

HPG report

Inclusion and exclusion in humanitarian action: findings from a three-year study

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Acronyms

AAP	accountability to affected populations
CSO	civil society organisation
HC	Humanitarian Coordinator
HCT	Humanitarian Country Team
HPG	Humanitarian Policy Group
IASC	Inter-Agency Standing Committee
INGO	international non-governmental organisation
IOM	International Organization for Migration
M&E	monitoring and evaluation
MSNA	multi-sector needs assessment
OCHA	Office for the Coordination of Humanitarian Affairs
RG2	Results Group 2 on Accountability and Inclusion
sclr	survivor- and community-led response
SDC	Swiss Agency for Development and Cooperation
SOGIESC	sexual orientation, gender identity and expression, and sex characteristics
VAF	Vulnerability Assessment Framework
VASyR	Vulnerability Assessment of Syrian Refugees
YHF	Yemen Humanitarian Fund
UN	United Nations
UNHCR	United Nations Refugee Agency

Executive summary

In recent years, the humanitarian sector has started paying more attention to those it leaves behind, such as people with disabilities, older people and speakers of minority languages. Since their needs are so often sidelined amid efforts to serve as many people as quickly as possible, this development is both welcome and overdue. In practice, however, translating attention to inclusion into action remains an uphill struggle. This report seeks to explain why, and to suggest what to do about it. It draws on findings from a three-year research project by the Humanitarian Policy Group (HPG) focused on understanding the dynamics of inclusion and exclusion in humanitarian action, including case studies in north-east Nigeria; the Rohingya refugee response in Cox's Bazar, Bangladesh; the urban refugee response in Jordan; and the complex mix of post-conflict recovery and natural-hazard-related disasters in Mindanao, the Philippines.

Towards a working definition of inclusion

Although there is no common definition, approaches to inclusion generally focus on ensuring equitable access to assistance and protection, and on taking into account the patterns of marginalisation that people may experience. This means being sensitive to the barriers people face when trying to access support, making sure that support is tuned to their diverse needs, and recognising their capacity to participate in and shape how aid is delivered. Ultimately, it is a way to put the principle of impartiality into practice: a proactive effort to make sure humanitarian action truly reaches those most in need.

Underpinning all this is the need to think about how exclusion takes place, and who does what to whom. The vulnerabilities people experience in crises do not just happen. Rather, they are the result of current and historical processes of marginalisation. This also highlights the idea that humanitarian responses should be rights-based, both focusing on addressing needs and thinking about the denials of rights that so often drive them.

Narrow and technocratic approaches are the norm

Across our research, we found that approaches towards inclusion were fragmented. Often, inclusion was reduced to a technical focus on forms of discrimination based on single individual characteristics – such as disability and age – and framed more as something to do as a targeted activity rather than a mainstream element across programmes. At worst, we saw a tendency to view inclusion as a passive process – the idea that if we do not actively discriminate, then we are being inclusive and that is good enough. Similarly, many efforts to support inclusion are quite narrow, focusing more on symptoms than on causes. For example, agencies often work to boost the numbers of women or people with disabilities in service committees, but this can be ineffective or actively harmful if it does not address the more fundamental challenges that prevent them from exercising their voices in the first place.

Scale is also important: humanitarians are generally better at thinking of inclusion at the level of individuals or small groups – for example, in targeting how assistance is delivered, which is where technical approaches come to the fore. They are less good at working at the macro level, where the problems may be more political in nature. We saw this in both Jordan and Mindanao, where areas with lower concentrations of affected people, or that were more difficult to reach, received less funding even in relative terms compared with areas that were the centre of humanitarian attention. This meant that location was in some a more important factor in determining access to assistance than need. In Nigeria, the exclusion of men and boys of fighting age from garrison-style camps – and hence from humanitarian assistance – also highlights the link between understanding inclusion and advocacy work on the equity of the overall response.

Outside inclusion-focused organisations, we also did not see much evidence of a strong link between inclusion and rights: inclusion is more often framed in terms of meeting needs or improving programme effectiveness. While this sounds semantic, our research in Bangladesh suggests that this is limiting the scope for affected populations to actually hold service providers to account, as well as to advocate for their own priorities and aspirations.

Although they exist for good reasons, the artificial boundaries separating humanitarian action from the wider contexts in which it takes place can also cause major problems for inclusion. Time is an important factor: when humanitarian responses based in the ‘perpetual present’ do not engage with the long histories of crises, this can severely limit their inclusivity. In Bangladesh, the decades-long sociopolitical marginalisation of the Rohingya has heavily limited the effectiveness of standard humanitarian accountability approaches because asking people whether they have been engaged effectively on water and sanitation projects borders on the meaningless when their identity, language, culture and rights are being eroded. Similarly in Mindanao, humanitarian inclusion efforts during periods of acute crisis often run counter to a set of priorities and approaches born of a long-running peace process. At the same time, specific inclusion challenges are often tied to wider structural questions that affect not just those people that humanitarian agencies are supporting, but also other vulnerable groups. This is especially true in urban responses, where host and displaced populations live together in overlapping social and administrative spaces. As the negative impacts of the Jordan Compact on both non-Syrian refugees and migrant workers show, solutions that focus narrowly on one population may not just exclude, but actively harm other people stuck on the periphery.

