



James Darcy

'The achievement of the MDGs will be a hollow victory if those who are worst off – including many of those living in fragile states – see little or no improvement in their living conditions'

The MDGs and the humanitarian–development divide

The Millennium Development Goals (MDGs) have proved invaluable in focusing attention on the problem of global poverty. They are also seen, increasingly, as the template for the formulation of policies, including country-specific poverty reduction strategies. But the related targets represent unrealistic medium-term objectives for some of the most impoverished and unstable parts of the world.

The question arises: how does the international humanitarian agenda relate to the broader development agenda, and specifically that articulated in the MDGs? It is a question that arises wherever people face a combination of chronic poverty and threats from natural hazards or violent insecurity. The way this question is answered affects the way in which aid policy is viewed, particularly in 'fragile' states; and has a more general bearing on public policy in crisis-prone countries. In poor but relatively stable countries, such as Bangladesh or Ethiopia, the need to respond to both short- and longer-term priorities poses a major policy challenge. In countries like Afghanistan or the Democratic Republic of Congo, that challenge is greatly compounded by chronic insecurity, political instability and institutional weakness.

What does this mean for international aid policy? The problem of trying to combine humanitarian and development agendas within one coherent policy of engagement is long-standing. It means resolving questions about concepts and principles, goals and functions, programme approaches and modes of operating, as well as practical questions about 'what works'. All of these demand to be tested against the reality of people's lives, and the diverse economic, social and political factors that affect different groups. Ideology and blueprints can sometimes get in the way.

Two agendas?

The MDGs focus on many of the same human concerns that characterise the humanitarian agenda: and in areas such as nutrition, child and maternal health, and access to clean water, there is a direct overlap. So what distinguishes

the humanitarian and development agendas? At one level, they merge into a general concern with human well-being and the alleviation of human suffering. But for humanitarians the emphasis is firmly on the latter, with the stress on actual or imminent threats to life, health, subsistence or security. In practice, humanitarian action tends to hinge on the identification of a 'crisis', understood as a dangerous deviation from the prevailing norm. Such action is characterised by relatively short-term horizons and limited goals, but a strong corresponding sense of moral imperative to act in the face of human suffering. Beyond that, it is largely non-aspirational. While it is certainly concerned with human dignity, it has little intrinsic concern with social justice, empowerment, sustainability or some of the other touchstones of modern development thinking. In other words, it takes the world as it finds it. Poverty is a contingent factor here, not a defining concern – even though the links between risk, vulnerability and poverty are very clear.

Development, by contrast, has become defined – more or less – as poverty reduction. The concept of poverty has itself evolved beyond its direct concern with human needs and capabilities to include social and political dimensions, reflected in a concern with rights issues such as access and social justice, and voice and accountability. This is a progressive agenda with broad aims that are only partly captured by the MDGs. While the MDGs re-focus attention on needs and capabilities, setting tangible targets to be reached within a defined timeframe, they lack the categorical and universal nature of the humanitarian imperative. This is the belief that no-one should be allowed to suffer in certain ways.

Bridging the divide

The achievement of the MDGs by 2015 will be a hollow victory if those who are worst off – including many of those living in fragile states – see little or no improvement in their living conditions. To say, for example, that Afghanistan or Southern Sudan lag behind on the MDGs is to state an obvious truth, but not a

very helpful one. As well as starting from a very low base in terms of human development, such places lack the necessary political and institutional basis for achieving ambitious medium-term objectives, however much funding is available. Insecurity and low absorptive capacity – the limited capacity of countries to absorb and spend aid in an effective way – are two of the limiting factors. Clearly, such circumstances require goals that are appropriate to the context, including realistic timeframes for achieving change.

The case of Ethiopia, on the other hand, suggests that it is possible to use the MDG template, even where the development base is very low, given the necessary financial, political and institutional backing. Ethiopia has made great strides on some of the MDG indicators, particularly on child mortality and nutrition, but it is still grappling with the over-arching problems of poverty and vulnerability. Ethiopia shows that sustained international financial assistance and consistent national economic growth are in themselves not sufficient to reduce poverty and vulnerability, particularly among subsistence farmers. The more general lesson from Ethiopia is that the traditional relief/development model is simply inadequate to address problems that are intrinsically related, like chronic poverty and vulnerability to acute food insecurity. Social protection measures, such as the Ethiopian productive safety net scheme, are part of the necessary ‘missing link’, though their developmental potential is debatable. Neither relief nor social protection – alone or together – can be expected to transform people’s lives and achieve the MDGs; but in the meantime they may be essential to protect lives and livelihoods.

Social protection in these contexts deserves more of the sense of imperative that is given to humanitarian action. Indeed, most humanitarian expenditure now goes to situations of ‘protracted crisis’, where violence and instability compound poverty and lack of development. Far from being treated as deviations from the norm, the ‘norm’ itself is redefined in these contexts. Humanitarian assistance often fulfils a basic welfare function, providing services and safety nets (however inadequate) for those for whom there is no prospect of social protection from the state, and little prospect of development in the medium term. The relief/development distinction can seem irrelevant: people simply need help in the daily struggle to survive with dignity. The policy and operational challenge is to provide the appropriate help on the scale and for the duration that it is needed. Sustainability is a key concern, and post-conflict state-building poses particular problems in this area. How do we scale

up service delivery and consolidate a peaceful new political order, while at the same time building up (rather than simply bypassing) indigenous institutions that may be severely weakened?

The way forward

It is true that there have been efforts to ‘localise’ the MDGs in recent years, in recognition of the very different start points across – and even within – different countries, and the need to encourage local ownership and definition of performance targets. However, the focus has been on situations of low capacity rather than on the more difficult fragile state environments. It is essential to understand what lies beneath the figures on progress towards the MDGs in fragile states, why different forms of inequality (regional in Sudan, horizontal in Sri Lanka, etc.) persist at the sub-national level and why this matters. There needs to be much more energy devoted to issues of targeting and accountability, and recognition that even small progress in fragile states is big news.

The MDGs may not provide the perfect template, but that does not mean that realistic goals cannot be set for key indicators (health, nutrition) and for the (re-) establishment of services and systems while ensuring basic minimum provision for all in the short term. The appropriate mix of funding, technical support and direct service delivery will always be a matter for judgement, on a case-by-case basis. But the same sense of imperative that drives humanitarian intervention in acute crises needs to inform our responses to those more protracted, but often more deadly, situations described above. Without this, the very notion of ‘longer term’ becomes an irrelevance for many.

So what should we conclude about the humanitarian–development divide? Some argue that it is artificial, and that it creates an ideological and institutional barrier to more progressive programming. We should certainly be wary of a crude distinction that divides the world into ‘crisis’ states on the one hand and ‘normal’ states on the other. It is more accurate to say that the distinction is not artificial, but simply inadequate to describe the reality of people’s lives. Our responses should be driven not by our ideological preoccupations, but by the dictates of each situation and by our common humanity.

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