Coordinates towards the transformation of philanthropy
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Modifying power relations between the North and the South for a more effective local impact

This document aims to spark reflections through coordinates, examples and provocative questions on how to advance the deconstruction and transformation process of philanthropic organizations to achieve a more meaningful impact at local level. It is an action-oriented document, filled with insights and practices, with the powers and limitations involved.  

Why is it Necessary to Transform Philanthropy?

There is currently a consensus on the need to transform philanthropy that has been built through conversations about “Localization”, Decoloniality, and Power-shift, in spaces such as Ringo Learning Festival, Alliance Journal, Participatory Strategy by TAI, and Accountable Now.

These dialogs share the urge to change how economic, human, technical-scientific, and cultural capital is transferred to beneficiary communities, acknowledging the power dynamics linked to the economic resources granted by philanthropy, the reproduction of structures and dynamics inherited from colonialism and the hierarchy in the North-South relationship.

In other words, it is important to stop assuming and explaining the needs, challenges, opportunities and solutions for local communities through what we might call #privilegedspoiling, “explaining and deciding on their behalf” without respecting their voice, ideas, worldviews, practices and projects.

In this sense, when we talk about transforming philanthropy, we are proposing placing beneficiaries at the heart of the financing process as active subjects and not as an object, so the changes to be made consider their needs and cultural, social and political contexts, and avoid causing harm even when not intended.

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1- Throughout the document, when we refer to “meaningful impact” or “effective impact” at the local level, we refer to the fact that the effectiveness and significance of the impact is defined by the impacted people themselves and not by the philanthropic or intermediary organizations.

2- This document has been prepared to promote reflections and actions in the meetings with organizations and funders convened by Transparency & Accountability Initiative (TAI). Therefore, and given the practical and brief nature of this document, it does not fully present the discussion on decoloniality, power-shift and “localization”. We have prepared, and made available, a list of references to study these topics in more detail. For the preparation of this document, and as part of the insights obtained from philanthropic organizations, we have interviewed members of Ford Foundation, Luminate and Open Society Foundation working at different levels and geographical areas.

3- This term has been strongly criticized in Latin America and also by those who suggest focusing on Power-Shift and Decoloniality. The term “Localization” is taken as a category imposed by international organizations, not recognized by grassroots organizations and communities. That means that it is alien to them. For this reason, we do not recommend using or focusing on this category.

4- The concept of #privilegedspoiling was coined by Pur-ple.
This process is complex because it requires transformations at the level of power and systems relationships. Besides, the context and situation of each philanthropic organization are different. Therefore, there might be several paths to make such transformation.

In this sense, we would like to start these practical recommendations, presented here as coordinates, by highlighting that there are no universal formulas, but paths to be built and traveled with their own characteristics. These paths will vary depending on the funding organization, the beneficiary communities, the topics and agendas, and the local contexts.

Coordinates and Actions for a More Effective Transformation at Local Level

Below, we present four coordinates to start a transformation process that would allow for a more meaningful impact at the local level. Each of them is presented with actions and questions that help to illustrate the possible paths to take.

Coordinates and actions have been defined to promote a comprehensive transformation process of the organization. For this reason, they address the following topics: narratives; institutional reorganization both inwards and outwards; the role of the community and alliances.

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#1 Narratives about the South from the South

**ACTIONS**
1. Fostering internal reflections on Decoloniality.
2. Carrying out #privilegedexplaining deconstruction activities.
3. Ensuring the voice of the community is heard in discussions about Decoloniality.
4. Promoting the presence of organizations from the South in the decolonial movement of philanthropy.

#2 Reorganizing and Starting Over

**ACTIONS**
1. Making financing processes, structures, decision-making mechanisms, ways of doing things and times more flexible.
2. Ensuring diversity in structures, processes and decision-making mechanisms.
3. Adapting external processes to the needs and capacities of the communities.
4. Placing beneficiary individuals and communities at the center of the whole reorganization.

#3 Participation is Key but Not Enough

**ACTIONS**
1. Ensuring participatory processes to make decisions and set the agenda, by placing the community and its local context at the heart of everything.
2. Devising management processes focused on the community and its local context.
3. Generating horizontal relations and permanent dialogs with the community.
4. Fostering mechanisms of reciprocal transparency, between donor organizations and beneficiary communities/intermediary organizations.

