

Discussion Paper

**Acts of faith?  
Thoughts on the effectiveness of humanitarian action**

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## **Acts of faith? Thoughts on the effectiveness of humanitarian action**

James Darcy, ODI

*'From the... perspective of saving lives and feeding the hungry...humanitarian action is a resounding success...'* ALNAP Review of Humanitarian Action in 2003, p.30

*'... most humanitarian activity in Africa is useless or damaging and should be abandoned.'* Alex De Waal, *Famine Crimes*, 1997, p. xvi

### **1. Attitudes to the issue of effectiveness**

Let me declare my position at the outset. I am sceptical about some of the claims made for humanitarian action, which often seem to me more a matter of aspiration or hope than of substance; but I believe in the humanitarian imperative and the essential justification for international humanitarian action. Having practiced for a number of years in this field, I am very conscious of the problems facing decision-makers at every level in the sector and the high degree of uncertainty with which they have to operate. I am equally conscious of the highly arbitrary way in which judgements about effectiveness tend to be made. I will argue that this degree of arbitrariness is neither necessary nor justifiable: the question of effectiveness can and should be more than a matter of belief or speculation, even if it is never fully 'knowable'.<sup>1</sup> There appear to be some structural reasons why the humanitarian sector is evasive on this question. I will suggest that the answer lies as much in the way the humanitarian problem is framed, and in transparency concerning the rationale for intervention, as it does in the empirical demonstration of impact. I will also argue that the theory on which humanitarian problem analysis is typically based is inadequate to the task, and will sketch a possible alternative model.

The language of 'belief' seems appropriate here. Humanitarianism is a creed, a belief system that can be framed with equal conviction in secular or religious terms, but which is necessarily couched in the language of moral values. The humanitarian imperative demands of us, individually and collectively, that we act in the face of certain kinds of human suffering. It finds expression primarily in organised humanitarian action, though the essentially private and voluntary nature of that action has increasingly given way to (more or less accountable) forms of public and official action, national and international. This shift, accompanied by radical changes in organisational culture in the voluntary sector towards new forms of professionalism<sup>2</sup>, has thrown the question of effectiveness into sharp relief: the use of public funds

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<sup>1</sup> For the purposes of this paper, the 'effectiveness' of humanitarian action is understood to be equivalent to its efficacy in achieving humanitarian objectives. The relationship between effectiveness and effect (or impact) is discussed below.

<sup>2</sup> See Hopgood (2005)

requires justification and the move towards results-based management requires the demonstration of effectiveness. What counts as 'demonstrating effectiveness' is, however, open to diverse interpretations.

How does the 'belief' aspect of humanitarianism sit with these accountability requirements? Evidently, the fact that it arises from a belief system cannot be taken to imply that the effectiveness of humanitarian action should itself be considered a matter of belief or faith, in the same way that the effectiveness of prayer might be. Yet agencies sometimes appear to present it in these terms to supporters and official donors alike. Trust us, they seem to say: the situation is as we say it is. Lives are at stake. You can help make it better – can do what your conscience or your mission statement demands of you – by funding us. We will save lives on your behalf, and you will have done your duty.

This is an attractive proposition; but taken on its own, it rests on little more than an appeal to faith. Whether we cast the humanitarian as priest or prophet (to use Hugo Slim's analogy<sup>3</sup>), it is a world in which the questioning of the message has sometimes seemed to be tantamount to the questioning of faith.<sup>4</sup> No-one seriously concerned with the question of effectiveness and impact, including the humanitarian agencies themselves, can be comfortable with such a position. To argue that the claims made by agencies are often true – as I believe they often are – does not deal with question: how do we (and they) know?<sup>5</sup> This paper is concerned with the ways in which humanitarian actors can provide a credible answer to that question.

The attitude described above, which is perhaps less prevalent than it once was, reflects an apparently widespread belief in the essential 'rightness' of *any* action carried out on humanitarian grounds, from humanitarian motives. On this view, the merit of such action lies as much in its motive as in its effect. Certainly the language of effectiveness, of impact, of accountability – the language, in other words, of modern bureaucracy – sits uncomfortably with the quasi-religious terminology of humanitarianism and its associated principles.<sup>6</sup> But increasingly, humanitarian action involves the disbursement of large amounts of public money, requiring justification as all such expenditure does.<sup>7</sup> In this context, the question of effectiveness cannot simply be taken on trust.

