Responding to humanitarian crises

Humanitarian aid is facing threefold pressure from natural disasters, human conflict and donor fatigue. Aid organisations need to adopt a range of measures and strategies to ensure that future and ongoing support is maintained.

By Valerie Amos, United Nations under-secretary-general for humanitarian affairs and emergency relief coordinator.

The demand today for humanitarian assistance is unprecedented. Global humanitarian needs are rising because of long-running wars in places such as Somalia and the Democratic Republic of the Congo (DRC), and more recent conflicts in Côte d’Ivoire and Libya. Natural disasters also have a humanitarian impact, often striking with terrifying ferocity. Unpredictable and unprecedented weather patterns across Africa, Central America and South and East Asia routinely displace millions of people. If there is an increase in large-scale disasters, such as last year’s flooding across Pakistan, this will put increased pressure on the speed, scale and effectiveness of the global response.

Population growth, limited resources, and volatile food and fuel prices are exacerbating an already difficult situation in many countries.

At a time when aid is most needed, there has been a dramatic rise in the level of threats and attacks on aid organisations, seeing workers attacked, equipment stolen and facilities damaged. Afghanistan, Pakistan and Somalia have the highest proportion of aid-worker deaths, kidnappings and attacks. Sudan, Chad and the DRC are also increasingly dangerous places to work. Over the last decade, aid-worker casualties have tripled, exceeding 100 deaths per year.

If negotiating these challenges were not enough, the humanitarian community is also dealing with increasing...
Aid agencies face increasing danger in providing assistance in areas of conflict.

The main challenge in the years ahead will be ensuring that the aid sector operates as effectively and cohesively as possible.

The ongoing generosity of donors, be they governments, individuals, companies or foundations, means that the most urgent humanitarian requirements are usually supported. However, more needs to be done to promote the many underfunded emergencies in order to maintain public and financial support.

Tackling security issues and their impact on this work is an area that requires everyone’s attention. What works in high-risk environments is already known and there are many lessons to be learned from each other’s security initiatives. Best practices have been identified in the way that aid workers can manage risks and still deliver on the ground. The global community has started to identify ways to balance humanitarian principles against the increasing need for armed protection in some places, and to ensure that national staff receive an adequate level of care and protection, equal with that of their international counterparts. It is time to turn those lessons into practice.

Another challenge is information overload. In a world awash with information, one of the biggest hurdles is pinpointing the right information to make good decisions. Recent major humanitarian responses last year in Haiti and Pakistan, and this year in Japan and Libya, have shown that there is room to improve the knowledge base for decision making. Humanitarian information and data must be available to all involved, using all possible networks. Information sharing and analysis need to happen in a timely manner.

Advances in communications and interest in social communities can combine with the increasing emphasis that humanitarian workers place on participation, accountability and partnership. Recent experiences have provided some valuable lessons. Haiti gave a sense of how quickly those communities can come together to make themselves relevant in an emergency. There have been further developments in this regard during the Japan and Libya crises this year, the latter resulting in the Libya Crisis Map website (libyacrisismap.net), supported by over 200 online volunteers around the world.

The need for principled, coordinated humanitarian action is as clear today as it ever was. Given the scale of the challenges, the key in the future will be forging effective partnerships. The barriers between the participants involved in mobilising humanitarian aid must be broken down, and the ways in which the readily accessible tools are used must be re-evaluated. Everyone must continue to work together if we are to ensure that humanitarian aid continues to measure up to the requirements and expectations of those in need. It is a time of great challenge, but also of great opportunity.
Dealing with Natural Disasters

Reforming the Global Response to Humanitarian Crises

The humanitarian response to disasters and crises has improved considerably and is continuing to move in the right direction. However, ensuring that the worldwide operation is working efficiently continues to be a challenge.