#4 A Collaboratory of Impact

**ACTIONS**
1. Promoting a collaborative, horizontal and transparent alliance with the community.
2. Identifying and defining other partners with the community.
3. Ensuring a permanent exchange of information with the community.
4. Promoting the engagement of more community stakeholders.
Advancing on a transformation process to make a effective impact at the local level is closely relat-ed to a continuous and deep reflection on how the privileges of belonging to the Global North affect the whole process of philanthropy. Being in a privileged situation often comes along with making assumptions and “giving explanations” about the problems, needs and possible solutions for the communities of the Global South; #privilegedsplaining.

The changes brought by the power-shift call for questioning and redistributing the North-South, or donor-local community, power relationships. The North must actively and conscientiously listen to the South. Those who understand and can explain the needs of the people are not the organiza-tions in their privilege and power position, but the communities themselves.

**Actions Leading us Towards Coordinate #1:**

1. Fostering internal reflections on Decoloniality.
2. Carrying out #privilegedsplaining deconstruction activities.
3. Ensuring the voice of the community is heard in discussions about Decoloniality.
4. Promoting the presence of organizations from the South in the decolonial movement of philanthropy.

**Narratives about the South from the South #1**

Does your organization provide forums for internal reflections on Decoloniality or on how to make a more effective impact at local level?

If so, have the organizations from the Global South and/or the intermediary organizations you work with been included in those conversations?

Do communities or intermediary organizations participate in these forums for reflection?

Have you carried out deconstruction exercises on colonial practices in the organization?

In what languages or dialects do these conversations take place?

**Transforming the Systems: The Cases of Ringo and Decolonizing Wealth**

**RINGO**
The Rights Co-lab’s RINGO Project is a systems change initiative that seeks to transform global civil society to respond to today’s challenges. This project has launched 8 prototypes that can transform RINGO institutions and the systems in which they function.

RINGO is the first globally coordinated cross-sectoral effort to revolutionize the sector by interrogating the purpose, structures, power, and positioning of these institutions.

We recommend reviewing their discussions!

[https://rightscolab.org/ringo/](https://rightscolab.org/ringo/)

**DECOLONIZING WEALTH PROJECT**
The Decolonizing Wealth Project envisions a world where racial equity has become a societal norm, and new systems and ways of being ensure everyone can live their best lives, thrive in their cultures, and bring about healing from generations of colonial trauma. One of their projects focuses on building an Indigenous and Black-led philanthropic infrastructure through which they can model best practices to redistribute wealth from a reparations approach. Another recognizes the power of their storytelling traditions to bring visibility and change to issues impacting Indigenous and Afro-descendant communities through digital projects, media engage-ment, and strategic partnerships.

[https://decolonizingwealth.com](https://decolonizingwealth.com)
#2 Reorganizing and Starting Over

Such a process requires the donor organization to dare to be more flexible and more diverse inwards and outwards. For this step, the organization should reconsider everything. It should transform its composition, its dynamics, its processes, its decision-making, the design of its strategies, the terms and conditions of the funding, etc.

In addition, this coordinate implies understanding that it is philanthropic organizations that need to adapt to the diversities, capacities, realities and contexts of the organizations/communities they want to support, and not the other way around. This transformation has a direct impact on how to think about philanthropy, give donations, design, implement and evaluate projects, and how to connect with the entire stakeholders’ map, including intermediary organizations.

About the latter, the reorganization and transformation of donors implies reviewing the identification and selection processes for intermediaries, so that these organizations also respond to the transforming criteria being implemented. They must be consistent with the new narratives and must know and understand the local context. Besides, their alliances and ways of working must place the community at the heart of what they do.

## Actions Leading us Towards Coordinate #2:

1. Making financing processes, structures, decision-making mechanisms, ways of doing things and times more flexible.
2. Ensuring diversity in structures, processes and decision-making mechanisms.
3. Adapting external processes to the needs and capacities of the communities.
4. Placing beneficiary individuals and communities at the center of the whole reorganization.

- How is the board of your organization composed? Are communities (their ideas, identities and experiences) represented?
- How does the composition of the board impact the decision-making process?
- How many individuals in leadership positions within the organization represent the regions involved in identity, cultural and social terms?
- Have financing processes been designed considering the realities of the communities (wording, format, language, etc.)?
- Who is in charge of deciding what the community needs to carry out the project? How is it done? What kind of engagement do the intermediary organizations and the local community have in that decision?
- Is the organization reconsidering the role of intermediary organizations so as to make a greater local impact? When deemed necessary for an effective local impact, what is the criteria used to identify and select them?
- Do intermediary organizations know the local context? Do they have connections with the beneficiary communities? Is their working methodology consistent with the view of decoloniality, power-shift and impact at local level?
Who is in charge of deciding the term for the funding? How is it done? What kind of engagement does the local community have in that decision?

