encouraged new discussions regarding long-term economic development solutions. In many of these

same communities, leaders had not yet identified economic development as a community problem that could be addressed collectively. Notably, the planning process in the short-term has encouraged new conversations between church and community leaders on what kinds of businesses exist in the community, how best to help them grow, and how to identify new businesses that could be introduced. A few local leaders recently started to create mid-term plans to help micro- and small-scale businesses restart or grow.

Reporting to Enhance Community Capacity Long-Term

Every organization struggles to monitor and report during a crisis. Many organizations suspend or reduce reporting requirements to a number of key outputs such as meals served, houses rebuilt, and families served. Understandably, such reports are often generated to comply with criteria delineated by external funders or are used to communicate with donors. And yet, the direct participation of leaders in the monitoring and reporting process can serve to gather more accurate information and enhance community ownership over and capacity for reporting processes. In the case of ENLACE, staff created user-friendly tools for leaders to use to update information in real time. Running totals of key outputs were available to leaders at all times through access to Google sheets. Nevertheless, fewer than 20 percent of church and community leaders accessed the data regularly due to limited access to the internet. For those leaders that did not access the forms online, ENLACE staff provided them with weekly and monthly reports via text or phone call. This practice of weekly reporting kept the leaders engaged and committed to the recovery and reconstruction process.

The ENLACE staff also asked leaders to gather impact stories. Gathering stories, pictures, and videos is a common request from NGOs. And in many cases, it can be an awkward and difficult request for community leaders who do not have ongoing relationships with the neighbors and community residents they serve. It can also be a challenge if local leaders cannot read or write proficiently, or do not have equipment to take the picture or record videos. Third party organizations can provide valuable resources and support to local leaders to gather impact stories. However, it is important to keep in mind that the primary reason for gathering such material should go beyond institutional and donor communication. Although grant compliance is an important motivating factor for story collection, local leaders also appreciate the gathering of stories as an important opportunity to develop a deeper and more nuanced understanding of the needs of neighboring families. Such stories often provide a chance to reflect critically on whether local initiatives and interventions have been effective. Moreover, they often serve to

inspire leaders and their local partners to continue to the long-term, collective work of community transformation.

Monitoring and reporting, if done in ongoing partnership with local leaders, should ultimately serve to enhance a sense of community and to strengthen the commitment of local leaders to collectively address the needs of their neighbors, both in the short- and the long-term.

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