By Sir John Holmes, former under-secretary-general for humanitarian affairs and emergency relief coordinator, United Nations

All signs indicate that the world will be faced with more – and more intense – humanitarian crises in the future. Internal conflicts, which cause so much suffering to civilians because they are fought out among them, do not look like they will disappear or diminish in the foreseeable future, and may increase further if recent events in Libya are any guide. Meanwhile, the effects of climate change are already being felt as climate-related disasters – cyclones, floods, droughts – increase, and the more insidious effects on food security and, indeed, the very viability of human existence in some areas of the globe, become increasingly visible. They, too, could lead to conflict.

As the 21st century advances, the combination of these effects with other fundamental factors – such as population growth, uncontrolled urbanisation, environmental degradation and scarcities of water, land and energy – may generate catastrophes on a scale not seen before.

These catastrophes will be, and will look, different. They will not be rapid-onset crises with clearly identifiable causes and reasonably obvious and quick solutions; they will be a gradual emergence of chronic acute vulnerability for large populations – people living on the edge of disaster permanently, and tipping over the edge with increasing frequency. These are crises that will dramatically affect the chances of reaching the Millennium Development Goals (MDGs) for those people caught up in them. The food security crisis in Niger in 2010 showed what the future may hold – that was a population of 13 million, but how will it manage a population of 30 million in 2050, when the deserts have advanced hundreds more kilometres, and rainfall may be both less in quantity and even less reliable?

Is the world equipped to deal with these already predictable disasters and crises? There is no doubt that humanitarian response has improved beyond recognition over the last 20 years and is continuing to get better: faster, more professional, more predictably funded and more consistent. Products such as Plumpy’nut, a peanut-based food supplement, have transformed the ability to tackle child malnutrition in a miraculously short space of time. Drinking straws that turn filthy puddles into drinking water, fuel-efficient cooking stoves for camp dwellers and other technological marvels have done much to help.

However, the still inadequate response to huge 2010 disasters such as the Haiti earthquake and the Pakistan floods has shown how far there is still to go. The fragmented nature of the international humanitarian system – with multiple United Nations agencies and hundreds of non-governmental organisations (NGOs) – makes coordination difficult. It is a constant uphill struggle to ensure that the whole enterprise, donors and all, is as efficient as it could be.

Responding more effectively

There are no magic solutions, but the worst of all would be the creation of a single global agency responsible for humanitarian relief, which would quickly become a bureaucratic monster. The world needs to do better, and there are several areas that must start to improve:

- Reduce the artificial gulf between humanitarian and development solutions: where crises have no clear triggers or obvious start and end points, humanitarian and development actors must work as one to make sure that immediate needs, for example for food aid, are being met. They must also see that the underlying causes, such as poor water retention and lack of agricultural investment, are tackled simultaneously and with the same sense of urgency. Similarly, relief and reconstruction after destructive earthquakes or floods need to become genuinely seamless, in the way they have not been in either Haiti or Pakistan.
- Invest much more in disaster risk-reduction measures, to reduce the deaths and damage where natural hazards...

Plumpy’nut – a high-energy nutritional mixture of peanut paste, sugar and vitamins – has been crucial in combating child famine in Africa...
It is a constant uphill struggle to ensure that the international humanitarian system is as efficient as it could be.

huge investments in agriculture and rural infrastructure, particularly in Africa; full use of technological advances; dramatically reduced waste; and effective social safety nets in the most vulnerable areas. How to do these things is known, but they are not really being done, and the promised resources are not flowing.

Second, the burden of humanitarian action must be shared much more equitably. More resources will be needed to tackle these massive challenges, and the same few rich western countries cannot carry the weight unaided. The major emerging economies all have poor and threatened populations of their own, but they, and the commodity-rich economies, cannot stand aside from the effort needed. Assessed contributions for humanitarian relief may not be a realistic prospect, but what about indicative guidance tables showing what a fair spread of contributions might look like?

The aid effort for victims of Pakistan’s floods highlighted inadequacies in global humanitarian methods.

are known and predictable in their occurrence, if not in their timing. This needs to go hand in hand with more investment in local capacity and resilience – which should be based, wherever possible, on a tri-sector partnership among government, civil society and the private sector.

