

BRIDGING THE EMERGENCY GAP

Reflections and a call for action after a two-year exploration of emergency response in acute conflicts

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About the Emergency Gap Project

This report is the final output of MSF's Emergency Gap analytical work —a collection of reflective pieces produced by the MSF Operational Centre Barcelona Athens (MSF OCBA). These publications have been a key element in the two-year Emergency Gap Project, a response to operational concerns over insufficient emergency response capacity across the traditional humanitarian system. The Project has aimed to analyse enablers and obstacles to the provision of effective assistance during the acute phase of conflicts. The analysis has been informed by MSF OCBA's operational experience and discussions with key external experts.

The Emergency Gap Project has also been motivated by a current shift in emphasis that could position emergency response as an exception, with the risks of lack of investment in the emergency response capacity that is so vital for the response to today's acute conflicts and the escalation of violence across the globe. For more information, go to: https://arhp.msf.es/categories/emergency-gap.

Disclaimer

Although this report —and the wider work within which it is framed— builds upon a commonly agreed problem statement, its opinions, conclusions and messages are those of the authors. While they are largely shared within MSF OCBA, these views should not be attributed to the wider MSF movement.

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Executive summary

The humanitarian sector, as a whole, is failing to mount timely and adequate responses in the acute phase of conflict-related emergencies.

The sector is increasingly professionalised and well-funded, and can detect more crises and reach more people in more places than ever before. However, more resources have not been matched by improved performance, according to findings from the Emergency Gap Project, a two-year examination of the challenges to effective emergency response in conflicts. Evidence from the Project¹ reinforces calls by Médecins Sans Frontières/Doctors without Borders (MSF) for renewed commitment to remain on the ground to address critical needs and deliver responses at scale —even in the most difficult environments— guided by the principles of humanity, neutrality, impartiality and independence.

Driven by evidence of persistent challenges to effective response in acute conflicts for all actors, including MSF, the Project has unpacked the factors that enable or disable the humanitarian sector's emergency response. Project consultations with senior actors across the humanitarian sector have revealed a general consensus that the humanitarian systems is struggling to deliver lifesaving assistance to those in need.

THE EMERGENCY GAP PROBLEM STATEMENT

The Emergency Gap Project has combined policy-driven analysis on the internal dynamics of the humanitarian sector when responding to acute conflict emergencies with lessons learnt from MSF's own work on the ground and reflections on some of the most prominent crises of recent years. The final report draws on the Project's thematic reports and case studies, and consultations with more than 150 senior-level representatives from 60 organisations across the humanitarian sector.

The Project has defined the emergency gap as the failure to ensure lifesaving services in the right places at the right time, particularly in the first year of an acute crisis. The gap is a shared concern across humanitarian organisations, a tangible humanitarian challenge and a key obstacle to the prevention of avoidable loss of life and suffering in conflicts worldwide.

Clearly, the emergency gap is not a single cause phenomenon. Powerful external factors beyond the control of the humanitarian community have simultaneously overloaded the humanitarian plate and created an environment unfavourable for humanitarian action. Externally, the politicisation, instrumentalisation and obstruction of humanitarian action remain key factors in the shrinking of humanitarian space. However, the dynamics of the emergency gap are also driven by internal factors that are well within the sector's control.

¹ Led by MSF's Operational Centre Barcelona Athens (MSF OCBA).

Internally, the sector is overly focused on the gulf between its ambitions and its available resources; the so-called 'funding gap' between the resources held by the humanitarian community and the cost of meeting people's identified needs. However, while the resources available are woefully inadequate, the funding gap is only one part of the system's shortcomings in emergency responses to acute conflicts. The current debate on improving humanitarian policies and financing overlooks the existing flaws in the conceptual drive of the sector; its structural set up; and the predominant mindset that shapes the sector's response.

THE CONCEPTUAL ELEMENT

Conceptually, the humanitarian imperative —the moral obligation to alleviate suffering— has been integrated into an ever-widening agenda spanning chronic poverty, climate vulnerability, political insecurity and counter-terrorism. As a result, there is growing pressure to align humanitarian action with developmental and political goals. At the same time, the sector's progressive inability to defend and operationalise its core humanitarian principles has contributed to the rise of new aid paradigms that openly delegitimise the value of principled humanitarian action.

The report reveals growing concerns that emergency response is undervalued by a dominant policy discourse that is increasingly focused on coherence and integration. This discourse has been backed by greater political commitment since the World Humanitarian Summit (WHS) in 2016 and the more expansive aid paradigm of the New Way of Working (NWOW), which aims for increased synergies across humanitarian, development and peacebuilding sectors to "end need". Post-WHS global humanitarian policies aspire to nothing less than a 'paradigm shift' that radically re-defines the essence of humanitarian action as an auxiliary to other goals, while failing to assess the real risks posed by closer alignment of humanitarian and political agendas to the ability of the sector to operate, particularly in conflict settings.

The Emergency Gap Project has confirmed that many humanitarian NGOs, donors and UN agencies share MSF's concern that the political and structural push for greater coherence of vision, goals and operational models will jeopardise the ability to deliver impartial assistance in conflict settings.

Current policy thinking is cemented into the notion of one problem (humanity and its suffering) and one solution (a shared set of goals and approaches to address that suffering). This ignores major differences in the types of crises and contexts in which humanitarians must operate, and the need to prioritise different types of action in acute crises and in situations that are more stable. In reality, the wide variety of needs requires quite different approaches, based on a diversity of actors and their niche competencies.

THE STRUCTURAL ELEMENT

Structurally, the traditional humanitarian sector is failing to capitalise upon the diversity of its actors, approaches and operational models. Instead, coordination, planning and funding streams are articulated around UN-led architecture and processes, which often favour coherence of action over flexibility and timeliness. There is also a mismatch between the core recipients of funding —UN agencies— and the frontline deliverers of aid. This is not only a major technical challenge for the rapid and cost-efficient transfer of money, but also a fundamental design flaw that hampers support for the necessary structural and operational investments required for the ability to stay and deliver in acute crises.

Growing centralisation has led to policy thinking that sees the humanitarian community more as a system of tightly fitting elements that all contribute to one purpose, rather than an ecosystem where independent and often diverging missions, goals, ambitions, and operational and organisational models can interact with and complement each other through their added values and strengths.

The experience of frontline responders such as MSF and the International Committee of the Red Cross (ICRC) shows that effective emergency response in conflict relies on the ability to react in a timely and meaningful way. This depends on heavy structural investments in security management, robust logistics and specialised stand-by technical expertise. In practice, operational independence —the ability to make and execute decisions— is greatly facilitated by unearmarked or softly earmarked funding that gives agencies vital flexibility in programming choices and risk management.

THE MINDSET ELEMENT

The ultimate ethical dilemma facing any humanitarian organisation is to decide how far to go, and at what point the risks become so great that it may be necessary to limit or withhold lifesaving assistance.

Today's humanitarian mindset has become conservative, risk-averse and costobsessed. This is linked to the current structural set-up of the humanitarian system and an aversion not only to security risks, but also financial risks and the risks to an organisation's reputation. It is often driven by donors' stringent monitoring and reporting policies and by their unwillingness to accept uncertainty or deviation of assets, or to fund potential failure, as well as by NGOs struggling to strike a balance between operational demands and institutional constraints. All stakeholders interviewed as part of the Emergency Gap Project spoke of unrealistic accountability and compliance norms that restrict their ability to accept risk. As a result, organisations go for the 'low-hanging fruit' by responding where needs are evident and access straightforward, rather than moving beyond their areas of regular operations. Instead of risk management, the sector is increasingly intent on risk *devolution* where each actor pushes risk as far away from itself as it can. In essence, the physical, organisational and financial risks that are inherent in highly insecure environments become an unsurmountable obstacle, rather than an operational challenge that must be overcome.

NEXT STEPS

MSF is not alone in its concerns about the inadequate levels of response in the early stages of crises, or in its attempts to critically analyse the reasons for the sector's poor performance. Emergency Gap Project consultations revealed that more actors than expected are willing to step up and enhance emergency response capacity to bridge the emergency gap. However, some operational organisations have the might but not yet the mindset, and those that have the mindset do not always have the necessary resources.

This report concludes that emergency response must be reinstated as a critical area of intervention. This means cultivating the humanitarian mindset of emergency-focused organisations that can operate in conflict settings, and backing their operations with the resources that are needed.

It calls for a greater recognition that acute needs will continue as new crises erupt or as more protracted crises slip back into the acute phase. Humanitarian policy must, therefore, ensure that efforts to make the transition from humanitarian to development approaches do not come at the expense of emergency responsiveness. It is important to retain the specificity of principled humanitarian action. This cannot be achieved by tweaking the existing system, given its current parameters for reform. Asking the 'traditional machine' to become more agile and independent of the wider political, economic, security and strategic goals is unrealistic, and will not result in better outcomes for emergency response.

The system can, however, allow more space for emergency-minded

organisations to operate. While an improved emergency response may not be the main priority of the whole sector, the UN and donors can proactively create a space where organisations that are willing to take a more active role in the early phases of crises can find pragmatic ways to do so and deliver results.

The right targets must be set for the response to the many different types and stages of crises, with a strong humanitarian focus on acute needs. It is critical to ensure humanitarian financing and action in conflict, where the blurring of the lines between addressing needs and the underlying causes of human suffering is undermining the humanitarian imperative.

An effective surge capacity is essential. Despite major access restrictions faced by humanitarian actors, one 'quick fix' for emergency response capacity would be to ensure a minimum number of capable organisations with the capacity, knowledge, readiness and deployability to provide coverage across all lifesaving sectors and deliver reliably in acute crises.

Because we rarely see the humanitarian sector as an ecosystem, there is a tendency to pursue one-size-fits-all solutions and global policies. Within this ecosystem, however, humanitarian action does not mean the same thing to everyone. Our expectations of each other should be informed by an understanding of our varied conceptual filters, whether based on humanitarian principles or in transformational agendas to build a better, more peaceful and empowered world.

The Emergency Gap Project does not attempt to define an emergency response rooted in principles as the only valid form of humanitarian action today. Instead, this report provides compelling arguments for retaining principled action as an indispensable form of response to human suffering that complements, but is not subsumed by, other transformational agendas. And its practical proposals invite dialogue on how to build a humanitarian sector that is better able and equipped to remain on the ground and deliver a meaningful emergency response in conflict.



Introduction

The first few months of crises are often marked by a failure to provide lifesaving assistance and protection to those enduring the violence

MSF also struggles to deliver its assistance in a timely and adequate manner, and acknowledges underperformance in some recent contexts

BACKGROUND

A look back at the largest conflict-related emergencies of the past five years reveals not one single example of a collective response that was both timely and to scale. While responders always step up —eventually— the first few months of crises are often marked by a failure to provide lifesaving assistance and protection to those enduring the violence. The lack of such a response has been notable, for example, during recurrent peaks of violence in Central African Republic and South Sudan, the collapse of Yemen following the start of the aerial campaign of the Saudi-led coalition, the Borno State crisis in northeast Nigeria, and the continuing battles for control of major cities in Syria and Iraq.

As a humanitarian medical organisation dedicated to providing critical lifesaving assistance to people in distress, to victims of natural or manmade disasters and to victims of armed conflict, Médecins Sans Frontières/ Doctors without Borders (MSF) has built its operational 'muscle' on its solid emergency response capacity and its strong sense of the critical importance of humanitarian principles,² and its 'backbone' for action on upholding medical ethics. Yet, like other humanitarian organisations, MSF struggles to deliver its assistance in a timely and adequate manner where it is most needed, and acknowledges underperformance in some recent contexts.³ While there is no consensus on the reading of the organisation's performance, there are internal debates on whether MSF has done its best, whether it could go further, and what it would take to do so.

The humanitarian sector has become increasingly professionalised, well-resourced, organised, populated and diverse. As a result, it can now detect more crises, target more people, alleviate more suffering and save more lives in more places than could have been conceived a generation ago —at least in theory. In reality, however, the sector is struggling to keep pace with the growing demands of more recurrent and more protracted humanitarian crises.⁴

² The value of some of these principles, and the hierarchy between them, has been the subject of debate within MSF.

³ Examples include the withdrawal from Somalia, the limited intervention in Syria, the late reaction to the Borno and Diffa crises and the difficulties in Mosul.

⁴ Humanitarian Policy Group, *Time to let go: A three-point proposal to change the humanitarian system*, Overseas Development Institute, April 2016.

The sector as a whole is struggling to keep pace with the growing demands of more recurrent and more protracted humanitarian crises

MSF has examined the avoidable suffering and loss of life in conflicts around the world and has repeatedly drawn attention to insufficient emergency response capacity in difficult environments In recent years MSF has examined what it perceives as avoidable suffering and loss of life in conflicts around the world and has repeatedly drawn the attention of the humanitarian sector to insufficient emergency response capacity in difficult environments. These concerns —which are shared by humanitarians from all types of organisations and technical sectors— have triggered, and will continue to trigger, internal processes and discussions within MSF on how best to step up to the challenge.

In 2014, in its *Where is everyone*? report, MSF concluded that while the humanitarian system was larger and more professionalised, this had not led to "a proportionate improvement in performance during emergencies. Rather, while it is core business for the humanitarian system, emergency response capacity has been undervalued and under-prioritised."⁵

The report and its accompanying case studies argued that humanitarian organisations are increasingly absent from the most difficult field locations; that emergency agencies often evacuate precisely when their assistance is needed most urgently; that technical capacity appears to be declining in the sector; and that some organisations choose to wait until the emergency passes to continue their regular work.

The United Nations (UN) system was deemed to be at the heart of the dysfunctions. However, risk aversion was also seen as pervasive within non-governmental organisations (NGOs) that were not investing enough in technical capacities and were slow to reorient longer-term humanitarian programming to effective emergency response.

In 2016, the first ever World Humanitarian Summit (WHS) took place. This was a major opportunity to address some of the system's dysfunctions at a time of particularly intense frustration with the performance of the humanitarian system at large. MSF decided not to take part in the WHS because of concerns about the lack of attention on —or intent to address the weaknesses in humanitarian action and emergency response, particularly in conflict areas or epidemic situations. MSF rejected the focus of the WHS, which it read as the incorporation of humanitarian assistance into a broader development agenda, and criticised the Summit for not seeking to hold states to their legal obligations on humanitarian and refugee laws.⁶

Previous MSF positions, however, stopped short of examining the underlying drivers for the sector's loss of presence in difficult contexts. Nor did MSF offer concrete recommendations to overcome the problems. This was the result, in part, of MSF's traditional discomfort with engagement in sector-wide reforms and processes —engagement that is seen in some quarters as

⁵ Healy, S. and Tiller, S., Where Is Everyone? Responding to Emergencies in the Most Difficult Places, Médecins Sans Frontières, July 2014: http://www.msf.org/en/article/msf-report-where-everyone

⁶ See "Emergency Now: A call for Action Beyond Summits. MSF's reflections on the World Humanitarian Summit", May 2016, in http://www.msf.org/en/article/emergency-now-call-actionbeyond-summits

MSF's history has been marked by rather conflicted relationships with other aid actors and a strong desire to be seen as somehow 'separate'

The question is how MSF can engage with policy developments and inject the reality of its own field operations without being absorbed by a time-consuming cycle of policy debates a futile attempt to influence entrenched dynamics and thinking that would, inevitably, distract from MSF's operational focus and internal analysis of its own challenges.

It has been noted that MSF's history has been marked, from its earliest days, by rather conflicted relationships with other aid actors and a strong desire to be seen as somehow 'separate'.⁷ Yet for many within MSF, voicing concerns about the dominant narrative of humanitarian policy remains a crucial part of its role, given that mainstream policy decisions have a progressive and negative impact on the space in which humanitarian agencies operate. The question is how MSF can engage with policy developments and inject the reality of its own field operations —particularly in the conflict settings that are so under-represented in the sector's thinking— without being absorbed by a time-consuming cycle of policy debates and reforms.

The concerns expressed in the *Where is Everyone*? report had already shaped strategic choices made by some of MSF's operational centres. The introduction of the four-year Strategic Plan of the MSF Operational Centre Barcelona–Athens (MSF OCBA) (2014–2017), for example, speaks of the "widening gap in response to complex emergencies both in terms of responsiveness and relevance. Actors that had traditionally been present at the initial phases of humanitarian crises are progressively disengaging and recent evaluations of MSF's response (all operational centres) in big crises reveal recurrent internal weaknesses."⁸

Driven by the firm conviction that this gap had to be addressed, MSF OCBA made a hard but necessary choice: it would, for the next four years, put all of its operational focus on consolidating assistance to victims of conflict and expanding its emergency response. As in any other organisation, such choices come with a cost, including very difficult decisions to limit operations in other types of crises. It is important to note, however, that MSF's commitment to work only in the forefront of emergency response in conflict has not always been consistent and has fluctuated throughout the organisation's history and across its operational centres.

⁷ Brauman, R. and Neuman, M., "MSF and the aid system: Choosing not to choose", CRASH

Foundation, Médecins Sans Frontières, July 2014.

⁸ MSF OCBA Strategic Plan 2014-2017.

THE EMERGENCY GAP PROJECT

The Emergency Gap Project aimed to highlight the need for a renewed commitment to remain on the ground and deliver meaningful emergency response in hard-to-reach places whenever a major conflict erupts or when violence escalates in a protracted crisis MSF's greater operational commitment to emergency response and acute conflicts required a better understanding of the operational and policy challenges that such contexts present for humanitarians. In 2016, MSF OCBA launched the two-year Emergency Gap Project to highlight the need for a renewed commitment to remain on the ground and deliver meaningful emergency response in hard-to-reach places whenever a major conflict erupts or when violence escalates in a protracted crisis.⁹ The Project aimed to inform current policy trends and progressive changes in the "traditional system" that can be perceived as actively discouraging humanitarian actors from meaningful and effective engagement in emergency response in conflict settings.

Rather than being purely a research project, the Emergency Gap Project is a policy-driven analysis of the current state of the humanitarian enterprise, informed and guided by the conceptual fundamentals and operational vision of MSF OCBA.¹⁰

The scope of the work covered the so-called "traditional humanitarian sector", i.e. humanitarian donors and organisations —whether NGOs, multilateral organisations or the Red Cross and Red Crescent Movement—that have shaped today's humanitarian frameworks, structures, and operational and funding models. As such, they have responsibilities and accountabilities related to agreed humanitarian principles and good practices.

This is not to say that so-called "new actors" are not an important part of today's modern humanitarian enterprise, but rather that they make their own choices on the standards and principles that guide their efforts.¹¹ The Emergency Gap Project, therefore, focused its efforts on influencing organisations that have promoted and embraced traditional humanitarian principles and that have committed, unequivocally, to support critical lifesaving assistance through effective emergency response in line with those principles.

⁹ See de Castellarnau, M., and Stoianova, V., *Emergency Gap: Humanitarian action critically wounded*, Emergency Gap Series, Médecins Sans Frontières OCBA, April 2016.