Inclusion is delayed and deprioritised

Inclusion tends to arrive late as a priority in humanitarian responses. This is a problem both because of who gets left out in the interim and because it is a false economy. In complex emergencies, there is often no ‘good time’ to focus on inclusion – ‘later’ might be when things stabilise, but just as often it is when funding dries up, the politics start to get really difficult, or the crisis evolves in a new direction entirely. At this point, bad habits or flawed assumptions from the early days of a response can get locked in and are hard to change.

Leadership is important in setting the terms for inclusion. On this factor, we saw that donors were often among the most vocal in demanding more focus on various aspects of inclusion (although which aspects get more attention varies from donor to donor and context to context). This stands in contrast to comparatively limited actions by senior leadership within responses themselves. The question of who is responsible for inclusion is also fraught and involves a lot of shifting responsibility: accountability is for the ‘Communication with Communities’ working group, disability is protection’s job. Inclusion-focused organisations can be crucial in helping to sharpen the focus, but their coverage is limited. Without any overarching mandate or leadership on inclusion at the response level, whether the needs of entire groups are properly considered can be dependent on whether a small handful of specialist organisations happen to be present.

The lack of high-level commitment was often accompanied by a lack of tools to assess, track and evaluate progress on inclusion. While efforts have been made to strengthen the coverage and consistency of assessments to make sure areas and individuals are not overlooked and can be better prioritised, there is still a tendency to over-focus on quantitative information that does not adequately address how exclusion happens or the barriers people face, a lack of data on hard-to-measure issues or marginalised population groups, and a reliance on top-down approaches that overlook the capacity, agency and rights of the populations involved. There are also missed opportunities to better analyse existing data to see who is missing from the services that humanitarians provide. Meanwhile, a continued tendency to focus on outputs and coverage as measures of success by both donors and responses contributes to an ongoing failure to incentivise more inclusive responses.

Links need to be drawn between inclusion, participation and local leadership

How humanitarians view inclusion often clashes with how affected people understand the world, with substantial implications both for aid outcomes and for relationships of trust. In Mindanao, where communities play a significant role in mutual support, people we spoke to understood inclusion as a dynamic process over time, starting with the triage of the most urgent cases and branching out to encompass entire villages or neighbourhoods. This clashed with the static, category-based approach applied by the humanitarian actors they dealt with, leading to perceptions of injustice and inefficiency, and exacerbating social tensions. Here, the distance between decision-makers in aid organisations and the actual process of aid delivery can be a real problem. At senior levels, the dynamics of exclusion are often poorly understood, while those responsible for programme delivery are not necessarily empowered to act on the exclusion they see happening around them.

A related problem is the reluctance within the humanitarian sector to hand over greater control to local and national actors, and to affected people themselves. This means that the role communities can play in prioritising vulnerabilities that outside actors cannot see or monitor is often overlooked. Here, humanitarians are often acutely sensitive to the risks of unequal community power dynamics, but at the same time, engagement with these power dynamics can be quite superficial. A good example is the issue of gatekeepers and intermediaries that humanitarians often have to work through to reach communities. These actors can play critical roles, both positive and negative, in translating inclusion to

local contexts. But the question of how to engage with them effectively while also managing resulting exclusion is less well understood. Local organisations and civil society can play a vital role here, as they are often better placed to understand and navigate local dynamics of inclusion and exclusion and maintain closer relations of trust with affected people. However, like their international counterparts, they are also subject to the power dynamics, norms and biases of the contexts in which they operate. Here, the positionality of different organisations with respect to the communities they serve will have a significant bearing on the ways they can support more inclusive responses, as well as how they themselves approach the needs and vulnerabilities of the most marginalised. A critical issue here is maintaining multiple entry points to working with affected communities towards building more inclusive responses. Ultimately, no single approach or intermediary will be right for everyone.

Recommendations

Humanitarian actors' commitment to the core principle of impartiality requires a focus on prioritising the most urgent cases and non-discrimination. Not including people who are marginalised and discriminated against is thus not just a failure of inclusion, but also a failure of humanitarian action itself. In order to be effective and impartial, humanitarian responses must therefore become more inclusive. To incentivise and achieve this goal, humanitarian leadership, operational actors, specialist organisations and donors should work together with affected communities to:

- **Adopt strong inclusion policies and inclusive humanitarian policies** at global and organisational level. In particular, this should include the adoption of a clear Inter-Agency Standing Committee (IASC) policy on inclusion, as well as clear definitions of success for the mainstreaming of 'leaving no one behind' across its workstreams and taskforces.
- **Rebalance humanitarian responses towards quality and equity**, for example through more explicit commitments in Humanitarian Coordinator (HC) terms of reference and Humanitarian Country Team (HCT) compacts, as well as the rebalancing of donor and response reporting and measures of success away from numbers and coverage and towards inclusion.
- **Adopt strategic indicators and approaches to operationalise impartiality in humanitarian responses** through clear response-level strategies and definitions of success; stronger twin-track approaches where the complementary responsibilities of mainstream organisations and inclusion specialists are clearly established and properly resourced; and strengthened coordination structures and advisory services.
- **Address the fragmented nature of inclusion through more intersectional approaches and greater collaboration** by adopting more holistic and joined-up approaches to guidance, training and specialised programming; more collective work and advocacy around common challenges undermining inclusion; and funding strategies that support collaboration rather than competition between different inclusion focuses.
- **Ensure sufficient resources and capacity exist to support inclusion at an operational level** through leadership-level commitments to mainstreaming inclusion within humanitarian organisations; more inclusive human resources and hiring practices across the sector; and flexibly funded, multi-year programming able to adapt to evolving understandings and needs.

