



THE STATE OF THE HUMANITARIAN SYSTEM

SUMMARY | 2015 EDITION

Humanitarian Outcomes



CONTENTS

Introduction	4
The need	8
The response	10
Function 1: Responding to sudden-onset disasters	14
Function 2: Supporting population in chronic crises	15
Function 3: Building resilience and independent capacity	16
Function 4: Advocating for humanitarian action and access	17
How aid recipients assess the humanitarian system	18
Case study: Philippines (Typhoon Haiyan)	20
Case study: Central African Republic	22
Case study: Mali	24
Case study: Syria	26
What's next	28

Tables

Humanitarian performance, SOHS 2012 and 2015	6
Evaluation criteria: Research questions	12

Figures

The humanitarian system	5
International humanitarian emergency responses, 2007–2014	9
Targeted recipients of aid	9
Humanitarian expenditure, 2013 (USD millions)	10
Percentage of stated requirements covered, by sector	11

INTRODUCTION

The goal of The State of the Humanitarian System (SOHS) study is to gather and synthesise evidence to form an overall picture of the system, and indicate how well it is serving the needs of people affected by conflict and crisis.

System? What system?

This study uses the term ‘system’ in an organic rather than mechanistic sense, as a complex whole formed of interacting and interrelated elements. The humanitarian system is thus defined as **the network of interconnected institutional and operational entities through which humanitarian assistance is provided when local and national resources are insufficient to meet the needs of the affected population.**

Analytical framework

The study evaluated the humanitarian system on its performance and progress between 2012–2014, using the OECD-DAC evaluative criteria as modified for humanitarian action (OECD-DAC, 1991; Beck, 2006): coverage/sufficiency, relevance/appropriateness, effectiveness, efficiency, connectedness, coherence and impact.

This year’s report differs from earlier editions, as performance has been assessed through the lens of four core functions of the humanitarian system. The humanitarian system can be seen as having two principal functions:

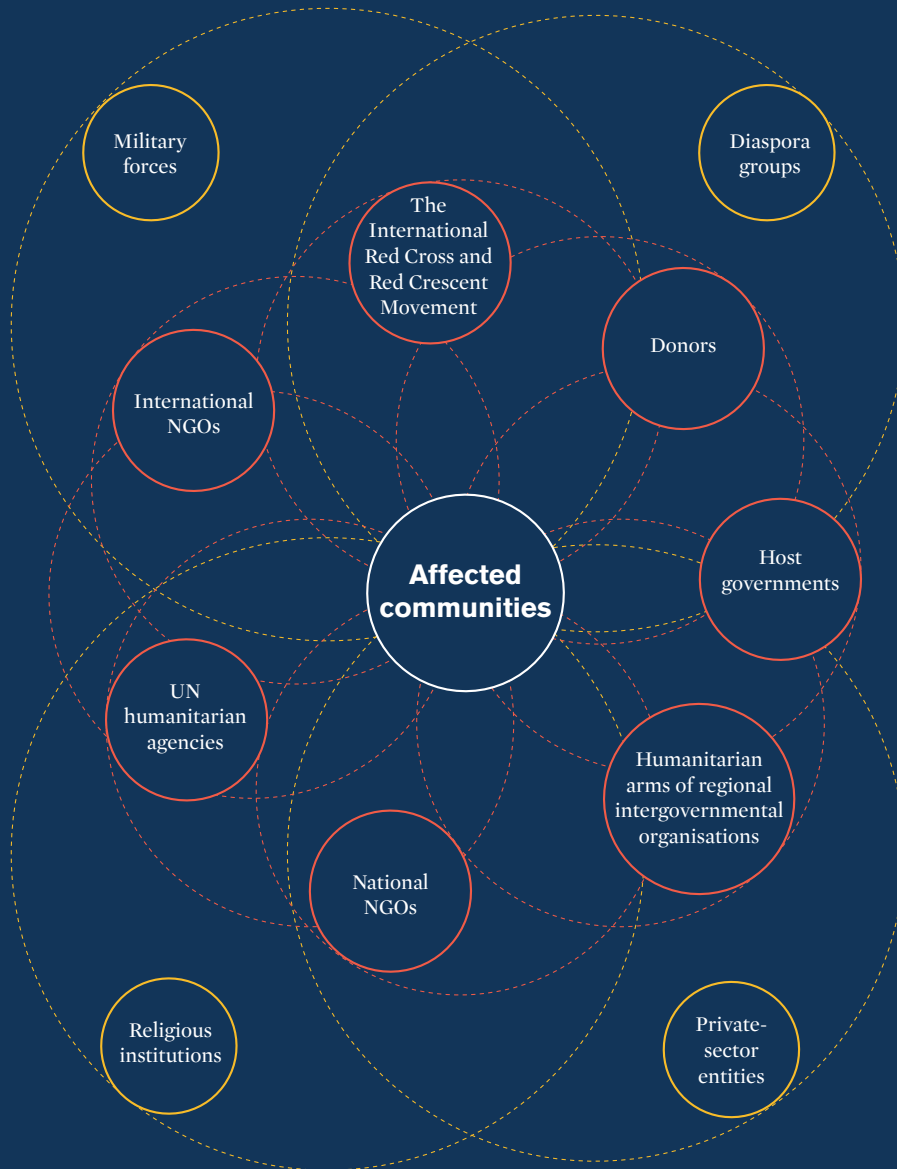
- Providing rapid relief in response to major sudden-onset disasters
- Meeting the basic humanitarian needs of populations undergoing chronic crisis conditions caused by conflict, repeated natural disasters, failures of development or governance, or some combination thereof.


The SOHS 2015 also identifies two auxiliary functions:


- Building capacity for local disaster preparedness, recovery and general resilience
- Advocating for humanitarian action and access on behalf of crisis-affected people.

The four functions described above do not make up an exhaustive list of humanitarian activities and are not equally important in every case. Rather, elements of each are usually at work to some degree in any given humanitarian context.







The humanitarian system



 Organisational entities for which aid provision is their primary mandate

 Groups that play a critical role in humanitarian response but humanitarian action is not their core function

Humanitarian performance, SOHS 2012 and 2015

Sufficiency/coverage	Effectiveness	Relevance/appropriateness
SOHS 2012 (2009–2011 compared to 2007–2008)		
		
No progress <ul style="list-style-type: none"> • Funding shortfalls and coverage gaps continued. • Coverage of stated requirements remained static. • Perceptions of sufficiency among humanitarian actors surveyed dropped to 34% (from 36% in 2010). 	Mixed progress <ul style="list-style-type: none"> • Programme objectives were largely met. • However, weaknesses were identified in leadership and timeliness. 	Improvement <ul style="list-style-type: none"> • Modest improvements occurred in aligning with host government priorities. • Progress was made in needs assessment methods and tools for communicating with affected populations. • Weakness persisted in local consultation on projects, especially with recipients.
SOHS 2015 (2012–2014 compared to 2009–2011)		
		
