One Sustainable Health FORUM

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FINANCING FOR ONE SUSTAINABLE HEALTH

POLICY BRIEF – FINANCING ONE SUSTAINABLE HEALTH (OSH) IN FRAGILE CONTEXTS: OPERATIONAL LESSONS AND GUIDANCE FOR GRASSROOTS PROGRAMS

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Financing OSH in Fragile Contexts: Operational Lessons and Guidance for Grassroots Programs

Policy Brief

Prepared by the OSH International Working Group 5 on OSH Financing

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The analyses, interpretations, conclusions and recommendations in this Policy Brief are those of the authors only and do not necessarily reflect the views of the organizations with which they are (were) affiliated or of the One Sustainable Health Forum.

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As stated in the Declaration One Sustainable Health for All , the "One Sustainable Health" approach is based on the idea that beyond targeted responses to individual health challenges, a more consistent and holistic approach is therefore required more than ever, not only encompassing human health, but also that of all living organisms and ecosystems, as well as anthropic pressures on the latter derived from agriculture, industrial activities, collective human behaviors and anthropological systems, and leading to heating of the planet, pollution and more. Because all natural ecosystems retroact on one another, progressing towards sustainable health can only be achieved through a consistent effort based on the principles of resilience and sustainability. Because no region is isolated, sustainable strategies should be designed and delivered taking into account their global impact and the principle of universality. One Sustainable Health (OSH) thus includes SDG 3 "Good Health and Wellbeing for All" and is an entry point to all 17 Sustainable Development Goals" [2].

On several occasions, the Declaration emphasizes the importance of co-constructing OSH programs and projects with local communities and financing them as closely as possible to local actors, thus echoing the orientations in terms of "***localizing development projects***" and *"**grassroots development***". This leads this Policy Brief about financing OSH at grassroots level – whose the previous IWG Financing (2023) document **"Breaking silos: Financing One Sustainable Health"** emphasizes the importance - to pursue two objectives around which it is structured.

The first objective (first part of the document) is to present—through the articulation of challenges to be addressed and pitfalls to be avoided—a *set of operational recommendations for the successful implementation of OSH projects and programs, within a perspective of project localization and grassroots development*[3]*,* that a financing strategy will have to sustain.

The second objective (second part of the document) is to demonstrate—through the case of the PASO Colombia initiative, which, in many respects as will be shown, embodies several features of the OSH approach *avant la lettre*—that it is indeed possible to establish **multi-stakeholder effective OSH financing strategies** within a localization and grassroots development perspective, even in the *highly*

[2] *One Sustainable Health for All, Declaration*, One Sustainable Health forum, 2023, p.11.

[3] *Grassroots development* is understood here in its specific organizational and functional sense—namely, the design and implementation of a project rooted in active community involvement at all stages—rather than in its political meaning where, to borrow the expression from E. Dennis (2022), it is seen as "representing a shift away from Western concepts of modernity and dependence on foreign aid to self-reliant, pluralistic strategies of progress"*(https://ace-usa.org/blog/research/research-foreignpolicy/building-from-the-bottom-up-grassroots-development-in-sub-saharan-africa/).*

challenging environments of post-conflict and/or profound institutional fragility that characterize far too many countries[4].

I. Financing OSH in a grassroots development perspective

1. The Institutional Framework of Subnational Government Matters: About approaches and concepts for OSH operationalization at grassroots level

The *One Sustainable Health for All* Declaration repeatedly underscores that local communities must play a cardinal role in the design and operationalization of OSH projects, programs, and strategies across the three constitutive domains of the OSH approach: human health, animal health, and the environment. It emphasizes the need to give a central place to *the voice of **local communities** in decision-making and solutions*. *Specific solutions must be contextually defined and include local contexts, communities, and people experiencing the direct impacts* (p. 24). It further recommends, among other points (p. 13), *to empower local communities and to ensure that flexible financing is channeled directly to communities on the frontlines, with financial instruments adapted to facilitate local access, use and accountability of funds, and to enable the co-construction and adjustment of projects by local communities in line with agreed priorities*, in the definition of which they must play an essential role.

The *localizing/grassroots development* orientation is aligned with the spirit of the 2030 Agenda for Sustainable Development adopted by the United Nations in 2015 which are encompassed in OSH approach. It is also consistent with the broader perspective of *decentralizing development policies*.

However, close attention must be paid to potential semantic confusions that may distort stakeholders' understanding of the expected effects of decentralization to contribute to a localizing and grassroots development approach in OSH projects. There is a danger that this results in misconceptions, weak policy design and implementation as well as poor articulation with the relevant sectoral and cross-cutting policies: The organizational structure and competencies within subnational government are of critical importance for OSH grassroots development initiatives..

Schematically, the term ***grassroots development*** refers to a bottom-up approach to economic and development dynamics, where priorities and initiatives emerge from local communities themselves, as active agents of their *well-being*, rather than being imposed from above (Flores and Samuel, 2019; Maldonado-Mariscal, 2023; Ruddick, 2025). The *grassroots level* designates the tiers closest to the population (villages, communities, neighborhoods, local associations).

Localization can be broadly defined as the integration, through community participation, of local contexts, priorities, and actors in the design, implementation, and monitoring of projects and programs

[4] World Bank list, https://thedocs.worldbank.org/en/doc/5c7e4e268baaafa6ef38d924be9279be-0090082025/original/FCSListFY26.pdf. The list (as of 2025) includes 38 countries, including 21 conflict-affected countries and 17 countries affected by institutional and social fragility.