The reliance on trust rather than evidence-based argument might be less concerning if that trust were shown to have been consistently well-placed. But there is some reason

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<sup>3</sup> Slim (2003)

<sup>4</sup> For an example of this line of criticism, see Rieff (2002) p.116. He cites de Waal 'Nobility of aim does not confer immunity from sociological analysis or ethical critique... It is as though the sociological study of the church were undertaken by committed Christians only: criticism would be solely within the context of advancing the faith itself.' [ref]

<sup>5</sup> Donors have become more demanding in this respect. See Minear & Smillie (2003)

<sup>6</sup> Hopgood *op.cit.*

<sup>7</sup> On developments in public accountability for humanitarian expenditure, see Macrae et al. (2002)

to think that the tendency to present a distorted analysis may be a structural feature of the humanitarian system. The response to the Indian Ocean Tsunami highlights some of the dangers. Here was an overwhelming human catastrophe, but one that humanitarian action was largely powerless to do much about: the vast majority of those who died did so at the time the tsunami struck. The life-saving claims that were central to many agencies' subsequent funding appeals were based on what was in retrospect (and arguably at the time) a misrepresentation of the risks people actually faced post-tsunami.<sup>8</sup> There are other such examples: the claim that 14 million people were at risk of starvation in southern Africa in 2002 and that food aid prevented this outcome is only one of the more striking in recent history. The response to the Iraq crisis threw up similarly misleading claims as to the rationale for humanitarian response. Here and elsewhere there is a strong case to be made that agencies and donors alike have significantly misconstrued situations, and sometimes in the process overlooked real humanitarian imperatives. This tendency to overstate the life-threatening nature of some situations – and hence the life-saving potential of an agency's role – reflects the logic of the humanitarian market. If you are in the business of saving life, you will tend to portray situations in ways that allows you to construct a life-saving rationale for your intervention. This pressure, familiar to anyone who works in the sector, encourages the presentation of skewed analysis both internally and externally.

I do not wish to suggest that such distortion is a universal tendency, nor even that it is the norm. But a degree of misrepresentation (not just over-simplification) is privately acknowledged by many in the sector to be a recurrent feature of agency appeals, an aspect of marketing that sometimes seems to be treated as a necessary evil.<sup>9</sup> Nor is this just a question of how agencies (mis)represent situations, and their own role, to external audiences. Such distortions can also be found in the internal logic of the agencies' (and donors') own decision-making and reporting processes. Related to this is a form of distortion that is perhaps more insidious – and more damaging – that involves donors and agencies agreeing on a different kind of narrative: one that 'wishes away' the evidence of human crisis. Many in the sector feel that this is what happened in the cases of DR Congo and Angola in recent years, to name two of the more extreme examples. The early days of the Darfur crisis – when all attention was focussed on the North-South peace process in Sudan – might be put in the same category. MSF have been particularly alive to this danger.<sup>10</sup>

The tendency to distort is prevalent enough that it has a bearing on credibility. This matters particularly because agencies more usually find themselves cast in the role of Cassandra: doomed to make prophecies that turn out to be true but that are not

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<sup>8</sup> See Rieff (2005). It is another question whether agencies' analysis of the medium and longer term impact of the tsunami was accurate, and whether claims regarding their role in recovery and reconstruction are justified.

<sup>9</sup> For an analysis of the humanitarian 'market-place' and its drivers, see Cooley (2004)

<sup>10</sup> Space forbids discussion of this issue here but it is highly important. See for example Terry (2002); Weissman, ed. (2004)

believed (or at least not heeded) at the time. International NGOs in particular have long been thought of as the conscience of the system, but their credibility is put in jeopardy by each false claim – for all that it may boost their standing in the short term. Official donors and politicians, for their part, have tended to show little discrimination in their assessment of such claims. We might conclude that they are generally happy to concur with the humanitarian proposition (true or not) when it is consistent with their broader agenda; but not when it would demand expenditure of more political or financial capital than is deemed expedient. Agencies, on this view, could be forgiven for thinking that accountability to donors had little to do with demonstrating effectiveness.