- **Inform inclusive responses by adopting a rights-based understanding of needs and vulnerabilities**, complementing quantitative assessments of need with qualitative understandings of root causes, barriers and enablers, bringing in diverse expertise and resources from outside the humanitarian sector where necessary.
- **Track exclusion in humanitarian response as part of a renewed commitment to effective impartiality** by interrogating and acting on regular monitoring and evaluation (M&E) data to better understand who is not being seen and heard, and why, as well as commissioning dedicated inclusion audits to assess issues systematically.
- **Uphold participation and accountability as a right for all people in crisis** by adopting more pluralistic approaches focused on engaging with a broad and diverse range of communities and groups. This should be underpinned by strong commitments to a rights-based approach to participation in policy, strategy and programming.
- **Centre the role of local actors in supporting more inclusive responses** through efforts to ensure organisations representing marginalised groups are embedded in response-level decision-making structures and able to access good-quality funding, and more closely linking policy and coordination approaches focused on local leadership and inclusion.
- **Strengthen links between humanitarian inclusion and the ‘nexus’**, by emphasising inclusion in policy and programming at the intersection of humanitarian, development and peace-building, as well as fostering stronger links between humanitarian actors working on immediate symptoms of exclusion and human rights organisations, civil society groups, national and local governments, and others working to address the root causes of exclusion along wider timelines.

1 Introduction

Inclusion has, whether implicitly or explicitly, always been a critical component of humanitarian action. Since the mid-2010s, however, it has gained increasing prominence as a specific agenda for policy and practice. The 2016 World Humanitarian Summit called for more inclusive humanitarian action, producing both a charter on inclusion of persons with disabilities in humanitarian action (Inclusion Charter, 2016), and an ‘inclusion charter’ promoting more impartial humanitarian action for vulnerable groups (Humanitarian and Disability Charter, 2016). Meanwhile, the United Nations (UN)’s 2015 commitment within the Sustainable Development Goals to ‘leave no one behind’ has been increasingly integrated into humanitarian rhetoric. Recent years have also seen the proliferation and growth of organisations focusing on advocacy and programming around specific aspects of inclusion, such as HelpAge (older people), Translators Without Borders/CLEAR Global (language), Humanity and Inclusion, and CBM (disability), Minority Rights Group (ethnic and religious minorities, indigenous groups) and Edge Effect (people with diverse sexual orientation, gender identity and expression, and sex characteristics – SOGIESC). Donors have also shown growing willingness to fund efforts to strengthen inclusion, and deployments of specialist advisors on gender and disability in particular are becoming the norm in large-scale humanitarian responses.

Despite these developments, there are signs that inclusion may be starting to lose traction as a policy agenda: although the Inter-Agency Standing Committee (IASC) has, since 2019, convened a dedicated Results Group (RG2) to provide guidance and technical support on achieving collective outcomes for accountability and inclusion, this group was disbanded in early 2022 and replaced with a Task Force focusing only on accountability.¹ While IASC has maintained a cross-cutting commitment to leaving no one behind, this is not matched with any explicit reflections in the structure of its current Task Forces, or with any indication of how this will be conceptualised, monitored or enforced.

This is especially troubling given that a significant body of evidence – including this study – suggests that existing commitments and efforts are still struggling to be translated into meaningful impact for many of the most marginalised people living through crises today (CHS Alliance, 2018; Barbelet, 2018; Devakula et al., 2018; CBM and JONAPWD, 2019; Robinson et al., 2020; Murphy and Bourassa, 2021). Humanitarian efforts to prioritise are often uneven in who they see and which needs count, people’s specific needs often fall by the wayside amid efforts to reach the most people as quickly as possible and ‘participation’ rarely focuses on the most marginalised or results in meaningful decision-making power for affected people.

This report seeks to explain why humanitarian responses still struggle with inclusion, and to suggest what to do about it. The questions and ensuing research that underpin this report are elaborated in Box 1.

¹ Formally, Task Force 3 on Accountability to Affected Populations, scheduled to run until the end of 2023.

Box 1 Humanitarian Policy Group's three-year study on inclusion

This report draws on findings from a three-year research project by HPG: 'Falling through the cracks: inclusion and exclusion in humanitarian action'. This was built around three central questions:

- What are the drivers of inclusion and exclusion in humanitarian crises including drivers that exist outside the practice of humanitarian actors?
- What and whose needs are included and excluded and by whom in humanitarian action?
- What does an inclusive approach to humanitarian action look like?