¹⁰ As well as building upon internal reflection and operational information, the methodology was reinforced with qualitative information from literature reviews and key-stakeholder interviews, supplemented where appropriate with quantitative data on humanitarian presence, financing and response times from secondary sources.

¹¹ Some of the so-called non-traditional donors such as Brazil, Mexico and the Organisation of Islamic Cooperation have joined existing initiatives and good practices; and some NGOs and civil society organisations (CSOs) from the global south have signed up to the Code of Conduct for the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief. For more information see https://www.ghdinitiative.org/ghd/gns/about-us/our-members.html and http://www.ifrc.org/Global/Publications/disasters/code-of-conduct/codeconduct_signatories.pdf

The Project has three main goals.

- To analyse the internal dynamics of the system in relation to the unacceptable lack of coverage and emergency responsiveness of the humanitarian sector at large.
- To undertake candid engagement with the sector to discuss and contrast this analysis, and to map the likely future investments in emergency response capacity across the sector.
- To retro-feed the findings of the analysis and the external engagement into MSF, prompting an internal discussion on the steps to be taken by the organisation to bridge the gap and to re-examine its own operational priorities and investments.

METHODOLOGY

The initial diagnosis drew on ongoing policy and operational reflections, combined with strong external expertise on humanitarian architecture, policy and financing The initial Emergency Gap diagnosis and analysis drew on ongoing policy and operational reflections within MSF OCBA, combined with strong external expertise on humanitarian architecture, policy and financing. The first step was a re-examination and consolidation of existing knowledge and analysis on the present status of emergency response in acute conflicts, together with a critical review of current global policy developments and their potential to support and promote stronger emergency response in the years to come. The resulting outputs include the six-part Emergency Gap thematic series, and five case studies that illustrate the way in which this emergency gap is unfolding in some of today's humanitarian crises.¹²

The initial conceptual phase was followed by an engagement round of bilateral meetings with more than 150 senior-level representatives from over 60 organisations involved in humanitarian assistance: 9 international organisations; 13 government donors; 30 international non-governmental organisations (INGOs); and 10 umbrella organisations, platforms, networks, think tanks and research institutions (see the full list in Annex 2). In addition, the work was presented at nine workshops and events in four continents. The engagement round was an opportunity to present and discuss the diagnosis and key messages, identify blind spots and examine points of disagreement, as well as to conduct a prospective analysis of the sector's plans for emergency response in the immediate future.

In parallel to these external discussions, a critical review of MSF OCBA's emergency response capacity over the past years was also conducted, looking at the reactiveness and scale of intervention in key crises, as well as organisational dimensions of support and delivery. This operational angle is a key element of the Project, not only because the analysis itself is informed by evidence and lessons learnt from emergency operations, but also because it aims to spark internal discussions to create a vision for stronger and more effective emergency response capacity across MSF.

¹² A full list of the Emergency Gap publications can be found in the bibliography and on the website of MSF OCBA's Centre for Applied Reflexion on Humanitarian Practice (ARHP): https://arhp.msf.es/categories/emergency-gap

ABOUT THIS REPORT

The report does not provide comprehensive coverage of every topic and country context examined in previous publications, but rather presents arguments for greater investment in improving the emergency response of the humanitarian sector This final report of the Emergency Gap Project consolidates the analysis from the earlier thematic papers and case studies, and draws on the information and discussions stemming from the engagement round. It has four goals.

- To present a more comprehensive picture of the problem and its drivers.
- To suggest a series of steps forward.
- To pave the way for internal reflection.
- To invite external dialogue with like-minded stakeholders who wish to see the humanitarian sector perform better in difficult operational environments and respond more effectively to human suffering.

The report does not attempt to provide comprehensive coverage of every topic and country context examined in previous Emergency Gap publications, but rather to present core arguments for greater investment in improving the emergency response of the humanitarian sector. With its focus squarely on retaining principled action as a critical form of response to human suffering in acute crisis, this report aims to respond to MSF's *Dunantist* tradition¹³ of humanity, neutrality, impartiality and independence, and stems from a desire to balance the current discourse in aid circles.

The inclusion of concrete recommendations may be surprising, given scepticism about the feasibility or likelihood of any dramatic shift in the current political and policy drivers of humanitarian affairs, or the ability of one organisation to wield sufficient influence to generate change. However, during the engagement rounds with humanitarian actors it became clear that there were practical opportunities to improve emergency response in conflicts by taking some simple and pragmatic operational steps. Many voices during these conversations also urged MSF to take its place at the table for such conversations and contribute its perspectives and proposals.

¹³ The term 'Dunantist' (named after Henry Dunant, who inspired the creation of the International Committee of the Red Cross). It refers to humanitarian practitioners who follow the traditional approach to humanitarianism, which comprises four fundamental principles: Humanity —alleviate human suffering wherever it may be found; Neutrality—do not take sides in a conflict; Impartiality —aid should be based on needs alone, regardless of race, class, gender and sex; Independence from benefactors and institutional donors.



Analysing the emergency gap

The emergency gap is the failure to ensure lifesaving services in the right places at the right time

EMERGENCY GAP PROBLEM STATEMENT

The humanitarian sector faces increasing challenges to its ability to reach and assist the victims of acute conflict. This conviction has been the driving force behind MSF's Emergency Gap Project, coupled with the belief that the sector's current inability to ensure sufficient presence and to provide timely and adequate assistance must be addressed.

The emergency gap is the absence of adequate humanitarian coverage and delivery of critical lifesaving assistance in the acute phases of a conflict. In other words, it is the failure to ensure lifesaving services in the right places at the right time (Figure 1). It is a tangible humanitarian challenge and a key obstacle to the prevention of avoidable loss of life and suffering in conflicts around the world, and is a concern that is shared by MSF and many other humanitarian actors.

At the start of the Project, the acute phase was defined as covering the first six months of a crisis. However, based on the findings from the Emergency Gap case studies and discussions with other key humanitarian actors, the definition was extended to the first 12 months of a humanitarian emergency, whether arising from a new conflict or a peak in violence in a conflict that already exists.



FIGURE 1. What is the emergency gap?

According to the SAVE research, organisations respond in smaller numbers to insecure contexts than to more stable contexts, regardless of the level of needs

The overstating of presence and coverage was also identified as a common practice While there is a lack of historic quantitative data on the size of the emergency gap at the global level, the humanitarian community (including and beyond MSF) has long been aware of a shortfall. The 2015 *State of the Humanitarian System* report showed that the perception of sufficiency of response (i.e. the adequate coverage of needs) among humanitarian practitioners had dropped to a new low of 24 percent (from 36 percent in the 2010 study and 34 percent in 2012).¹⁴ The report suggested that agencies had been less than frank about serious operational capacity gaps, independent of funding, that they face in conflict-affected and logistically challenging settings. It also captured a perceived decline in technical capacity in key lifesaving sectors, such as health, nutrition and water, sanitation and hygiene.

When the results of the three-year-long research programme on Secure Access in Volatile Environments (SAVE) were released in November 2016,¹⁵ the main findings around presence and coverage, as well as access and quality, resonated strongly with the Emergency Gap diagnosis and messages. In terms of coverage, the SAVE research¹⁶ found that humanitarian organisations respond in smaller numbers to insecure contexts than to more stable contexts. It also found that, regardless of the levels of funding available or the needs of the population, far fewer humanitarian organisations —largely the same group of INGOs— tend to be among the main operators across all high-insecurity settings and are the only actors to respond consistently to highly violent conflicts.

The overstating of presence and coverage was also identified as a common practice: a problem also observed in some of the Emergency Gap case studies, which found this to be a particular trend among multi-mandate organisations that feel the pressure to justify and secure year-on-year donor investments by claiming to reach to as many areas as possible. SAVE found that organisational capacity and insecurity dictated where aid agencies operate within high-risk countries, resulting in unequal coverage of needs. Operations are clustered in more secure and easily accessible areas within these countries, rather than reflecting the relative needs of local people. This under-coverage was confirmed by people directly affected, who reported a declining aid presence in their immediate areas.

This emergency gap diagnosis was also largely validated during the Emergency Gap engagement rounds. Donor governments, implementing agencies and international organisations all agreed that few humanitarian organisations can work effectively in active war zones and reach those most in need or in the conflict areas that are hardest to access (whether such access is impeded by security risks or logistics and operational constraints), and that coverage of humanitarian needs is unacceptably limited.

¹⁴ ALNAP, State of the Humanitarian System Report 2015.

¹⁵ SAVE: www.saveresearch.net/. SAVE conducted research in four countries that account for highest number of attacks on humanitarians: Afghanistan, South Central Somalia, South Sudan and Syria.

¹⁶ Stoddard, A., and Jillani, S. with Caccavale, J., Cooke, P., Guillemois, D., and Klimentov, V., *The Effects of Insecurity on Humanitarian Coverage*, Secure Access in Volatile Environments (SAVE) research programme, Humanitarian Outcomes, November 2016.

There is a widespread feeling that the aid sector is now set on a course that is impossible to reverse While there was consensus on the nature of the problem, there was also a high degree of defeatism and a widespread feeling —shared to some extent within the MSF movement— that the aid sector is now firmly set on a course that is impossible to reverse. Within this context, it is tempting for operational organisations that depend on institutional funding to simply try to navigate the turbulent waters of the new humanitarian landscape, rather than waste time and energy in fighting a losing battle.

Clearly, the emergency gap is not a single-cause phenomenon. The limited humanitarian presence in acute emergencies is also the result of persistent violence and increasing operational complexity; little or no humanitarian access and limited resources —including funding and technical support, such as security management and logistics. The dynamics of the emergency gap are being driven by a combination of external political, strategic and economic drivers, and a series of internal aid sector factors (Figure 2).

FIGURE 2. What drives the emergency gap?



We can see two strong impulses in relation to humanitarian action: to use it for a different objective (often political or military) or to obstruct and deny it

Humanitarian assistance also ends up being used to replace political action or to mask political inaction It is undeniable that powerful external factors beyond the control of the humanitarian community have conspired to simultaneously overload the humanitarian plate and to create an environment that is unfavourable for the humanitarian enterprise.

For one, humanitarian space is increasingly compromised by the fundamental geopolitical shift from a western dominated world to one that is seeing a re-assertion of the sovereignty of the global south and its wish to control international activity within its borders, as well as a sharp increase of populism and protectionism in the global north. As nation states navigate this change, we can see two strong impulses in relation to humanitarian action: to use it for a different objective (often political or military) or to obstruct and deny it.

The first impulse can be seen in Afghanistan, Iraq and Mali, while the second has prevented humanitarian aid from reaching those in need in Syria and has placed severe limits on the response to crises in Ethiopia and Sudan. Given that most conflicts are within countries, states that are parties to the conflicts that drive humanitarian needs have little interest in allowing independent, neutral and impartial responses on their territory.

Whether the humanitarian response is used to pursue political interests or denied to protect political interests, the net result is a severely curtailed space for independent humanitarian action. The political disregard for the role of independent humanitarian action has been matched by a progressive disregard for the legal frameworks and obligations that underpin international humanitarian law (as shown by the wave of attacks on medical facilities in Syria and Yemen and on the MSF hospital in Kunduz, Afghanistan), and the loss of relevance of international bodies responsible for pursuing peace and ensuring a minimum of humanity in war and situations of forced displacement.

In conflicts with less strategic significance, such as those in Central African Republic, the Democratic Republic of Congo or South Sudan, the tendency is almost the opposite. More often than not, humanitarian assistance ends up being used to replace political action or to mask political inaction.

The lack of political muscle and will of the international institutions to act in the face of conflict, injustice and suffering has created a fertile environment for crises to intensify, for seemingly endless conflicts and for the accumulation of human suffering. Crises become more protracted in the absence of political solutions and a failure to tackle the root causes of such suffering. As new emergencies erupt, the humanitarian sector is increasingly overstretched as it tries to respond to an ever-growing workload of both new and increasingly protracted crises. As new emergencies erupt, the humanitarian sector is increasingly overstretched as it tries to respond to an ever-growing workload of both new and increasingly protracted crises

Today's counterterrorism dynamics affect conflict environments and political narratives worldwide At the same time, political and economic risks, social and climate vulnerability, and exposure to structural violence and insecurity are all driving the rise in humanitarian needs that humanitarians aim to address. The result is a buckling in the system. Yet crises are not solely humanitarian in nature and the solutions, therefore, cannot be solely humanitarian.

In 2016, there were around 66 million people who had been forcibly displaced from their homes, more than at any other time since 1990.¹⁷ Of these, nearly two-thirds were internally displaced, whose numbers had doubled in that same timeframe.¹⁸ The average length of displacement as a result of war and persecution stood at 17 years, and fewer refugees were returning home than at any point in the past three decades.¹⁹ The Global Humanitarian Appeal for 2018 reached its sixth consecutive record high in terms of annual funding sought, aiming to reach 105 million of the estimated 135.7 million people who need assistance.²⁰

Another external driver of the emergency gap is insecurity: an inherent and inevitable part of conflict. Not surprisingly, the safety of humanitarian workers has always conditioned the ability to deliver assistance. Total numbers of recorded attacks on humanitarians are clearly on the rise. There were 158 attacks against relief organisations in 2016 alone, with 101 aid workers killed, 98 wounded and 89 kidnapped, according to the *Aid Worker Security Report*.²¹

There is no consensus on whether increased casualties indicate a rising trend of targeted attacks on humanitarians, or whether it is also because there are more humanitarians out there, and more rigorous reporting of incidents. What is clear, however, is that there is growing concern for the safety of staff and that this has an influence on humanitarian practice.²²

The obstruction and politicisation of aid are responsible for far more than the erosion of principled humanitarian action.²³ Today's counter-terrorism dynamics affect conflict environments and political narratives worldwide. So-called 'liberation wars', like the one against Islamic State (IS) in Syria and Iraq, and peace-enforcement operations, as seen in Mali, are leading many

- http://interactive.unocha.org/publication/globalhumanitarianoverview
- ²¹ Humanitarian Outcomes, *Aid Worker Security Report 2017*: https://aidworkersecurity.org/sites/default/files/AWSR2017.pdf
- ²² This will be explored further under "Mindset".

¹⁷ Based on data from UNHCR (http://www.unhcr.org/figures-at-a-glance.html) and the Internal Displacement Monitoring Centre (http://www.internal-displacement.org/database/displacement-data).

 ¹⁸ Based on data from the Internal Displacement Monitoring Centre's Global Report 2017: http://www.internal-displacement.org/global-report

¹⁹ Ban, Ki-moon, One Humanity; Shared Responsibility, Report of the Secretary-General for the World Humanitarian Summit, United Nations, 2016.

²⁰ See Global Humanitarian Overview 2018, UN OCHA, December 2017:

²³ In this report, we use the terms "principled" or "principles-driven" to mean based on the core humanitarian principles of humanity, impartiality, neutrality and independence. This use is widely accepted in humanitarian literature and by the humanitarian sector. See, for example, the Inter-Agency Standing Committee (IASC) Reference Group on Principled Humanitarian Action, and the use of the term in reports and publications by the Norwegian Refugee Council and the International Committee of the Red Cross.

Within the humanitarian sector, we are witnessing its inability to counter these external dynamics by standing strong in the defence of principled action

Internally, the humanitarian community has a responsibility to ensure that its policies and structures support the performance of its mission. The bigger the external challenges faced by the sector, the greater the internal drive should be new non-state armed groups to distrust and reject humanitarian action that would, in the past, have been seen as beneficial, both in terms of relief and as testimony to the situation on the ground.

Anti-Western feelings are becoming increasingly well-harnessed and are often played out in violence, and while there has always been insecurity in conflict settings, this is a new threat for a traditional humanitarian sector perceived largely as a Western product. Negotiated access has become more complex as a result of the transnational nature of these armed groups, and their more or less explicit rejection of humanitarian action.

Within the humanitarian sector, we are witnessing its inability to counter these external dynamics by standing strong in the defence of principled action and by taking active steps to equip themselves for an adequate response in acute conflict. This has links to the new conceptual framework of the WHS, with its main focus on the increasingly protracted nature of human suffering and its 'ending needs' paradigm.

This conceptual framework is a challenge to, and dilutes the value and contribution of, principled humanitarian action in an increasingly complex and interconnected world.²⁴ While trends towards integrated approaches to ensure unified responses are nothing new, the current agenda represents a significant shift in commitment across the UN system (and beyond) to making the concept operational, with significantly more political momentum than in its other guises and with the backing of the World Bank.

The sector's dominant narrative is concerned with weak coordination between its many actors and with the so-called 'funding gap': that abyss between the resources in the hands of the humanitarian community and the cost of meeting the identified needs. While it is clear that the available resources are inadequate to meet the surging costs of addressing successive and deepening crises, the funding gap is outweighed by the sector's stark capacity gaps. Focusing exclusively on funding issues while failing to address structural challenges obscures the fundamental capacity problem.

Structural challenges also affect the prevailing mindset that shapes the sector's motivations to respond in emergencies and its relationship to physical, financial and fiduciary risk. Risk aversion is rampant among humanitarian actors,²⁵ and instead of risk *management* the sector is increasingly intent on risk *devolution* where each actor pushes risk as far away from itself as it can. This results in an operational and organisational culture that is unsupportive of effective emergency response in acute conflicts and other highly insecure contexts.

²⁴ According to Agenda for Humanity, Core Responsibility 4: Change people's lives —from delivering aid to ending need: "Success must now be measured by how people's vulnerability and risk are reduced, not by how needs are met year after year": http://sgreport.worldhumanitariansummit.org

²⁵ The Presence and Proximity: To Stay and Deliver Five Years On study found that the challenges noted in the 2011 To Stay and Deliver report (e.g., limited presence and proximity, risk aversion) ultimately remain intact.

EMERGENCY GAP INTERNAL DRIVERS

The fundamental challenge is to transcend the idea of 'one size fits all' and to build a humanitarian policy and practice framework that honours and supports both protracted and immediate needs The emergency gap is driven by powerful external and internal dynamics. Externally, the political and strategic shifts in the international system have had an undeniable impact on the humanitarian sector's mission, structure, culture and ability to operate, and have played a role in its internal transformative processes and policy shifts. Internally, however, the Emergency Gap Project argues that the humanitarian community has responsibilities that cannot be renounced, and a responsibility to ensure that its policies and structures support the performance of its mission. The bigger the external challenges faced by the sector, the greater the internal drive should be.

The Emergency Gap Project, therefore, chose to focus exclusively on the internal, sector-specific dynamics.

This work recognises that humanitarian action does not mean the same thing to everyone and that our expectations of each other should be informed by an understanding of our conceptual filters. These could be rooted in humanitarian principles and the vision of humanitarian response as an exceptional form of action in the face of overwhelming needs, or in transformational agendas, with their vision of building a better, more peaceful and empowered world. Policy focus in the sector appears to inevitably take an 'either/or' stance on the scope of humanitarian action, and tends to veer away from a purely emergency response towards approaches that are more holistic.

The Emergency Gap Project contends that the current aid paradigm is shifting too far towards addressing protracted needs and the quest for solutions to crises, but recognises that the fundamental challenge is to transcend the idea of 'one size fits all' and to build a humanitarian policy and practice framework that honours and supports both visions (Figure 3).