(Ettlinger, 1994; Carrasco et al., 2023). More specifically, for USAID for example[5], localized programs are those that are locally led, where a diverse group of local actors define priorities, design projects, drive implementation, measure and evaluate results, and take fuller ownership of efforts to save lives, reduce poverty, strengthen democratic governance, reduce corruption, address climate change, prevent conflicts, respond to global pandemics, and recover from humanitarian crises. In a more politically charged context, the concept refers to shifting power from international organizations to local actors, communities, and implementing partners, in order to make development initiatives more inclusive and responsive to the actual needs of recipients. Consequently, localization is then considered as a way to make aid more efficient and cost-effective. Calls for action on localization are growing and the localization approach has been gaining significant interest in recent years as « the movement has witnessed valuable progress with the expansion of Voluntary Local and Subnational Reviews (VLRs and VSRs respectively), the transformation of limited consultative approaches into an enhanced involvement of a plurality of actors, including citizen participation, and the evolution from restricted spaces for dialogue to ambitious multilevel governance arrangements and multistakeholder co-creation efforts that, following the capability approach, recognize the diversity of abilities" (Bilsky et al., 2021; Carrasco et al., 2023).

Grassroots development and *localizing projects* as we can see, overlap in that both emphasize territorial anchoring and community participation from designing project up to monitoring and evaluation.

By contrast, the generic term ***decentralization*** *encompasses three organizational modalities that are very different from one another*, one of which is poorly aligned with localizing/grassroots approaches:
i) *Deconcentration*, the transfer of responsibilities to the deconcentrated services of the central State (regional or provincial administrations, prefectural offices, etc.), with little or no real autonomy. These services and structures (prefectures, regional directorates, provincial ministry offices) remain hierarchically subordinate to the central government and lack both political and legal autonomy. These characteristics make this form of subnational government not particularly conducive to a grassroots approach.
ii) *Delegation*, the transfer of specific responsibilities or the management of public services to semi-autonomous bodies, agencies, or NGOs (contractual arrangements). *The delegating entity* (such as the relevant national sector ministry) retains ultimate control over what is delegated and how it is carried out;
iii) *Devolution*, the transfer of powers, resources, and political responsibility to elected local governments (municipalities, regions), with elected bodies accountable to voters. These entities enjoy legal autonomy, define their own priorities, adopt budgets, and report directly to the population. They are not hierarchically subordinated to the central government.

[5] https://ocdc.coop/wp-content/uploads/2023/12/Localization-at-USAID_-The-Vision-and-Approach.pdf

These distinctions are crucial, since *the contribution and effects of each of the three modalities of decentralization for grassroots development are intrinsically very different*. It is *devolution*—the genuine form of decentralization—that provides the most appropriate framework for grassroots development projects aiming to operationalize OSH strategies and to deliver the expected outcomes in terms of community empowerment and tangible results. By contrast, deconcentration represents the least favorable institutional environment. However, there may well be, for example, a program budget that contributes to the financing of an OSH project at the grassroots level, but this typically operates under the often very rigid rules of deconcentrated financing, which leave little to no autonomy for the beneficiary entities.

That said, regardless of the form of decentralization (deconcentration, delegation, or devolution), ensuring the ***alignment and complementarity of OSH projects/programs with district action***—or equivalent administrative structures— is critical to prevent the *potentially harmful effects of excessive fragmentation* of local initiatives. The effects of local initiatives mushrooming supported by a myriad of donors, as seen in some countries, can be very detrimental to consistency and effectiveness of both health policies (in the narrow sense) and OSH-related public policies. If alignment and complementarity of OSH projects/programs with district action is a key issue, however evidence shows that the hierarchical subordination of district authorities to central and provincial administrations has often resulted in a reduced contribution to the development of local communities (Tumusiime et al. 2019). Consequently, efforts to establish the essential effective coordination between grassroots OSH initiatives and districts face a recurrent challenge: decisions concerning planning, procurement, and financing are frequently taken outside the district level, which generally has very limited capacity to mobilize resources locally and to exercise control over their use. This limitation arises not only in cases of deconcentration, but also under incomplete forms of devolution.

In addition, there is a *lack of local data necessary to properly calibrate OSH interventions* in line with public policies in the areas where OSH projects are implemented—an issue that becomes particularly acute in countries affected by conflict or characterized by high institutional fragility.

2. Addressing Challenges and Avoiding Key Pitfalls in the Financing of Grassroots OSH Projects

A multi-stakeholder financing strategy for an OSH project, within a perspective in line with project localization and grassroots development approaches, will necessarily be encapsulated in a set of features shaped by the way in which the various elements of the project are designed and implemented under the approaches outlined above. Drawing on the literature on project localization, as well as on lessons learned from numerous grassroots development experiences[6]—both their successes and their failures—in low and middle income countries (LMICs), it is possible to identify a selection of **key challenges** to

[6] Cf. *"References"*.

be addressed and pitfalls to avoid for OSH grassroots projects. They translate into concrete operational recommendations. ***Ten of which appear to be of particular importance***.