These questions were framed by a literature study focused on understanding what inclusion means in humanitarian action, how it relates to other key concepts, and current obstacles to humanitarian action (Barbelet and Wake, 2020). This was followed by primary research in the form of four case studies carried out in 2020–2021, focusing on: the internal displacement crisis in north-east Nigeria (Barbelet et al., 2021a); urban refugees in Jordan (Gray Meral et al., 2022); the complex mix of post-conflict recovery and natural-hazard-related disasters in the Philippines' Bangsamoro Autonomous Region in Muslim Mindanao (Fernandez et al., forthcoming); and participation in the Rohingya refugee response in Bangladesh (Lough et al., 2021). These were complemented by a small number of interviews with operational actors and inclusion specialists working at global level for the UN and international non-governmental organisations (INGOs) and donors. Throughout its course, the project also sought to maintain a dialogue with communities of policy and practice around inclusion, which has also informed the analysis in this report. In 2021, HPG worked with RG2 and other actors to facilitate discussions on inclusion as a priority topic at the UN Office for the Coordination of Humanitarian Affairs (OCHA) Humanitarian Networks and Partnerships Week, culminating in a summary note outlining common issues and ways forward (Barbelet, 2021). Following the completion of primary research for the study, HPG also hosted three research workshops with policy-makers and practitioners on tackling operational challenges related to inclusion, improving inclusive community engagement and accountability, and supporting a more intersectional inclusion agenda. The outcomes of these discussions are summarised in a policy brief (Barbelet et al., 2022).

1.1 Defining inclusion

While inclusion as a concept has been widely discussed across the humanitarian sector over the years, there is no commonly accepted definition. Based on the points of emphasis common to a range of interpretations put forward by different actors (i.e. CHS, 2014; Handicap International, 2015; Searle et al., 2016; Age and Disability Consortium, 2018; IASC, 2019), for the purposes of this research we understand inclusion in humanitarian action as involving the following four linked elements:

- **Impartiality:** ensuring through inclusive assessments and the use of disaggregated data that humanitarian action reaches and focuses on the most urgent cases and those most affected by crises, without discrimination.
- **Equitable access:** ensuring that all individuals affected by crises can have equal access to services and assistance.
- **Specific and diverse needs:** ensuring that humanitarian responses address the specific needs of individuals and cater to diverse needs, including tailored programmes.
- **Participation:** ensuring that all individuals are able to participate in humanitarian responses, including influencing the strategic direction of humanitarian responses; that the capacities of all individuals are recognised and harnessed; and that humanitarian responses listen to the voices of those too often marginalised in societies and communities.

As Barbelet and Wake (2020) highlight, successfully realising these elements requires them to be situated within a clear analysis of power. Contrasting with the largely static, ahistorical concept of ‘vulnerability’ (see Box 2), this involves looking beyond who has what needs (i.e. a focus on symptoms), to how those needs have arisen in the first place (i.e. a focus on causes). Inclusion and exclusion are *relational* processes. The root causes of why some individuals and groups have more urgent needs, or struggle to access assistance, are often grounded in long histories of marginalisation by other people, whether in the form of prejudice, social norms or political manoeuvre. Here, the language of *rights* is important in providing a clearer way both to link processes of marginalisation with their outcomes in humanitarian settings, and to reframe the relationship between marginalised people and the aid actors who serve them. Specifically, it interprets exclusion as an unacceptable denial of rights guaranteed by national and international law, while framing marginalised people in crises as rights-holders to whom aid actors and states have obligations, rather than the fortunate recipients of charity. This implies paying much closer attention to people’s *capacity* as agents of their own destiny, rather than as passive recipients of assistance. In this respect, participation – as the power to speak up and have one’s voice heard – underpins all other aspects of inclusion: if marginalised people are able to meaningfully engage with aid actors about the challenges they face and their priorities for assistance, they are more likely to be accounted for and involved in how assistance is prioritised, designed and delivered. This is not just a question of ‘raising voices’ – understood fully, participation is ultimately a political process, a means to organise, make demands and rights claims of aid providers and duty-bearers, and to hold them to account over failures to uphold commitments (Arnstein, 1969; Chambers, 1994; VeneKlasen and Miller, 2007).

Box 2 Inclusion, vulnerability and intersectionality

Across much of humanitarian action, meeting the needs of the most marginalised is often approached through the lens of ‘vulnerability’. This focuses on factors affecting the likelihood of people facing threats, and their ability to withstand them (Global Protection Cluster, 2017). While this overlaps with inclusion’s focus on specific needs and equitable access, inclusion generally goes beyond vulnerability in its focus on capacities, rights and participation. In practice, vulnerability approaches have tended to translate into the use of categories such as gender, disability or displacement status as proxies for the urgency of need that different groups are assumed to face. As several critiques have outlined, this can lead to understandings of need that are static, ahistorical, depoliticised and individualised (Clark, 2007; Miller et al., 2010; Turner, 2019; Sözer, 2019). Focusing on vulnerability categories reduces vulnerability to a ‘state of being’ without accounting for how needs emerge, how people can become more or less vulnerable over time, or how different risk factors and capacities overlap to produce what outcomes. This also reinforces approaches that focus on victimhood rather than capacity. Ultimately, this can risk a situation where people with severe needs but not falling into a specific category are even further excludedⁱ