The following theoretical framework, which articulates and addresses the sector-specific drivers of the emergency gap, does not have one main element or 'original sin' from which the others unfold. It is, instead, a nonlinear progression, with three elements —the conceptual, the structural and the mindset— reinforcing each other and generating the momentum to move further away from principled emergency response in conflict settings.

1. CONCEPTUAL ELEMENTS

• Policy impacts on the space for humanitarian action

As humanitarian aid is challenged by external factors, its scope, architecture and priorities are also being reconfigured from the inside. As a result, two emerging issues are driving the emergency gap from a policy and conceptual perspective: the sector-wide push for coherence, aiming to align the humanitarian mission with broader political and strategic agendas; and the blurring of the lines between different kinds of humanitarian contexts and moments in the response. The consequences include the loss of the humanitarian mission's added value as a distinct way to address human suffering.

The aid community has a long history of trying to operationalise this idea of coherence of policies and integration of humanitarian action with broader strategic objectives, first through the humanitarian development nexus (HDN), and today through the more ambitious aid paradigm of the New Way of Working (NWOW) and related initiatives²⁶ emerging from the 2016 WHS. The integration and coherence debate in aid circles is, ironically, incoherent —the term refers to an assortment of policies and structural arrangements that are, in turn, interpreted differently by different aid actors.²⁷

In essence, the more pragmatic form of coherence aims for greater coordination and complementarity among the various humanitarian actors, and between the humanitarian sector as a whole with peacebuilding, military and political sectors. However, the WHS consolidated an ideological form of coherence that realigned the humanitarian goal towards 'ending need' and 'leaving no one behind', therefore redefining humanitarian action as an auxiliary to the holistic transformation of human society. This is a prescription for the impossible and distracts from the reality that the global context demands even greater independence if humanitarians are to navigate their way through powerful interests towards people in need.²⁸

Two conceptual issues are driving the gap: the sector-wide push for coherence, aiming to align the humanitarian mission with broader agendas; and the blurring of the lines between different kinds of humanitarian contexts and moments in the response

The WHS consolidated an ideological form of coherence, redefining humanitarian action as an auxiliary to the holistic transformation of human society

²⁶ Such as the Grand Bargain (GB) and the Comprehensive Refugee Response Framework (CRRF).

²⁷ For more on the Emergency Gap analysis on the topic of coherence see Dubois, M., *The Cost of Coherence*, Emergency Gap Series, Médecins Sans Frontières OCBA, December 2016.

https://arhp.msf.es/emergency-gap-papers-aid-environment/emergency-gap-cost-coherence ²⁸ lbid.

Humanitarian action —as an endeavour intended solely to support human beings— cannot be so easily aligned with policies that are designed to correct political, social and economic injustices

There is a perception that aid fails to address the root causes of crises and longer-term vulnerabilities. While this is true, it does not constitute a gap in the *humanitarian response*. The actual gap stems from the frequent absence of development and political action in difficult settings The NWOW presents a 'new paradigm' for increased synergy across the humanitarian, development and peacebuilding sectors to meet people's immediate needs, while reducing their risk and vulnerability in the longer term.²⁹ As a multi-stakeholder agenda, it requires the active engagement of national governments, local authorities, national and international civil society, bilateral and multilateral partners, humanitarian actors, development practitioners and peacebuilders in all humanitarian contexts.³⁰

By definition, the traditional idea of principled humanitarianism sits awkwardly alongside peacekeeping, counter-terrorism, social equality, economic development and climate change mitigation. And this is not because of 'humanitarian exceptionalism' but because humanitarian action —as an endeavour intended solely to support human beings— cannot be so easily aligned with policies that are designed to correct political, social and economic injustices.

While good humanitarian action will, ultimately, help to reduce vulnerabilities, principled action means that transformational agendas are not part of the humanitarian mission. However, despite the overstretching of the humanitarian mandate into areas beyond immediate and lifesaving responses, the sector (including single-mandate humanitarian organisations) has made progress in its understanding of —and commitment to— the full scope of human needs and aspirations that unfolds during crises.

This is important in contexts where national governments are unable to tackle chronic suffering, or unwilling to cater for the needs of every citizen; or where other, more relevant forms of action (such as development aid) are not being deployed and humanitarian assistance is the only reliable source of international aid. The challenge, however, lies not with the analysis of the problem, but with the solution, which has moved towards an integrative approach for a unified response, rather than the differentiated approaches that are needed to respond to such a wide variety of needs, drawing on many organisations and their different expertise. This is particularly true for two key variables: different points in time in relation to the start of the crisis, and different contexts or types of needs.

One driver of the UN's new paradigm is the perception that aid work in crisis settings fails to address the root causes of conflict, and the long-term needs and underlying vulnerabilities of people. This is true, but the error is in believing that this constitutes a gap in the *humanitarian response*.

²⁹ The "New Way of Working" (NWOW) was first conceptualised in the paper After the World Humanitarian Summit. Better Humanitarian-Development Cooperation for Sustainable Results on the Ground by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), the United Nations Development Programme (UNDP), the Office of the United Nations High Commissioner for Refugees (UNHCR), the United Nations Children's Fund (UNICEF), the World Food Programme (WFP), and the World Bank.

³⁰ High-Level Workshop on the New Way of Working – Advancing Implementation, Outcome Note, Copenhagen, 13–14 March 2017.

The actual gap stems from the frequent absence of development and political (and even peacebuilding and environmental) action and presence in difficult and politically sensitive settings, despite the clear need for transformative action.

The response to the vast scope of people's needs, especially for those enduring years if not decades of crisis, cannot be solely humanitarian in nature. And yet, more often than not, it is humanitarians who are left to cater for needs across the spectrum: from acute malnutrition and the fundamental lack of water, sanitation and health care, to the seemingly endless provision of basic services and support to public institutions. Not surprisingly, this can have dramatic effects on the sector's ability to shift into gear and respond to acute emergencies and peaks of violence.³¹

Dilution of value of humanitarian action

The NWOW is an ambitious broad-focus agenda that incorporates humanitarian assistance within a wider vulnerability reduction, crisis prevention and needs elimination framework. It can be argued that, for humanitarians, this could dilute the importance and primacy of meeting immediate critical needs, subsuming these to the pursuit of the wider Sustainable Development Goals (SDGs).

There will always be tensions between short-term and long-term needs and between targeted and comprehensive approaches. By definition, more strategic goals such as economic development, state or peacebuilding, and even human and social rights, focus on policies, institutions and systems, rather than on people, even if people are intended to be the ultimate beneficiaries. Equally, the long-term needs of a system do not necessarily align with the immediate needs of people.

The push for coherence in conflict or highly-politicised contexts could lead to humanitarian action becoming instrumentalised, with the express intention of achieving goals of a different nature that conflict with principled humanitarian response. This has potentially corrosive effects on the humanitarian sector's ability to deliver on the basis of needs; on the security of humanitarian personnel and beneficiaries; and consequently on the legitimacy of the humanitarian mission.

There will always be tensions between short-term and long-term needs and between targeted and comprehensive approaches

The instrumentalisation of humanitarian action could corrode both the humanitarian sector's ability to deliver on the basis of needs and the legitimacy of the humanitarian mission

³¹ During the crisis in Niger in 2015 and 2016 in the Diffa region, an emergency gap occurred despite the sector's existing presence because the prevailing developmental approach slowed and even prevented the necessary shift from a longer-term structural focus to an immediate lifesaving response. There was, for example, resistance to the dropping of fees for healthcare provision, even when these fees presented a clear barrier for access to healthcare for vulnerable displaced populations. Additionally, heavy coordination structures (which will be reinforced under the WHS radical vision of coherence), further delayed emergency response. The need for comprehensive data to begin planning and unlock funding was compounded by competition and flag-planting, which had a paralysing effect in Diffa. Edwards, J., *North-east Nigeria*, Emergency Gap case study, Médecins Sans Frontières OCBA, April 2017.

There is little empirical evidence of direct risks or downsides generated by such integrated operations, but the lack of clear causal links does not mean that the risks do not exist. Indeed, risks are merely the potential for harm and remain theoretical until realised. The few examples from the Emergency Gap case studies, however, suggest that the risks may be real.

In northern Mali, for example, there have been consistently high levels of humanitarian needs, but only limited structural investment in lifesaving sectors, and particularly healthcare, for people trapped in the crisis. While members of the international community have stepped in to respond,³² their interests are also framed by the logic of coherence of action through integration, stabilisation and counter-terrorism rationales. The MSF Emergency Gap case study³³ found that this has led to subordination, and the potential sacrifice, of humanitarian assistance to political goals. In a similar way to other politically (and militarily) charged humanitarian response operations, such as those seen in Afghanistan and Iraq in the early 2000s, the erosion of humanitarian imperative was fuelled by the intentional incursion of the army³⁴ into the humanitarian realm through Quick Impact Projects (QIPs) and other similar activities to obtain quick gains and to "win hearts and minds."

Erosion of principles

When instrumentalised as a transformational force, humanitarian action is unable to serve the interests of people in need on all sides of a conflict impartially and neutrally. Humanitarian action anchored in the core principles of humanity, neutrality, impartiality and independence becomes impossible, and nowhere more so than in conflict settings. Given that today's conflicts are primarily internal, with states being parties to the conflict, humanitarian action that is linked to state-building in these contexts is unlikely to be neutral or impartial.

One recent example can be seen in Mosul, where the humanitarian response that accompanied the military operation against IS took place in a highly politicised environment³⁵ with humanitarian principles largely disregarded in the planning and execution of the relief operation.³⁶

Given that states are often parties to the conflict, humanitarian action that is linked to state-building in such contexts is unlikely to be neutral or impartial

³² There have been seven consecutive Humanitarian Response Plans in Mali since 2012.

³³ Pozo Marín, A., Perilous terrain. Humanitarian action at risk in Mali, Emergency Gap case study, Médecins Sans Frontières OCBA, March 2017.

³⁴ Both the UN Multidimensional Integrated Stabilization Mission in Mali (MINUSMA) and the French led Opération Barkhane run QIPs.

³⁵ Fox, H., Stoddard, A., Hammer, A., Davidoff, J., *Response to the Mosul Offensive, 2016–2017: A Review of Issues and Challenges*, Humanitarian Outcomes, March 2018.

³⁶ Principled Humanitarian Assistance of ECHO Partners in Iraq (May 2017), commissioned by the Norwegian Refugee Council and supported by the Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO), found that ECHO was the only donor that was openly concerned about the principles, while other donors were more politicised, and that the application of the humanitarian principles in the operations of ECHO partners varied widely.

In contrast with most other conflict situations, there was strong political pressure to provide an immediate and up-to-scale response in Mosul

To be effective, and to be humanitarian, the sector must maintain enough independence to ensure the primacy of the principle of humanity, and enough neutrality to deliver aid impartially according to need, rather than institutional and military objectives or even the lofty ambitions of the SDGs

The high level of collaboration between the UN and the Government of Iraq was detrimental to humanitarian neutrality in ways seen in other integrated missions, yet it seemed to reach a level of political and operational alignment that was unique to this context and exacerbated by the counter-terrorism agenda.

In contrast with most other conflict situations, there was strong political pressure to provide an immediate and up-to-scale response in Mosul, particularly after the humanitarian failure to prepare and assist the population caught in the previous offensive against IS in Fallujah. However, few implementing organisations had the capacity to do so in this very insecure context, and even the usual frontline responders³⁷ in conflict —the International Committee of the Red Cross (ICRC) and MSF— did not respond quickly or to scale.³⁸

In the UN-led health response, the political push to deliver led to extra-humanitarian solutions, like the use of for-profit medical actors embedded in coalition forces. This curtailed the impartiality, neutrality and independence of humanitarian operations, with compromises going largely unchecked. Nevertheless, many lives were saved by the medical trauma intervention, despite the politicisation of the aid operation and the failure to ensure principled action.

The gaps in response that are usually tolerated in other acute conflict situations were considered intolerable in Mosul, where an 'anti-emergency gap situation' of sorts emerged in sharp contrast with the siege and subsequent battle for Aleppo, which ended just as the battle for Mosul was starting a little over 600 Km to the east.³⁹

The humanitarian action model is designed to safeguard the independence and neutrality that are crucial to maintain impartiality and gain access. Traditional humanitarian principles are side-stepped by design when working in an integrated framework under the banner of the SDGs, stability and counter-terrorism agendas, or the NWOW. To be effective, and to be humanitarian, the humanitarian sector must maintain enough independence to ensure the primacy of the principle of humanity, and enough neutrality to deliver aid impartially according to needs, rather than institutional priorities, military objectives or even the lofty ambitions of the SDGs.

³⁷ This report uses the term "frontline responder" to refer to organisations that work consistently in acute conflict settings and are able to gain access and provide coverage in difficult and insecure locations.

³⁸ Fox, H., Stoddard, A., Hammer, A., Davidoff, J., (op. cit.) finds the MSF response to have been, in general, too little and too late. This was the result not only of external factors (a sense that it was too unsafe to operate) but also to internal factors, most notably human resource constraints and poor intersectional coordination.

³⁹ In Aleppo, despite the international public outrage at the indiscriminate bombing of civilians, humanitarian assistance was politically obstructed. In Mosul, the public outcry at the indiscriminate bombing of civilians was relatively muted and humanitarian assistance was instrumentalised.

The lost specificity of conflict

Context-specific analysis and response are critical for good humanitarian practice, but the operational reality of working in conflict and its implications for humanitarian policy have all but disappeared from the discussions

The 'ending needs' and the 'collective outcomes' agendas draw their lessons and good practices from non-conflict environments Context specificity has been largely missing from both the WHS and the NWOW agendas. In addition, the value-added of principled humanitarian action in situations of violent conflict, authoritarian states and other high-risk protection settings has been insufficiently addressed.

By mixing the varied approaches from acute and protracted crises, and from natural disasters and armed conflict, and putting them all together in the same concept of humanitarian assistance, current policies make it difficult for the sector to have meaningful discussions on humanitarian practice. Context-specific analysis, planning and response models are critical for good humanitarian practice, but the operational reality of working in conflict and its implications for humanitarian policy have all but disappeared from the discussions.

This statement might seem shocking, given that the WHS flagship report dedicated the first of its five core commitments to the issue of conflict. Upon close examination, however, it becomes clear that this issue was debated only in the context of the need and the political will to put an end to conflict, and not as a distinct operational reality.⁴⁰ The NWOW also focuses on achieving collective outcomes that will reduce needs, risks and vulnerability, particularly in settings affected by fragility, conflict and displacement.⁴¹ Ethiopia, Somalia, Uganda and Yemen are the four countries selected for the initial rollout of the agenda. However, considerations on how humanitarian principles will be applied and how the space for principled action will be protected in active conflict or in politically contested contexts have not yet been addressed satisfactorily in the NWOW framework.

The 'ending needs' and the 'collective outcomes' agendas —like the HDN before them— draw their lessons and good practices from non-conflict environments. However, direct extrapolation is not always possible and may even have unintended and negative impacts on the sector's ability to work effectively.

⁴⁰ The United Nations Secretary General's report One Humanity, Shared Responsibility states: "When conflicts are protracted and intractable, often it seems to be easier for the international community to invest in humanitarian responses than in concerted efforts to prevent and resolve conflicts. But humanitarian assistance will never be the solution and deployments of peacekeepers will not be enough. As the high-level reviews over the past year have emphasized, the answer ultimately lies in far greater global leadership to find political solutions, along with a cultural, operational and financial reprioritization toward prevention."

⁴¹ Outcome document from the High-Level Workshop on the New Way of Working, op. cit.

In Borno State protection concerns, such as forced displacement, were not addressed openly, and this top-down policy push favoured longer-term developmental and strategic goals over immediate humanitarian needs

Post-WHS policies aspire to a 'paradigm shift' in how the aid sector works, yet fail to sufficiently scrutinise and assess the risk posed by a closer alignment of humanitarian and political agendas

Protection concerns ignored

In the same vein, there is insufficient consideration of protection issues in the post-WHS initiatives, particularly assistance. As such, the NWOW agenda risks overshadowing other critically important conversations around the protection of civilians caught in conflict and respect for international humanitarian law (IHL) and refugee law.

During the response to the Borno State crisis in north-east Nigeria, government donors and the UN system succumbed to the narrative of denial promoted by the Government of Nigeria and did not publicly recognise the situation as a large-scale conflict emergency, speaking instead of a food security crisis.⁴² Protection concerns, such as forced displacement, were not addressed openly, and this top-down policy push favoured longer-term developmental and strategic goals over immediate humanitarian needs.

This, in turn, determined the operational choices and political positioning of aid actors: UN agencies chose development objectives (which diverted attention from mounting critical needs), and this shaped the proposals made by INGOs to donors (which included development elements repackaged as humanitarian activities). It was only in October 2016, over two years after the start of the offensive against Boko Haram, that the rhetoric of the Nigerian authorities changed from a narrative of denial to one of emergency, including condemnation of UN agencies and INGOs for not doing enough.

Risks not acknowledged or addressed

The push for coherence stems from a very basic and deeply engrained premise that more alignment and greater integration of efforts will lead naturally to better and faster results. This idea has never been thoroughly scrutinised, even though decades of attempts to put it into practice have brought to light its inherent inconsistencies and operational costs.

Post-WHS global humanitarian policies aspire to a 'paradigm shift' in how the aid sector works, yet fail to sufficiently scrutinise and assess the risk posed by a closer alignment of humanitarian and political agendas to the ability of the sector to operate, particularly in conflict settings. It is surprising that while there is a growing push from outside the humanitarian sector to politicise, instrumentalise and obstruct aid, the sector itself seems to have suspended its reflexes to distrust or be wary of proximity with political agendas.

⁴² Edwards, J., *North-east Nigeria*, op. cit.

For some donors, the challenge is how to protect humanitarian principles, which are 'under attack' from outside and within the humanitarian sector, at a time when the protracted nature of crises has blurred all distinctions between humanitarian and other forms of action

Many voiced their concern that whenever it is put next to other more strategic goals, humanitarian action becomes easily dismissed as unsophisticated, dated and simplistic The question of the role played by coherence-guided policies, such as the NWOW, in the current loss of emergency focus and responsiveness of the humanitarian sector was the single most controversial topic during the engagement rounds for the Emergency Gap Project. It became clear that many humanitarian NGOs, donors and UN agencies share our concern that a consolidated political and structural effort towards greater coherence of vision, goals and operational models will jeopardise the ability to deliver impartial assistance in conflict settings.

For some donors, the challenge is how to protect humanitarian principles, which are perceived to be 'under attack' from outside and within the humanitarian sector, at a time when the protracted nature of crises has blurred all distinctions between humanitarian and other forms of action. Others went further: saying that principled action must be defended in any context, and not only in conflict and politically unstable environments, and that humanitarian principles must be reinstated as the foundation of the humanitarian enterprise.