1. **Imposing a top-down logic under the guise of "participation."** Symbolic consultations while decisions are already taken by ministries or donors create risks of mistrust, weak ownership, and even local rejection. In the same vein, one should also mention what is known as astroturfing, which refers to an action that is presented as spontaneously originating from a local level (grassroots), but which in reality comes from an organization outside the pseudo-local origin, such as a political structure, a company, or an interest group.
2. **Underestimating the importance of local dynamics.** Traditional power networks, associations, (as ethnic dimensions in specific context) matter. Projects that ignore these local features risk generating tensions among stakeholders, community and can be paralyzed by conflicts of influence and power.
3. **Underestimating the importance of local dynamics.** Local notables, traditional leaders, politicians, clientelist networks, or dominant groups may monopolize resources or steer decisions to their own advantage. Stakeholders often operate with some hidden agendas, while project managers face information asymmetries that undermine the relevance of their decisions. Vulnerable groups may be excluded or have their needs neglected.
4. **Not establishing, from the outset, financing arrangements that involve community contributions and enable sustainable funding.** Many grassroots projects (and the communities themselves) depend heavily on temporary external financing—multilateral, bilateral, public, or private (foundations, large NGOs). Without durable resources, initiatives often collapse once external funding ends.
5. **Neglecting sustained local capacity-building, community empowerment, and failing to value local knowledge and practices.** Transplanting approaches, practices or technologies proven elsewhere may prove inappropriate or costly compared with what could be achieved by integrating local practices. This often results in poor ownership or outright rejection of the project by communities, thereby undermining one of the central objectives of the grassroots approach and perpetuating reliance on external expertise.
6. **Not giving transparency and accountability the attention they deserve.** Without clear, honest and effective local monitoring mechanisms (citizen committees, social audits, participatory budgeting), corruption or political capture undermines project legitimacy. Yet one must also remain mindful of the risk that such mechanisms themselves may be manipulated by interest groups.
7. **Weak alignment with subnational and national policies.** Grassroots projects do not operate in isolation from their national and regional institutional and economic environment. Projects that remain disconnected from national / regional frameworks (e.g., health plans, climate strategies; and so on) and from subnational and national policies risk marginalization, duplication, incoherence, and resource waste, while lacking support from national, regional, or district budgets. Moreover they increased sectoral or/and cross-sector fragmentation of approaches and activities. Evidence shows they are most effective when running within a

"sandwich" formed by support from an effective central or regional state and dynamic bottom-up inclusive community action.

8. **Lack of reliable local data.** The lack of disaggregated statistics at the local level frequently leads to poorly targeted or ineffective interventions. This constraint is not insurmountable, but overcoming it requires long-term investment in robust surveys, reliable methodologies, and appropriate monitoring mechanisms—tools that demand consistency and rigor to be genuinely useful.
9. **Overemphasis on short-term results.** Many donors (and politicians) demand rapid and visible "quick wins." While politically attractive, this focus often undermines sustainability, local ownership, and long-term community empowerment.
10. **Assuming that local success can be automatically scaled up and fueling the *pilotitis* syndrome.** This is the challenge of *pilotitis*—the proliferation of successful pilot projects that fail to expand nationally. Pilots often benefit from exceptional attention and concentrated resources (from donors or NGOs who cannot or do not wish to engage in an appropriate effort at the national level), that can be hardly replicated at scale. They may rely *inter alia* on strong local leadership and sustained community mobilization—all these conditions rarely reproduced nationwide without significant adaptation. These dynamics underscore the centrality of local governance and the management of scale-up transitions, which remain recurrent stumbling blocks in many LMICs.

II. Spaces of Care in PASO Colombia: Some Lessons to Inform a Financing Strategy for OSH Programs and Projects at the Grassroots Level

PASO Colombia, is a program developed by **One Earth Future Foundation** since 2015, which supports the reintegration of former FARC combatants, coca-growing farmers participating in Colombia's **National Comprehensive Program for the Substitution of Illicit Crops (PNIS)**, and **Venezuelan migrants**.

PASO Colombia was not originally designed to address an OSH agenda, yet it displays numerous features that, as will be shown, resonate *de facto* with the characteristics of an OSH approach *avant la letter* within a grassroots development orientation. In this sense, it provides a particularly valuable set of elements for defining and operationalizing—subject to necessary adaptations—***an actionable mixed financing strategy - multiple stakeholders and modalities*** - *designed to sustainably fund health in OSH projects*, within the particularly challenging contexts of post-conflict regions and/or settings of deep institutional fragility, which remain a critical barrier to health improvement in far too many countries.

PASO has operated in 12 of Colombia's 14 conflict-affected regions—territories that mirror conditions found in many fragile zones and context across the globe:
i) life unfolds amid conflict and uncertainty, where health systems, livelihoods, family cohesion, and communication persist under the strain of violence, instability, and stigmatization;

ii) communities are frequently cut off from fair governance, sustainable livelihoods, and access to essential services such as health, nutrition, security, and dignified work.

PASO's work aims to foster **endogenous community resilience** through food security mechanisms, the incubation and acceleration of cooperative income-generating activities, and the creation of dedicated reintegration spaces known as **ERAs (***Espacios de Reincorporación y Acogida)*. These spaces serve as platforms for developing individual and collective capacities, grounded in local knowledge, supported by community assets, guided by ethical principles, and funded through a blend of *philanthropy, international cooperation, state support, local organizations, and private sector partnerships*.

Just as peace is not merely the absence of violence but the reweaving of social bonds, health is more than access to care—it is the capacity to cultivate well-being. True health systems go beyond addressing immediate needs; they build long-term resilience, local agency, and empowerment. This involves preventive care, education, and the transformation of root causes. While both emergency support and capacity-building approaches are necessary, this makes it imperative to implement a financing strategy that *enable communities to endogenously ensure physical and mental well-being in fragile and underserved environments*.