There are early indications that some actors are seeking a move away from vulnerability as an assumed category or status, at least at policy level. Recent guidance, such as work on strengthening disability inclusion in humanitarian response plans (Perry, 2019), or ECHO’s protection mainstreaming indicator (ECHO, 2021), has sought to shift emphasis towards analysing what factors put people at greater exposure to risk in a given context. More ambitiously, the concept of intersectionality (Crenshaw, 1991) offers a potential way out of many of these limitations by encouraging a more holistic, historically and contextually grounded analysis of needs and capacities. It emphasises how overlapping experiences of discrimination (or privilege) can combine to produce specific outcomes for different people, often exacerbating existing inclusions or creating new patterns of marginalisation that are distinct from the sum of their parts. Due to the risk of its generating ‘endless complexity’, the humanitarian sector has struggled to translate this into an operational approach, although a number of recently published assessments and guidelines (e.g. UNFPA, 2020; Kabir et al., 2022) suggest an increasing willingness to engage with the issue.

ⁱ While the interpretation of vulnerability in some policy documents is more nuanced than critique suggests, this study and others like it have found that more often than not, these limitations do tend to characterise how it is operationalised in practice.

Source: Adapted from Barbelet and Wake, 2020.

In an environment of shrinking funding and expanding needs, inclusion does not imply a completist vision of meeting every need of every individual within a crisis. Rather, it involves a commitment to transparently analysing, documenting, negotiating and revisiting the challenges that responses face in determining who and what needs to be prioritised. In contexts where the scale of crises combine with conflict or political dynamics to heavily constrain which kinds of aid can be distributed to whom, pursuing more inclusive humanitarian action may also need to be balanced with the humanitarian imperative to deliver aid at all.² However, it is the assertion of this study that without putting inclusion front and centre of responses, this trade-off is too often taken as a given, rather than thoroughly interrogated.

Several respondents for this study highlighted concerns with the introduction of inclusion as a ‘new’ entry in an already crowded field of humanitarian terminology and agendas. Yet it is helpful to think of it not just as a technical niche, or an emerging policy frontier – especially given that many of its aspects are already integrated into a range of policy agendas such as participation, accountability to affected populations (AAP) and locally led humanitarian action. Rather, inclusion should be seen as the process through which the ideal of impartiality is operationalised – and thus as central to principled humanitarian action. By placing renewed attention on this process, it offers a way to close the gap highlighted in research elsewhere between asserted commitments to impartiality, and clear guidance about what actually putting that into practice might look like (Healy and Tiller, 2016; DuBois, 2018; Kossman, n.d.).

² As Pictet (1979, cited in Healy and Tiller, 2016: 63) asserts, this involves balancing ‘proportionality’ – ‘for equal suffering, equal assistance; for unequal suffering, assistance in proportion to the extent of suffering’ – with practicality – acknowledging that in many circumstances the realisation of fully proportional assistance is simply not possible if aid is to be effective.

2 Disjointed landscapes: how the humanitarian system conceptualises and understands inclusion

In the absence of a clear definition or a guiding policy framework, understandings of inclusion within the humanitarian sector are heavily fragmented. There is a tendency for different aspects of inclusion to be made discrete from one other, and rarely framed within a more overarching approach to understanding and addressing who is falling through the cracks, and why. This fragmentation is accompanied by a tendency to understand inclusion in narrow terms – as a technical or operational concern, rather than a higher-order question of rights, root causes or political economy. These trends can generate disjointed landscapes of inclusion within humanitarian responses, in which certain populations, vulnerabilities, needs and capacities catch the attention of practitioners, while others remain overlooked, or unseen entirely.

2.1 Fragmentation of approaches

In many cases, inclusion is still understood in categorical terms, focusing on specific groups of people or categories of need, such as gender, people with disabilities, people with diverse SOGIESC, religious and ethnic minorities, and beyond.³ This has a number of implications for how inclusion is operationalised in practice. First, seeing inclusion largely as a proliferation of different categories all requiring their own specific approaches has led to a sense of being overwhelmed and being asked to do too many things at once, especially among programme teams with limited time and resources (Barbelet et al., 2018a; Barbelet, 2021). Related to this, it can have the unintended effect of creating hierarchies between different marginalised or vulnerable groups in terms of what or who gets prioritised. Across our case studies, for example, we found a widespread perception among both aid workers and affected communities themselves that an entirely justified focus on the specific needs of women and girls by humanitarian actors was happening at the expense of, rather than in balance with, those of men, boys and gender-diverse people. As Barbelet and Wake (2020) highlight, breaking things down into categories can reduce inclusion to a question of ‘marketability’ in terms of what gets funded, with ‘women and girls’ competing with ‘older people’ to attract the attention of donors in competitive bidding processes. Absent altogether from these hierarchies are axes of inclusion that do not fall neatly into categories because they are not always identity-based or easily visible – such as race, social class or stigmatised occupations. In general, these aspects tend to lack the same kinds of communities of expertise and advocacy that have forcefully pushed for greater sensitivity to other aspects of inclusion over the years at both the global and response levels.