There were, however, more pragmatic approaches: some donors saw the push for efficiency rather than effectiveness (as embodied by the Grand Bargain)⁴³ and the paradigm shift towards a unified vision and model of action (as embodied by the NWOW) as the only practical outcomes of the past few years of intense debates, which in their view makes them worthy of preservation. Similarly, some donors chose to focus on the opportunities, rather than on the challenges presented by the new agenda, including the opportunity to introduce humanitarian principles as a strategic approach for other action needed in countries enduring humanitarian crises. However, others were weary of the influx of actors with no expertise in complex humanitarian settings, particularly the World Bank (given its strong leverage and its focus on cost efficiency).

At present, donors supporting the NWOW appear unconcerned with the potential costs of the agenda to humanitarian practice and humanitarians working in acute conflict. Similarly, some UN agencies and big multimandate INGOs challenged the idea that humanitarian action can progress in today's complex environment without engaging in global policy frameworks that tackle the root causes of conflict, poverty, inequality and vulnerability.

Many, however, voiced their concern that whenever it is put next to other more strategic goals (whether political, military, economic or social), humanitarian action becomes easily dismissed as unsophisticated, dated and simplistic. There are, therefore, fears that greater integration will inevitably lead to greater erosion of the space and conditions for principled humanitarian action. While there is certainly no unimpeachable proof that

⁴³ The Grand Bargain was first formulated by the High-Level Panel on Humanitarian Financing in their report to the United Nations Secretary General, *Too important to fail—addressing the humanitarian financing gap*, December 2015.

The new humanitarian paradigm is turbocharging this process without examining its effects on the structural capacity of the sector greater alignment of actors and agendas around a shared set of strategic goals leads automatically to disinvestment in emergency response, there is no hard evidence that greater centralisation of action and policy coherence have provided better outcomes for people trapped in acute conflict.

The ICVA Briefing Paper, *The Grand Bargain Explained*, asserts that "the experience to date in countries where Humanitarian Response Plans (HRPs) have been linked to UN Development Assistance Frameworks (UNDAFs) shows how development and political agendas can crowd out or overshadow humanitarian and protection priorities."⁴⁴

The most severe costs of coherence stem from the politicisation of aid and its impact upon the people in need of assistance. They include the critical absence of lifesaving assistance to those trapped in crises of little geopolitical importance, and the critical denial of lifesaving assistance to those trapped on the 'wrong side' of crises of high geo-political importance.

This conceptual push has reduced the space for humanitarian response and the sector's ability to meet immediate critical needs. The new humanitarian paradigm is turbocharging this process without examining its effects on the structural capacity of the sector. A further push for policy alignment will require more centralised planning and decision-making and a more homogenised aid system. Instead, the aid sector should reconcile the need to address immediate necessities while recognising the full spectrum of human needs and aspirations. To do this, it must reconceptualise the nature of the problem and capitalise upon the advantages of diverse and independent approaches.

⁴⁴ ICVA, *The Grand Bargain: Everything you need to know*, ICVA Briefing Paper, February 2017. This point was also raised in a more recent ICVA briefing paper – *The "New Way of Working" Examined*, September 2017. Furthermore, during the 'The New Way of Working: What does it Mean for NGOs?' PHAP and ICVA Seminar on the 5th October 2017, a representative from Action Contre La Faim also highlighted that they "see a high risk the Humanitarian Agenda will... be downgraded to a secondary place in many contexts."

2. STRUCTURAL ELEMENTS

From a structural perspective, the main driver of the emergency gap is the failure of the humanitarian sector to capitalise upon the diversity of its actors, approaches and operational models

There have been heavy costs and poor results in treating the aid sector as a system rather than an ecosystem of actors From a structural perspective, the main driver of the emergency gap is the failure of the humanitarian sector to capitalise upon the diversity of its actors, approaches and operational models.

• One-size does not fit all

Since the early 1990s, humanitarian coordination, planning, and funding streams have become progressively centralised and articulated around UN-led architecture and processes. This set-up has been crucial for the evolution of humanitarian action from an often patchy and unpredictable model to an articulated approach guided by common principles and good practices. On the flipside, this model often favours coherence of action over flexibility and timeliness of response.

In the past decade, various humanitarian reform processes championed by donors and the UN system have resulted in an even more UN-centric humanitarian design. This centralisation has led to policy thinking that sees the humanitarian community more as a system —where elements fit tightly together and every part contributes to a clear common purpose— than as an ecosystem where independent (and often diverging) missions, goals, ambitions, and operational and organisational models can interact (and complement) each other on the basis of their added values and strengths.

There have been heavy costs and poor results in treating the aid sector as a system rather than an ecosystem of actors that is driven by a variety of structures and forces that resist coherent action. The current aid architecture has contributed to flagrant power imbalances and infighting around resources, often decried by policymakers and analysts.⁴⁵

During the engagement rounds for the Emergency Gap Project, interlocutors from all types of humanitarian organisations —from donor agencies to operational actors and think tanks— conceded that the centralisation of the humanitarian sector has helped to appease reasonable concerns about the growing number of players spiralling into a chaotic and ungovernable mass, but has done little to ensure a nimble and responsive humanitarian enterprise. Overall, UN agencies were quick to qualify their real power in driving a centralisation agenda, while most NGOs argued that the current structure skews the power balance in favour of the UN.

⁴⁵ Humanitarian Policy Group, *Time to let go*, op. cit.

The centralisation of the sector has helped to appease reasonable concerns about the growing number of players spiralling into an ungovernable mass, but has done little to ensure a nimble and responsive humanitarian enterprise As the UN-led common planning and response processes have become heavier within expanding transparency and accountability frameworks, there is also a trade-off between comprehensiveness and speed associated with flexibility: a compromise often referred to as quality of process versus timeliness.⁴⁶ This loss of timeliness and flexibility is a critical issue for humanitarian funding that should support rapid and adaptable response to rapidly evolving contexts.

In reality, traditional decision-making and allocation mechanisms often fall short when it comes to timeliness: allocations to the activities under common response plans and pooled funds continue to take anything from two to five months to materialise.⁴⁷ Standard bilateral funding mechanisms, even when harnessed outside common UN-led processes, are not sufficiently able to support frontline deliverers of aid in the immediate launch of an emergency response.

Competition trumps delivery

In the field, overstating presence to secure better funding is a widespread practice. The three-year SAVE field research project found that "while some humanitarian organisations remain operational in active conflict, they often overstate their impact. Incentives to demonstrate presence to donors and the general public can obscure the reality that their footprint on the ground is limited. The perverse result is that aid organisations often inadvertently make the humanitarian situation appear less dire than it is, undermining their advocacy on behalf of the people they seek to serve."⁴⁸

The review of the sector's performance in Diffa, Niger, by the Emergency Gap Project described the early months of the emergency response as one of backbiting and power struggles among implementing agencies as a result of the competitive funding and coordination dynamics within the system.⁴⁹ This contributed to a number of potentially damaging practices, such as 'flag-planting': claiming coverage of a given sector in a specific location, and the money and power that comes with it, to prevent the sharing of resources with a rival. In Diffa, even when a lack of coverage was clear, some agencies still refused to accept the assistance of others, instead promising to do better —and were backed up by their donors.

⁴⁶ See for instance OCHA, Evaluation of the Common Humanitarian Fund: Global Synthesis Report, May 2015; and Stoianova, V., Review of NGOs' Experience with the Syria-Related Pooled Funds, ICVA, December 2014.

⁴⁷ Ibid. For commitment times to the HRP, see Development Initiatives, *Global Humanitarian Assistance Report 2014*, Chapter 7.

⁴⁸ Stoddard, A., et al., *The Effects of Insecurity on Humanitarian Coverage*, op. cit.

⁴⁹ For information on the Niger case study, see Edwards, J., *Niger Jan 2015-Aug 2016*, Emergency Gap case study, Médecins Sans Frontières OCBA, November 2016.
Flag-planting is a perverse and extended practice that hides potentially bigger gaps between assumed coverage and actual services

The mismatch between the core recipients of funding and the frontline deliverers is more than a major challenge for the rapid and costefficient transfer of money: it is a fundamental design flaw for support to the necessary structural and operational investments Flag-planting is a perverse and extended practice that hides potentially bigger gaps between assumed coverage and actual services. While it is well documented and privately acknowledged by all involved, it is not contested in public by anyone. As a result, it is not addressed.

MSF is not immune to 'flag-planting' tendencies and internal power struggles for presence and reach, rather than money and resources. This was evident in the Mosul emergency response, where MSF's intersectional coordination was poor at the beginning of the response, partly because of a questionable sense of competition between sections.⁵⁰

Overall, natural competitiveness for resources has been exacerbated by the centralised nature of the humanitarian sector and by the ever growing mismatch between its ambitions and available resources. The economic crash of 2008 led to a contraction in the human resources and aid budgets of many donor governments. This has exacerbated a pre-existing trend of favouring fewer and larger grants for multi-mandate implementing partners, which require less time and human resources for contracting, reporting, and monitoring and evaluation, rather than supporting an array of specialist organisations through numerous grants.

As a result, the bulk of resources in the humanitarian sector is held increasingly by a handful of UN agencies, while most of the frontline work is carried out by the Red Cross and Red Crescent movement and NGOs (although some UN agencies also retain strong operational capacity and ability to deliver).⁵¹ This separation between humanitarian funding and the delivery of aid has generated considerable dysfunctions, both in terms of the speed and the nature of the response. In addition, this mismatch between the core recipients of funding and the frontline deliverers of aid is not only a major technical challenge for the rapid and cost-efficient transfer of money, but also represents a fundamental design flaw for support to the necessary structural and operational investments that are critical for the ability to stay and deliver in acute crises.⁵²

⁵⁰ Fox, H., Stoddard, A., Hammer, A., Davidoff, J., Response to the Mosul Offensive, 2016-2017, op.cit.

⁵¹ In MSF's experience this is particularly the case for the World Food Programme.

⁵² Stoianova, V., Humanitarian financing: is it all about money?, Emergency Gap Series, Médecins Sans Frontières OCBA, April 2017.

Independence is greatly facilitated by unearmarked or softly earmarked funding, which gives agencies more flexibility when it comes to programming choices and risk management

Organisations that cannot build up or invest in their organisational capacity are unlikely to become early interveners in acute crises

Financial independence is key

From a structural standpoint, organisations lacking financial independence —and reliant on common security support and logistics services have limited operational flexibility. Incentives to invest in independent operational capacity are scarce in a sector where the decades-long push for coherence has promoted ever closer alignment of services and structures. It also centres an organisation's priorities and resources on securing funds, and away from investing in the necessary organisational capacity to be better able to reach people who need assistance.

Experience from frontline responders such as MSF and the ICRC shows that effective emergency response in conflict relies on the capacity and the ability to gain access and deliver critical assistance. In contested and hardto-reach areas this requires heavy structural investments in independent security management, robust logistics and specialised technical expertise. In practice, independence is greatly facilitated by unearmarked or softly earmarked funding, which gives agencies more flexibility when it comes to programming choices and risk management.

It means that agencies' humanitarian responses are less likely to be bound or influenced by the special interests of donors in particular areas or groups in the country and are more able to adapt programming to the changing circumstances in a volatile environment. This is particularly important, given that humanitarian coverage tends to not only be uneven within and across contexts, but is also proportionally lower in areas under the control of militants in opposition to the government and to the Western powers that provide most humanitarian funding.⁵³ Independent capacity in logistics and transport can also be critical, as it allows an organisation the flexibility of movement that, in turn, affects risk tolerance.

Organisations that cannot build up or invest in their organisational capacity are unlikely to become early interveners in acute crises that require a robust initial operational infrastructure. It is likely, therefore, that organisations that depend heavily on earmarked funding from donor governments or on partnerships with UN agencies will exclude the possibility of launching emergency response in a new crisis, and particularly in contexts of acute conflict where operational costs are much higher. And this contributes to the emergency gap.

This is particularly true for organisations undertaking cost-heavy sectoral interventions such as emergency water, sanitation and hygiene (WASH). The sectoral gap in emergency WASH was acknowledged unanimously during the Emergency Gap Project engagement rounds and in our sectoral WASH analysis⁵⁴ by donors, UN organisations (including UNICEF, the

⁵³ Stoddard, A., et al, *The Effects of Insecurity on Humanitarian Coverage*, op. cit.

⁵⁴ Cunningham, A., The Evolution of Emergency WASH in Humanitarian Action, Emergency Gap case study, Médecins Sans Frontières OCBA, June 2017.

After war broke out in Yemen, the structural dependence of humanitarian NGOs on UN security analysis and core services was seen as a key factor in the sector's dramatic failure to stay and deliver

For humanitarian organisations that favour emergency response operations, restricted access to sufficient levels of flexible and core funding could have a negative impact on the reach and quality of their operations WASH cluster lead agency) and traditional WASH specialist NGOs. While there are no fewer organisations and agencies working on WASH than before, they are less able to intervene in conflict⁵⁵ because few of them have the necessary capacity, resources and know-how to be willing or able to act as emergency responders, particularly in insecure environments.

In Yemen, the structural dependence of humanitarian NGOs on UN security analysis, supply pipelines, and transport and evacuation services was seen as a key factor in the sector's dramatic failure to stay and deliver after war broke out in March 2015.⁵⁶

Academic research⁵⁷ has also confirmed (as noted above) that independence is facilitated by unrestricted or less restricted funding. However, the costs of supporting the humanitarian operations of frontline humanitarian agencies are often funded fully or partially through an overhead charge on every grant, even though these costs are well known, predictable and easily accounted for, and would, therefore, be better funded through core institutional funding.⁵⁸

This dysfunctionality creates challenges for the predictability of income and disincentives for proper investments in organisational capacity. For humanitarian organisations that favour emergency response operations —particularly in fragile and conflict settings— restricted access to sufficient levels of flexible and core funding could have a negative impact on the reach and quality of their operations.

To support the necessary structures, it is imperative that more donors use unearmarked funding by increasing its volumes and extending its reach beyond traditional recipients (mainly UN agencies) to emergency oriented NGOs that are committed to working in insecure environments under agreed results frameworks. While reduced earmarking constitutes a core element of the Grand Bargain, it remains to be seen how this commitment will be upheld in a political environment of more stringent donor governments' funding mechanisms, and whether core funding will be made readily available to the full array of implementing organisations.

⁵⁵ In sharp contrast with WASH interventions in natural catastrophes.

⁵⁶ See Cunningham, A., Enablers and obstacles to aid delivery: Yemen Crisis 2015, Emergency Gap case study, Médecins Sans Frontières OCBA, November 2016.

⁵⁷ Haver, K. and Carter, W., What It Takes: Principled pragmatism to enable access and quality humanitarian aid in insecure environments, Humanitarian Outcomes, November 2016.

⁵⁸ Stoianova, V., *Humanitarian financing: is it all about money?* Op. cit.

Striving to assess needs and provide assistance and protection in an impartial manner may not be feasible for those who are part of the local dynamics, with further complications related to the principles of neutrality and independence

There should be complementarity across organisations and operational approaches, and between locally-led and internationallydelivered assistance

• The challenges of localised aid in conflict

At present, the localisation of the aid agenda appears to be the sector's main response to its structural limitations in gaining access and providing timely assistance in difficult environments. At the WHS, one message was heard more loudly than others: national and local actors should be at the forefront of humanitarian responses in their home countries. This makes eminent sense in many emergency contexts, particularly in slow onset emergencies and natural disasters in stable contexts, and should be the preferred option for support in those cases. However, it must be recognised that emergencies springing from armed conflicts or in highly contested environments pose serious challenges to principled humanitarian action for local and national responders.

At the practical level, these responders face inherent challenges around adherence to the core humanitarian principles when armed conflict takes place in their country.⁵⁹ These challenges may be the result of perceptions linked to their various ties or affiliations with institutions, groups and communities, or because of their deliberate choice to favour a particular geographic area or population group. Striving to assess needs and provide assistance and protection in an impartial manner may not be feasible for those who are part of the local dynamics, with further complications related to the principles of neutrality and independence.

Clearly, the issue is not one of competition between the values of external versus localised aid, nor about which approach is better. There should be complementarity across organisations and operational approaches, and between locally-led and internationally-delivered assistance. Impartial, independent and neutral humanitarian action will continue to be critical in conflict and fragile settings where local capacities are insufficient or overwhelmed by the scope of the crisis, or where principled action cannot be reasonably pursued by relying solely on locally-led approaches.

Local capacity-building, remote programming and nationally-led responses are paramount for building resilience, strengthening institutions and pursuing sustainable solutions in more stable contexts. However, in the humanitarian response to the crisis in the Niger region of Diffa, there was a critical lack of experienced human resources both internally within INGOs or UN agencies and also within the local talent pool. Even so, donors and their implementers continued to support policies to promote localisation of the response, and it could be argued that this undermined the effectiveness of that response by putting policy dogma ahead of local realities.⁶⁰

⁵⁹ Schenkenberg, E., The challenges of localised Humanitarian aid in armed conflict, Emergency Gap Series, Médecins Sans Frontières OCBA, November 2016.

⁶⁰ Edwards, J., *Niger Jan 2015-Aug 2016*. Op. cit.

The priorities of INGOs change dramatically if they move from being implementers to brokers or intermediaries, and there is less discussion on the operational challenges of getting things done Business models that are less oriented to implementation also mean less proximity to the people we are all here to serve. Despite arguments that working through local partnerships increases proximity to people in need and enhances an understanding of their needs, the priorities of INGOs change dramatically if they move from being implementers to brokers or intermediaries, and there is less discussion on the operational challenges of getting things done. The narrative and the thinking moves from operational innovation to concepts and systems, which represents a dramatic shift in the humanitarian mindset. To put it crudely: we see more efforts directed towards aid systems and policies, and less analysis anchored in field realities and geared towards practical solutions to operational challenges. One of the major shifts in the mindset of the humanitarian community is the increase of risk aversion

The emergency mindset —the determination to act quickly, to take risks and to overcome challenges— is the vital force that pushes humanitarians to pursue an enabling policy framework and effective structures

3. THE MINDSET ELEMENT

• The importance of the emergency mindset

One of the major shifts in the mindset of the humanitarian community is the increase of risk aversion.

In the course of the Emergency Gap Project, the emergency mindset was overwhelmingly identified as the crucial driver in the provision of timely lifesaving assistance, even in the most insecure and difficult environments. Organisations that see humanitarian work as an intrinsically urgent and critical endeavour, which transcends the political, social and economic drivers of the suffering to which they are responding, will invariably try to preserve a meaningful space for emergency response in their mission, and to reinforce their structural capacity to deliver.

The emergency mindset —the determination to act quickly, to take risks and to overcome challenges that are inherent to working in volatile and chaotic environments— is the vital force that pushes humanitarians to pursue an enabling policy framework and effective operational structures. It also fuels their work when that enabling environment has been created.

Nowhere is the humanitarian mindset more pivotal than in a context of acute conflict or a peak of violence in a conflict that is protracted. With humanitarian action rooted in the principle of humanity, the suffering of fellow humans generates a moral obligation to assist. And it is this moral obligation —the humanitarian imperative— that drives humanitarians to enter war zones to help alleviate suffering.