1. The Local Care Ecosystem

The Local Care Ecosystem is designed as a holistic framework for health, well-being, and environmental care in targeted zones. It comprises: i) *An integrated care architecture to manage* : triage processes for urgent, chronic, minor, and life-threatening conditions ; continuous monitoring of the physical and psychological pulse of the community; attention to the living conditions of women and children; ii) *Oversight of basic environmental health*, including sanitation and air quality ; iii) *A local pharmacy and apothecary*, stocking modern and ancestral medicines—herbs, oils, tinctures, and soul medicines such as poetry, prayer, and music; iv) *A House of Counsel* for mental, emotional, and spiritual care; v) *A food security mechanism,* linked to local production and equitable distribution; vi) *A registry of the sick and a community-led monitoring and evaluation system***.**

Local Health Stewards and Integration with National Health Systems

In many conflict-affected and institutional fragile areas, formally trained physicians are scarce. This calls for a strategy to raise healers from within the community. These local caregivers need not follow traditional, long-form medical education. Instead, a more inclusive approach can identify and train midwives and mothers, elders with traditional healing knowledge, youth aspiring to medicine or nursing and survivors of trauma, such as former combatants, who seek to become agents of healing

This localized system complements existing health structures. For example, in Colombia, ex-combatants are included in the SISBEN system, which provides access to public health services and medicines. However, real access in remote and conflict-affected zones remains limited. The effectiveness of the care ecosystem can be increased by empowering local health stewards to navigate and connect with

national health services, facilitating access to telemedicine and digital health solutions, enhanced by AI-driven diagnostics and creating community health profiles to address common ailments swiftly and efficiently with adapted protocols.

This *threefold approach*—local care architecture, community-based health stewards, and integrated health system access—has the potential to radically improve healthcare delivery in fragile contexts.

From Human to Ecological Health

This model can be extended to address the health of animals and nature. Food security, livelihoods, and environmental regeneration are integral to the system. Through community-led conservation enterprises, One Earth Future work in PASO Colombia support ecosystem restoration (reforestation, soil recovery, water treatment), mitigation of the effects of mining and illicit crop cultivation and development of circular economy models that responsibly harness the region's biodiversity

These environmental initiatives are deeply integrated with the Spaces of Care, both in generating local funding mechanisms and ensuring a holistic vision of health—for people, animals, and the land itself.

2. Funding Framework for the Spaces of Care

The PASO Colombia experience with *Espacios de Reincorporación y Acogida* (ERAs) demonstrates that building and sustaining community-led health ecosystems requires a ***mixt, adaptive financing model***—one that aligns diverse funders, patient capital, and locally generated value.

The ERA[7], whose original name was *Escuelas Rurales Alternativas*, emerged as a practical response to serious coordination and implementation deficiencies experienced by government and international organizations during the first stages of the Disarmament, Demobilization and Reincorporation process, in the aftermath of the Havana Peace Accords in 2016. *The governance problems* came from a mix of budgetary and legal rigidities, centralization, deficient knowledge of detail and intricacies of key variables, impractical work methods and at times vested political interests, that crippled last mile delivery. Coordination meetings revealed that the resources announced and boasted in the media were not ready for implementation, including basic housing and sanitary infrastructure for approximately 12.000 former FARC guerrillas who were already in Government created demobilization stations. In addition *no real team or coordination work was happening among agencies, the right participants were*

[7] The Base of the Mountain: Rural Alternative School of Miranda, Cauca, Universidad del Valle, PASO Colombia, October 2020.
PASO Colombia, Final Recommendations: Proposed by Business on the Frontlines XII, Team Colombia, Meyer School of Business, University of Notre Dame.

often not present, and conflicting views among parties blurred the possibility for co-creation of a common vision.

By contrast, the ERA provided something like a four-dimensional Design Thinking environment. By creating a true space like a farm near the demobilization zones, it became possible to gather the key actors, especially, the end users to interact with planners, local providers and businesses and local public officials. The space was not only providing ideas and plans but the relational experiences. Crucially, the fourth dimension was time. Time brought relationships, trust, knowledge of the territory, commitments, of which emerged a form of collective intelligence that fueled a common vision. The ERA turned into the space where everything truly happened: production, deliveries, access, and the lived experience of peace.

ERAs became a community space of iteration—of trial and error, of usability, of the growth of collective intelligence and incorporation—where neighbors could share both their concerns and their contributions, that shaped exchanges of goods and services, business development and investments, providing quick learning of sustainable agricultural practices.

Fostering interaction among several funding partners

While each ERA is adapted to its specific territory, all share a **common funding characteristic**: multiple stakeholders contribute capital, knowledge, assets, and in-kind resources according to their mandate, capacity, and relationship with the community. The *mix evolves over time* as internal dynamics change and external conditions—such as security, markets, and financial flows—shift. Resource coordination is essential to maintain coherence in the provision of inputs. **Stewards**, often respected community members with leadership and technical skills, organize relationships, giving activities form, stability, and function. Over time, **collective intelligence** strengthens governance, enabling greater specialization among stakeholders. A well-designed ERA integrates **physical space, social meaning, and cultural practice**—combining origins, roles, and rituals.

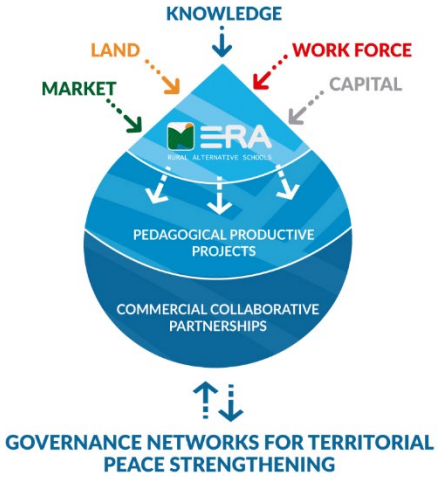

Illustration 1: *ERAs Pool social, environmental, and productive resources*

In PASO's experience, the ERA structure provides a dedicated space that **fosters interaction among six distinct types of funding partners:** private sector partners, international agencies, local (subnational) public entities, national government programs, financial capital, patient and physical capital.