All of this has a bearing on how effectiveness is understood and how it is accounted for. Depending on how the humanitarian problem is defined in a given context, it may be possible to appear to ‘solve’ it with little or no reference to evidence. Perhaps the ‘trust’ model serves a purpose here. If the real concern is to salve our consciences or to appear to fulfil our official responsibilities, we might draw the cynical conclusion that our actions have merit *regardless* of their impact on the ground. Indeed, evidence to the contrary might be highly unwelcome and there may be little incentive to look for it. But if our concern is with actual outcomes for people then this clearly will not do. We may as well construct and solve ‘virtual’ emergencies without reference to the real world (some would argue this already happens). The truth of the narrative about what is happening to people and why, and the role of the humanitarian actor in that narrative, demands much greater attention.

#### *Effect and effectiveness.*

The question of effectiveness is part of a wider question about impact or *effect*. The question of what effect humanitarian action has encompasses all the consequences, positive or negative, of interventions on humanitarian grounds. Much of this is beyond the scope of the present paper; but effectiveness cannot be considered in isolation from the broader question of impact in assessing the merit of an intervention.<sup>11</sup> Some of the charges made against humanitarian action concern its supposed negative effects: from fuelling conflict to creating dependency and undermining the social contract. While the validity of these charges is contested, some of their force derives from simultaneously challenging the positive claims made for aid while highlighting its potentially damaging effects. De Waal, for example, attributes only marginal positive effect to relief efforts while stressing their negative effects; and argues that ‘evaluation should be concerned with the question of how humanitarian aid fits into and complements people’s coping and livelihood practices’.<sup>12</sup> If it can be shown that humanitarian aid has only a relatively marginal effect on people’s survival *and* that it results in significant harm, then the case *against* aid – or at least aid in a particular form – becomes compelling.

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<sup>11</sup> For a full discussion of the assessment of impact in this sector, see Hofmann et al. (2004)

<sup>12</sup> de Waal (1997)

Effectiveness is understood here to be concerned with the narrower question of whether humanitarian action is successful in achieving its objectives. This raises a number of sub-questions. What are those objectives, and how are they framed - in terms of outputs or outcomes? Should we be considering joint (collective) objectives or those specific to a given agency? How do we know when they have been met, and to what extent positive outcomes can be attributed to humanitarian action? And if we are concerned with gauging performance, what would constitute good (effective) performance in the circumstances? Would, say, a 70% level of achievement of objectives constitute good performance – and what allowance should we make for ‘external’ variables in making this judgement?

Beyond the performance of a particular agency, it seems legitimate to ask about the effectiveness of the humanitarian response to a situation taken as whole. We might ask, for example, to what extent the international humanitarian response to the Darfur crisis has been effective. Perhaps no simple answer can be given to that question. If we assume a collective goal of ensuring that the affected population has sustained access to the means of subsistence and is protected from violence, then a reasonable (if vague) answer might be that the response has been only partly effective as regards subsistence, and largely ineffective as regards protection. Even then, we would want to distinguish effectiveness over time: in this case, the response is acknowledged to have been late and too slow in many respects. We would also be bound to consider the extent to which the achievement of those goals lay within the power of the humanitarian agencies: it may be that within the prevailing constraints, humanitarian action achieved all that it could have done. The humanitarian system can often appeal, with justification, to a number of ‘get out’ clauses: too little money, lack of secure access, lack of political will. Perhaps we should be content with ‘effective in the circumstances’ in making the judgement of particular agencies; but less content to do so when considering the collective response, particularly if we include the political actors in whose hands lies at least some degree of control over those same circumstances.

In any case, in spite of the common absence of explicitly articulated collective objectives<sup>13</sup>, it seems important to be able to distinguish the effectiveness of the collective response – the performance of the ‘system’ – from that of its constituent elements. A part of the issue of effectiveness lies in how the system works to achieve collective goals; but it is in the disaggregation of the effectiveness question (over time, between different actors, and so on) that we are most likely to find useful results. We want to ask whether agencies delivered what they said they would, and this question of ‘outputs’ would seem the minimum an agency could reasonably be expected to account for. Whether that intervention has had the effect claimed for it is a much tougher question. What is certain is that, in the absence of a clear statement of the

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<sup>13</sup> Some substantial progress is now being made in this respect with the UN Consolidated Appeals process and the associated Common Humanitarian Action Plans.

problem to be addressed and of the rationale for the particular intervention, it is impossible to hold agencies properly to account for their actions.