3 Even more narrowly, we found in policy documents, in the design of events and in panel discussions, and even in the initial assumptions of some of our interviewees, that ‘inclusion’ is often implicitly equated more or less directly with policy and programming around disability.

Categorical understandings of inclusion can also mean that different forms of exclusion or patterns of need tend to be analysed and addressed in isolation from each other. This generates two issues: first, it reinforces an approach in which exclusion due to belonging to a given category is assumed rather than properly assessed; and second, it can lead to a failure to understand needs holistically in terms of how they overlap with each other. In Jordan, for example, we spoke to a female head of household who reported being deprioritised for assistance after her son turned 18, on the assumption that her son could then work and support his mother, despite his having a heart condition that rendered him unable to work. Although there had been no meaningful change in her circumstances, a change in one vulnerability category was here crudely interpreted as trumping another, while a third was overlooked entirely.

Siloed approaches to inclusion also mean that it often ends up being handled as a specific set of activities or processes, often run in parallel to other programmes, rather than an overarching outcome. This extends beyond the question of categories to other approaches that address key aspects of inclusion, such as AAP (HAG, 2021) or protection mainstreaming (Cocking et al., 2022). While this may often be necessary and can carve out space for specific issues to be considered in-depth, handling inclusion in this way can leave it weakly connected with other programming – as demonstrated, for example, by common complaints among AAP practitioners that the outcomes of their work are often met with a ‘take it or leave it’ attitude or active resistance by other humanitarians. Running inclusion as a separate ‘technical’ activity can also lead to a disconnect between the specialists running it and the higher-level, political processes of decision-making within a response. It can also lead to a mystification of certain issues: SOGIESC inclusion (HAG, 2018) or ethnic marginalisation (Thomas and Opiyo, 2021) are sometimes viewed as being ‘too hard’ or ‘too sensitive’ for mainstream operational actors to meaningfully address.

Ultimately, putting inclusion into a separate silo contributes to an ongoing tendency to see it as an optional ‘bolt-on’ activity rather than an intrinsic part of good humanitarian programming. As one UN interviewee explained:

I think often [it’s] very standalone, we have a specific [activity] (...) But they’re still not a part of the mainstream (...) And we still see that the largest programmes for humanitarian response are the very blanket (...) mass programmes that don’t have inclusion. They may have a 10% budget dedicated to inclusion. So it’s again seen as an add-on, like we add inclusion and stir, it’s not like everything we do has to be inclusive, we have a separate thing (...) So I think it becomes a risk that it can just be added on as a small component of the larger, rather than being the whole purpose of everything we do.

2.2 Narrowness of vision

Handling inclusion as a specific programming function rather than a core consideration of a response as a whole can also result in a narrowing of vision in terms of both what it entails and the kinds of approaches and actions that are required to support it.

2.2.1 Inclusion and rights

Across the contexts we studied, the denial or suspension of the rights of affected people were a key driver of exclusion (in terms of both long-term processes of marginalisation and vulnerability, as well as exclusion from aid): the denial of property rights for people with complex land tenure arrangements displaced after violence and natural hazards in Mindanao; the suspension of due process for men and boys summarily detained by security services in north-east Nigeria; the differential and contingent access to refugee rights among Syrians and asylum seekers from other countries in Jordan; and the denial of the very ‘right to have rights’ for stateless Rohingya in both Myanmar and Bangladesh. Yet despite commitments to rights-based humanitarian responses⁴ laid out in widely endorsed global policies such as the Core Humanitarian Standard, or the IASC’s Centrality of Protection statement (IASC, 2013) and subsequent Protection Policy, we found that the link between inclusion and rights is patchy at best.

At a basic level, this includes a limited grounding of needs and response analysis within a rights framework, demonstrated for example by a consistent focus on deficits – i.e. whether people are having their needs met – rather than by the barriers preventing them from the realisation of rights (Darcy and Hofmann, 2003). Similarly, seeing affected people as defined by what they lack rather than as active bearers of rights may explain at least in part the failure to fully understand or acknowledge their capacities to engage with and set the direction of responses as equal partners.

This deficit-based outlook was also coupled with a tendency to frame what should be rights issues in instrumental or utilitarian terms. For example, humanitarian actors in Cox’s Bazar tended to approach participation as a means to an end of more effective or efficient service delivery, rather than a right in itself or a means to make rights claims. Similarly, many interviewees saw the exclusion of marginalised groups in the early stages of a response as a necessary function of meeting as many needs as quickly as possible, rather than a failure to ensure equal rights for all. At a political level, we also saw evidence that – even when the significant challenges and limitations are acknowledged – many humanitarian actors are over-cautious or slow to advocate for affected people’s rights when doing so may be sensitive, such as when it runs counter to the objectives of host governments (Section 3.3; see also Niland, 2014; Mahoney, 2018; Davies, 2021).