Flexibility and Participation at the Heart of the Strategy: The FRIDA and BUILD cases

FRIDA
FRIDA is a fund for young feminist movements that employs a participatory grant making model in which the decision-making process is in the hands of the young feminists themselves. Through this model they seek to change power relations in philanthropy.

Once applications have been submitted, co-parties are invited to vote for the proposals that should receive funding. Frida’s staff and advisors ensure that grants are awarded through an open and transparent review of the applications. This means that it is young feminists, who are deeply connected to their realities and to the people involved, who decide what strategies are necessary and what can be implemented with the resources available.

BUILD
The Ford Foundation’s Building Institutions and Networks (BUILD) initiative is a grant making approach focused on helping organizations become stronger and more resilient over time.

By providing grantees with five years of general operating support, combined with targeted organizational strengthening support, BUILD aims to equip these organizations with the strategic clarity, people, knowledge, and resources they need to achieve impact and advance systems change over the course of years and decades.

Who is in charge of deciding the term for the funding? How is it done? What kind of engagement does the local community have in that decision?

#3 Participation is Key but Not Enough

Having an impact at local level implies placing beneficiary individuals and communities at the heart of every process, decision, strategy, management and assessment.

Their voices, experiences, cultures, contexts, wisdoms and identities are the cornerstone not only of the whole donation process, but also of the reconfiguration of the organization’s structures, dynamics and internal schemes. In this way, a bond between philanthropic organizations and beneficiary communities as peers is forged, based on co-creation processes. It is not only about generating forums for participation but also about involving the community in decision-making processes in organizational structures.

Actions Leading us Towards Coordinate #3:

1. Ensuring participatory processes to make decisions and set the agenda, by placing the community and its local context at the heart of everything.
2. Devising management processes focused on the community and its local context.
3. Generating horizontal relations and permanent dialogs with the community.
4. Fostering mechanisms of reciprocal transparency, between donor organizations and beneficiary communities/intermediary organizations.

https://youngfeministfund.org/es/

Promoting a collaborative, horizontal and transparent alliance with the community.

Identifying and defining other partners with the community.

Ensuring a permanent exchange of information with the community.

Promoting the engagement of more community stakeholders.

#4 A Collaboratory of Impact

To create a collaboration environment with impact at local level it is essential to start with a transparent, horizontal and collaborative alliance with beneficiary communities. In this sense, the transformation of the power relationships between the parties involved in funding processes implies building collaboration networks with other stakeholders who interact directly with the community, on the ground, and know the local context and particular situation of the population, as well as with those who are related in other ways.

The key in this type of partnership lies in the ability of the donor organization to put the community at the center of this collaboration effort. What brings different parties together is the beneficiary community, their voices, needs, expectations and experiences. Alliances must be forged along with the community.

Actions Leading us Towards Coordinate #4:

1. Promoting a collaborative, horizontal and transparent alliance with the community.
2. Identifying and defining other partners with the community.
3. Ensuring a permanent exchange of information with the community.
4. Promoting the engagement of more community stakeholders.
In the north of Argentina, there are currently 500 indigenous communities that belong to 14 native groups. Due to historical reasons and structural conditions of inequality and discrimination, members of these communities live in poverty and struggle to cover their basic needs for access to food, water, housing, health and education.

At the beginning of 2020, after 9 indigenous children died and 7,543 were found to be at nutritional risk, the region was declared in social and health emergency.

The great number of deaths was, to a great extent, connected to the fact that boys and girls arrived at Hospitals in such a poor physical condition that in most cases it was impossible to revert.

In this context, several international organizations, INGOs and national civil organizations started implementing activities on the ground.

In view of the enormous number of reports produced at various times by international agencies, INGOs, and state institutions, describing the situation of the affected population and identifying problems and possible solutions, a large part of the resources were allocated to improve health equipment, increase the number of health workers and ensure the conditions of access to health care centers.

Communities, in most cases through their chiefs (“Caciques”, in Spanish), participated in meetings with organizations that started carrying out support-related tasks on the ground. Their opinions and recommendations were taken into account for the initial assessment which allowed for the identification of the existing problems.