Decline (with a few exceptions) <ul style="list-style-type: none"> • Despite an increase in funding, overall coverage decreased. <ul style="list-style-type: none"> • Most gaps were seen in support for chronic crises, including deficits in funding, technical capacity, and recruitment, as well as access constraints. • Some coverage improvements were cited in responses to natural disasters. • Perceptions of sufficiency among humanitarian actors surveyed dropped to 24% (from 34% in 2012). • More pessimism was expressed about ability to reach people in need in conflicts, mostly due to insecurity. 	Mixed progress <ul style="list-style-type: none"> • Improvements were noted in both timeliness and mortality/morbidity outcomes in rapid responses to major natural disasters. • Improvements were noted in coordination, and in quality of leadership and personnel in major emergencies. • Performance was poor in conflict settings. • A majority of survey respondents graded effectiveness low. • Crosscutting issues have not yet been systematically addressed. Most progress has been in the area of gender, but more needs to be done in the areas of age and disability. 	No progress <ul style="list-style-type: none"> • A slight majority (51%) said needs assessment had improved but saw no progress in engaging local participation. • Some methodological innovations occurred in needs assessment, but no consensus was reached on tools. • More feedback mechanisms were developed, but there is little evidence of affected populations' input to project design or approach.

Connectedness	Efficiency	Coherence/principles
		
<p>Improvement</p> <ul style="list-style-type: none"> Improvements, mostly driven by the host states, have occurred with the establishment of national disaster management authorities (NDMAs) and legislated cluster links. Growing norm and tools for accountability, but under-investment in the capacities of local partners. 	<p>No progress</p> <ul style="list-style-type: none"> No significant new savings of money or time were noted. Donors seeking greater efficiencies by using fewer funding channels were perceived as creating inefficiencies down the line, such as cascading overhead costs and tougher reporting requirements. 	<p>Decline</p> <ul style="list-style-type: none"> Increasing strain on principles was noted, as many humanitarian NGOs were seen to align with political and military agendas. The gulf widened between strictly humanitarian and multi-mandated organisations. Continued disconnection and friction were noted with longer-term development agendas.
		
<p>Little progress</p> <ul style="list-style-type: none"> Limited progress in Asia was outweighed by lack of progress in many other regions. Survey participants saw little participation and consultation of local authorities. Consultation and participation of recipients ranked poorest among practitioners. 	<p>Little progress</p> <ul style="list-style-type: none"> No significant change or new development was noted since the last review. A few small-scale (project-level) examples of new efficiencies were noted. Some inefficiencies were cited in surge response to Typhoon Haiyan and in the Syrian refugee response. 	<p>No progress</p> <ul style="list-style-type: none"> Stabilisation and counter-terror agendas continued to influence donors' humanitarian funding decisions. Donor firewalling of humanitarian aid, and their consideration of principles, has weakened. There is a perception of increasing instrumentalisation and politicisation of humanitarian assistance, including by affected states. Despite the rise of the resilience concept, no progress occurred in changing aid architecture to suit, or in phasing in development resources earlier in the response and recovery phases.

THE NEED

2.1 Emergencies: Larger and mostly conflict-driven

The past three years have seen the international humanitarian system responding to fewer emergencies, mostly ‘complex’ (conflict-related) in nature, and with larger human caseloads. This contrasts with the prior study, which reported an increase in the number of emergency responses in 2009–2010 compared to 2007–2008 (ALNAP, 2012).

At the same time, significantly greater numbers of people were targeted for assistance (a 44% average increase from 2009–2010, and a 78% increase from 2007–2008), and the price tags for the responses have risen accordingly. Chronically vulnerable and unstable areas such as CAR, Mali and South Sudan, whose populations were already receiving humanitarian assistance, experienced new outbreaks of violence leading to further displacement and magnified needs.

Needs tend to accumulate as new complex emergencies are added to the caseload more quickly than older ones drop off. The absence of political and development solutions to the underlying causes has led to the majority of humanitarian resources being directed towards chronic complex emergencies. Of the 58 countries that received humanitarian assistance in 2014, 49 (84%) had received it every year for the last five years and 40 countries (69 per cent) were on their tenth straight year of receiving humanitarian aid.

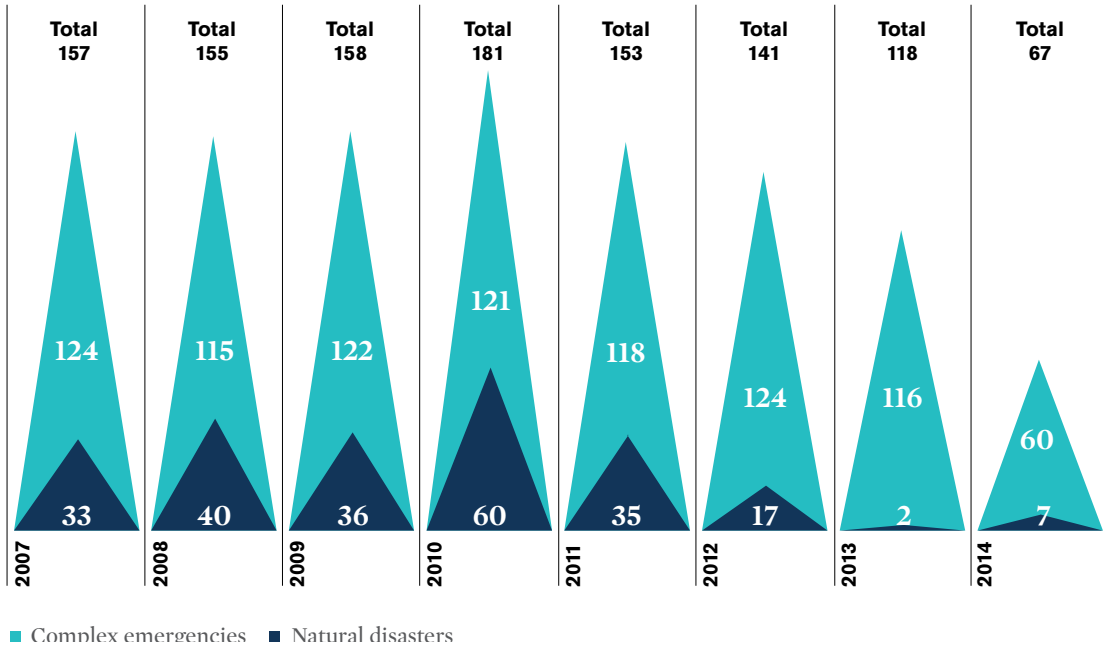
2.2 The problem of measuring and defining needs

The system has not developed a standard formula for calculating the number of people in need, typically a subset of ‘people affected’ by an emergency (some of whom can cope without outside assistance). In the past, most humanitarian appeals were based not on the number of people in need but rather on the total number of targeted beneficiaries of different projects planned by agencies. More recently, humanitarian actors have used consensus numbers derived from a variety of data sources. This makes global analysis difficult.

Good data is typically in short supply in humanitarian emergencies, particularly in volatile and hard-to-access settings or where baseline surveys have not been carried out. Further challenges include distinguishing between humanitarian needs caused by conflict and those caused by underlying poverty, and counting displaced people who may move frequently. Complicating matters further, the numbers may carry political weight.