1. **Private Sector Partners** – Attracted by competitive advantages such as skilled local labor, fertile land, and niche products, these partners co-develop market opportunities with communities, especially in food security and rural product commercialization. Within ERAs, the private sector often plays the role of ***buyer***. Early in the program, coffee initiatives benefited greatly from purchase agreements with a major Italian importer, which committed USD 11.6 million to acquire 5 million kg of coffee from newly formed ex-combatant cooperatives. Over time, as cooperatives demonstrate sustainability and sound management, local businesses and investors are drawn in as both providers and long-term partners.

2. **International Agencies** – Organizations such as World Food Program (WFP), International Organization for Migration IOM, United Nations Organization against Drugs and Crime UNODC, and International Center for Tropical Agriculture CIAT contribute equipment, tools, and services under clearly defined project mandates, with strong emphasis on contract compliance and accountability. ERA structures enhance agency efficiency through improved coordination on the ground, promoting high production, environmental, and management standards. Partnerships with the World Food Program, IOM, and the UN Mission of Verification have pooled expertise and funding into joint projects, maximizing collective impact.

3. **Local (Subnational) Public Entities** – These actors are both **providers** and **beneficiaries** in the ERA model. They supply land concessions and coordinate with local stakeholders, while directly benefiting from the strengthened economic and social fabric created by ERA activities. By integrating resources and personnel from different agencies, they align with municipal programs to build market spaces, warehouses, and renew infrastructure. In one PASO migration program, 35% of the budget was spent directly on local associations, logistics, harvesting, and other services, boosting the local economy.

4. **National Government Programs** – Capable of large-scale investments in infrastructure, subsidies, and special economic zones, these programs achieve their greatest impact when paired with efficient planning and active community participation, like the ones operating within ERAs. In many cases, community members themselves provide the labor, significantly reducing operational costs. National governments also play a pivotal role in channeling international agency funding into their own programs. *The **triad** of government policy, international agency support, and effective local implementation—such as that seen in ERAs—drives innovation and strengthens public–private–social coordination.*

5. **Financial Capital** – ERAs have attracted three types of financial partners: **cooperative, development banks** and commercial. Cooperative and development banks have provided substantial funding to social enterprises, expecting sustainability while also investing in long-term economic development and social integration. They offer specialized financial and sectoral expertise, which is then transferred to communities. Commercial banks face greater challenges in financing investment projects, focusing mainly on customer credit and working capital, often at high interest rates and short maturities.

6. **Patient and Flexible Capital** – This form of capital creates the **backbone structure** that enables diverse institutions to operate effectively toward a shared purpose. While governments could ideally fulfill this role, in many contexts it is provided by faith-based organizations, councils of elders, or philanthropic groups that *combine funding with governance support.* PASO began as a program of the **One Earth Future Foundation**, funded with USD 9 million from the Arsenault Family Foundation[8]. The foundation's values—relentless empiricism, iterative learning, and strong stakeholder engagement—allow resources to be redirected flexibly to meet the evolving needs of funding coalitions and community goals.

Together, these six funding types lay the foundation for sustainable ecosystems *that serve humans, animals, and nature* - three substantial dimensions to the OSH approach - enabling formation of

[8] This philanthropy is inspired by founder Marcel Arsenault's vision of a world without armed conflict within the next 100 years.

farmers' associations for economies of scale, market access to external buyers, investment in sustainable agriculture and reforestation, leveraging of community assets such as productive land and forest cover.

Why This Matters for Funders and other stakeholders

Spaces of Care transform **traditional aid** into **self-sustaining, multi-capital ecosystems**. By blending finance sources, valuing in-kind exchanges, and embedding regenerative practices, Spaces of Care become health providers, economic engines, knowledge and data hub, catalysts for peace and ecological restoration.

And moreover, what is highly valuable for each stakeholder, This model offers funders **measurable outcomes** in health, livelihoods, and ecosystem restoration—while building durable social capital and ensuring every investment becomes a **seed for systemic change.**

Illustration 2: *Common goods, markets, shared infrastructure, collective intelligence results in endogenous economic and social activity*

3. Financial Architecture and Key Financial Mechanisms

The ***multi-stakeholder nature*** of the Paso Colombia's Spaces of Care Initiative, i.e. the four dimensional Design Thinking environments dedicated to the health to humans, animals and nature, requires the

setting up of a specific financial architecture based on eight elements enabling coordinated and flexible financing of the activities to be implemented.

1. **Health-Associated Endowment Funds with l**egally protected endowments managed by trusted fiduciaries and income-generating investments sustaining core operations and attracting co-funding partners. For example, PASO's launch funding came from the Arsenault Family Foundation via the One Earth Future Foundation as mentioned above.
2. **Social Impact Trusts which are** Jointly governed by community leaders, donors, and ethical custodians. They measure returns in **services delivered, diseases prevented, and ecosystems restored, and they e**nsure operational transparency and accountability.
3. **Community Land Trusts with** 5–7 years concession agreements allowing rapid deployment of health and livelihood projects. Even short tenure can host clinics, apothecaries, orchards, and training facilities. Land selection prioritizes ecological function, cultural significance, and natural beauty.
4. **Regenerative Finance Models.** Regenerative finance models emphasise practices that restore, renew or revitalise natural systems, improving the health and functioning of ecosystems while also enhancing social well-being. They involve using money in ways that support systemic restoration, social equity, and ecological resilience[9]. Instead of merely minimizing environmental impact, they actively contribute to rebuilding biodiversity, improving soil health, enhancing water quality and uplifting communities. In PASO they include green bonds, solidarity lending, blockchain-backed currencies to enable the secure and transparent recording of transactions, and refundable social funds. As illustration, with the Interamerican