• Address the fragmentation of response to ensure that, for example, hundreds of NGOs do not turn up after a major disaster, overwhelming coordination capacity and often demanding more care and attention than they can themselves bring. This can only be done through self-certification and self-discipline by the NGOs.

• Ensure much greater attention to local sensitivities and needs, including by communicating better with those affected, wherever possible, and mentoring the creation of genuinely local NGOs. The days of white men in shorts, no matter how well intentioned, should be numbered.

• Develop new skills in dealing with disasters in urban settings to address the weaknesses shown up by the response in Port-au-Prince. Rapid urbanisation, not least in the developing world, means that the exposure of city populations to natural and other hazards is growing rapidly. Mega-cities bring the risk of mega-disasters, from earthquake, flood or storm. Many of the world’s biggest cities are exposed to all three. What would have happened if the Japanese earthquake in March had been much closer to Tokyo?

Two issues are fundamental if the international community is to be equipped to deal with the dramas of the 21st century, and are also fundamental for the G8. First, the world needs to get serious about food security. Feeding the global population of nine billion in 2050 – sustainably – is possible, but not without major changes in diet;
Simultaneous disasters: learning lessons from Japan’s devastation

The recent earthquake, tsunami and ensuing damage to Japan’s Fukushima nuclear power station have focused attention on the need for countries and organisations to be properly prepared for the combined effects of more than one crisis.
A magnitude-9 earthquake, the strongest in Japan's recorded history and centered about 135 kilometres off the north-eastern coast of Japan, released its horrific forces. There were more than 50 aftershocks of magnitude 6 or more, with effects being felt as far away as Tokyo. The earthquake triggered a massive 23.5-metre-high tsunami that crashed into the nearby coast, swamping dykes and cities and villages, and propagating across the Pacific.

The direct impacts of these coupled forces on the Japanese people and their infrastructure are immense and will be long-lasting. The death toll rose daily. Fifteen days after the event, the figure stood at around 11,000, with more than 17,000 still missing. Housing and all infrastructure was affected. Japan will remain in recovery mode for a long time.

Earthquakes around the Pacific are relatively well understood. This was the fourth most intense earthquake in the world since 1900. The most recent big quake in Japan was the 6.9 magnitude Kobe earthquake of 1995, which caused 6,425 deaths. Unfortunately, it is still not known when and with what force an earthquake will occur — unlike weather events, they are essentially unpredictable.

A tsunami is relatively predictable, but only once the earthquake has occurred. Although tsunami warnings give little time for response in nearby coastal communities, in some villages people escaped — but their property did not. The warnings were issued by the Japan Meteorological Agency, which has the means of preparing, issuing and communicating warnings, emphasising the value of an integrated, all-hazards warning system.

While these impacts were devastating enough, the combined impacts of the earthquake and the tsunami on the Japanese nuclear power station added a third devastating impact. The destruction of electric power lines to the Fukushima nuclear power station left it with no means to cool the reactor and spent fuel rods. The result has been fires, explosions and partial meltdowns, leading to the leakage of radiation that is contaminating propagating across the Pacific.

There is a need for an integrated approach — there should not be a focus only on one risk, such as terrorism, at the peril of neglecting other risks.

The recent earthquake and tsunami in Japan resulted in thousands of deaths and the displacement of entire communities.
The Emerging Challenge of Non-Communicable Diseases

Kazem Behbehani and Manuel Carballo

While the world’s attention has been rightly taken up with the threat of HIV and related co-infections such as TB, another major, and possibly far greater, public health threat has been silently emerging. Relatively unnoticed and unremarked upon by health policymakers and epidemiologists the world over, a range of serious and often life-threatening, non-communicable diseases have gradually come to characterise many, if not most, developed and developing countries alike. Today, these non-communicable diseases are presenting a new and massive threat to health-care systems, health-care financing and the economic capacity of countries, as well as to the health of hundreds of millions of people and their quality of life.