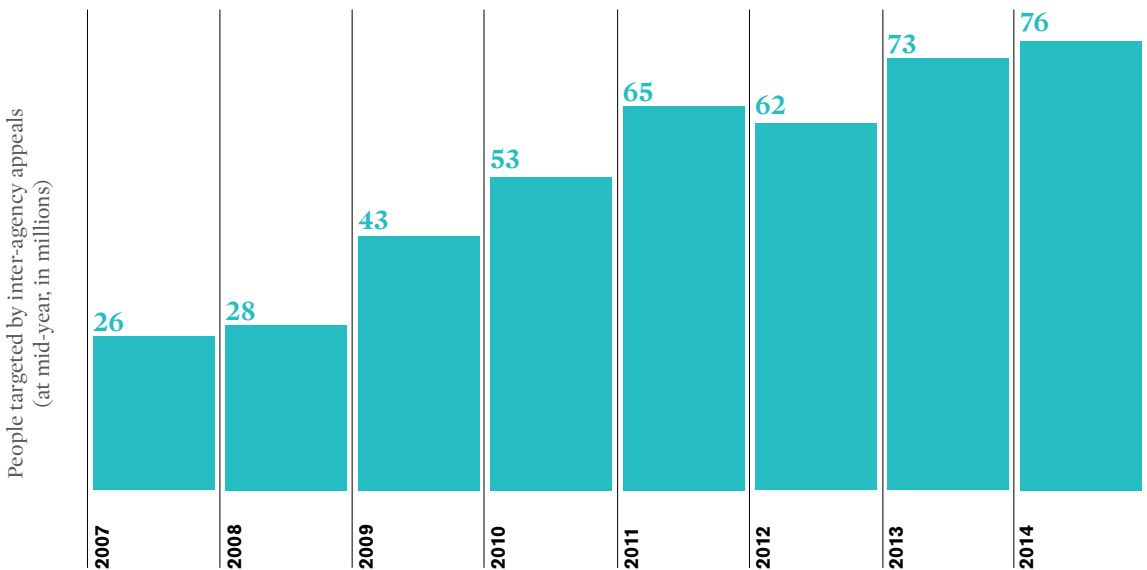
Some global reports have consolidated need numbers in opaque and inconsistent ways, adding to the confusion. The lack of solid data on people in need remains a major obstacle to understanding the success or failure of a humanitarian response.

International humanitarian emergency responses, 2007–2014



Source: FTS (11 January 2015).

Targeted recipients of aid



Source: OCHA, 2014(b) World Humanitarian Data and Trends.

THE RESPONSE

As of 2014,
there were



4480

humanitarian
organisations



4 out of 5

being local NGOs
working in-
country

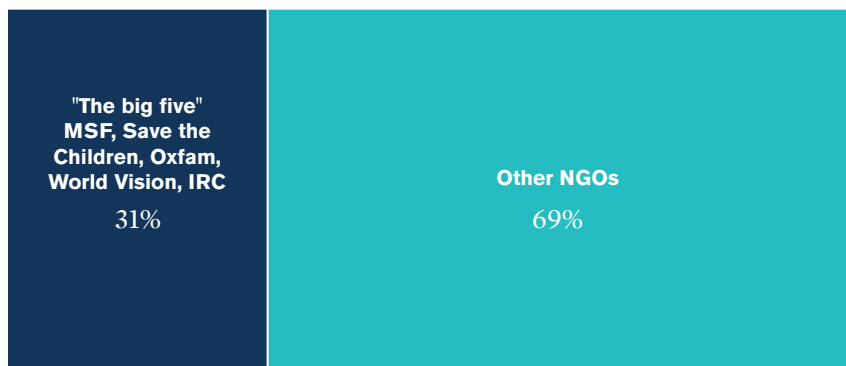
For better or for worse, humanitarian response is a growth industry. In economic terms, growth in the humanitarian system is ‘sticky’ – when organisations enlarge their capacity in response to a surge in emergency funding, they tend not to shed staff and other resources to the same degree afterwards. Many of the largest INGOs operating today have grown by successive big leaps related to major emergencies.

At over \$20 billion in recorded direct contributions to emergencies in 2014, the system has reached its highest funding level in history. Yet increases in the number of people targeted for assistance have outstripped the growth in funding: the average amount contributed per aid recipient has dropped by a quarter since the last SOHS period.

Not all sectors are funded equally either and the gap between coverage and stated requirements has widened. Protection was only funded at 30% of stated requirements. Aid practitioners’ perception of sufficiency has declined to a new low of 24% (from 36% in 2010 and 34% in 2012).

In 2011-2014, 6-8% of total government flows went through pooled funding instruments. Yet national NGOs and others reported no real increase over the time period in review. Donors continue to rely on their habitual partners – which are almost entirely international organisations. Little serious exploration has been done of the potential feasibility of funding disaster-affected governments or national NGOs directly.

Humanitarian expenditures, 2013



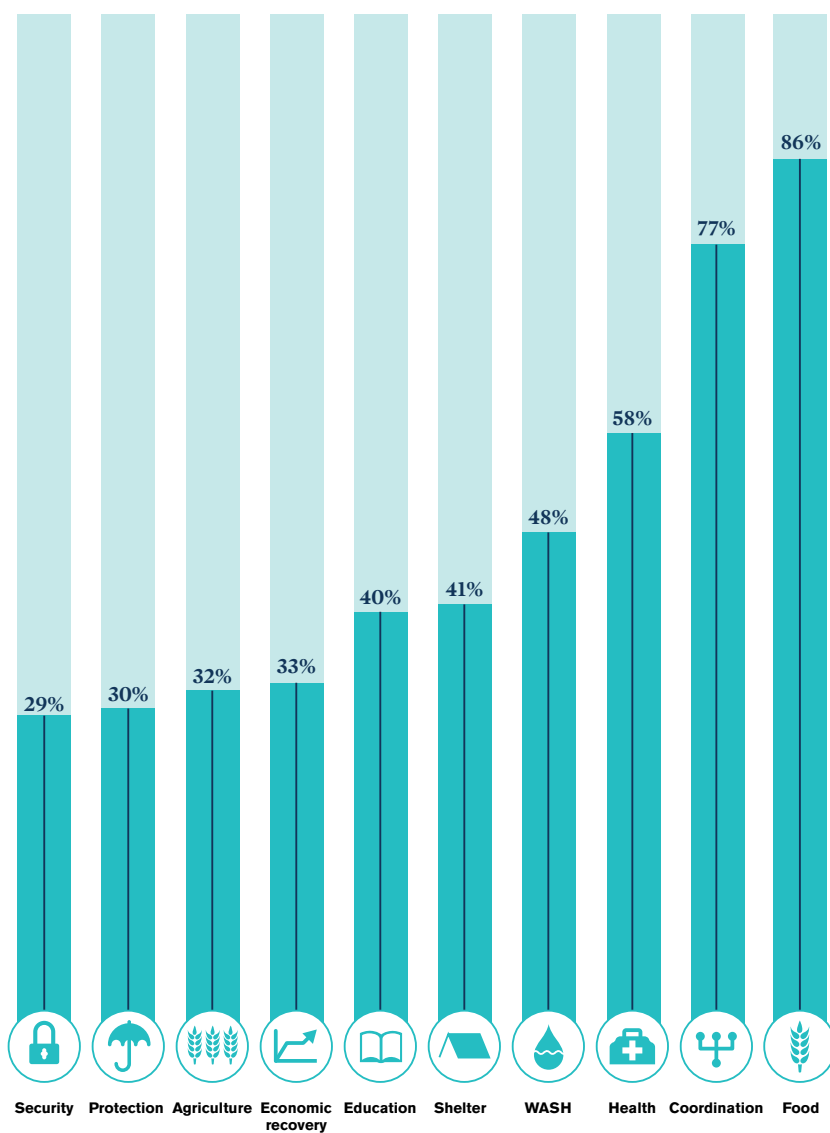
Source: Humanitarian Outcomes (2015).