Box 1. Artisanal gold mining, a traditional source of income at the grassroots level that could contribute to the financing of OSH projects

Artisanal gold mining is a small-scale operation that has involved extracting gold for centuries, often for subsistence purposes, particularly in rural areas in numerous countries in Africa, Asia and Latin America. Informal and generally regulated by traditional local authorities, artisanal gold mining has health consequences for miners and local populations, as well as for the environment (Lao-Tzu Allan-Blitz et al, 2022). Local taxes on artisanal gold mining are a potential option to contribute to the financing of OSH projects. But it would need to be structured and formalized in order to be sustainable and equitable. The principle would be to channel informal revenues into a grassroots formal OSH project adapted to local context, in the field of healthcare, insurance, animal health or environment. This would involve defining clear collection mechanisms, establishing partnerships with communities and gold mining stakeholders, and ensuring transparency in the use of funds in areas of activity. Several mechanisms could be explored. However, challenges and issues such as corruption, misuse of funds, and the volatility of gold mining revenues would need to be addressed to ensure the sustainability of funding, as well as a fair equity in the distribution of outcomes that have been funded, including for non-gold miners.

[9] Cf. for example https://earthly.org/

Development Bank (IDB), PASO created low-interest, refundable **Social Funds** for social-purpose businesses, paired with capacity-building and market integration.

5. **Community-Owned Microenterprises, as** herbal cooperatives, beekeeping, agroforestry and solar installations. PASO-supported enterprises have generated over USD 20 million in activity and saved USD 6 million in food security costs.
6. **Subnational Government Support** including public asset provision and program integration into municipal health, conservation, and peace strategies. It strengthens legitimacy and aligns with legal requirements for community consultation.
7. **Ethical Philanthropy & Faith-Based Giving b**ring financial resources, mobilise specialized networks, and reinforce community credibility as it is the case for example for partnerships with Catholic health networks such as the Camillian Order.
8. **Private & Academic Investment.** Spaces of Care foster innovation, attract research partnerships, and leverage emerging technologies (AI, blockchain, digital diagnostics) for monitoring and evaluation.

4. Digital Tools & Innovations for Financial Resilience

They provide essential support and complement the financial architecture, enabling it to optimize efficiency and transparency in short-, medium-, and long-term activities.

Coordination of social ecosystems within Spaces of Care can be enhanced through **Digital Ledger Technologies (DLTs,** a secure way of conducting and recording transfers of digital assets without the need for a central authority), local currencies, and community-controlled financial tools.

In those spaces, **Pools of Commitments** provide a powerful coordination tool—allowing diverse stakeholders to register, track, and fulfill their pledges of resources (financial, in-kind, or service-based) in a transparent, verifiable way. The pools allow communities to back tokens or vouchers that pledging to provide goods and services reducing the need for national official currencies. By consolidating commitments into a shared, interoperable ledger, ERAs can synchronize contributions from multiple partners, avoid duplication of resources, trigger activities once collective thresholds are met and build trust through visible, accountable delivery

When integrated into digital systems, these pools become dynamic instruments for **adaptive planning** and **collective action**, enabling Spaces to align short-term operations with long-term investment strategies.

Key digital tools include:

- **Decentralized Ledgers**. Tamper-proof records of all transactions.
- **Smart Contracts**. Automated compliance with agreed milestones.
- **Local & Digital Currencies**. They will facilitate contactless payments and help local communities adapt to lower cash usage for payment transactions in the project-related activities .It is also a way to retain value locally and to reward volunteer contributions. Grassroots Economics' community currency systems show that **localized, trust-based finance** increases resilience, amplifies external aid, and embeds projects in local economic life. Applying these principles to Spaces of Care positions them as **economic engines, data hubs, and catalysts for peace and ecological restoration**.
- **Interoperable Commitment Pools**. A digitally registered pool of commitments would not work in silos. They can interact, exchange and reinforce one another. Neighboring pools can cross accept each other´s commitments, pools in different territories, or with regional and national networks. Regional resource-sharing networks linking multiple ERAs.
- **Distributed Resilience.** Endogenous generation of incomes, health service provisions must remain when cash dries up, shocks hit like cash shortages, migration flows, or in the event of supply chain disruptions. This occurs when commitments, goods, and services are maintained through tokens, ensuring the continuity of operations during local disruptions.
- **Tech Sovereignty**. Ensure community ownership and maintenance of digital infrastructure by using open source code that communities can audit, adapt and fork, local governance regarding the relative values of exchanged goods and services, data autonomy and offline and low tech options
- **Impact Integration**. That means impact that is natively embedded in the technology social processes through evidence that is provided by every transaction. Thus transparent ledgers, impact linked tokens and interoperability with external finance, are built in the system, incentivizing funding to verified, real-time outcomes.

5. Current achievements and the road ahead

The ERAs, present in conflict areas in Colombia, have achieved the following coverage[10]. The Sustainable Peace Program for Colombia (PASO Colombia), achieved a wide coverage in most conflict zones. It has undergone a multi-year evaluation (2018–2023)[11] based on surveys, interviews, and focus groups with rural communities, Signatories of the Peace Agreement, and other vulnerable groups.

Main achievements

[10] Source: ILA, Impact, Learning and Accountability Team, One Earth Future Foundation

[11] Encuesta de Evaluación de ERA 2023 y Evaluación Plurianual, Econometría Consultores, Producto 3: Informe Final, 16/02/2024.