Ultimately, the effectiveness of a humanitarian response will be gauged against the outcomes for the crisis-affected population and of different groups within it. The question here is not simply 'to what extent did your intervention achieve its objectives?' but also 'were these the right objectives?', 'would another form of intervention have had greater effect?' and 'could the same result have been delivered more cheaply?' This last question of cost-effectiveness is one that humanitarians are uncomfortable with (how to put a price on a human life?) but which in a world of scarce resources, competing priorities and a proliferation of different potential service providers – including the military and commercial contractors - cannot be avoided.

## **2. Effectiveness and the rationale for humanitarian action**

The question of effectiveness depends on what we are trying to achieve through humanitarian action. Some versions of the 'new humanitarianism' give rise to a plethora of objectives – from conflict prevention to social transformation – which many would argue go well beyond the capacity of humanitarians and the instruments available to them to deliver. Judged against such objectives, perhaps, humanitarian action is bound to fail. For the purposes of this discussion, I shall assume a narrower, more traditional humanitarian agenda.

The humanitarian proposition has roughly two parts to it. The basic proposition runs something like this:

*1. The current situation is as described (symptoms, causes, trends) and it is actually or potentially catastrophic. Unless remedial or preventive action is taken, the outcome will be a (greater) human disaster (more or less precisely defined). It is imperative to act to prevent this outcome.*

The business-oriented corollary to this is:

*2. The necessary remedial or preventive action is of types X and Y. Without interventions of this kind the outcome above is highly likely or inevitable. It is imperative to fund and implement such interventions.*

The validity of both of these propositions needs to be scrutinised in considering the question of effectiveness. To use a medical analogy, both the validity of the diagnosis/prognosis and the likely efficacy of the proposed remedy need to be considered. The effectiveness of an intervention can only truly be judged in terms of its efficacy in promoting desired outcomes and averting undesired ones. This demands an

understanding of what outcomes were to be anticipated in the first place. Since we are talking here not of clinical environments but of situations involving complex interactions of political, environmental, socio-economic, behavioural and other factors, this is clearly not a simple matter or a precise science. But methods for (*inter alia*) predicting famine or the spread of disease in populations – bringing together economic, sociological, epidemiological and other perspectives – have advanced to the point where more reliable prognosis is often possible. Even in situations of armed conflict, involving shifting and dispersed populations and where access is restricted, the use of remote sensing technology and demographic techniques allows potentially far greater accuracy at least of diagnosis (about where people are and what is happening to them) than has been possible before.

In practice, the question of effectiveness has to be considered both *prospectively* (what *will be* effective) and *retrospectively* (what *has been* effective).<sup>14</sup> Faced with making a (prospective) decision about whether and how to intervene in a potentially catastrophic situation, the practitioner will rely on judgement and past experience as well as evidence about the current situation. This includes knowledge of what has happened in other similar circumstances and what kinds of intervention have been effective. On this basis, the practitioner formulates a hypothesis (if we do X, the result will be Y) which is tested in practice. A concern with prospective judgements about effectiveness points to the need to strengthen the evidence base available to decision-makers at critical points. This evidence base is currently weak in many respects.<sup>15</sup>

This links to the question of *retrospective* judgements about effectiveness. Assuming we are concerned here with outcomes rather than simply with outputs, this too is an uncertain science. But it is one that is amenable to empirical study, providing a potential basis of evaluation for the purposes of both accountability and learning (to inform prospective judgements).<sup>16</sup> Because it relies on comparison between a counterfactual situation (what would have happened if we had not intervened or had done so differently) and a factual one (what actually happened)<sup>17</sup>, linked by an uncertain attribution of causal effect, there is commonly a high degree of arbitrariness in retrospective as well as prospective judgements about effectiveness. While the factual situation may itself be difficult to ascertain with any degree of precision, the counterfactual one is necessarily uncertain. Here too, the quality of the initial analysis (diagnosis/prognosis) is critical.

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<sup>14</sup> A third category ('what *is being* effective'), strictly speaking a variant of the retrospective approach, is the stuff of real-time monitoring and provides a potential basis for the modification of programmes.

<sup>15</sup> Darcy and Hofmann (2003)

<sup>16</sup> It is striking, looking at the ALNAP database of evaluations, how little can be gleaned about effectiveness judged against outcomes – despite the optimistic quote at the head of this paper.