Note: Percentages based on the estimated total global humanitarian spend of NGOs, 2013, based on annual reports/financial statements. Source: Humanitarian

Outcomes Global Database of Humanitarian Organisations (see Annex 3, Organisational Mapping Methodology)

During the past few years humanitarian country teams in a small number of contexts have explored the use of multi-year humanitarian planning rather than the standard 12-month cycle.

Percentage of stated requirements covered, by sector



Source: FTS (downloaded 11 January 2015).

Evaluation criteria: Research questions

Core humanitarian functions

Coverage/sufficiency

Is the volume and distribution of resources sufficient to meet needs?
To what degree are needs covered?

Effectiveness

How well were humanitarian objectives met?
Was the response timely?

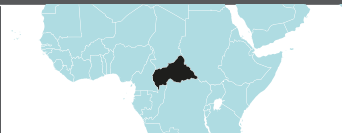


FUNCTION 1 Rapid response to sudden onset disasters

Philippines,
Typhoon Haiyan

- Volume of public and private financial flows following disaster onset.
- Perceptions of sufficiency of humanitarian actors, host governments and recipients.

- Time from disaster onset to start of activities.
- Specific objectives met or not met, according to evaluations.
- Perceived relative effectiveness of different sectors and actors, according to survey responses.

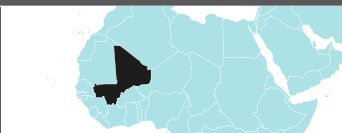


FUNCTION 2 Support in chronic crises

Central African Republic

- Annual global and sectoral funding flows, compared to needs.
- Global and sectoral programming presence, compared to needs.

- Accomplishments based on objectives (as identified in strategic response plans, programme proposals and the like), according to evaluations.



FUNCTION 3 Fostering resilience and preparedness

Mali

- Funding flows dedicated to preparedness and resilience, compared to needs.

- Level of preparedness (advance funding and rapid deployment).
- Demonstrated improved response and/or quicker recovery in subsequent emergencies.



FUNCTION 4 Advocacy

Syria

- Institutional resources devoted to global and national-level advocacy.









- Policy changes by political actors attributed to advocacy efforts.

KEY FUNCTIONS

AUXILIARY FUNCTIONS

Relevance/ appropriateness Do interventions address the priority needs of recipients? To what extent do they drive programme design?	Efficiency Do outputs reflect the most rational and economic use of inputs?		Coherence Does the intervention adhere to core humanitarian principles and align with broader peace and development goals?
<ul style="list-style-type: none"> Evidence of government and/or community involvement in and leadership of needs assessment and prioritisation. Consultation with local community and beneficiaries on needs assessments, appeals and other feedback mechanisms. 	<ul style="list-style-type: none"> Employment of most efficacious materials and logistical platforms for the type of disaster. Rational allocation of time and resources as perceived by participants. 	<ul style="list-style-type: none"> Efficient division of labour between donors and funding channels. Gains in economies of scale vs. loss in cascading overheads of sub-partnership arrangements. 	<ul style="list-style-type: none"> Evidence of promotion of and respect for international humanitarian law by humanitarian actors (public statements and policy input, via media monitoring). Adherence to core humanitarian principles (mapping outcomes of relevant meetings at the global and regional levels and perceptions indicated by survey data). Evidence of reconciliation with development and peace building priorities when possible, independence of humanitarian priorities when necessary (evaluations).
<ul style="list-style-type: none"> Operational emphasis on priority needs. Use of systematic, broad-based and participatory needs assessments. Beneficiary consultation and feedback mechanisms. 	<ul style="list-style-type: none"> Rational allocation of time and resources as perceived by participants. 		
<ul style="list-style-type: none"> Activities and resources strategically targeted to areas most vulnerable to shocks and disasters. Consultation and participation of populations in determining needs. 	<ul style="list-style-type: none"> Appropriateness of preparedness and resilience inputs. 		
<ul style="list-style-type: none"> Planning and activities against collectively identified priorities for advocacy. 	<ul style="list-style-type: none"> Measurable results of activities and time spent on advocacy efforts. 		<ul style="list-style-type: none"> Independence of humanitarian objectives from other agendas.

FUNCTION 1: RESPONDING TO MASSIVE SUDDEN-ONSET DISASTERS








 <p>Coverage/ sufficiency</p>	 <p>Effectiveness and relevance/ appropriateness</p>	 <p>Efficiency, coordination and connectedness</p>	 <p>Coherence/ principles</p>
			

Typhoon Haiyan (known as Yolanda in the Philippines) was, thankfully, the sole massive natural disaster during the review period. In this emergency, the humanitarian system proved itself capable of timely, effective and relevant responses in terms of meeting immediate objectives and priority needs. It also demonstrated the ability to provide sufficient coverage in terms of mobilising resources and accessing populations, with only moderate trade-offs in efficiency, coordination and connectedness that come with the large size of the response. In natural disasters, moreover, coherence and principled humanitarian action are far easier to achieve than in conflict-driven crises.

While not a natural disaster, the Syrian refugee exodus to neighbouring countries also began as a massive and quickly unfolding crisis. Despite some reported problems in efficiency and coordination, the aid response to the refugees in the region has also been given mostly high marks for effectiveness, timeliness and appropriate focus on priority needs.

These overall positive results were assisted to no small degree by cooperative and capable host governments and an automatic surge of international capacity made possible by the new interagency process for system-wide mobilisation and response to major disasters, termed Level 3 (L3) emergencies. Tellingly, similar success was not seen in the chronic crises of CAR and South Sudan, which experienced sudden conflict escalations during the review period. The system also saw some key early failures in a very different sort of natural disaster: the Ebola outbreak of 2014, a case sufficiently different from the typical rapid-response scenario in challenges and response requirements to warrant separate discussion in the report.