Economic Impact. 93.2% of participants considered the ERAs a good option, with 65.6% remaining in the program for more than one year. Average incomes generated within the program were 28% higher than the legal monthly minimum wage in 2023, with a gender gap of less than 4%, compared to the national average gap of 11%. The proportion of families reporting the ability to save increased from 18% in 2018 to 40% in 2023. The average total annual savings per household was equivalent to 1.5 times the monthly minimum wage.

Food Security. 91.2% of respondents affirmed that the ERA Project contributes to improving food security. While the national average for moderate food insecurity in Colombia is 28%, only 23% of ERA participants reported experiencing this situation.

Social Trust and Reconciliation. Between 2018 and 2021, high levels of trust were recorded between ex-combatants and communities (63% and 80%, respectively). In 2022–2023, trust levels declined: 47% among ex-combatants and 56% in communities. However, trust in the ERA program itself remained high at 73%.

Local Governance and Conflict Resolution. Community leaders have become the primary mediators: 50% of the population turns to them in case of conflict. There has been an increase in the use of legal and institutional mechanisms to resolve disputes and to participate democratically.

Well-being and Life Plans. More than half of ERA participants reported satisfaction in areas such as restoring family and emotional ties, productive projects, employment, and leisure time. In 2023, 92.1% of participants stated that their lives had improved, and 84.6% participated in national and local elections.

Areas to strengthen for better results

Despite encouraging results, the program's impact can be further strengthened through sound public policy, efficient investments, and improved coordination at both national and subnational levels. In this regard, the evaluation highlights several areas where better coordination and targeted action could generate greater results:

Access to Markets. Local markets and campesino networks have enhanced commercialization; however, major obstacles remain in reaching larger, more competitive markets. High transportation costs, deteriorated roads, and unfavorable pricing for small and medium producers continue to constrain growth.

Private Sector Participation. Partnerships with private companies remain limited. Expanding these alliances would help unlock new market opportunities and enhance economic sustainability.

Land Ownership. A significant number of participants operate on rented or borrowed land, restricting stability and scalability. Expediting processes to secure land tenure is critical for long-term progress.

Trust in Authorities. Confidence in local and regional governments remains low due to perceived neglect and unfulfilled commitments. Rebuilding trust will require tangible, consistent action that responds to community priorities.

Food Variety and Sufficiency. While severe food insecurity has declined, moderate food insecurity persists in some regions, particularly in terms of food diversity and sufficiency. Addressing these nutritional gaps is essential.

Conflict Resolution. Although advances have been made in managing disputes, conflicts related to environmental issues and access to public services remain significant. Strengthening institutional mechanisms for conflict resolution is a priority.

Security and Economic Conditions. Ongoing insecurity and fragile economic conditions undermine confidence and weaken commitment to peacebuilding. Improving both is fundamental to sustain program achievements.

Infrastructure and Transportation. Poor road conditions and inadequate infrastructure reduce efficiency in transporting goods, limiting profitability and market integration.

At the same time, *ERA initiatives generate valuable data, foster governance, and promote coordination—elements that can make public policy more effective and impactful.*

III. Conclusion and Key Lessons for an OSH Financing Strategy at the Grassroots Level in Fragile Country Settings

As highlighted above, the *Paso Colombia* project is not formally an OSH initiative. However, it embodies a set of features, challenges, and operational lessons that are highly relevant for most OSH-oriented projects. In particular, it has ***directly addressed many of the major pitfalls to be avoided*** *when financing OSH strategies and projects in fragile and conflict-affected contexts.* The lessons derived from this initiative hold considerable operational value for the financing of OSH strategies in highly challenging settings. Four are critical ***in which the 10 key pitfalls to avoid*** in financing OSH strategies and initiatives at the grassroots level, as highlighted above, fall (see Box 2 for a brief recap).

1. A Long-Term Vision Must Shape the Financing of Grassroots OSH Projects

Box 2. Brief recap of the ten key pitfalls to avoid (cf. I.2.)

1. Imposing a top-down logic under the guise of participation. – 2. Failing to anticipate the risk of elite capture. – 3. Underestimating the importance of local dynamics. – 4. Not establishing, from the outset, financing arrangements that involve community contributions and enable sustainable funding. – 5. Neglecting sustained local capacity-building, community empowerment, and failing to value local knowledge and practices. – 6. Not giving enough attention to transparency and accountability. – 7. Weak alignment with subnational and national policies. – 8. Lack of reliable local data. – 9. Overemphasis on short-term results – 10. Assuming that local success can be automatically scaled up and fueling the *pilotitis*

Effective blended-finance strategies (multi tool and stakeholders) for achieving integrated health outcomes across humans, animals, and ecosystems in OSH projects depend fundamentally on the *underlying vision* and conceptual model. In the case of Paso Colombia, the *Spaces of Care* approach is rooted in a simple yet profound premise: health is not merely the absence of disease, but the capacity of individuals, communities, and ecosystems to thrive together. As these *Spaces of Care* begin to demonstrate tangible improvements in health, economic inclusion, and ecological restoration, they also generate valuable data, innovations, and social capital. This, in turn, attracts international organizations, public agencies, private investors, and academic partners seeking high-impact, evidence-based initiatives that strengthen planning, service delivery, and long-term resilience.

In conflict-affected, and institutionally fragile contexts—where many OSH initiatives will take place—such thriving requires more than emergency or short-term responses. *A medium- to long-term perspective is essential*, requiring sustained, systemic, and community-rooted approaches that address immediate financing needs while simultaneously fostering durable resilience. Particular attention should be given to the pragmatic use of *digital tools*, which can play a pivotal role in shaping OSH financing strategies and mechanisms capable of ensuring both resilience and sustainability.