Why then, despite the significant growth and the professionalisation of the sector, do humanitarians continue to fail to deliver in the hardest-toreach places? Is the humanitarian imperative no longer the driving factor in operational and security decision-making? Is it increasingly being replaced by institutional interests? Several UN agencies and government donors shared their frustration over the dwindling numbers of emergency-minded implementing partners able to manage and take risks and to retain the necessary skills to operate in contexts of active violence. In humanitarian operations, there is correlation between the level of suffering and the level of acceptable risk —the higher the needs, the more justified the risk

Despite the undeniable relevance of structural constraints, overcoming limitations should start with adopting the right mindset and the intent to overcome such challenges

· An increasingly risk-averse mindset

Obviously, war zones are dangerous places. Accepting risk is, therefore, an inherent part of humanitarian action. While risk-tolerance varies across organisations, it should also vary by the type of programming and the moment of the crisis when operations are taking place. In humanitarian operations, it is generally accepted that there is some correlation between the level of suffering and the level of acceptable risk —the higher the needs, the more justified the risk.

Humanitarian organisations analyse risk in relation to the impact of their operations to determine how far to go and at which point the risks become so great that limiting or withholding urgent lifesaving assistance may be justified. This is one of the defining ethical challenges of humanitarian action, and the higher the need and the risks, the tougher that call becomes.⁶¹

It would appear that the risk clearly outweighed the humanitarian imperative for the traditional humanitarian community in Yemen in 2015, as the majority of international actors withdrew from the country after the start of the hostilities. There have been questions about whether a full evacuation was warranted, and during the Emergency Gap engagement rounds most of the humanitarian organisations on the ground at the time of the evacuation expressed their doubts about its necessity. Many lamented the lack of alternative security, transportation and evacuations mechanisms to those offered by the UN system, as in that particular case, structural limitations appeared to have trumped the humanitarian mindset and the willingness to stay and deliver.

Despite the undeniable relevance of structural constraints, overcoming such limitations should start with adopting the right mindset and the intent to overcome such challenges. In fact, some organisations defied the evacuation decision of the United Nations Department of Safety and Security (UNDSS) and left some international staff behind, which allowed them to maintain a connectedness with the reality in the field and to resume operations more quickly once the return of other international staff was possible.

Limiting or ceasing humanitarian presence and assistance when and where it is most desperately needed is an extremely hard decision for any humanitarian organisation. In Yemen, the decision to evacuate led to one of the most glaring emergency gaps in recent times, which was prolonged in its acute phase for well over a year. This was seen by many interviewees for the Emergency Gap Project as an utter failure of the humanitarian community and the ultimate example of everything that is wrong with the structure and mindset of the humanitarian sector.

⁶¹ Buth, P., *Insecurity – always an unsurmountable obstacle*?, Emergency Gap Series, Médecins Sans Frontières OCBA, January 2017.

Limiting or ceasing humanitarian assistance when and where it is most desperately needed is an extremely hard decision and returning to a country after a full withdrawal or prolonged absence can be challenging

While the concept of programme criticality is widely understood and used in decisionmaking, the formal policies of most NGOs do not involve steps to ensure and facilitate it MSF has also found itself in the difficult position of having to withdraw from one of the worst humanitarian crises in the world. In 2013, MSF took the painful and controversial decision to pull out from Somalia after 22 years. This came after numerous violent attacks in which 16 MSF staff were killed and others abducted —with the final abduction lasting 21 months. The decision to withdraw lifesaving services, however, was not motivated by these events alone, but rather by the realisation that parties in the conflict with whom MSF had negotiated access appeared to be tolerating, or in some cases actively supporting, crimes against MSF staff. It took MSF until June 2017 to re-assess the situation and implement its modest and cautious return to Somalia, building on the lessons learnt from the 2013 withdrawal.

Return to a country after a full withdrawal or prolonged absence can be challenging. Apart from the practical constraints of entering an insecure area, the organisation's history in that country may pose additional complications, and depending on how evacuations were managed and explained by an organisation, its return to the same area may be marred by the consequences of any earlier evacuations.⁶²

The concept of risk encompasses several types of hazards and challenges: physical risk to people and assets linked to operations; fiduciary risk linked to processes and accountability; and reputational or institutional risks linked to the business model of the organisation. The type of risk and risk-level seen as acceptable by an organisation is often determined by different factors including: the (self-given) mandate and risk-appetite of the organisation; the strategic value of its presence in a particular context as well as its depth of knowledge about the context and the strength of its networks with relevant interlocutors; the strength of the organisation's security management capacity; and, crucially, the criticality of the humanitarian intervention —the impact of the intervention on the target population.⁶³

Independently to the reflection and analysis of the Emergency Gap Project on this issue, broader academic research has arrived at similar conclusions. SAVE research focuses on the term 'residual risk', i.e. the idea that some level of risk has to be accepted, even after mitigation measures are taken. Programme criticality —being willing to accept greater levels of residual risk for lifesaving programming— is a vital consideration when deciding how much residual risk is acceptable. Without it, "there is the possibility of making decisions using a lowest common denominator risk threshold, and failing to take lifesaving action as a result. In addition, some types of residual risk acceptance (mainly fiduciary/reputational) are very much linked to donors' risk acceptance. A certain level of fiduciary risk will likely

62 Ibid.

⁶³ Ibid.

be morally justified, especially if modest in scale or humanitarian needs are high (e.g. payments to local warlords/gatekeepers in Somalia during the 1992 famine)."⁶⁴

It is inevitable that avoiding security and fiduciary risk poses dilemmas for impartial operations and the prioritisation of assistance based on (and in proportion to) needs, with precedence given to those whose needs are the greatest. In addition, while the concept of programme criticality is widely understood and generally brought to bear in decision-making, the formal policies of most NGOs do not involve steps to ensure and facilitate it.

The drivers of risk-aversion

Risk-aversion is also favoured by the current structural set-up of the humanitarian system. It is often driven by donors' stringent monitoring and reporting policies and their unwillingness to accept uncertainty, to fund failure, loss or diversion of assets, or to accept that meeting critical needs in hard-to-reach places scores unfavourably under value for money criteria.⁶⁵ As a result, organisations go for the 'low-hanging fruit' by responding where needs are evident and access straightforward, rather than taking the risks of expanding beyond their areas of regular operations.

For fiduciary or reputational risks, the ability to share risk with donors or international partner organisations can increase risk acceptance and allow critical activities to proceed.⁶⁶ However, as revealed during discussions with over 60 key humanitarian organisations, risk-devolution seems to be a far more regular occurrence than risk-sharing. Chasing risk around the sector was identified as the predominant risk-management technique.

All of the stakeholders interviewed spoke of unrealistic accountability and compliance norms that restrict their ability to accept risk: government donors said they are tied up by risk-averse taxpayer-accountable parliaments and complained of increasingly risk-averse partners. Implementing agencies decried the limitations set by donors' stringent regulatory frameworks, and INGOs criticised those imposed by the centralisation of coordination and services around the UN, particularly the security restrictions on the UNDSS and related disruptions to the United Nations Humanitarian Air Service (UNHAS), on which most humanitarian organisations rely for transportation and evacuation.

Risk-devolution appears to be a far more regular occurrence than risk-sharing: chasing risk around the sector was identified as the predominant risk-management technique

All of the stakeholders interviewed spoke of unrealistic accountability and compliance norms that restrict their ability to accept risk

⁶⁴ Haver, K., Tug of war: ethical decision-making to enable humanitarian access in high-risk environments, Network paper Number 80, Humanitarian Practice Network, November 2016.

⁶⁵ See Stoianova, V., *Humanitarian financing: is it all about money?* op. cit.. However, it is worth mentioning that some donor practices in highly-insecure and limited-accessibility contexts are more flexible than their formal policies indicate.

⁶⁶ Haver, K., *Tug of war.* Op.cit.

For MSF, the ability to take risks is crucial for its willingness and ability to adapt and deliver in difficult settings; this is clearly perceived as a 'luxury' afforded by the organisation's funding model For MSF, the ability to take risks with less fear of financial, professional and reputational reprisals is crucial for its willingness and ability to adapt and deliver in difficult settings; this is clearly perceived both externally and internally as a 'luxury' afforded by the organisation's funding model. However, for humanitarian organisations that are heavily reliant on projectbased funding and structural and operational support from the UN-led system, it can be particularly hard to take the necessary risks to maintain effective presence and delivery in insecure environments.

In South Sudan, for example, the sudden outbreak of civil conflict in December 2013 created an immediate and severe humanitarian crisis compounded by the fact that so many agencies that should have been able to respond were not in a position to do so. Many humanitarian and development agencies were already working throughout the country when the conflict started, but the fighting in Juba sparked a mass exodus of aid personnel.

In the early months of 2014, agencies tended to flock to the places where the needs were evident and access was relatively straightforward, or to the Protection of Civilians sites that held only a fraction of the people in need of assistance. Access was also constrained by risk-averse UN polices: the areas with the greatest humanitarian need were often those with active conflict, and UN restrictions on travel to those areas (including by UNHAS and UNDSS) placed a huge constraint to humanitarian access. Once aid agencies had established projects and bases in these hubs there was a natural tendency for them to stay there, and only a handful of agencies tried continuously to address unmet needs in new locations.⁶⁷

⁶⁷ Operational Peer Review, Internal Report: Response to the crisis in South Sudan, Inter-Agency Standing Committee, July 2014.

The greater level of exposure to suffering is generating a stronger collective sense of an obligation to act, but as this has not led to political solutions, the pressure for a collective humanitarian imperative falls on humanitarian actors alone

A stronger obligation to act

Another dimension to the humanitarian mindset may appear to contradict what has been said so far, but actually feeds into the synergies across the three elements analysed in this report. Historically, the world has never been so exposed to the collective suffering of humanity. Real time and detailed coverage of the brutality of wars and the personal experience of suffering is not only reaching the humanitarian sector, but the public worldwide. It is now part of mainstream knowledge.

It may be plausible to argue that this level of exposure to suffering is generating a stronger collective sense of an obligation to act. This has not yet led to political solutions, so the pressure for a collective humanitarian imperative falls on humanitarian actors alone. At the same time, the challenge is massive and requires not only investment in structures and capacities but also risk-taking. The system is faced with a task that it is neither designed nor prepared for, and instead of looking inwards to find ways to step up to the challenge, it is looking outwards to find solutions that either address the causes or build the resilience of people to these shocks.

Earlier in this report, we queried whether the humanitarian imperative had faded as the driving force in operational and security decision-making. The answer is probably yes and no. It is fading as the driving force in the decision-making of many humanitarian organisations in the field, but it is stronger than ever in activating collective processes. There is a new global awareness of the suffering of large numbers of fellow human beings. As humanitarians, we shouldn't give up on finding ways to respond to the immediate suffering. Nor should we look for solutions far into the realms of diplomacy and international engagement.

THE EMERGENCY GAP ILLUSTRATED 2013-2017

MALI

Reasons for the most acute gap (fluctuating since 2012)

- Conflict in northern Mali since 2012 has resulted in limited humanitarian access and rising mortality in areas where people have no access to health care.
- The high risk of attack by armed forces has made humanitarians cautious and risk-sensitive.
- Humanitarian actors, including MSF, either struggle to provide a timely and efficient response or are not present at all.
- An explicit interlinking of three agendas —integration, stabilisation and counter-terrorism-hampers humanitarian action.
- Humanitarian actors may avoid links with UN agencies because of the perceived 'integration' of UN humanitarian and military actors.
- Military-driven instrumental 'aid' activities also exacerbate gaps in the humanitarian response, as humanitarian actors refuse to work in the same zone to reduce the risk of association.

NIGER/DIFFA

Reasons for the most acute gap (December 2014 to June 2016)

The Boko Haram violence in neighbouring Borno state in Nigeria led to violence and displacement spilling over to Niger.

- The initial response was more meagre than expected, given the strong presence of the aid community before the crisis.
- Many agencies assisted those who were easiest to reach and did little to challenge the lack of access imposed by the Niger military.
- A development mindset stifled flexibility, including a reluctance to adapt existing long-term focus to emergency response and waive fees for health services.
- Rivalry between UN agencies and INGOs undermined effective coordination, leadership and funding, resulting in major gaps.
- This resulted in big gaps between assumed coverage and actual services.

NORTH EAST NIGERIA

Reasons for the most acute gap (2015 and 2016)

- In 2015, North East Nigeria saw an influx of IDPs who were trapped in a war zone, cut off from humanitarian access.
- The sector was slow to recognise the crisis in early 2015; and late to act in the critical period from the end of 2015 to the summer of 2016.
- International response was hampered by authorities that did not want to acknowledge the severity of the crisis, and by the reluctance to declare a L3 emergency.
- Government-imposed limitations on humanitarian access went unchallenged and there were no successful access negotiations with Boko Haram.
- Most staff responding to the early stages of the crisis had no humanitarian experience, which led to timid or ineffective response.
- · Already established organisations were not able to scale up their structural capacity effectively.



YEMEN

December 2015 at least)

- · Most humanitarian agencies evacuated when Saudi-led air strikes began in March 2015 and took months to return, leaving the population without humanitarian assistance at a critical time.
- UN acceptance of Saudi funding for the humanitarian response undermined perceptions of UN neutrality.
- There was a critical lack of UN leadership between March and December 2015 which had an adverse impact on the effectiveness of the overall response.
- Access was hampered by security constraints and the lack of effective security management, access negotiation mechanisms and independent logistics by frontline INGOs.

SOUTH SUDAN

- National staff also fled or could not work because of fear of attacks based on their ethnicity.

- Most INGOs showed weak security risk analysis and negotiation capacity at the start of the crisis, which limited their access to areas in need.
- · Impressive leadership on mobilisation was not matched by HCT leadership for much of the response.

- The violence after the coup d'état in March 2013 led to the evacuation of many UN agencies, which did not return until September 2013.
- The L3 activation brought in experienced staff, but field presence beyond Bangui remained weak, and it took nearly four months for assistance to start flowing beyond the capital.

Reasons for the most acute gap (March 2015 to

- Most had implemented development programmes before the crisis and struggled to shift to emergency mode.
- Upon their return, most agencies continued to lead operations from Amman. Being removed from the crisis created a sense of lack of urgency.

- Reasons for the most acute gap (2013-2014)
- In December 2013, escalating violence led to heavy fighting and an exodus of international aid personnel, many of whom did not return for three months.
- A L3 emergency was declared in February 2014, yet, even though there were no funding gaps, the response was slow to deploy.
- There was disproportionate focus on the PoC sites that accounted for few of the needs while most interventions had only transient contact with people in remote locations.

CENTRAL AFRICAN REPUBLIC

Reasons for the most acute gap (2013-2014)

- Funding gaps, lack of actors and insecurity left many people largely unassisted for long periods of time.
- The HCT-led coordination model was questioned, especially by INGOs and global stakeholders, with UN leadership seen as too bureaucratic, political and Bangui-centred.
- Critical needs were not properly addressed during the most acute gap. In an open letter, MSF criticised the failure to react to the mounting crisis, and the time spent on assessments and planning exercises.









Bridging the gap

It is essential that the right targets are set for the scope of humanitarian financing and action in conflicts, where the blurring of the lines between addressing needs and the underlying causes of human suffering is undermining the humanitarian imperative

There are important distinctions to be made about which type of funding best supports emergency response in conflict, the type of capacities that are needed, the importance of a speedy response, and the actors best-placed to deliver meaningful assistance MSF has not been alone in expressing concern over the inadequate levels of response in the early stages of crises, nor in its attempts at a critical analysis of the reasons for the sector's poor performance. As the mismatch between aspirations and results grows, the current humanitarian architecture and tools are increasingly being called into question as the right way to address the multi-faceted needs seen in many of today's emergencies.

Many new paradigms and policies have been set out in the wake of the 2016 WHS to tackle the sector's shortcomings. However, and despite a decade of system-wide reforms, the sector still falls short in the world's most enduring crises, and perceptions of humanitarian work suggest that the formal system is not doing a good job.⁶⁸ This is, in part, because many reforms are addressing the symptoms and not the causes of problems, and because there is a quest for one single recipe to serve every moment, type and aspect of humanitarian response at the same time, and equitably.

Given that the notion of humanitarian action has expanded beyond the sphere of lifesaving assistance in acute emergencies, and that different types of action rely on different sets of skills and approaches, it is essential that the sector acknowledges and further explores its own diversity. At the same time, it is essential that the right targets are set for the scope of humanitarian action and for humanitarian financing in conflict settings, where the blurring of the lines between addressing needs and the underlying causes of human suffering is undermining the humanitarian imperative.

Humanitarian financing and its accompanying aid architecture need to recognise the fundamentally different nature of humanitarian action in conflict. Current strategic thinking and policy recipes blur the differences between working in protracted and acute crises, and across natural disasters, armed conflicts, complex emergencies and health epidemics. There are obvious and important distinctions to be made about which type of funding best supports emergency response in conflict, the type of response capacities that are needed, the importance of a speedy response, and the actors best-placed to deliver meaningful assistance.

⁶⁸ Humanitarian Policy Group, *Time to let go*. Op. cit.

More actors than expected are willing to step up and enhance emergency response capacity to bridge the emergency gap

Some operational organisations have the might but not yet the mindset, and those that have the mindset do not always have the necessary resources Over the past two years, the Emergency Gap Project has drawn attention to the relevance of emergency response and the potential of current global humanitarian policies and trends to enable or disable effective emergency response in acute conflict. The engagement round and discussions revealed that more actors than expected are willing to step up and enhance emergency response capacity to bridge the emergency gap. Some operational organisations have the might but not yet the mindset, and those that have the mindset do not always have the necessary resources. In general, the way most INGOs are funded does not allow them to generate and maintain the costly structural capacity needed to respond to emergencies and to manage insecure contexts.

Some donors are sensitive to the problem and want to see an improved emergency response among their partners. At the same time, many donor agencies and departments feel powerless to change the policy and organisational set up in their governments, or are not inclined to challenge strategic decisions. While many will not agree with our analysis and proposed way forward, others are willing to explore new partnership models and ways to finance emergency response.

The analysis and discussions undertaken as part of the Project have also informed a series of conclusions and key messages to raise awareness of the need to maintain operational and conceptual space for principled humanitarian action and to invest in the necessary structural capacity and skills. These suggest a direction for further strategic and operational enquiry, rather than providing a blueprint for action. Future operational discussions should take place between humanitarian organisations (including MSF) and donors to explore these themes, aiming for a more specific and actionable agenda.

CONCLUSIONS AND KEY MESSAGES

1. The political environment remains the key factor in the shrinking space for humanitarian action.

This space is already compromised by growing instrumentalisation and obstruction of humanitarian aid, blatant disrespect for IHL and refugee law and the double threat posed by terrorism and counter-terrorism. But even when some humanitarian space is available, the willingness and capacity of the humanitarian sector to respond quickly and provide critical assistance in a conflict is also compromised.

2. Tweaking the existing systems, with its current parameters for reform, will not result in better outcomes for emergency response.

The current system is a result of political choices that, if anything, are becoming more entrenched, and is weighed down by the bureaucratic and integrated nature of current humanitarian policies and practices.