FUNCTION 2: SUPPORTING POPULATIONS IN CHRONIC CRISIS

 <p>Coverage/ sufficiency</p>	 <p>Effectiveness and relevance/ appropriateness</p>	 <p>Efficiency, coordination and connectedness</p>	 <p>Coherence/ principles</p>
			

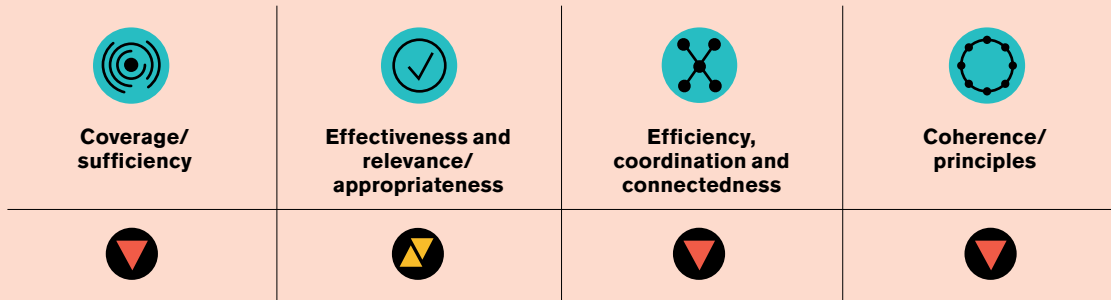
Many of the same countries receive humanitarian aid year after year. Crisis conditions persist in these places due to a combination of development challenges (including poverty), cyclical natural hazards and conflict and instability.

Chronic crises can also have peak moments, such as a famine, natural disaster or a severe upsurge in or start to a conflict. Because building international consensus for humanitarian assistance is usually easier than tackling underlying political or security problems, or engaging with difficult governments, humanitarians are being asked to play increasingly wider roles – including supporting securitisation, filling gaps left by development actors and substituting for weak or neglectful host governments.

Perhaps not surprisingly, the evidence suggests that humanitarian assistance is falling short of its aim of supporting vulnerable people living in these crises. Coverage/sufficiency is weak, partly because humanitarian organisations are being pulled in different directions within crises and increasingly stretched thin across crises. The review period saw a spike in the number of chronic crises undergoing a rapid deterioration and a few cases in which civilians faced violence on a massive scale. Interviewees reported a growing sense of competition between crises linked to funding gaps and human resource challenges.

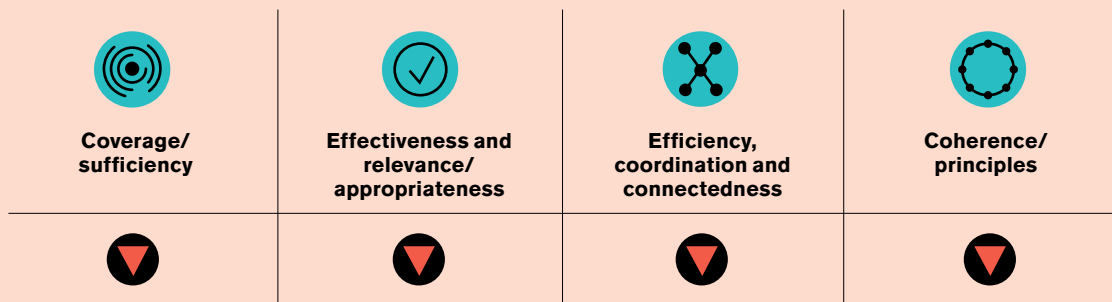
Despite modest gains in efficiency and coordination, local aid actors continue to be marginalised within coordination and funding structures. The effectiveness and relevance of humanitarian interventions were challenged by persistent shortcomings in aid actors' ability to engage with affected people.

FUNCTION 3: BUILDING RESILIENCE AND INDEPENDENT CAPACITY



Preparedness, disaster risk reduction, recovery and capacity building, while distinct areas of activity, have come to be seen as critical components of resilience. The goal of resilience programming is to break out of the reactive cycle of humanitarian action and build local capacity to prepare for, withstand and mitigate the effects of crises. Over the period of review, resilience initiatives proliferated both in stable countries that face severe natural disaster hazards and in chronic crises settings where vulnerable populations are put further at risk by repeated floods, droughts and famines. Although on the rise, resilience remains a small corner of humanitarian action. The study found some important gains in preparedness, particularly in natural-disaster-prone stable countries; however, to date there is only limited evidence that these efforts have had a meaningful result in chronic crisis settings.

FUNCTION 4: ADVOCATING FOR HUMANITARIAN ACTION AND ACCESS



Humanitarian actors engage in advocacy with a broad range of objectives – from enabling and increasing humanitarian assistance, to encouraging actors to uphold international humanitarian law, to seeking broader solutions to crises. When civilian populations are suffering as a result of war and the humanitarian action designed to help them is severely constrained by political and/or security impediments, as in Syria, the role of advocacy can take on added importance. It can become both a moral imperative and a function of last resort for humanitarian actors.

Advocacy can take place in the public realm or through private dialogue. Its objectives can be small-scale and local, as when pushing for armed actors to allow humanitarian aid to proceed through certain routes, or large-scale and global, for instance lobbying the UN Security Council to call for respect for international humanitarian law. Different aid organisations have very different stances on the types of advocacy they are willing to engage in, and at what level of investment. Advocacy is not only the most variable but also the least tangible humanitarian activity, and perhaps one of the most difficult to measure, and limited documentation is available on its evaluation. Applying the evaluation criteria used in the rest of this study to the advocacy function is thus in more difficult.

This study's assessment of humanitarian advocacy draws mainly on findings related to the civil war in Syria but also on material from CAR, South Sudan, and other contexts. It looks at what humanitarian actors seek to accomplish through advocacy and analyses the difficulties and prospects for future efforts. Overall, while some organisations have invested considerably, global humanitarian advocacy efforts are still limited in scope and coordination, and their effectiveness has been hampered by the lack of clear targets and a coherent strategy. Advocacy on behalf of CAR and South Sudan did not succeed in mobilising sufficient international response to the unfolding crises there. In the case of Syria, although advocacy contributed to the passing of UN Security Council resolutions endorsing cross-border relief operations, these have had little meaningful effect on the protection of Syrian civilians or their access to humanitarian aid, which raises important questions about the meaning and role of advocacy.