The way these combined approaches are shaped—whether through centralized, deconcentrated, or devolved, community-led perspectives—will be critical in determining both the architecture and the effectiveness of financing efforts.

2. The Importance of Integration into National and Sub-national Systems to Avoid Fragmentation

Grassroots OSH interventions must be designed to integrate with, and complement, national and subnational health systems and related policies on animal health, environment, including biodiversity. The importance of OSH initiatives *coordination with the implementation of health policies at the district level* has been emphasized above. Without this, there is a high *risk of further fragmenting already fragile health systems* and contributing to a patchwork of disconnected public and private actions. Such risks are inherent in a multiplication of grassroots-level operations and must be explicitly addressed through relevant policy and financing strategies.

3. Building Complex Multi-Partner Financial Architecture

An agile, multi-actor, and well-coordinated financing strategy is critical. Grassroots OSH operations will often require collaboration among multiple domestic partners—at both national and subnational levels—as well as foreign stakeholders. *Paso Colombia* illustrates that it can be *possible to construct a complex financial architecture for OSH-oriented projects* by pragmatically ***combining a wide array of instruments from diverse sources.*** Although challenging, this approach enables the pursuit of collective goals while simultaneously fostering greater community participation, deeper capacity building, income generation, and appropriate technology adoption. Ultimately, it also *enhances scalability* of local initiatives.

4. Rigorous Monitoring and Evaluation as a Foundation for Sustainability and Scale-Up

A robust and demanding monitoring and evaluation (M&E) framework is indispensable for ensuring the sustainability, effectiveness, and efficiency of OSH financing strategies at the grassroots level. In *Paso Colombia*, such a framework was designed ***from the outset and progressively refined***. This M&E framework not only highlights tangible and encouraging *achievements* but also provided crucial insights on *areas requiring improvement or reinforcement*. Importantly, it provided practical and comprehensive guidance for scaling up successful "models" that address the interconnected challenges of health, environmental issues, and climate risk—while underscoring the need to avoid the common pitfall of transposing such models without carefully considering the necessary contextual adaptations. By embracing flexibility and accountability, funders and communities can co-create OSH ecosystems that are locally owned, globally connected, effective and sustainable.

✍ More specifically for *humanitarian engagement* in the OSH approach, look at the recommendations and actions for policymakers and donors formulated by the International Working Group 9 on "**One Health in Humanitarian Settings**." - Marino, V., Bolon, I., Ziveri, D., Urbaez, K., Zinsstag, J., Blanchet, K., & Ruiz de Castañeda, R., (2025). Humanitarian Action in the Planetary Crisis [Policy Brief].DOI: 10.13097/archive-ouverte/unige:182726

References (Selection)

Allan-Blitz, L.-T., Goldfine, C., & Erickson, T. B. (2022). Environmental and health risks posed to children by artisanal gold mining: A systematic review. *SAGE Open Medicine*, *10*, 20503121221076934. https://doi.org/10.1177/20503121221076934

Bilsky, E., Moreno, A. C., & Fernández Tortosa, A. (2021). Local Governments and SDG Localisation : Reshaping Multilevel Governance from the Bottom up. *Journal of Human Development and Capabilities*, *22*(4), 713-724. https://doi.org/10.1080/19452829.2021.1986690

Bossert, T. (1998). Analyzing the decentralization of health systems in developing countries : Decision space, innovation and performance. *Social Science & Medicine*, *47*(10), 1513-1527. https://doi.org/10.1016/S0277-9536(98)00234-2

Carrasco B., Rahemtulla H., and R. Rohdewohld (Eds). (2023). *Decentralization, Governance and Localizing the Sustainable Development Goals in Asia and Pacific*, Routledge and ADB.

Ettlinger, N. (1994). The Localization of Development in Comparative Perspective. *Economic Geography*, *70*(2), 144. https://doi.org/10.2307/143652

Farmer, J., Carlisle, K., Dickson-Swift, V., Teasdale, S., Kenny, A., Taylor, J., Croker, F., Marini, K., & Gussy, M. (2018). Applying social innovation theory to examine how community co-designed health services: Using a case study approach and mixed methods. *BMC Health Services Research*, *18*(1), 68. https://doi.org/10.1186/s12913-018-2852-0

Flores, W., & Samuel, J. (2019). Grassroots organisations and the sustainable development goals : No one left behind? *BMJ*, l2269. https://doi.org/10.1136/bmj.l2269

Maldonado-Mariscal, K. (2023). Grassroots innovation and social innovation in perspective. *Frontiers in Sociology*, *8*, 1247293. https://doi.org/10.3389/fsoc.2023.1247293

Marchesi, S., & Masi, T. (2021). Delegation of implementation in project aid. *The Review of International Organizations*, *16*(3), 655-687. https://doi.org/10.1007/s11558-020-09396-9

Ruddick W. (2025). *Grassroots Economics – Reflection and Practices*, Grassroots Economics Foundation.

Tumusiime, P., Kwamie, A., Akogun, O. B., Elongo, T., & Nabyonga-Orem, J. (2019). Towards universal health coverage : Reforming the neglected district health system in Africa. *BMJ Global Health*, *4*(Suppl 9), e001498. https://doi.org/10.1136/bmjgh-2019-001498

Xinyi, L., YingXin, X., Yuan, G., & Kai, Z. (2023). Grassroots autonomous organizations embedding, non-agricultural employment and farmer homestead withdrawal behavior : Based on the research data of Qionglai City, Sichuan Province, China. *Environmental Science and Pollution Research*, *30*(39), 91158-91172. https://doi.org/10.1007/s11356-023-28478-w