Therefore, asking this 'traditional machine' to become more agile and independent of the wider political, economic, security and strategic goals is unrealistic. While an improved emergency response may not be the main priority of the system, the UN and donors can proactively and intentionally create a space where organisations that are willing to take a more active role in the early phases of crises can find pragmatic ways to do so and deliver results.

3. Conceptually, humanitarian policy is focused on the HDN, which has now expanded to peace and security under the NWOW.

The emphasis is on common goals, progression is one-directional and the strategies are always integrative and aimed at state building/ reinforcement. In this conceptual framework, the relevance of emergency response is not sufficiently recognised, the role of independent humanitarian action questioned and the specificities of conflict ignored. While the idea of a global and unifying solution is appealing and visionary, it may be unrealistic in the short term.

This approach addresses the increasingly chronic nature of needs, yet it may overlook the fact that one key characteristic of protracted crises is that as well as being drawn out, they often see peaks of acute crisis (Central African Republic, South Sudan, Democratic Republic of the Congo, Iraq and Yemen were prime examples in 2017).

Therefore, humanitarian policy cannot only focus on the way out of a crisis. There needs to be greater recognition that acute needs will continue as new crises erupt or more stable crises regress into acute phases. Humanitarian policy must, therefore, conceptually be able to hold both, and efforts to make the transition from humanitarian to development approaches cannot come at the expense of emergency response. 4. Structurally, current centralising tendencies should be tempered and the principle of a humanitarian ecosystem should be embraced to allow the creation of reliable surge capacity, driven by an emergency mindset and results oriented action.

In an ecosystem, one size does not fit all, and different operational and strategic approaches nurture and support collective outcomes even when they do not collaborate directly with each other. From a humanitarian architecture point of view, this is based on the spirit of a network (not necessarily a formal network structure).

From this perspective, and despite the major access restrictions faced by humanitarian actors, one 'quick fix' for emergency response capacity would be to ensure a minimum number of competent organisations with the capacity, knowledge, readiness and deployability to provide coverage and deliver reliably in acute crises.

This would require emergency-minded organisations and donors coming together to build a reliable, well-prepared and rapidly-mobilised international surge capacity that can deploy and deliver assistance in the initial phases of a crisis. Such surge capacity would be guaranteed by a small and informal network of international organisations capable of delivering consistently, in a timely manner, at scale and across all lifesaving sectors in difficult settings.

Such a network requires information sharing, gathering and analysis, as well as operational coordination to establish common parameters and red lines, and to avoid coverage gaps or overlaps. While MSF is reluctant to coordinate its operations consistently with other actors on the grounds of preserving its independence, it should not confuse being coordinated with being co-opted.

To maintain the necessary agility and the capacity to work in volatile environments, **it is crucial to preserve operational independence and to work in a more informal frame of collaboration, free from the bureaucratic burdens that characterise common response plans and protected from competing political agendas and wider coherence considerations.** Operational independence (in other words, the ability to make and execute operational decisions), requires a financing framework that focuses on results (flexible, timely and free of impossible conditions), strong competence in security management⁶⁹ and negotiated access,⁷⁰ specialised pools of people available for rapid deployment and independent logistics and transport.

⁶⁹ Linked to programme management.

⁷⁰ Which is, in turn, aided by "walking the talk" (in terms of principles) and "delivering" (these two elements retro-feed and, therefore, allow the maintenance of access and the possibility of gaining further access).

The development of this surge capacity should not detract from the sectors' impressive investments in areas of disaster risk reduction, vulnerability reduction, the mitigation of natural and man-made risks, the response to chronic needs, and resilience building in contexts of natural disasters and protracted crises. Instead, international surge capacity will collaborate actively with regional, national or local actors capable of delivering assistance to address critical needs in a context-specific manner. This would ensure that the surge capacity does not bypass existing capacities, process and plans, while providing the necessary focus, dedicated resources and relevant skills and structures for the effective delivery of emergency assistance and protection. This is largely context specific, so international surge actors need to be able to work with national/regional capacity when available, or completely alone when there is no such capacity is in place.

A new surge network would aim to deliver lifesaving support for at least the first six months of a crisis (whether it is new, or a peak in a protracted crisis), with the initial focus on reducing mortality. That focus would then expand to encompass more long-term objectives —with the surge network either aiming to deliver that additional support itself, or to set things up so this work can be handed over to others at a later stage.

5. While it is crucial at policy level that the humanitarian sector is able to simultaneously pursue long-term and short-term ambitions and objectives, tensions between the two dimensions are likely to emerge on the ground in acute emergencies, particularly during conflicts or political crises in contexts where there is a strong focus on, and investment in, development. When these tensions prove irreconcilable, it is imperative that the sector retains the ability to guarantee effective and impartial response to critical needs in situations of acute conflict.

6. The need to shift focus as crises evolve is important, and is linked to the need to recognise that 'one size does not fit all' and that crises do not evolve in a linear manner.

Depending on the level of acuteness, the focus of the response will need to adapt and this should inform the priorities. At the most acute end of the spectrum, the focus should be on addressing critical needs as quickly as possible. At the other end, the response can be more sophisticated, complex and formalised (Figure 4).



In the face of mounting human suffering around the world, the need for an effective humanitarian response capacity in emergencies is more pressing than ever. The emergency gap will only grow bigger if the different parts of the humanitarian community continue to blame each other for their risk-averseness and fail to recognise the need to strengthen their focus, investments and capacity to deliver.

If the sector is to bridge —or at least reduce— the emergency gap, it has to acknowledge the need to pursue long and short-term aid objectives simultaneously. This requires reinstating emergency response as a critical area of intervention by cultivating the humanitarian mindset of emergency-focused organisations that are capable of operating in conflict settings, and backing their operations with the necessary structural investments.

SPECIFIC RECOMMENDATIONS TO KEY ACTORS

The following recommendations are directed to key actors that have both an intrinsic responsibility and a critical role to play in improving the space and conditions for effective emergency response in acute conflict. However, they do not pretend to be the only solutions to the challenges outlined in this report. They are based on the lessons learnt from MSF operations and the Emergency Gap Project's reflections on the state of emergency response. Other organisations with different operational filters may propose different and better solutions based on their own policies and practice. In that sense, these recommendations are simply a contribution to an ongoing debate. They aspire to be an invitation to a dialogue on how to build a humanitarian sector that is better able and equipped to remain on the ground and deliver a meaningful emergency response to those trapped in conflict.

MESSAGES FOR DONORS⁷¹

Policy

As international frameworks are being questioned, multilateralism is being scrutinised, and the foundations of international aid are being redefined, donor aid agencies have a critical role to play in reasserting the critical nature of an enabling policy framework for humanitarian action. It is crucial to preserve the principled nature of humanitarian action wherever it is undertaken, and particularly in the context of armed conflict, political violence, counterterrorism security and military operations.

The current surge in conflicts and situations of acute violence around the world has shown that the humanitarian community lacks the capacity and ability to respond in an adequate manner. **Emergency response remains a core mandate for the humanitarian sector and needs support and adequate resources.**

While humanitarian action can contribute to achieving long-term ambitions such as the SDGs, its scope, priorities and timeframe remain fundamentally different. **Timeliness and the critical importance of meeting immediate needs should be reinstated as key points of focus and cannot be sacrificed for other strategic goals.**

⁷¹ These recommendations are directed to donor aid agencies and departments in charge of implementing governmental aid policies. In that sense, they address the internal elements of the humanitarian sector and do not presuppose that donor agencies and aid departments have the ability to shape their governments' global political, security and other strategic goals.

Financing and capacity

The humanitarian sector systematically struggles to deliver a principled and meaningful response in conflict. Capacity needs to be in place before an emergency strikes and cannot be replaced by the mere injection of additional funding once a crisis is unfolding.

The political nature of the UN structures and organisations in armed conflict and contexts of political instability often precludes them from acting as neutral brokers of access and humanitarian space. Consequently, **donors must support the operational independence and negotiation capacity of implementing humanitarian organisations on the ground**.

Adequate response capacity has been shown to rest upon robust organisational and operational structures, including logistics, security management, adequate human resources and access to sufficient (and unrestricted) funding that allows for the proper resourcing of the organisation and the rapid launch and scale-up of operations. **Donors must meet their commitment to provide adequate support to frontline organisations, including with core funding.**

Working in conflict requires a degree of freedom of action to reconcile the scarcity of robust and reliable data, rapidly evolving circumstances, and the need to adapt operations. When working in conflict it is also important to assume some level of financial loss and the risk of diversion of assets. Donors must adapt their accountability frameworks to support, rather than further stifle, the ability of implementing organisations to take the necessary risks.

To gain visibility for the actual operational gaps and to avoid overstating presence and coverage, donors should require all implementing partners (both multilateral organisations and NGOs), to accurately represent their level of response and their real capacity to address critical needs.

MESSAGES FOR UNITED NATIONS (UN) BODIES, AGENCIES AND SYSTEM

For the Office of the United Nations Secretary-General

At a time of changing structures and evolving policy frameworks, the UN has a critical role to play in reasserting the vital importance of an independent humanitarian aid sector for the lives, prosperity and well-being of nations. The UN should, therefore, lead a process to **relegitimise humanitarian action and its core function of emergency response, including its short-term ambitions to save lives and alleviate suffering in real time, impartially and independently, firewalled from political agendas or considerations.** At a country level, this should translate into administrative and legal frameworks that enable independent humanitarian emergency response for all actors on the ground, and not only for partners in the Strategic Planning/Humanitarian Response Plan. These frameworks should have both a political dimension (relating to acceptance and recognition of the value of humanitarian action) and a more practical focus on fast-tracking administrative procedures for emergency response such as: issuing visas; streamlined in-country registration of humanitarian organisations; facilitating imports, supply and procurement; dispensing travel permits; and facilitating licenses for medical staff. OCHA should be in charge of this effort, with the enabling frameworks negotiated for the humanitarian ecosystem at large, and not only for formal UN partners.

While security risks must be recognised and examined at all times, it is important to acknowledge and accept the inherent risks and challenges of humanitarian action in conflict and champion the 'stay and deliver' principle with the same determination as the protection of staff and assets.

There should be efforts to differentiate the UN humanitarian agencies from the more political and military UN bodies in the field to preserve the independence of the sector and its operational ability to coordinate and deliver. The perception of independence is a demonstrated enabler of access and quality of response.

For the United Nations Office for the Coordination of Humanitarian Affairs (OCHA)

As the office tasked with leading and coordinating the overall response to humanitarian crises, OCHA is in a unique position to ensure a realistic portrayal of in-country response capacity and to press for an **honest mapping of the emergency gap**, **both in terms of field presence and effective coverage of critical needs**.

Within its purview to create humanitarian space and advocate for measures to meet people's needs, OCHA's Policy Section should systematically assess and map the risks that all emerging global policy frameworks, such as the NWOW and other elements from the post-WHS agenda, pose for principled humanitarian action. OCHA should lead on developing the appropriate mitigating measures to ensure that the core humanitarian principles are upheld and that all development and peace efforts can transition effectively to —and support—emergency response in the event of an acute crisis.

OCHA should promote the narrowing of the scope of humanitarian activities covered under the Humanitarian Response Plans that are funded through humanitarian budgets, while simultaneously calling for the re-engagement of all developmental, economic and political actors and approaches to support the necessary long-term activities and approaches.

MESSAGES FOR INTERNATIONAL NON-GOVERNMENTAL ORGANISATIONS (INGOs)

All humanitarian actors have a responsibility to reclaim a space for fast and responsive humanitarian action, rooted in principles and targeting critical needs wherever they are found. **Emergency-minded INGOs should actively pursue and champion a humanitarian environment that is conceptually and operationally conducive to emergency response**.

While **operational delivery is the critical arena for upholding emergency response** and protecting the humanitarian space, **it should also be championed at coordination and planning levels in the field, and through policy involvement at the global level**.

To ensure an adequate resourcing environment for emergency response, like-minded INGOs should reach out proactively to government and multilateral donors to seek the right funding and partnership conditions for an effective response to critical needs.

While it is paramount that donors should become more tolerant of fiduciary risk for humanitarian operations in conflict settings, **INGOs have an obligation to accurately represent their capacity, presence and coverage in humanitarian emergencies**. The current trend of flag-planting and overstating of presence to secure continued funding should not be tolerated by any part of the humanitarian sector.

Emergency-minded INGOs should **match the emergency mindset and humanitarian imperative as drivers for action with the necessary structural investments** in human resources, technical know-how, independent logistics capacity, in-house competence in negotiated access and security management, **supported by their main donor partners**.

MESSAGES FOR MÉDECINS SANS FRONTIÈRES (MSF)

Given the new holistic and integrative policies that are being embraced by the humanitarian sector, there are concerns about whether traditional emergency responses and humanitarian principles will have adequate support from the new aid paradigm. If not, the emergency gap is likely to grow, and quickly. **MSF should take a critical look at its own responses to recent major crises** to inform internal strategic discussions that examine:

- 1. the investments needed for improved emergency response
- 2. the scope of MSF's interventions when there are insufficient actors on the ground, both in terms of assistance and protection
- 3. and intersectional dynamics in large emergencies in order to address internal tensions between operational autonomy and intersectional consistency (i.e. competition versus complementarity).

The lack of human resources has been identified, in general, as the main bottleneck for the organisation's ambitions in volatile contexts and complex emergencies. **MSF needs to work on global strategies to ensure the generation of senior capacity with the right mindset and the necessary competencies. This is essential to manage rising complexity and secure the volume of people needed to maintain the organisation's growth, spurred in part by geographic and sectoral overstretching in response to the emergency gap.**

The emergency mindset has been identified as a key driver for effective presence and delivery in acute crises, and particularly in conflict settings. To ensure adequate support for MSF operations in the field, it is critical that the emergency mindset is also cultivated widely at headquarters level. In parallel, MSF should also ensure that organisational support capacity at the headquarters level is better streamlined for the current volume and type of emergency response in which MSF is engaged.

The response to the pace of acute conflicts and the scale of critical needs cannot be served by the current, limited number of operational organisations that are able to deliver timely and relevant lifesaving assistance consistently during acute crises in places that are insecure and hard-to-reach. MSF should **engage in solutions-oriented discussions with traditional and new humanitarian actors that are willing to increase their role in emergency response, and with the donors willing to support them.**

While maintaining its focus anchored in operational delivery, **MSF should commit to** influencing both policy and practice of emergency response through realistic and pragmatic objectives, particularly at field level.



Bibliography

Médecins Sans Frontières (MSF) Emergency Gap Series:

Thematic papers

Emergency gap series 1: de Castellarnau, M., and Stoianova, V., *Humanitarian action critically wounded*, April 2016. https://arhp.msf.es/emergency-gap-papers-aid-environment/emergency-gap-humanitarian-action-critically-wounded

Emergency gap series 2: Cunningham, A., 'Stay and Deliver' Yemen Report, April 2016. https://arhp.msf.es/emergency-gap-papers-aid-environment/stay-and-delivervemen-report

Emergency gap series 3: Schenkenberg, E., *The challenges of localised humanitarian aid in armed conflict*, November 2016. https://arhp.msf.es/emergency-gap-papers-aid-environment/emergency-gap-challenges-localised-humanitarian-aid

Emergency gap series 4: Dubois, M., *The cost of coherence*, December 2016. https://arhp.msf.es/emergency-gap-papers-aid-environment/emergency-gapcost-coherence

Emergency gap series 5: Buth, P., *Insecurity – always an insurmountable obstacle?* January 2017. https://arhp.msf.es/emergency-gap-papers-aid-environment/emergency-gapinsecurity-always-insurmountable-obstacle

Emergency gap series 6: Stoianova, V., *Humanitarian financing: is it all about money*? April 2017. https://arhp.msf.es/emergency-gap/humanitarian_financing_is_it_all_about_money

Case studies

Cunningham, A., Enablers and Obstacles to Aid Delivery: Yemen Crisis 2015, May 2016. https://arhp.msf.es/emergency-gap-case-study-aid-environment/enablers-andobstacles-aid-delivery-yemen-crisis-2015

Cunningham, A., *The Evolution of Emergency WASH in Humanitarian Action*, June 2017. https://arhp.msf.es/emergency-gap-case-studies/evolution-emergency-wash-humanitarian-action-

Edwards, J., *Niger, Jan 2015–Aug 2016*, November 2016. https://arhp.msf.es/emergency-gap-case-study-aid-environment/niger-jan-2015-%E2%80%93-aug-2016 Edwards, J., 'North-east Nigeria', April 2017. https://arhp.msf.es/emergency-gap-case-studies/north-east-nigeria

Pozo Marín, A. Perilous Terrain: Humanitarian action at risk in Mali, March 2017. https://arhp.msf.es/emergency-gap-case-studies/perilous-terrain-humanitarianaction-risk-mali

Additional sources

ALNAP, State of the Humanitarian System Report, 2015.

Ban, Ki-moon, One Humanity; Shared Responsibility, Report of the Secretary-General for the World Humanitarian Summit, United Nations, 2016.

Brauman, R. and Neuman, M., "MSF and the aid system: Choosing not to choose", CRASH Foundation, Médecins Sans Frontières, July 2014.

Development Initiatives, Global Humanitarian Assistance Report 2014, Chapter 7.

Fox, H., Stoddard, A., Hammer, A., Davidoff, J., *Response to the Mosul Offensive*, 2016–2017: A Review of Issues and Challenges, Humanitarian Outcomes, March 2018.

Haver, K., *Tug of war: ethical decision-making to enable humanitarian access in highrisk environments*, Network paper Number 80, Humanitarian Practice Network, November 2016.

Haver, K. and Carter, W., *What It Takes: Principled pragmatism to enable access and quality humanitarian aid in insecure environments*, Humanitarian Outcomes, November 2016.

Healy, S. and Tiller, S., *Where Is Everyone? Responding to Emergencies in the Most Difficult Places*, Médecins Sans Frontières, July 2014. http://www.msf.org/en/article/msf-report-where-everyone

High-level Panel on Humanitarian Financing Report to the Secretary General, *Too important to fail – addressing the humanitarian financing gap.* January 2016. https://reliefweb.int/report/world/high-level-panel-humanitarian-financingreport-secretary-general-too-important-fail

High-Level Workshop on the New Way of Working – Advancing Implementation, Outcome Note, Copenhagen, 13–14 March 2017.

Humanitarian Outcomes, *Aid Worker Security Report 2017.* https://aidworkersecurity.org/sites/default/files/AWSR2017.pdf

Humanitarian Policy Group, *Time to let go: A three-point proposal to change the humanitarian system*, Overseas Development Institute, April 2016.

Inter-Agency Standing Committee, Operational Peer Review, Internal Report: *Response to the crisis in South Sudan*, July 2014.

International Council of Voluntary Agencies (ICVA), *The Grand Bargain: Everything you need to know*, briefing paper, 2017.

International Council of Voluntary Agencies (ICVA), *The New Way of Working Examined*, briefing paper, 2017.