<sup>17</sup> See Fearon (2005)

*Revisiting the rationale for humanitarian action*<sup>18</sup>

The most general terms in which the aim of humanitarian action is stated (saving life, reducing suffering) are generally translated in practice into objectives that relate to physiological and economic outcomes for crisis-affected populations. Typically, the primary stated objectives concern the prevention or reduction in levels of ‘excess’ mortality, acute malnutrition and life-threatening illness, together with the provision of remedial or palliative care for those already affected. To this list should be added the protection of civilians from violence, though here the objectives and role of humanitarian action are less well defined, its potential effectiveness more uncertain.

Ultimately, then, we would expect most questions of effectiveness to be judged against these objectives – with all the attendant problems of establishing causation. The relevant outcomes are commonly understood to be determined by a range of causal factors that are linked according to a model first developed by UNICEF.<sup>19</sup> Core humanitarian responses are typically defined in terms of minimum human requirements grouped under standard ‘sectoral’ headings (food and nutrition, health care, water and sanitation, shelter, etc.) which are then translated into service delivery requirements.<sup>20</sup> A widespread threat to people’s access to these basic requirements, together with the physiological and security factors mentioned above, are taken to be the key defining criteria of a humanitarian crisis. Broader economic approaches such as those based on the concepts of *livelihoods* and *food security* are concerned with another level of causal analysis and may have greater predictive value over the medium term. These may give rise to a range of interventions aimed at prevention in the short to medium term, based on supplementing people’s own coping strategies and obviating the need for them to resort to damaging and high-risk survival strategies.

Of course, this account does not do justice to the scope and nature of the humanitarian enterprise. In particular, what constitutes an appropriate humanitarian response cannot be judged in purely technical or material terms, and a concern with human welfare and dignity may dictate a range of responses (providing burial shrouds, re-uniting families) which are less obviously amenable to evaluation in the terms of effectiveness. This serves to highlight the point that judgements about effectiveness (prospective or retrospective) necessarily involve qualitative as well as quantitative criteria; and that this depends on understanding the choices and preferences of the people on whose behalf the intervention is undertaken. While this paper concentrates on the more measurable aspects of humanitarian response, and on physiological and economic outcomes, this should not be taken to imply that qualitative criteria are of secondary importance.

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<sup>18</sup> This section is concerned with risk analysis and is more or less self-contained. Those concerned only with the main line of argument in the paper may prefer to skip to the Conclusions.

<sup>19</sup> See Sphere Handbook p.136: [www.sphereproject.org/handbook\\_index.htm](http://www.sphereproject.org/handbook_index.htm)

<sup>20</sup> See Sphere, which relates these sectorally defined needs according to the (modified) UNICEF model

The idea of *meeting needs* is dominant in this sector. ‘Humanitarian needs’ are generally understood in terms of deficits: people are said to face a critical lack of the basic requirements (goods or services) described above. Humanitarian action, on this view, is primarily concerned with identifying and plugging deficits. My colleagues and I have pointed out elsewhere the limited utility of this model, and suggested that ‘need’ might be better understood as ‘what needs to happen to prevent (or promote) certain outcomes’.<sup>21</sup> Needs assessment is then seen as the process of determining what steps need to be taken, and what resources this will require. Here the governing concept is not need but *risk*, understood as the probability of certain adverse outcomes occurring in defined timeframes.<sup>22</sup> Humanitarian action on this view is primarily concerned with reducing levels of acute risk related to the outcomes of primary concern described above.

One advantage of using *risk* rather than *need* as the organising principle is that it allows public health and protection factors to be properly accounted for. In particular, it fits better with the strategy of making dangerous environments safer for people – by tackling hazards (cleaning wells, clearing landmines) or reducing people’s vulnerability (vaccinating children, deploying guards). This points to ways of setting objectives and gauging effectiveness that the deficit model does not allow.<sup>23</sup> It also forces consideration of the interaction between various causal factors and sectors of response. Reducing these risk factors through a multi-sectoral intervention strategy provides a potential basis for joined-up thinking and programming.