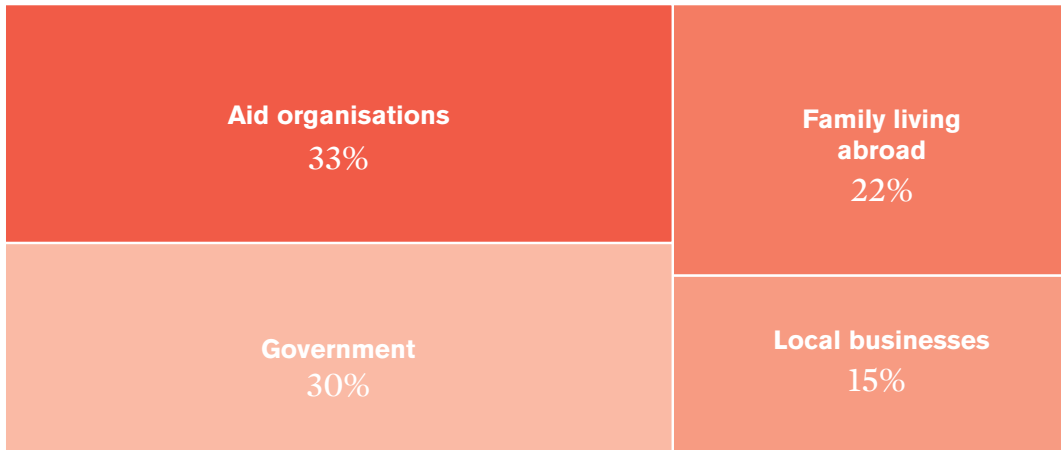
HOW AID RECIPIENTS ASSESS THE HUMANITARIAN SYSTEM

The SOHS study surveyed aid recipients in three countries, representing two chronic, complex emergencies (DRC and Pakistan) and a major sudden-onset natural disaster (Philippines post Typhoon Haiyan).

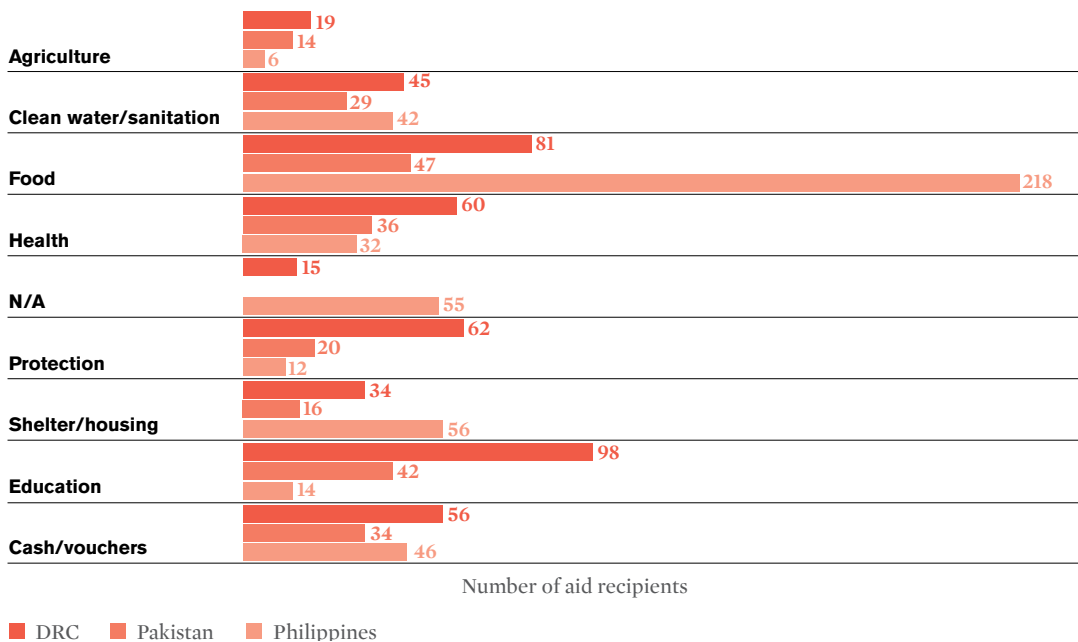
Despite the oft-repeated refrain that the humanitarian system represents just a tiny slice of the aid provided in emergencies, in these three contexts it was seen by recipients to play a prominent role. Humanitarian organisations (local and international) were cited as the primary source of aid for DRC recipients and the second most important source in the Philippines and Pakistan, after the government.

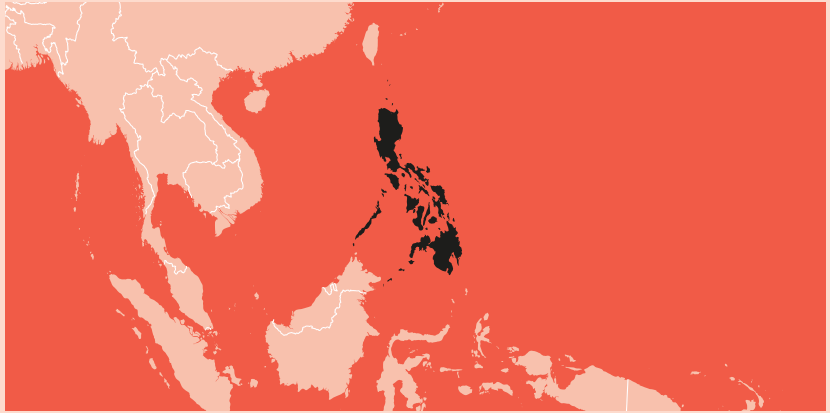
More than half (53%) of aid recipients were satisfied with the speed at which the aid arrived. Most recipients also reported that they were only partly satisfied with the quality and quantity of the aid they received; 44% of surveyed recipients reported not having been consulted by aid agencies on their needs prior to commencement of the aid programming, while only 33% said they had been. However, only 19% of those that had been consulted said that the agency had acted on this feedback and made changes.

Recipients' perceptions of main source of aid (when specified)



Priority needs identified by aid recipients





PHILIPPINES (TYPHOON HAIYAN)

Overview of performance

Coverage/sufficiency: Nearly \$1 billion in funding was mobilised for the response, from major donor governments (notably Japan and the United Kingdom and United States) as well as from private sources in countries with large Filipino diaspora populations. Acute emergency needs in the first three months were amply covered, but deficits appeared in longer-term housing assistance and other aspects of recovery. Stated requirements for food assistance, WASH, coordination and logistics were relatively well covered (all over 70% funded), while contributions for early recovery and livelihoods were far below the request (29% funded). The L3 designation triggered a global surge of UN human and financial resources, with relevant agencies, funds and programmes treating it as a global priority and dedicating resources accordingly. The response was able to reach all affected areas; however, some complained that Tacloban and its surrounding areas were over supported compared to other places, like eastern Samar.

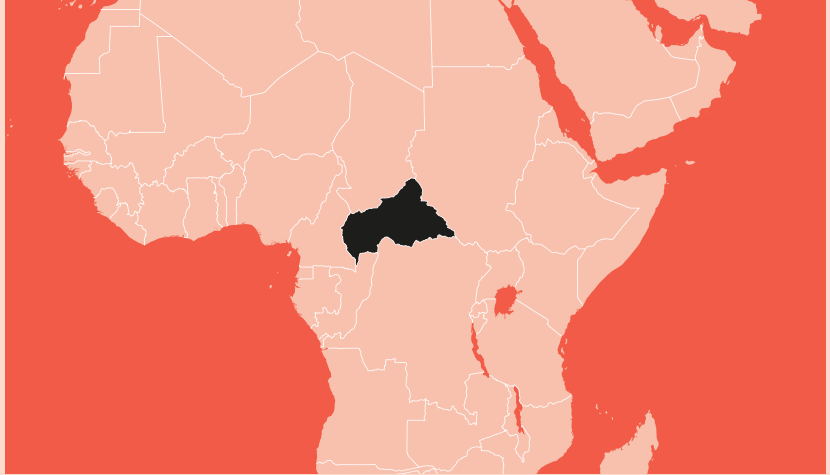
Relevance/appropriateness: Although problems were noted with MIRA, the relevance and appropriateness of relief aid for affected people was not faulted. Unlike in other natural disasters, there were no major problems with inappropriate aid clogging ports and working counter to relief and recovery goals. Needs assessments were multiple and largely uncoordinated across the system, but most were undertaken in close coordination with local authorities and in a timely fashion.