Médecins Sans Frontières/Doctors Without Borders (MSF) "Emergency Now: A call for Action Beyond Summits. MSF's reflections on the World Humanitarian Summit", May 2016. http://www.msf.org/en/article/emergency-now-call-action-beyond-summits

MSF Operational Centre Barcelona Athens (MSF OCBA) Strategic Plan 2014-2017.

Norwegian Refugee Council, Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO), HERE-Geneva, *Principled Humanitarian Assistance of ECHO Partners in Iraq*, Geneva, May 2017.

Outcome document from the High-Level Workshop on the New Way of Working – Advancing Implementation, 13–14 March 2017, Copenhagen.

Stoddard, A., and Jillani, S. with Caccavale, J., Cooke, P., Guillemois, D., and Klimentov, V., *The Effects of Insecurity on Humanitarian Coverage*, Secure Access in Volatile Environments (SAVE) research programme, Humanitarian Outcomes, November 2016.

Stoianova, V., *Review of NGOs' Experience with the Syria-Related Pooled Funds*, ICVA, December 2014.

United Nations, After the World Humanitarian Summit. Better Humanitarian-Development Cooperation for Sustainable Results on the Ground by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), the United Nations Development Programme (UNDP), the Office of the United Nations High Commissioner for Refugees (UNHCR), the United Nations Children's Fund (UNICEF), the World Food Programme (WFP), and the World Bank.

United Nations Office for the Coordination of Humanitarian Affairs (OCHA), *Evaluation of the Common Humanitarian Fund: Global Synthesis Report*, May 2015.

United Nations Office for the Coordination of Humanitarian Affairs (OCHA) *Global Humanitarian Overview 2018*, December 2017. http://interactive.unocha.org/publication/globalhumanitarianoverview/

United Nations Office for the Coordination of Humanitarian Affairs (OCHA), *To Stay* and Deliver, Good practice for humanitarians in complex security environments, 2011.

United Nations Office for the Coordination of Humanitarian Affairs (OCHA), Norwegian Refugee Council, Jindal School of International Affairs, *Presence and Proximity: To Stay and Deliver Five Years On*, 2016.



Annexes

ANNEX 1: CASE STUDIES SUMMARY TABLE

COUNTRY	CRISIS CONTEXT	START OF ACUTE PHASE OF CRISIS	MOST ACUTE GAP
Yemen 2015*	In late 2014, ongoing conflict between the Houthis and the Government of President Hadi left the Houthis in control of the capital, Sana'a, and Hadi resigning as president. To rescue the Hadi Government, a Saudi-led coalition of nine other Arab countries began air strikes on 25 March 2015. Most agencies (other than ICRC and MSF) left in March 2015 after the UN decision to evacuate, only starting to return in June of the same year, failing to provide the appropriate humanitarian assistance at a critical time.	Since the start of the targeted air strikes in March 2015	From March 2015 to December 2015 (at the very least)
Niger/Diffa 2015-2016*	Niger is characterised by chronic malnutrition, food insecurity, poor access to health services and displacements. In May 2013, following a series of Boko Haram (BH) attacks, the Government in neighbouring Nigeria declared a state of emergency and launched a military offensive in three states in northeast Nigeria, including in Yobe and Borno, which borders Niger. As a direct result of this violence and further BH attacks, waves of displaced people began crossing the border into Niger. At the same time, many humanitarian organisations began to evacuate as a result of security concerns. The subsequent military counter-measures by the army of Niger left the area off limits to humanitarian responders. By the end of 2015, there were over 230,000 displaced people in Diffa state, including refugees, Nigerien returnees and IDPs.	Since the end of 2014	December 2014 to June 2016
North East Nigeria 2015-2016*	As with many conflict-related crises, the emergency in north-east Nigeria has deep and complex roots in the history of the region. The conflict began in 2009 and soon escalated beyond the control of the authorities. It unfolded amid pre-existing political, social and economic tensions, making an effective humanitarian response exceedingly difficult. In 2013, President Jonathan declared a state of emergency across three states, following attacks by insurgents. The crisis resulted in a sprawling humanitarian disaster with refugees arriving in Niger, Cameroon and Chad in large numbers from late 2014. During a scale-up of the counter-insurgency campaign by Nigerian security forces in 2015, Maiduguri saw a huge influx of IDPs and it became clear that a significant crisis was unfolding. A large proportion of the population was effectively trapped in a war zone and cut off from humanitarian access. An unknown number of people died as a direct result of the conflict and an increase in food insecurity and malnutrition.		Early 2015 to late 2016
Central African Republic (CAR) 2013-2015*	The Séléka rebellion started In December 2012. In the year that followed, this protracted crisis became increasingly complex with the advance of Séléka forces and the political and intercommunal violence that would leave almost one-fifth of the population displaced and half in need of assistance. The coup d'état in March 2013 generated further violence, including attacks on humanitarian assets. This led many UN agencies to evacuate and they did not return until September 2013. The crisis became more "visible" when, in November 2013, France and the US warned of an impending genocide. In December 2013 a peak of violence swept the capital, Bangui, just as the UN declared a L3 system-wide emergency (the L3 was deactivated in May 2015).	Since the coup d'état in March 2013	March 2013 to April 2014
South Sudan 2013-2015*	A new conflict broke out in December 2013 following a political contest between President Salva Kiir and Vice President Riek Machar, with initial fights between Dinka and Nuer groups that escalated into violence in the streets of the capital Juba, and SPLA units splitting largely along ethnic lines. The news sparked mutinies, splits and attacks nationwide, with heavy fighting in the major cities of the three states of Upper Nile (Malakal), Jonglei (Bor) and Unity (Bentiu), as well as operations against opposition in heartlands such as Leer and Nasir. This peak of violence sparked the massive displacement of populations (over 800,000 people), especially from the three conflict-affected states in the acute phase of the crisis (up to March 2015). A L3 emergency was declared on February 2014 and de-activated in May 2016.	December 2013	l December 2013 to June 2014
Iali 2017*There has been an active conflict in northern Mali since 2012, with a volatile security situation and restricted humanitarian access. Epidemic diseases are prevalent, resulting in high child mortality, especially in hard to-reach areas. The humanitarian situation remains precarious because of the volatile situation and the very limited access of the population to basic services, particularly health care. In most areas in the North, there is little presence or provision of services by the State. In Kidal, the State is completely absent and access to health care (including for nomadic communities) has been jeopardised by the withdrawal of INGOs because of insecurity. There are three foreign military operations in Mali supporting the Malia Government and its armed forces in the fight against the non-signatory armed groups, under the principles of integration, stabilisation and counter-terrorism.		Since the start of the conflict in 2012	There have been gaps in access and coverage since the start of the conflict in 2012

COUNTRY	SCOPE OF THE RESPONSE			
Yemen 2015*	Timeliness There were significant delays in the humanitarian response. Following the full-scale evacuation in late March 2015, most organisations did not return until June and even then continued to lead operations from Amman, Jordan. Upon their return, UN and many INGOs were bunkered down in Sana'a as a result of security concerns that delayed the response and limited the coverage of hard-to-reach areas.			
	Responding to scale	Even though humanitarian agencies used national staff and partners to deliver assistance during the evacuation period, the limited presence of international staff in locations outside Sana'a and Hudaydah —even after their return to the country—severely impeded the ability to deliver assistance, and the adequacy of presence and coverage.		
	Adequate coverage of critical needs	The full-scale evacuation of humanitarian organisations at the start of the conflict meant that critical needs were not addressed during this most crucial time. Limited field presence and lack of proximity to people affected by the crisis impeded a clear understanding of humanitarian needs and consequently hampered the delivery of assistance in terms of scale, speed and appropriateness of response.		
Niger/Diffa 2015-2016*	Timeliness	The initial response was slow, particularly in more remote areas. The start of the crisis was linked to attacks that led to the evacuation of many humanitarian actors, resulting in further delays in humanitarian operations.		
	Responding to scale	Response was not to scale, particularly in the light of the well-established presence and activities of the aid community before the crisis. There was a failure to achieve a level of response that could reasonably be expected —and that is indeed advertised— as being within the capacity of the international humanitarian system to deliver. Efforts were made to plug the gaps, but were hampered by inflexible strategies, poor implementation and weak contingency planning (partly the result of the fluid nature of this crisis).		
	Adequate coverage of critical needs	Critical needs were partly covered. Many implementing agencies failed to ensure geographically impartial coverage of vulnerable populations, focusing instead on assisting those easiest to access. In Diffa state, many of the needs of the crisis- affected populations were not being met, there were gaps in coverage in every sector, and Sphere standards were not being met even where some coverage was claimed. In addition, there were tens of thousands of displaced people beyond the reach of humanitarian aid in areas where the military denied access or that were deemed too dangerous to access by the internal security protocols of the humanitarian actors themselves. There was little advocacy aimed at gaining access to cut-off populations.		
Niger/Diffa 2015-2016*	Timeliness	The sector was slow to recognise the humanitarian crisis in early 2015; late to sound the alarm and act in the critical period from the end of 2015 to the summer of 2016; and slow to gear up after June 2016. After the summer of 2016, the scale of the crisis in Borno, together with improved access, mobilised donors, UN leadership, NGOs and the Nigerian authorities to radically increase the humanitarian response. However, that scale-up was still painfully slow, and at the beginning of 2017 some NGOs were still waiting for funding to arrive, the UN system claimed to be only a quarter of the way to 'cruising altitude', and the resources of the Nigerian Government had not yet scaled up to meet the needs.		
	Responding to scale	There were numerous problems and constraints in scaling up the response. The UN called for international assistance as late as April 2016, with donors and humanitarian organisations only mobilising after June that year. This meant that the response was both slow and not to scale for most of the crisis period (and was still deemed insufficient during the first half of 2017).		
	Adequate coverage of critical needs	Critical needs were not addressed adequately, particularly in remote locations. There were very high numbers of displaced people during 2015 and 2016, with only a fraction of them in receipt of official relief, while the overwhelming majority of assistance was delivered informally by the host community.		
Central African Republic (CAR) 2013-2015*	Timeliness	It took the humanitarian community a long time to scale up its response. Most UN agencies and development actors evacuated following the coup d'état and did not return until September 2013, and then bunkered down in Bangui. The system reacted following the L3 activation, yet it took nearly four months for assistance to start flowing outside of the capital.		
	Responding to scale	The most pronounced impact of the L3 was the surge of experienced and high-quality UN staff into the mission and the arrival of new INGOs. The Level 3 also raised the profile of the country significantly. Without it, there would have been far less financing and fewer actors. However, field presence was already weak before the start of the crisis in 2013, after which many agencies greatly reduced their presence in the field or indeed in the country as a whole. This resulted in insufficient implementation capacity, including a lack of staff able to manage security, assess needs and undertake aid delivery.		
	Adequate coverage of critical needs	Critical needs were not properly addressed during the most acute gap. The UN's failure to respond adequately prompted MSF to denounce the situation in an open letter: [http://www.msf.org/en/article/central-african-republic-open-letter-un-humanitarian-system]. The situation improved after the L3 declaration, but important gaps remained, particularly in terms of the response outside Bangui.		
South Sudan 2013-2015*	Timeliness	Despite a successful UN fundraising campaign, the response was slow to deploy in the early months of 2014, which undoubtedly resulted in preventable deaths and suffering. The response served the more accessible locations, such as Mingkaman and the Juba PoC sites, rather than deep-field locations. Even in major centres like Malakal, IDPs and humanitarian staff described assistance as unacceptably limited until February 2014 (two months after the crises began) and not improving markedly until April/May. It was not until June when relief began reaching affected people in sufficient volumes and with wide enough coverage to stabilise the situation.		
	Responding to scale	While there were many humanitarian and development agencies working throughout South Sudan, few were in a position to respond when the conflict started. In the first half of 2014, donors such as ECHO and DFID became concerned that remote populations were not being served quickly or adequately. The fighting in Juba had sparked a mass exodus of aid personnel and had caught humanitarian organisations unprepared. Many of the evacuated personnel did not return for three months.		
	Adequate coverage of critical needs	Critical needs were not addressed evenly across the country. The response focused principally upon the needs of civilians within the PoCs. Although some rapid response missions lasted several weeks and led to long-term operations, the majority were short interventions, with only transient contact with conflict-affected people in remote locations. Once aid agencies had established projects and bases in the hubs there was a natural tendency for them to stay there, so it was only the most dynamic agencies that continually sought to address unmet needs in new locations.		
Mali 2017*	Timeliness	Humanitarian actors, including MSF, either struggle to provide a timely and efficient response or are not present at all.		
	Responding to scale	In Northern Mali, the withdrawal of NGOs as a result of deteriorating security has left a limited presence and the ability to deliver aid has often been reduced to flash visits and remote operations. While the situation was not defined as a mortality crisis, humanitarian assistance is sorely needed and absent.		
	Adequate coverage of critical needs	There is limited coverage as a result of severe limitations in access in many areas in Northern and Central Mali.		

COUNTRY	CONCEPTUAL EL	EMENTS
Yemen 2015*	Political agenda (subordination of humanitarian action)	The UN's acceptance of Saudi funding for the Yemen Humanitarian Response Plan caused controversy among humanitarian actors as it was seen to indicate political manipulation of the aid effort. The lack of strong and consistent Western pressure has given Saudi Arabia a free hand in its prosecution of the war. Also, because of the politically sensitive nature of the Middle- East, the views of Western governments are very influential, resulting in external political pressures by UN member states on the UN.
	Localisation focus	International organisations relied on national staff and partners to deliver assistance during the evacuation period. Yemeni NGOs and CSOs were also able to receive funding directly through the Yemen pooled funding mechanism. Principled action, however, was an issue. Overall, the neutrality of local organisations was tested as national staff in charge of operations during evacuation were put under pressure by the de-facto authorities, other non-state armed groups, and their communities.
	Ability to shift gears between chronic and acute phases	At the time of the evacuation most aid actors working in Yemen were implementing development-oriented programming. Therefore, a transition from development activities to emergency operations had to take place during the period before agencies began to return to the country. Shifting gears was a major challenge for long-serving multi-mandate organisations. It was unfair for multi-mandate INGOs to assume that national staff could so easily make the transition from development to emergency work.
Niger/Diffa 2015-2016*	Overstretching of humanitarian action towards longer-term approaches	Despite the acute nature of the crisis, the development practice mindset predominated in the larger established organisations and government agencies, leaving them inflexible and poorly adapted to react to changing circumstances in a timely manner. The long-standing development focus in humanitarian activities in Niger had resulted in de-skilling humanitarian actors in terms of emergency response capacity. This inertia manifested in the unwillingness of staff to adopt new modes of action as well as the unwillingness of some donors to allow existing development programmes to quickly recalibrate to meet new crisis-related challenges. This was seen particularly in the resistance to drop fees for healthcare services, even when this was a clear barrier to healthcare access for displaced populations.
	Localisation focus	There was a strong push for localised aid despite the widespread opinion across the humanitarian community that local actors in Niger did not have the capacity to manage emergency response work, despite decades of humanitarian assistance in the country and capacity-building initiatives. In spite of the acuteness of the crisis, there was continued pressure for INGOs to engage in capacity-building partnerships from both the Government and international donors. Some INGOs and UN agencies moved to direct implementation to ensure better results. Other INGOs, however, continued to programme money through capacity-building activities, admitting that the quality of service was not easy (or even possible) to manage —especially where services are delivered through government departments / Ministry of Health.
	Ability to shift gears between chronic and acute phases	Unlike other conflict-related emergencies, the crisis in Diffa occurred in the context of a well-established international aid infrastructure that was already delivering development and humanitarian programmes. But there were challenges to the capacity to shift gears into effective emergency response mode as a result of a lack of experienced personnel, coupled with the unwillingness of donors to adapt existing long-term programming to emergency response swiftly enough and of aid personnel to adopt new modes of action.
North East Nigeria 2015-2016*	Political agenda (subordination of humanitarian action)	The political context in Nigeria and in Borno state worked against the deployment of international humanitarian actors. This was a result of politically motivated denial from local authorities that did not want to acknowledge the severity of the crisis, fearing negative perceptions while wanting to claim victory over the insurgent forces and position the military offensive as part of the global war on terror.
	Overstretching of humanitarian action towards longer-term approaches	Top-down policy imperatives favoured development goals over immediate humanitarian needs and drove operational choices and political positioning: UN agency priorities included development goals that diverted attention from the high levels of immediate needs. They also shaped the proposals made by INGOs to donors, which included developmental approaches re-branded as humanitarian activities.
	Localisation focus	The strong role of the national government in overseeing the humanitarian response led to delays in recognising the scale of the crisis and government-imposed limitations on humanitarian access that were unchallenged by the sector.
	Ability to shift gears between chronic and acute phases	Large and long-established development programmes run by UN agencies and INGOs and delivered by long-serving staff, including managers, were deeply embedded within Nigerian government ministries. OCHA was not yet fully mobilised in the North East, the WFP was not in the country, and the other UN enablers present in Nigeria were all development actors with little or no capacity, funding or apparent willingness to be in the North East during this period of violence.
Central African Republic (CAR)	Localisation focus	There was no prevalent focus on localised aid, perhaps because of a lack of local capacity.
2013-2015*	Ability to shift gears between chronic and acute phases	Available evidence showed that the scale-up of outputs was disappointing. There was a lack of available data to quantify progression in the response, a point criticised by the UN's own Operational Peer Review. In the case of food (the single most common form of humanitarian assistance), WFP figures showed that the number of beneficiaries barely increased at all in the six months from December 2013 to June 2014. The lack of sufficient actors on the ground and the evacuation of many of the UN and development actors was a major factor in the lack of ability to scale up.
South Sudan 2013-2015*	Localisation focus	There had been an important focus on localisation in South Sudan. However, at the time when many of the INGOs and UN personell had been evacuated, many national staff also fled or could not work because of fear of attacks based on their ethnicity.
	Ability to shift gears between chronic and acute phases	As noted, few of the humanitarian and development agencies already working throughout South Sudan were in a position to respond when the conflict started, largely as a result security concerns and the exodus that followed the start of violence in Juba.
Mali 2017*	Political agenda (subordination of humanitarian action)	The combination of integration, stabilisation and counter-terrorism rationales is a potentially explosive mix for humanitarian action, and Mali is the only country where the three co-exist and overlap explicitly. On integration: The role of MINUSMA, coupled with the shared leadership of the political and humanitarian branches,leads to a general perception of conflict of interest with the assumption that political objectives will trump humanitarian needs. On stabilisation: MINUSMA seeks to extend the presence, authority and legitimacy of the Government by any means, including the use of force or by undertaking "humanitarian" activities. MINUSMA is perceived by armed actors in Mali as a party to the conflict, unambiguously authorised to be a warring force in support of the Government. On counter-terrorism: Operation Barkhane and the G5 have an explicit counter-terrorism mandate and MINUSMA has committed to providing logistical support to the G5 troops. Quick impact projects (QIPs) and similar activities are part of the strategy to gain acceptance for the military actors through "humanitarian" activities, which has proven to be dangerous for humanitarian action in contexts of acute armed conflict.
	Localisation focus	Humanitarian actors have resorted to working through local actors to side-step access limitations, even for coordination roles where OCHA is not present. However, the limited availability of qualified local partners means that the same local NGO may be, at the same time, an implementing partner of MINUSMA, Barkhane, a UN agency and an INGO, with the subsequent risks for humanitarian space and perception of neutrality, as well as lack of visibility of impact.