Another advantage of this approach is that it provides a stronger basis for priority setting and cross-contextual comparison. An over-arching question here is: which population groups are at serious risk, in what time frame, of the following:-

- life-threatening disease
- acute malnutrition
- violence: killing, injury, rape, inhumane coercion, etc.
- catastrophic loss of livelihood and subsistence options

This points to a possible way of representing situations in such a way as to illustrate the levels of risk that different groups of people face. A rough ‘risk profile’ might be constructed, around 3 broad categories<sup>24</sup>:

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<sup>21</sup> Darcy and Hofmann, 2003

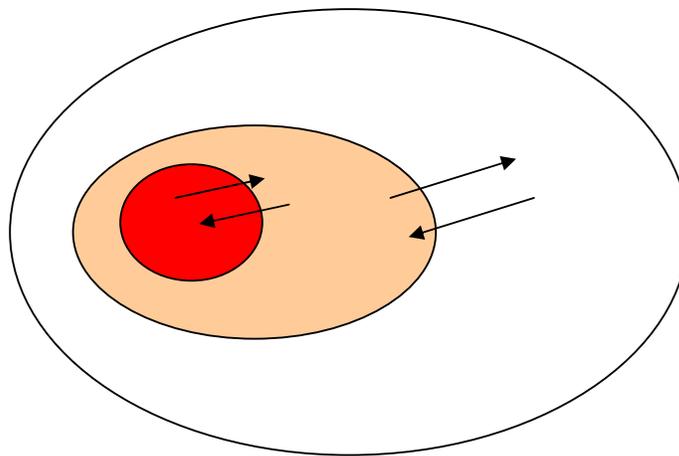
<sup>22</sup> Risk is commonly described in this context as the product of threats (hazards) and vulnerabilities

<sup>23</sup> This would include trend analysis based on outcome indicators like malnutrition levels; and analysis based on reduction in known risk factors.

<sup>24</sup> This ‘risk profiling’ idea is presented here for the purposes of discussion only – it is not a fully worked out scheme. But I believe a useful system could be developed along these lines.

1. **Acute risk**<sup>25</sup>: those already suffering these outcomes or at serious risk of doing so within (say) 1 month => require urgent remedial /preventive /protective interventions
2. **Semi-acute risk**: those who are seriously threatened with these outcomes in the near future - up to (say) 6 months - unless preventive steps are taken;
3. **Medium term risk**: those who are threatened with these outcomes in the next 12-18 months – if, for example, they cannot plant their fields or maintain their herds. This might represent a class of people who face destitution and hence increased exposure to the above risks.

The diagram below illustrates how such a risk profile might be represented by an 'egg' for each situation of concern. Each sphere represents a category one of the risk categories described above, the inner sphere representing those at most acute risk.



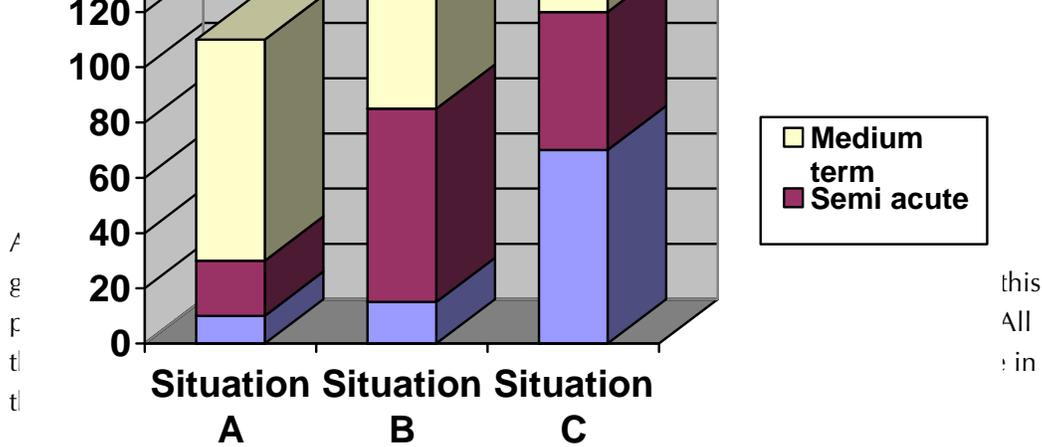
On this basis, a central question in judging the effectiveness of humanitarian action would be the extent to which it:

- (i) helps people shift from the inner to the outer spheres of risk, or out of the risk categories altogether
- (ii) helps prevent those in the outer spheres falling into the inner spheres.