Typhoon Haiyan struck the central islands of the Philippines (where it is known as Typhoon Yolanda) on 8 November 2013. The strongest tropical cyclone ever recorded, it killed over 6,000 people and displaced about 4 million. In total, an estimated 14 million people were affected across 36 provinces, the majority living on the island of Leyte and in its major city, Tacloban, which lost about 90% of its infrastructure. About a million homes were damaged in the storm, about half of those completely demolished, and millions of people saw their income sources lost or disrupted. Unlike in previous typhoons, the devastation included air and sea ports in the hardest-hit regions, as well as entire city infrastructures, necessitating emergency airlift to bring in critical supplies.

Effectiveness: The response was timely and met the critical objectives of providing food, water and shelter and preventing significant post-event mortality and morbidity. No major incidence of waterborne disease or malnutrition occurred, as typical in the aftermath of natural disasters (and seen in prior Philippines typhoons), and outbreaks of vaccine-preventable diseases such as measles were not severe. The work of the logistics and emergency telecommunications clusters greatly facilitated the overall response, and the greater use of cash assistance was valued by participants and popular among most aid recipients.

Efficiency, coordination and connectedness: After an initial (arguably unavoidable) period of confusion, coordination was established quickly and in good cooperation with the government. Standby agreements in place between donors and implementers proved very helpful. Thanks to government preparedness and leadership within the cluster system, coordination worked well. However, evaluations concluded that the surge of new international personnel had an overbearing effect on government and local aid actors in some instances.

Coherence/principles: The transition to recovery created challenges, and humanitarian actors felt that cluster leadership was missing for coordinating strategies for the transition to long-term objectives (or handover to development actors). Longer-term housing remains a critical issue. As in Haiti, underfunding of the shelter sector, intractable land use issues, and lack of a locus of responsibility in the international aid system for medium- and long-term shelter needs resulted in a great many people stuck in temporary shelter, with limited prospects for solutions at scale. This is broader than a humanitarian problem, but it has the potential to lead to renewed humanitarian crisis, as people with inadequate shelter remain vulnerable to disease and other hazards. ●



CENTRAL AFRICAN REPUBLIC

Overview of performance

Coverage/sufficiency: From March through October 2013, humanitarian organisations scaled down activities in the country despite a dramatic increase in needs. The humanitarian actors had followed the under-prioritisation of CAR by development actors, including donor governments. While the L3 declaration prompted increased funding (the 2014 SRP was eventually funded at 71%), donors' pledges did not translate to timely funding. The L3 resulted in many new organisations establishing operations, eventually including increased deployment to areas outside Bangui, but it remained extremely difficult to recruit qualified staff, both national and international, particularly French speakers.

Relevance/appropriateness: Needs assessments were largely one-off, qualitative exercises, making national prioritisation difficult, and the needs of IDPs in urban areas were not assessed at all. Leadership on IDPs generally was lacking, with joint strategies and approaches not well articulated. Some approaches, such as decreasing assistance to IDP sites as an incentive to return home, indicated a lack of understanding of the IDPs' assessment of the conflict and their needs. This and other examples indicated a lack of effective two-way communication with affected populations, although efforts to improve in this area were also noted.

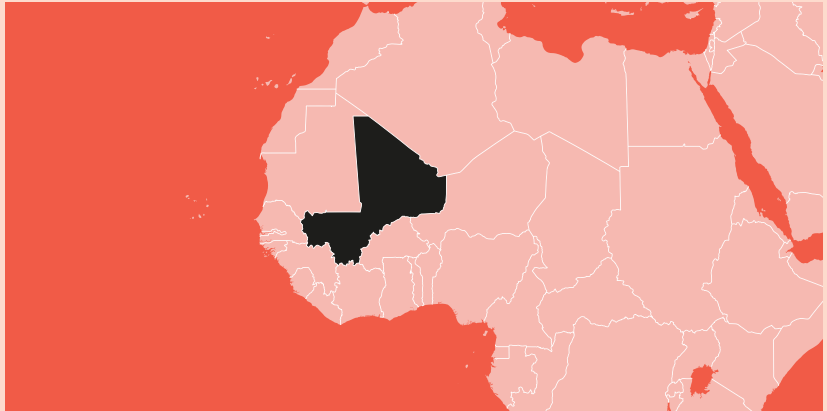
Effectiveness: The L3 helped to turn around a situation of 'unacceptable performance', in the words of MSF (Liu, 2013), whose advocacy played a role in kick-starting the humanitarian system, and it helped make up for what had been a lack of international media and government attention. This resulted in an initially top-heavy response, however, with too much time and staff devoted to

One of the poorest countries in the world, CAR has suffered from persistent under-development and conflict. In December 2012, the *Séléka*, a loose alliance of Muslim fighters, began a military campaign that succeeded in ousting the president. Self-defence groups called *anti-Balaka* were formed, and although the *Séléka* was formally dissolved in September 2013, both groups subjected populations to extensive attacks and abuses. An estimated 900,000 Central Africans were displaced by the fighting in December 2013, and a large portion of Muslims (about 15% of the pre-crisis population) fled the country. A UN stabilisation mission followed a French military intervention and an African-led international support mission. CAR was declared an L3 emergency in December 2013. Humanitarian assistance flows subsequently increased sharply, from \$96 million in 2012 to \$504 million in 2014.

planning and coordination and not enough to operations. Response triggered by the L3 was also slow; while agencies' internal funding and some individual donor mechanisms helped offset this somewhat, CHF and CERF funds were slow to arrive to implementing organisations. Little emphasis was given to preparedness and contingency planning in 2014, despite calls for an increased focus on this.

Efficiency, coordination and connectedness: Qualified and capable HCs and cluster/coordination staff were rapidly deployed after the L3 declaration. The MIRA and a myriad of related assessments and plans were completed ably and rapidly, but agencies struggled to remain informed in the highly fluid context. The humanitarian country team and various coordination structures, while improved, were seen as under-functioning compared to other crises. The rapid response mechanism played a valuable role, helping correct some of the built-in barriers to a fast and flexible response. Overall, the crisis underscored the difficulties humanitarian actors have in defining their role in this type of fragile, highly under-developed country where development donors have receded, including in supporting the basic services of a collapsed state.

Coherence/principles: The protection cluster was seen as functioning relatively well in a context where protection was a key issue, and some positive collaboration with the UN stabilisation mission was noted in this area. Humanitarian agencies' capacity to negotiate with actors relevant for access remained under-developed, even as security conditions were deteriorating. ●



MALI

Overview of performance

Coverage/sufficiency: While aid actors perceived the funding levels in 2012–2013 as largely sufficient, they noted gaps in protection, education and WASH. Humanitarian access and coverage were limited due to insecurity in the north of the country, despite attempts to enhance access through support of local NGOs.