Nevertheless, by the end of 2020, 108 boys and girls died. By mid 2021, the death toll already reached 64.

At the beginning of 2021 a local civil society organization carried out a different work methodology in order to identify needs, possible solutions and determine how to design the project along with indigenous communities.

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**CASE STUDY A**

The voices of indigenous families in the southern part of the Global South

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5. See https://boletinoficialsalta.gob.ar/instrumento.php?cXdlcnR5dGFi697Hw4M7g1cXdlcnR5
sentatives of the community, and mothers directly affected by the situation of malnutrition of children who were heard, consulted and invited to make decisions on how to allocate the available resources.

The families expressed their distrust of the Western health system and medical model. They were also afraid that their children might be taken away in violent ways to be admitted. They were concerned about their lack of information on the treatments and care offered by hospitals and the lack of resources when they had to stay in the cities during the hospitalization of their loved ones. That’s why children arrived at health centers in such poor health conditions.

From there, it was possible to get them involved and to make an assessment along with people from the indigenous communities. It was then possible to detect that one of the main problems was the lack of information that could be understood in their language and culture and that respects their world view.

This produced a huge distrust of families in the Western health system. In turn, the lack of resources and infrastructure for the families that had to stay with children during their hospitalization meant that they did not want to have them admitted because, in many cases, that would result in them being taken away without the company of any member of the community.

If they had not listened to the voice of the community and given their insights a major role in the identification of their needs and possible solutions, the funding would have followed the recommendations of experts and organizations that assumed which the problems were. Although many of these were actually real, the response would have failed to solve a fundamental problem to find sustainable structural solutions and would have failed to empower people as active subjects of their own changes.

Some of the solutions, co-developed with the communities, included: demanding the presence of intercultural facilitators, institutional transit hostels and socio-economic support for the families, along with the creation of an Intercultural Health Support Network, with the purpose of putting an end to discrimination and violence suffered by boys and girls when they want exercise their right to health.

Food for Thought - Q&A

Who was in charge of determining which community received funding and which community was impacted by such funding? How was it done?

Practice Aligned with Coordinates
The community is not only identified through the individual/s who represent them in forums of participation, but through the engagement of those affected by the problem along with other stakeholders that interact with the community.

The community was first identified by the indigenous families themselves who were experiencing the problem. The voice of mothers of children suffering malnutrition was essential to understand the problem and seek solutions.

Practice Not Aligned with Coordinates
The community is defined by experts in the topics, by those who represent them in institutional forums of participation, and by institutional actors who interact with their leaders.
Who set the agenda of the funding, the needs and the areas to be funded, and the results of the projects affecting the community? How was it done? What kind of engagement did the community have?

**Practice Aligned with Coordinates**
The voice of the community affected was paramount to set the agenda, to identify needs, to find solutions and to establish expected goals. Understanding the problem from the perspective and insights of the families involved was key to determine what would be financed.

Empathy in listening. Understanding the context by being on the ground, paying attention to the voice of the community. The voice and experiences of people interacting with the community.

**Practice Not Aligned with Coordinates**
The agenda, needs, solutions and expected results are determined based on the reports prepared by international organizations, the exchange with experts, and listening only to those identified as representatives of the community.

Who was in charge of deciding the term of the funding? How was it done? What kind of engagement did the community have?

**Practice Aligned with Coordinates**
Long term financing was essential to address the need to make structural changes and empower the community with solutions sustainable in time. This was decided together with the community.

**Practice Not Aligned with Coordinates**
The term of the financing depends on the agendas of international organizations, the priorities defined and the period pre-assigned to the projects.

Who designed the project to be implemented? How was it done? What kind of engagement did the community have?

**Practice Aligned with Coordinates**
The project was designed based on the insights of the families and other stakeholders that interact with the community. And it was approved by them.

**Practice Not Aligned with Coordinates**
The project is designed based on guidelines previously defined by the donor, or previously established topics, activities, and the like, that are adapted by the organization in charge of the financing.

When instructions are given in the North but solutions come from the South

The 2014–2016 outbreak in West Africa was the largest Ebola outbreak since the virus was first discovered in 1976. Immediately after its detection, international organizations (WHO, Doctors Without Borders, UNICEF) traveled right away to the region along with represen-

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tatives from the governments of UK, France and United States which sent 4,000 troops to Liberia.