The risk profile will look quite different according to whether we are discussing, say, Darfur (where the acute 'yolk' will be proportionately very large) or Sri Lanka (where it will be much smaller). In the above model, the acuteness of the crisis would be represented by the relative size of the inner spheres to each other and to the outer sphere; but also by the propensity of people to move inwards or outwards.<sup>26</sup> We would want to know which groups fell into which category of risk.

<sup>25</sup> Acuteness of risk here is taken to refer to the timeframe in which the outcome is predicted. It is distinguished from the question of high or low risk, i.e. the likelihood of the risk being realised. This likelihood will generally decrease from the central to the outer sphere, so that those in the inner sphere are both at most acute and at highest risk.

<sup>26</sup> The number of categories is arbitrary, but using these three allows useful distinctions to be drawn without being too unwieldy. Most crisis situations are susceptible to analysis on this



The three situations represented above would each have a different character, and each are at a different stage of evolution. Both A and B would indicate the need for action to prevent a full-blown crisis, but B is the more urgent case. C represents such a full-blown crisis in which the acute category is proportionately much larger. The rationale for intervention in each case would be different, as regards the timeframes over which outcomes are anticipated ('risk horizons') and the attempt made to prevent or ameliorate them. A central concern of humanitarian action is to prevent situations of type C developing from situations of types A and B.<sup>28</sup>

All this, of course, gives rise to many questions. On what basis can risk be assessed and quantified, so as to establish who falls into which category? What is a 'serious' risk, and how can different types of risk be aggregated? How should the effect of aid be factored in? And so on. This method would not be easy to standardise: it would rely to a significant degree on the experience and judgement of those using it and (particularly for areas that have not been assessed) it would depend on estimate and extrapolation.<sup>29</sup> Its accuracy would also depend on the quality of the demographic information available. Its merit is perhaps largely presentational: it provides a basis for discussion of severity and of priorities for intervention, within and between contexts. As well as a general situational profile that aggregates groups facing different kinds of risk, separate profiles could be drawn up for (say) under-5s at risk of acute malnutrition. This would allow for a more accurate representation of the character of a crisis and for the prioritisation of sectoral interventions.<sup>30</sup>

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basis. But it might be appropriate in some cases to use different risk categories, e.g. using different timeframes.

<sup>27</sup> In practice, figures for 'numbers affected' tend to include all those who have suffered (or may be at risk of) significant adverse effects, such as having their homes partially destroyed by cyclone or being forced to sell livestock on disadvantageous terms.

<sup>28</sup> There is of course no standard path of evolution for a crisis. A situation may go suddenly from 'normal' to high risk. That said, a crisis precipitated by a recurrent hazard (e.g. drought, flood) may follow a 'typical' path. In such cases, knowledge of previous occurrences and how people coped may be invaluable in deciding how best to respond.

<sup>29</sup> I would argue that humanitarians do in fact make *implicit* judgements of this kind all the time. I believe that making these more *explicit* would constitute substantial progress. The process of seeking expert consensus can itself be valuable in establishing differences of view on fact and interpretation.

<sup>30</sup> The identity and location of those at risk is not captured by this method: to do so requires risk mapping and vulnerability profiling of the kind already commonly undertaken. What characterises the method proposed here is the consideration of overall scale, severity and acuteness of risk over time.

Arriving at such a profile requires an analysis of proximate causal factors. In order to determine who is in what risk category, we would need to know (for example) not just who is currently malnourished, but what the actual/likely trends in nutritional status are. This depends on analysis of causal factors, most critically those relating to loss of subsistence options and exposure to danger.

The point of adopting this approach would be to help inform management decisions about proportionate, appropriate, timely and well-targeted responses. The key aim could be framed in terms of getting people out of the inner spheres, and ultimately out of the risk map altogether; and preventing people collapsing inwards from one risk category to a more acute one. The priority groups would be those in inner spheres; but different response strategies generally need to run in parallel in order to prevent others falling into those categories.

### **3. Conclusions**

This paper has attempted to highlight a conundrum for the humanitarian sector. It was suggested above that judgements about the effectiveness of humanitarian action are unjustifiably arbitrary. Some of that arbitrariness can be traced back to fuzziness or distortion in situational analysis; and mischaracterisation of situations (by over- or under-stating severity) is common enough to raise questions about the general credibility of situational analysis in the sector. This, coupled with sometimes misleading claims for the potential role of humanitarian action, can result in a situation where organisations adopt positions that can only be maintained by denying, avoiding or misconstruing the evidence. There are some structural reasons (including marketing and competition factors) why organisations may not wish to be pushed too hard on their situational analysis or on the question of their effectiveness. Yet many of those working in the sector are genuinely concerned to do exactly this; and most of the organisations concerned are ostensibly committed to greater accountability for their actions.