COUNTRY	STRUCTURAL ELEMENTS		
Yemen 2015*	Coordination structures	Poor coordination and the dysfunctional set-up of the UN had knock-on effects not only on UN agencies but also on INGOs, given their dependency on the UN. However, the cluster system was an enabler, to some extent, as it provided a consistent forum for coordination. When Amman became the primary back-up base just after the evacuation period, agencies became removed from the crisis, creating a sense of lack of urgency. INGO and UN managers were swept into a constant round of meetings: coordination became the project.	
	Quality of leadership	There was a critical lack of leadership between March and December 2015. It took the UN a long time to rationalise its leadership structure and provide guidance to the sector, which hampered the establishment of an appropriate response for the rest of the aid system. Initially, the separation of the Designated Official (DO) function from the Humanitarian Coordinator (HC) function reduced the HC's authority in security related decisions, even when these related to the humanitarian response. The HC was also 'double-hatted' as he was also the Representative of UNHCR in Yemen and the prioritisation of his duties was an issue. The situation improved from December 2015 when a 'triple-hatted' Resident Coordinator (RC), HC and DO was appointed, which combined authority and security management responsibility in one position. However, the leadership structure was further confused by the posting of the Regional UN HC and a high-level UN representative (Assistant SRSG level) to Riyadh, Saudi Arabia.	
	Funding	Overall, underfunding was not an issue in 2015 as a result of the donation from Saudi Arabia to the Yemen HRP. Absorption capacity was low, however, because of a lack of presence or the ability to implement a response on the ground. The considerable financial dependency on the UN by INGOs in Yemen had consequences for the agility of operations.	
	Existing capacity and ability to scale up	Limited scale-up capacity of UN agencies as a result of security ceilings and inadequate numbers of staff in-country was exacerbated by the evacuation. The L3 declaration (designed to mobilise a scale-up in the humanitarian community's resourcing, capacity, deployability and response) did not help to bring in the required numbers of experienced staff quickly enough. There was also limited ability to expand operations and establish UN humanitarian hubs outside Sana'a.	
Niger/Diffa 2015-2016*	Coordination structures	Rivalry and competition between UN agencies and INGOs was a barrier to effective coordination and leadership, while dual roles led to unhelpful and damaging power dynamics between implementing actors and leading agencies. However, there were indications that coordination had improved somewhat in early 2016.	
	Quality of leadership	Weaknesses in humanitarian leadership were responsible for some of the failure to access populations in need. In the absence of a strong national government led-response and coordination agency, the humanitarian community and its leadership showed little power and vision to direct efforts towards harder-to-reach populations.	
	Funding	In July 2016, OCHA's mid-year balance showed an overall funding gap of US\$219 million, representing 69% of the funding required. An unprecedented number of L3 emergencies at the time, all demanding funds, were competing for attention and resources globally, and Niger had lower profile than Nigeria within the regional Lake Chad crisis. Consequently, there were important funding gaps in the response to the crisis in Niger. The competitive funding environment hampered the effective scaling-up of the response, leading to flag-planting dynamics in an attempt to protect established working relationships and areas of operation from the entry of new players. This resulted in big gaps between assumed coverage and actual services.	
	Existing capacity and ability to scale up	The pool of humanitarian expertise was significantly smaller than in other emergencies, with lack of key technical skills at a higher level of management within all agencies (including MSF). A critical example of this knowledge gap was seen in the WASH sector.	
North East Nigeria 2015-2016*	Coordination structures	There was extremely poor coordination and collaboration within sectors. The Humanitarian Country Team (HCT) was dysfunctional at the Abuja level, with key actors sometimes not present or even resisting calls for a move to an emergency mode for response in the North East to preserve existing relationships with Nigerian authorities. The unwillingness of the UN to confront the Nigerian Government with a L3 declaration had a negative impact on the perception of severity of the crisis and the narrative around it (such as the labelling of food insecurity, rather than conflict, as a major driver of suffering).	
	Quality of leadership	Until 2016, the UN's leadership was not fit for purpose. There was no consistent HC and the HCs that were in place between 2014 and 2016 did not have emergency experience. Fill-in HCs were required to balance long-standing development relationships with the authorities against their responsibility to push the same authorities to accept emergency humanitarian modalities. The UN leadership also resisted calls by the HCT in Abuja to launch an emergency approach in Borno, instead insisting that existing efforts were sufficient.	
	Funding	Funding systems could not deliver adequate resources in an appropriate timeframe. In most cases, donors had been pushing for INGO mobilisation but funding bureaucracy did not allow for a quick expansion of operations. INGOs with the capacity to scale up only began to reach people in need in September 2016, but some claimed that funding only became available 4 or 5 months later. Most actors —with the exception of ICRC, MSF and WFP— were unable to access untied funding for emergency response. In a sector beset with competition for funds, this lack of significant reserves available to UN agencies and INGOs for emergency humanitarian purposes exacerbated many of the negative dynamics in the system.	
	Existing capacity and ability to scale up	There were few experienced emergency staff. Even the more emergency-specialised organisations like MSF struggled to mobilise the kind of experienced leadership that was needed. Already established organisations running longer-term programmes were not able to scale up their structural capacity effectively. The bulk of the staff responding to the early stages of the crisis had no humanitarian experience. As a result, warning signs were missed and responses were timid or ineffective.	

COUNTRY	STRUCTURAL ELEM	STRUCTURAL ELEMENTS		
Central African Republic (CAR) 2013-2015*	Coordination structures	The HCT-led coordination model was questioned and its application widely criticised, especially by INGOs and global stakeholders. INGOs considered its UN leadership to be too slow, bureaucratic and political. They objected to the "unacceptable" rapid turnover of UN coordination staff; OCHA's "excessive" capacity without tangible added value; and disproportionate investment in coordination (except at the operational, cluster level where it was sorely lacking) rather than in operational gaps and what many considered the most important work of "getting your hands dirty—in the field." With rare exceptions, such as in Kouango, UN coordination was perceived as Bangui-centred.		
	Quality of leadership	Empowered leadership was evident at the HC level, but far less successful at the HCT level. At first, the deployment of a Senior Humanitarian Coordinator (SHC) was critical to improvements, greatly increasing the coordination of a response that hitherto lumbered in "reactive mode." Having an empowered leader clearly helped with making decisions, rather than relying on HCT consensus but there were structural weaknesses at a later stage. SHC leadership was undermined by a poorly functioning HCT, ICC and information management. HCT leadership remained inadequate during much of the response and had a mixed impact on its effectiveness.		
	Funding	The L3 had a considerable impact on mobilising resources for the scaling-up of the response. Within a week of the L3 declaration, the UNCT began to implement a humanitarian action plan (100 Day) to rapidly scale up the humanitarian response with a requested budget of US\$152 million. By January 2014, the HCT produced a revised Strategic Response Plan (SRP) for the year ahead, targeting 1.8 million people out of an estimated 2.5 million people in need of humanitarian aid. Overall funding for the SRP in 2014 was relatively high, with 74% of requirements met (CAR being the third best-covered crisis among 31 SRPs in that year).		
	Existing capacity and ability to scale up	There were low starting levels of humanitarian capacity in the country, with limited ability to scale up. The scale of response and targeting remained insufficient to the country's needs. Funding gaps, lack of actors and insecurity left some sectors poorly covered. People living in the bush and with host families went largely unassisted, and the focus on Bangui and western regions was contested. Stakeholders perceived a mix of external "structural" reasons and internal "strategic" reasons for insufficient coverage. All actors recognised the gaps, with some estimating that only 30% to 50% of needs were met. All local leaders but one reported that coverage was inadequate.		
South Sudan 2013-2015*	Coordination structures	Clusters were under-resourced and overburdened with routine administrative duties and, therefore, lacked capacity to ensure quality and coverage. The ICWG was not sufficiently focused on the key functions of supporting and monitoring the performance of the clusters. While the Operational Working Group (OWG) was cumbersome and ineffective in 2014, it started to improve in 2015. However, the HCT was not strategic enough, nor did it hold the ICWG and the clusters accountable.		
	Quality of leadership	Leadership had a mixed impact on the effectiveness of the response. While there was impressive leadership on resource mobilisation, the HCT leadership of the response was not sufficient. Leadership and accountability were also too diffuse across the various coordination bodies, including the ICWG. HCT leadership remained inadequate during much of the response, which was also undermined by the poor functioning of that body.		
	Funding	Strenuous fundraising efforts, led by the HC, raised US\$1.27 billion in 2014: 70% of requested funds and a far better response than seen for other emergency appeals. Donors displayed good flexibility in allowing pre-crisis long-term funding to be used for emergency response. Notably, the CERF provided rapid support (US\$33 million in 2014) for urgent and underfunded interventions such as camp construction and measures to tackle the cholera outbreak. Access to independent or unrestricted funds was another hallmark for a flexible response (e.g. MSF and ICRC). However, even though there were no considerable funding gaps, the response was slow to deploy.		
	Existing capacity and ability to scale up	The humanitarian and development agencies working throughout South Sudan lacked the sufficient and experienced staff to scale up the response. A number of small and medium-sized agencies were quicker to reorganise and begin effective relief than some of the large UN agencies and INGOs. UN standard requirement for approval from UNDSS for all new deployments to new locations and other risk management rules slowed its responsiveness capacity.		
Mali 2017*	Coordination structures	The humanitarian response in terms of quality, speed and scale needs to be improved. The impact of the integration, stabilisation and counter-terrorism rationales can exacerbate the difficulties of common coordination structures. In Menaka, for example, UNHCR is responsible for coordination, but the humanitarian actors present prefer not to be contacted by UNHCR to avoid association with the UN agency as a result of the 'integration' of UN humanitarian and military actors and the use of military escorts.		
	Quality of leadership	In Mali's MINUSMA, as in other integrated missions, the leadership of the political and humanitarian branches relies on one person with a triple-hatted role: the Humanitarian Coordinator (HC), the UN Resident Coordinator and the Deputy Special Representative of the UN Secretary General. As part of the integrated mission, the role of the HC is divided across different responsibilities, often to the detriment of humanitarian priorities.		
	Funding	The Humanitarian County Team needs to clarify its humanitarian narrative to define and implement a resource mobilisation and prioritisation strategy based on clearly identified needs.		
	Existing capacity and ability to scale up	Reduced local and international humanitarian capacity in the country is further exacerbated by insecurity and integration with military actors, with limited ability to scale up and deploy in hard-to-reach areas.		

COUNTRY	MINDSET ELEMENT	S		
Yemen 2015*	Relationship to risk The start of the military campaign was met by a full-scale evacuation of most humanitarian actors in Yemen. Upon the return, extreme risk-aversion meant that few organisations operated outside Sana'a, which resulted in a lack of credit information and analysis on local security threats and risks, and on the actual needs of people. In effect, the heavy dependency of INGOs on the UN evacuations and security assessment mechanisms made them also dependent upon the UN for security management and risk analysis.			
	Focus on gaining and maintaining access and coverage	There was restricted access across Yemen because of insecurity and bureaucratic impediments that affected the operational response. In addition, UN humanitarian agencies were not perceived as active, neutral and impartial actors. The ability to gain access was hampered by security constraints and the lack of effective security management, access negotiation mechanisms and independent logistics by frontline INGOs.		
	Focus on cost- efficiency and value for money	Logistical obstacles were seriously disruptive to aid provision. The independent logistics capacity that was needed was not necessarily funded by donors, which posed big problems for a number of INGOs. Donors decided to fund only UNHAS for air service, medevacs, and evacuations and UN control of these services, coupled with UN security restrictions, hampered INGO's presence and operations.		
Niger/Diffa 2015-2016*	Relationship to risk	Access to vulnerable populations was limited by risk-aversion and the unwillingness of UN agencies and INGOs to push back against security norms and challenge the rulings of local authorities. INGOs also reported self-imposed limitations that restricted movement and access because of security considerations. All of this had a negative impact on the quality of the humanitarian response. For example, the ability to maintain well-functioning water infrastructure at informal sites relied on only day-time visits and operations, resulting in low presence and coverage in the northeast of Diffa state and in Bosso.		
	Focus on gaining and maintaining access and coverage	During much of the crisis, Niger's military authorities denied humanitarian actors access to large areas of the border region in Diffa state. Humanitarian organisations displayed little appetite to challenge these security orthodoxies or indeed their own internally set limits, especially regarding security guidelines. Furthermore, many INGOs linked access issues and gaps in geographic coverage to logistical challenges, such as distance and poor roads, rather than fear of attack.		
	Focus on cost- efficiency and value for money	Funding issues were most often raised by NGOs particularly in relation to covering costly activities such as water trucking or food distributions to displaced population sites, while other activities were less affected.		
North East Nigeria 2015-2016*	Relationship to risk	The emergency mindset was, in general, lacking. While there were very significant security constraints in 2015 and early 2016, access was also restricted or banned by the military. In the context of very high insecurity, mandating military protection, the roles of risk taker and risk avoider were, for some time at least, reversed, with UN agencies accepting more security-related risks than INGOs.		
	Focus on gaining and maintaining access and coverage	There was severely limited access in a context of high insecurity. Access was tightly controlled by the military and, even when access was allowed, there were serious security risks. There were no successful access negotiations with any element of Boko Haram.		
Central African Republic (CAR) 2013-2015*	Relationship to risk	There were widespread security concerns in CAR. Actions to secure access and maintain humanitarian space were unsatisfactory, but did show signs of improvement in 2015. UN actors highlighted a lack of physical access to remote rural areas, and insecurity in the north-east that had led to the deaths of some humanitarian workers. In its open letter to the UN, MSF criticised the impact of evacuating UN staff during much of 2012 based on what were deemed "vague security concerns"; putting UN staff on lockdown during critical moments in 2013; failing to react to the mounting crisis with concrete action in the main hotspots; and undertaking too many assessments and time-consuming planning exercises while leaving the population without assistance.		
	Focus on gaining and maintaining access and coverage	Overall, the response relied on international forces for secure access while insisting on humanitarian independence, a paradox noted by both the people directly affected and armed actors. In addition, poor security management limited the use of the available humanitarian space, while organisations that relied on their own security protocols enjoyed the greatest access. Securing access remained a complex challenge and was critical for programme effectiveness.		
South Sudan 2013-2015*	Relationship to risk	In the early months of 2014, agencies tended to flock to the places where the needs were evident and access was relatively straightforward. Access was also constrained by insecurity: the areas with the greatest need were also those with active conflict. The risk-averse stance of UNHAS/UNDSS rules was deemed a huge constraint for humanitarian access, resulting in a disproportionately high-level of response in PoC sites, given that their populations accounted for only a very small proportion of those in need. Risk-aversion was also rife amongst INGOs, with rapid evacuations in the Maban refugee camps, which were not under any direct threat at that time.		
	Focus on gaining and maintaining access and coverage	The initial response to the crisis was characterised by weak security risk analysis and negotiation capacity. Most INGOs seemed to either rely on OCHA to open up humanitarian space for them, or relied on a strategy that focussed solely on contacts with civilian (and not military) authorities, which limited their access to areas in need. Both sides were willing and able to negotiate presence and access with humanitarian agencies, but there were missed opportunities to expand access, resulting in weak presence in the conflict areas.		
Mali 2017*	Relationship to risk	Severe limitations to humanitarian access and the high risk of attack by armed forces have made humanitarians very cautious and risk-sensitive. Humanitarian actors have struggled with insecurity and incidents in Mali since the beginning of the conflict in 2012, and as a result, the presence of INGOs has decreased. Consequently, there is very limited presence and, therefore, little exposure to the risk.		
	Focus on gaining and maintaining access and coverage	Military-driven instrumental 'aid' activities also exacerbate gaps in the humanitarian response, as humanitarian groups refuse to work in the same zone in order to put some distance between themselves and the military forces to reduce the risk of association.		

*SOURCES:

Yemen 2015

Emergency Gap case study and IASC Operational Peer Review, January 2016.

Niger/Diffa 2015-2016 Emergency Gap case study.

North East Nigeria 2015–2016 Emergency Gap case study.

Central African Republic (CAR) 2013-2015 MSF internal report on CAR 2014 and Inter-Agency Humanitarian Evaluation (IAHE) of the Response to the Central African Republic's Crisis 2013–2015.

South Sudan 2013-2015 MSF internal report 2014; Inter-Agency Humanitarian Evaluation (IAHE) of the Response to the Crisis in South Sudan, Final Evaluation, November 2015; and MSF internal review MSF internal review of the February 2016 attack on the Malakal Protection of Civilians Site and the next-event situation post-event situation.

Mali 2017

Emergency Gap case study and STAIT, Rapport De Mission STAIT Mali, April 2017, only available in French.

DONOR GOVERNMENTS	MULTILATERAL AND INTERNATIONAL ORGANISATIONS	NGOS	INTERNATIONAL PLATFORMS AND THINK TANKS
 CANADA DENMARK EUROPEAN CIVIL PROTECTION AND HUMANITARIAN AID OPERATIONS (FIELD) FRANCE - FRENCH PERMANENT MISSION TO THE UN GENEVA GERMANY - MOFA AND GERMAN PERMANENT MISSION TO THE UN NEW YORK IRELAND NETHERLANDS NORWAY SPAIN SWEDEN - SIDA AND MOFA SWISS DEVELOPMENT COOPERATION (SDC) AND SWISS HUMANITARIAN AID DIVISION UNITED KINGDOM - DFID AND UK PERMANENT MISSION TO UN NEW YORK USA - NATIONAL SECURITY COUNCIL, US SENATE FOR FOREIGN RELATIONS, OFDA AND USA PERMANENT MISSION TO THE UN NEW YORK 	 ICRC IOM OCHA (NEW YORK AND GENEVA) OFFICE OF THE UNSG UNDSS UNHCR UNICEF WORLD BANK WFP WHO 	 ACTION CONTRE LA FAIM (FRANCE) ACTION AGAINST HUNGER (US) ACCIÓN CONTRA EL HAMBRE (SPAIN) ALIMA BRITISH RED CROSS CANADIAN RED CROSS CARE CANADA CONCERN DANISH REFUGEE COUNCIL GOAL HANDICAP INTERNATIONAL INTERNATIONAL MEDICAL CORPS INTERNATIONAL RESCUE COMMITTEE ISLAMIC RELIEF MÉDECINS DU MONDE FRANCE MÉDECINS DU MONDE/ MÉDICOS DEL MUNDO SPAIN MERCY CORPS NORWEGIAN REFUGEE COUNCIL OXFAM GLOBAL HUMANITARIAN TEAM OXFAM NOVIB PEOPLE IN AID PREMIÈRE URGENCE SAVE THE CHILDREN UK 	 ACAPS ALNAP GPPI HERE-GENEVA HUMANITARIAN OUTCOMES ICVA INTERACTION ODI STAIT START NETWORK VOICE

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