Given the potential severity of the infection, the best medical experts (e.g. Harvard) were employed and Big Data was used to track the spread of the virus. In turn, the governments of Guinea, Sierra Leone and Liberia began to implement strategies designed by “experts” and international organizations from the Global North. In addition to imposing lock downs and quarantines, they received significant funding to build large isolation centers which, according to the Western sanitary paradigm, were placed on land away from villages to avoid contagion. They also prohibited traditional mortuary rituals in which it was customary to caress the bodies of the deceased. They imposed burials without contact.

However, a year after the initial outbreak, thousands of people had died and millions of dollars had been invested, while the virus continued to spread at full speed. What wasn't working?

Medical experts’ protocols and international organizations plans had not considered the local social and cultural context, and most importantly, the people of the local communities had not been consulted.

After months failing to stop the spread of the virus, they reached out and started talking with the people in the villages. This is when they understood why they were not going to the isolation centers, why they were not respecting prohibitions related to the burial of their loved ones, why they had been hiding sick people at home and why nobody was following any of the recommendations made by people from international organizations.

First of all, isolation centers were away from the villages and sick people and their families did not have the means to get there. In addition to that, they understood that there were certain suspicions around these centers and that is why admitted people fled from them. As windows were dark and opaque and it was impossible to see what was happening inside, people and their families could not trust what Western doctors were doing inside the buildings. Besides, sending foreign and often young white people to villages to give instructions on how to deal with the situation also failed because in the communities the voice of authority and teaching came from older adult leaders.

At the same time, they discovered that in the face of all these failures, there were solutions that came from the same community: Why not train seniors so that they can train people in their own villages? Why not use or build a house within the village as an isolation center and train people in the village so that they can run it? Or, in case they did not want to take their relatives to any center, why not develop training processes inside the village on how to implement safety measures at home? And, moreover, why not co-design funeral rituals together, respecting traditions while complying with safety measures?

Only when the communities began to get involved in the solution, a year later, did the cases begin to decrease and the spread slowed down. As this case clearly shows, Western doctors and international organizations analyzed the situation and acted from their own assumptions without considering the local context and the communities themselves - their resources, their voices, their experiences and traditions. Only when they were involved in finding the solution, could the Ebola outbreak be contained.
Food for Thought - Q&A

Who is in charge of deciding what the community needs to carry out the project? How is it done? What kind of engagement does the local community have in that decision?

**Practice Aligned with Coordinates**
From the beginning - at the design stage - and throughout the process of implementing the strategy, representatives of the affected communities are involved in the decision-making process. Their opinions are as relevant as scientific-medical knowledge regarding the severity of the problem, the spread of the virus and its high mortality; as well as regarding local medical practices, traditional rituals, the geographical context, the resources of the communities and their desires and needs.

**Practice Not Aligned with Coordinates**
The strategy is designed by a Western medical scientific committee and is implemented from its own perspective and that of international organizations, without involving local communities, assuming which the problems are and imposing solutions.

Does your organization provide forums for internal reflections on Decoloniality and/or on how to make a more effective impact at local level?

**Practice Aligned with Coordinates**
There is a process of reflection on the paradigms of care and health and disease treatments, and on the power relations on which they have been built and their consequences. New processes are implemented to ensure representativeness and diversity of knowledge, traditions and practices of social groups receiving financial resources from philanthropic organizations.

**Practice Not Aligned with Coordinates**
The funding agenda is defined by philanthropic organizations using the Western medical paradigm while other forms of health care and treatment are dismissed.

Is there a decentralization strategy for the resources, so that it is not always the same organizations and/or geographical regions - urban/rural?

**Practice Aligned with Coordinates**
There is an understanding of the local geographical context from the point of view of the affected people and communities as opposed to establishing a single urban/rural division. This allows for the resources granted to reach the different relevant contexts for greater impact at local level.

**Practice Not Aligned with Coordinates**
Resources are given and projects are implemented as most conveniently or traditionally to suit the way of doing things of intermediaries, organizations or donors. Local context specific characteristics are not taken into account.

Who decides which alliances to forge when devising the donation strategy? How is it done? What kind of engagement does the local community have?

**Practice Aligned with Coordinates**
Alliances are forged with organizations, people in leadership positions and groups that are valued as such by the community itself and with whom there is a bond of trust. For example, young people in international organizations are replaced by traditional leaders of communities.

**Practice Not Aligned with Coordinates**
Partnerships are created exclusively with organizations that usually engage with the donor, without confirming their representativeness with the local community or without looking for other alternatives that may be more relevant to local communities.
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