Long considered to be diseases of the more affluent sections of the community in industrialised and post-industrial countries, non-communicable diseases are fast becoming one of the greatest threats to middle- and low-income countries and to poor, as well as rich, people everywhere. While diabetes is probably the most illustrative of this emerging disease scenario, it is by no means the only one. A global epidemic of cardiovascular disorders is also emerging as a complication of diabetes, and in its own right. Together, these and a host of other non-communicable diseases are confounding the challenge of healthcare in ways that could not have been envisaged even 30 years ago. They are becoming a driving force for major reform in the ways we confront and try to prevent diseases, the ways in which diseases are diagnosed and when, how and by whom they are diagnosed. They are also revolutionising the ways in which care and treatment is provided.

Non-communicable diseases also affect health economics in ways that other diseases do not. Unlike most communicable diseases, they are typically of long duration and require a type of constant care and treatment that can be more costly in terms of healthcare provider time, medication, and the type and amount of hospitalisation that is sometimes required. Non-communicable diseases also have a unique adverse impact on the economic productivity of countries because, if left alone or not dealt with in a timely and efficient manner, they disable people in ways that prevent them from participating in, and contributing to, production processes. This also impacts upon families, as it is relatives who must take up the challenge of care and support, and this can decrease their productivity within and for society as well. At the same time, they prevent people with disease from enjoying the benefits of economic development and, in doing so, marginalise them economically, as well as socially.

There are many contributing factors to this fast-evolving disease challenge. Perhaps the single most important one is that lifestyles everywhere are changing, and are doing so rapidly. Life in general is becoming more sedentary, and even the work environment is requiring people to be less physically active and less mobile. Better transportation means that people are walking less, and the technological revolution in communications means that much can be accomplished.
without leaving the office or home. This comes at a time when the market is flooded with a wide range of industrially processed foods that are not always appropriate or balanced. In much of the world, people now have more financial resources available to them and are consuming more food and drink than at any previous time in history, without routinely compensating for this through exercise and energy expenditure.

The challenge presented by this emerging pattern of non-communicable diseases extends, among other things, to prevention, and it is becoming manifest that, unless a large proportion of these diseases can be avoided, healthcare systems in both developed and developing countries will soon be overwhelmed by them. Preventing non-communicable diseases calls, more than anything else, for people to participate actively in promoting and protecting their own health, including how they live and eat. It calls for a greater level of awareness by the public about the interaction between lifestyle and physical and psychological well-being, and requires people to be willing and able to put that new awareness and knowledge into practice. If these changes at the individual level are to be sustainable, equally it calls for governments to adopt and actively promote health, occupational, social, and food and nutrition policies that can create the supportive environment in which personal behavioural changes can be implemented and maintained.

For health-care systems, the emergence of this non-communicable disease epidemic is a new wake-up call, and hopefully the health sector will be able to respond fully to it. Not only will it need clinical practices to change, but also it will require an entire revision of skills and relationships between health-care providers and the public. Whereas, at one time, the role of the health-care provider was primarily to diagnose and prescribe medication, the new epidemic will call for cadres of health-care providers who can counsel and work closely with patients/clients for long periods of time, supporting them and giving the encouragement needed to cope and live with the daily task of behaviour change.

The Dasman Diabetes Institute in Kuwait represents the type of change that is called for. A research, training and policy institute, as well as a clinical centre of excellence, the Dasman Institute brings together new skills, attitudes and knowledge under one roof. It provides people with a new conceptual and operational approach to the primary and secondary prevention of non-communicable diseases, as well as their treatment, using cutting-edge clinical know-how.

The Dasman Institute is also opening up new avenues in the use of electronic health record systems designed to increase efficiency and improve communications between healthcare providers, and at the same time, is introducing new standards for treatment and creating innovative concepts and techniques of citizen-centred care. Increasingly recognised for its relationship with other world-leading centres of excellence, the Dasman Institute is helping to test and put in place new approaches to dealing with the diseases of tomorrow.

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