By its appeal to faith and its tendency to inflated claims, the humanitarian sector lays itself open to the charge of being engaged in a kind of confidence trick (as it came to be accused by some in the mid-1990s), albeit one in which the public and donors are generally willing to suspend their disbelief. The potential damage to credibility is especially worrying given the essential role of humanitarian agencies in highlighting the situations that are (objectively speaking) of greatest concern. This issue of credibility demands critical attention from agencies and donors alike. But the structural disincentives sketched above are all the more powerful because they potentially reflect a mutual interest: seen from one perspective, it may be in *nobody's* interest within the sector (donors or agencies) to push the question of effectiveness too hard. To do so

might reveal the limits of what is demonstrable; or worse, might reveal a fundamental disconnect between the nature and scale of the humanitarian problem and the nature and scale of the (individual or collective) intervention.

We should be especially wary of the tendency to avoid, or re-write, complex narratives which show little potential for happy endings. Some of the contexts in which it may be most difficult to demonstrate effectiveness – such as DR Congo – are precisely those which most require humanitarian action. Here the disincentive is of a different kind and its consequences more deadly, since it may result in a disinclination to act in the first place. Certainly the political rewards for doing so may not be perceived as commensurate with the political risks involved. These more intractable situations raise questions about humanitarian effectiveness that are systemic and deep-rooted. At a global level, we might ask how effective the international system is when measured against the criterion of impartiality. More modestly, we might ask whether a given therapeutic feeding programme (however successful in its own terms) can be considered effective if it is only able to treat 5% of those who need therapeutic care.

Perhaps this is too harsh an assessment of the systemic response to questions of effectiveness. Some progress has been made at the levels of both policy and practice, by individual organisations and within the system as a whole. Declarations of institutional will – expressed through initiatives like the Sphere project and the Good Humanitarian Donorship process<sup>31</sup> – provide a basis for pursuing the issue of effectiveness, though the lack of shared agendas and collective responsibility for outcomes remains a substantial barrier.

This paper has not addressed the subject of empirical analysis of impact and effectiveness, which is the subject of Prof. Jim Fearon's paper in this series. There is no doubt, leaving aside the question of incentive, that the problems inherent in establishing impact are a significant factor in the relative neglect of the subject of effectiveness in the humanitarian sector. It is often intrinsically difficult to gauge impact, particularly in complex and fast-moving situations (see Hofmann et al, 2004; Fearon 2005). There are also few agreed terms for doing so. In spite of its methodological problems, the risk profiling model suggested above is a possible way of better defining the rationale for intervention. It gives rise to two main questions. First, what critical risks do different groups of people face and how is their situation likely to develop? And second, what kinds of intervention are most likely to prevent the outcomes of primary humanitarian concern? Answering both questions requires an explanatory model that is adequate to the task and reference to various kinds of evidence: about the current context, about comparable situations and about the impact of previous interventions. There is much work to be done on all these scores. In the absence of empirical (and preferably real-time) evidence about effectiveness, we

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<sup>31</sup> Harmer et al. (2004)

depend heavily on the accuracy of the diagnosis, the validity of the prognosis and a judgement about the likely efficacy of the prescribed treatment.

The broader point is that the sector needs better and more consistent ways of characterising the situations in which it is intervening and of describing the rationale for its individual and collective interventions. Transparency of rationale is essential here. Unless I know what your analysis of the problem is, and how your proposed solution is supposed to address it, I cannot assess the merit of your intervention or sensibly debate alternatives with you. The experience of logical framework approaches and of bureaucratic impact reporting schemes should warn us, perhaps, not to adopt inflexible or 'tick box' approaches to this issue, and to beware of perverse incentives. But the demand for humanitarian actors to account for their actions in this way remains valid. Indeed, unless the effectiveness question can be answered more convincingly, agencies may find that as the climate of opinion changes, their role – or even the justification for international humanitarian action - is increasingly called into question.

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