Relevance/appropriateness: The response lacked a comprehensive, cross-sector picture of humanitarian needs and priorities. While there was a sizeable response to internal displacement in 2013, many IDPs were hidden from official view, living with urban host families, which made it simultaneously more difficult to address their needs and easier to overlook them. Leadership on IDPs and on protection issues was also unclear and generally weak. In addition, many aid actors reported that the dominance of in-kind food aid was not optimal, particularly given the lack of a clear strategy linked to the reduction of vulnerability.

Effectiveness: Agencies and donors previously working in Mali with a development or resilience focus were able to switch gears, bring in new personnel and mechanisms and launch a humanitarian response, but some agencies scaled up more slowly than their internal capacity suggests would be possible. Despite their presence in the region, most humanitarian actors (except ICRC) did not anticipate or plan for the crisis, although contingency planning and preparedness have been stepped up since the crisis.

Fighting by insurgent groups in the north of Mali beginning in January 2012 caused several hundred thousand people to flee, including local government officials. By April 2012, armed groups had taken over the three largest cities in northern Mali. The violence took many donors and aid actors by surprise; despite its endemic poverty, Mali had been considered an example of democratic and development success. In response to the crisis, humanitarian assistance flows to Mali increased greatly, from \$28 million in 2011 to \$375 million in 2014 (FTS 2015). In July 2013, the UN Multidimensional Integrated Stabilization Mission in Mali deployed in July 2013, and new presidential elections were held, but much of the country remains contested and highly insecure.

Efficiency, coordination and connectedness: Aid actors widely viewed the humanitarian coordination functions, including clusters and the humanitarian country team, as appropriate and functional. The government disapproved of the humanitarian modalities, however, and wished to exercise greater control over these aid flows. The SRP for the Sahel region was viewed as a step forward because of its regional approach and longer time frame, but was not viewed as resulting in increased coordination and connectedness, largely because the results indicators are very broad and activities lack prioritisation. Humanitarian actors pointed to the lack of a vision for humanitarians' role in resilience-building, the nature of resilience-building in general, and ways to address chronic, structural needs, in particular those with a conflict dimension.

Coherence/principles: Aid actors demonstrated knowledge of and intention to adhere to the humanitarian principle of independence and neutrality, in particular vis-à-vis the UN Integrated Stabilization Mission and other foreign forces, and a code of conduct on specific practices and international support helped actors to realize the importance of humanitarian principles and modalities in general. However, the roles of the Resident Coordinator/ Humanitarian Coordinator and OCHA within the integrated mission have at times been seen as detracting from a strong strategic focus on humanitarian needs. ●



SYRIA

Overview of performance

Coverage/sufficiency: With \$5.5 billion raised through the Syria SRP over three years, the crisis has brought in a historic volume of financial contributions. Additional contributions come through untracked channels, including from the Middle East and Syrian diaspora organisations. However, with humanitarian access severely constrained, funding has not translated into physical and material coverage of needs, particularly in some of the worst-affected areas inside Syria. As acknowledged in the most recent SRP, ‘recognising that all needs cannot be covered, critical humanitarian gaps remain both in terms of geographical coverage and the scale of activities.’

Relevance/appropriateness: Getting solid information on the aid picture for the whole of Syria has been extremely difficult, and as a result the humanitarian community is unable to determine if the aid getting through is the most relevant and appropriate to people’s needs. Until 2014 there was no information on needs for Syria as a whole. Although a consolidated assessment was finally accomplished in the Humanitarian Needs Overview produced at the end of 2014, it remains limited due to the small number of primary information sources available. The consensus among humanitarians, however, is that the biggest gaps are in protection, health and shelter, recognising the limited extent to which humanitarian actors can influence protection in the absence of a political solution.

Since late 2011, the conflict in Syria has resulted in a quarter of a million deaths, over 7 million people displaced, and more than 12 million people in need of humanitarian aid. The extraordinarily difficult operating environment involves an obstructive government (itself a violator of international humanitarian law) as one of the conflict parties, a fractured opposition that includes actors with no compunction against targeting aid workers for violence, as well as a divided aid community. Active combat and high levels of insecurity, alongside the constraints imposed by the government, have severely limited access for humanitarian actors. UN agencies and a few NGOs have provided aid from Damascus, mainly through the Syrian Arab Red Crescent, while other NGOs and diaspora groups deliver cross-border aid from the neighbouring countries of Iraq, Jordan, Lebanon and Turkey.

Effectiveness: As a measure of timely relief delivered on a prioritised basis to those most in need, it would be impossible to call the Syria response a success. Less than half of the estimated 12.2 million people in need have been reached by humanitarian assistance. The insurgent-held and heavily contested districts in the north, as well as besieged areas, have the highest numbers of people in need, and many people have been relying on cross-border aid operations that were secretive until the UN Security Council endorsed them in 2014. Only a small proportion of the aid, whether from Damascus or cross-border, can be monitored, making it extremely challenging to determine whether it has reached the target population or met its objectives.

Efficiency, coordination and connectedness: Coordination among and between the UN agencies and NGOs has been severely hindered. Organisations have been highly reluctant to share information, both for security reasons and in some cases for the reputational risk in not being able to state confidently where their aid was ending up. Tensions have also run high between the UN-led response coordinated from Damascus and the NGOs, working largely cross-border, preventing a unified humanitarian operational response to the crisis. Western humanitarians have also been criticised for missing opportunities to build more effective partnerships for delivery through local and diaspora Syrian actors.

Coherence/principles: Much of the aid delivered within Syria has been neither impartial nor independent, primarily due to restrictions imposed by the government and other armed actors, general insecurity, and the difficulties of operating at scale from cross-border locations. ●

WHAT NEXT?

Evidence from the SOHS 2015 shows that the solution is not only more money, but rather for the system to reinvent itself.

The study outlines six potential approaches to making things better:

1

Identify and fix humanitarian capacity gaps via mapping of collective capacities and resources.

2

Enable greater coverage in conflict environments by increasing support to actors with best and most rapid access.

3

Make humanitarian action more relevant and accountable to affected people by monitoring of humanitarian responses from their perspective.

4

Rationalise UN humanitarian capacity from the existing 10 or so separate agencies dealing with it to a more unified emergency system with unified lines of accountability.

5

Donors to make funding more predictable, appropriate and flexible (e.g. multi-year) to respond to chronic crises, which are on the rise.

6

Humanitarians should work more closely together with political and development actors to build resilience and local capacity. Reducing risk is not just a humanitarian challenge.

Related ALNAP publications

Global Forum Results and Analysis
paper

Global Forum briefing papers

Responding to changing needs?
Challenges and opportunities for
humanitarian action (Montreux XIII
meeting paper)

www.alnap.org
sohs.alnap.org



ALNAP
Overseas Development Institute

203 Blackfriars Road
London, SE1 8NJ