4 Emerging in the 1990s following the Rwandan Genocide and incorporated into humanitarian policy in the 2000s, rights-based approaches to humanitarian action seek to ground the basis and operation of humanitarian responses not just as a moral or principled response to needs and human suffering, but within systems of legal rights and obligations established in international treaties such as the International Covenant on Civil and Political Rights, or the Convention on the Elimination of All Forms of Discrimination Against Women. This sees the goal of humanitarian action as not just the fulfilment of needs but the meeting of rights; establishes affected populations as rights-holders, with humanitarian actors and ultimately states as duty-bearers responsible for meeting them; and codifies these understandings into efforts to design and monitor humanitarian action such as the Core Humanitarian Standard (see, for example, Slim, 2002; Benelli, 2013; Borgrevink and Sandvik, 2021).

By contrast, pockets of greater emphasis on rights do exist, most notably in the approaches of specialist inclusion organisations. For example, much of the work around both disability advocacy and programming uses rights language to frame demands that people with disabilities must be better served by humanitarian responses, and as a way to ground narrow questions of meeting needs within a wider focus on solidarity and empowerment. However, these focused efforts have yet to spill over into how humanitarian responses handle rights more generally.

2.2.2 The boundaries of a 'crisis'

The widely observed tendency of humanitarian action to approach crises as singular events in both time and (literal or conceptual) space has significant implications for inclusion. Here, the drive to focus on immediate, acute needs can leave humanitarian action operating in a 'perpetual present' (Bennett, 2016: 13) that takes limited account of both pre-existing histories in which it intervenes, and the medium-term 'post-crisis' realities it contributes to creating. In the context of inclusion, this is reflected in limited attention to root causes – the structural and contextual dynamics that drive exclusion in the first place. This can limit the effectiveness of efforts to be more inclusive by either misdiagnosing or mistreating the problems humanitarian efforts are trying to fix. In Cox's Bazar, for example, efforts to strengthen participation and AAP focused on increasing the presence of marginalised groups in consultative processes, but rarely linked these with the underlying issues – such as lack of access to education, exclusion from political or civic participation, shattered community cohesion – that constrained people from meaningfully expressing themselves in the first place. Meanwhile in Mindanao, prioritisation exercises by external actors often failed to account for the importance of social cohesion and consensus in the context of an ongoing and fragile peace process still marked by intermittent outbreaks of conflict.

At worst, short-sighted approaches to inclusion not only lead to people falling through the cracks, but also actively perpetuate and compound their marginalisation. Writing in the context of the response to Hurricane Katrina, Adams (2013, cited in Madianou, 2015) documents how the privatisation of disaster relief actively caused harm by deepening existing race and class-based inequalities, effectively producing a 'second-order disaster' with impacts on people's well-being in many cases just as severe as the initial shock. In Somalia, Jaspars et al. (2020) outline how the lack of a political economy analysis of how aid is delivered has contributed to transforming internal displacement camps into lucrative businesses for 'gatekeepers', who impose heavy taxes on aid and ground rent, while pushing politically marginalised camp residents into exploitative labour conditions to survive. Conversely, drawing an arbitrary divide between meeting immediate needs and a focus on longer-term aspirations can end up running counter to the priorities of communities themselves, who invariably see the two as interlinked, and existing on a continuum. This misses opportunities both to more effectively support communities' own capacity to respond to crises as they see fit, and to support resilience in the face of recurring shocks (Corbett et al., 2021).

Fixing humanitarian crises in time is often accompanied by drawing similarly arbitrary boundaries around what a crisis is and who it affects. As multiple examples within our Jordan case study demonstrate, focusing on a single event or ‘caseload’ of people can have significant detrimental impacts on wider social inclusion beyond that immediate ‘bubble’. Here, an emphasis on meeting the needs of Syrian refugees actively hurts the ability of refugees from other nationalities to secure livelihoods or to access assistance. Similarly, efforts to support Syrian refugee access to labour markets brought them into direct competition with already vulnerable Jordanian-Palestinians – who have largely been confined to work in low-wage industries by decades of sociopolitical marginalisation (Grawert, 2019). Beyond a generally reactive focus on ‘social cohesion’ when ‘host communities’ dealing with the fallout of humanitarian decisions taken in isolation start to push back, these issues are rarely factored into humanitarian decision-making. As the Covid-19 pandemic also demonstrates, humanitarian boundaries can prove similarly inflexible when circumstances shift and new forms of acute need emerge. As one donor working on the Syria refugee response explained:

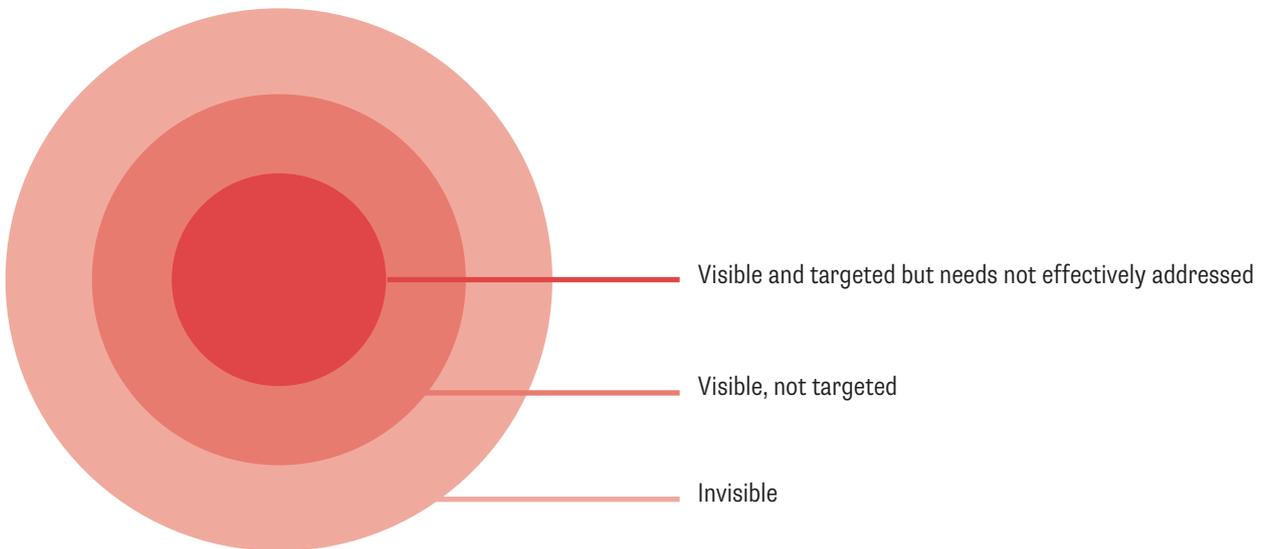
We heard anecdotal evidence about domestic workers being abandoned by their families who employed them, refusing to pay them, kicking them out on the street, turning to sex work. And we thought, well, that’s awful, but we’ve got our programme with our refugee burden and that’s all we can do.

Pushing too hard at the boundaries of a crisis does raise serious questions around what is ‘in scope’ for humanitarian actors. Several interviewees expressed discomfort that too close a focus on root causes or medium-term time horizons risked diluting the focus of humanitarian actors on providing life-saving assistance, driving ‘mandate creep’ into activities that were more properly the realm of development actors. Similarly, there are times when upholding the principle of impartiality may sit uncomfortably with respect for neutrality when addressing or even discussing certain needs or certain populations is perceived as a politically charged act. These are genuine tensions, and there is no straightforward consensus on how to resolve them (on mandate creep, see for example DuBois (2018) against Fal-Dutra Santos (2018)). At the very least, humanitarians have a responsibility to engage with wider contextual drivers and processes of exclusion in order to mitigate their impacts on humanitarian outcomes, as well as to make broader efforts to connect their work with other actors where solutions to exclusion within humanitarian work may ultimately fall outside its boundaries. This may include organisations with broader or complementary mandates such as development, human rights and peace-building actors. It also needs to involve national and local governments, who are the ultimate duty-bearers and guarantors of rights for affected people, as well as the main actors in coordinating and providing humanitarian assistance in the increasing number of contexts where the ‘formal’ international humanitarian system no longer predominates. In cases where humanitarians are the largest or sole source of assistance for prolonged periods – as in Cox’s Bazar – there may also need to be a careful re-evaluation of what ‘in scope’ looks like when a narrow adherence to mandates and principles risks generating significant and lasting harms.

2.2.3 Invisibility and impartiality

Across the case studies, we saw that current inclusion approaches generally focus on what humanitarian actors can see and measure, in other words, visible populations already targeted by assistance (see Figure 1). The emphasis is often on meeting specific needs, or identifying which individuals are more eligible for assistance in a context of limited resources. By contrast, the processes through which entire geographies or population groups are rendered invisible to responses is less commonly discussed as an inclusion issue. This can include specific areas not being targeted for assistance despite high levels of need (as with more remote islands near Mindanao that are often deprioritised for assistance due to the high cost of reaching them); specific populations that are cut out of accessing aid (as with imprisoned men and boys in the case of north-east Nigeria); or specific needs that humanitarian actors cannot easily see (as with people with SOGIESC who may limit their engagement with aid actors due to the risks this may involve). This is not a completely straightforward trend, and improved assessment processes have strengthened targeting and prioritisation of assistance at a macro level (e.g. between different districts or camp blocks). However, in the absence of more granular information, the maxim that the best way to access humanitarian assistance is to ‘be near a road’ (Healy and Tiller, 2016) continues to hold true in many circumstances.

Figure 1 Circles of inclusion and exclusion in humanitarian response



Note: Barbelet and Wake (2020) identify three main ways in which people affected by crises are excluded. The outer circle represents individuals who are invisible to humanitarian actors but vulnerable to the impact of a crisis. The middle circle represents individuals who are vulnerable to the impact of a crisis and are visible to humanitarian actors, but are not targeted by assistance and protection. The inner circle represents individuals visible to humanitarian actors and targeted by humanitarian assistance and protection, but in ways that do not meet their needs, or which they cannot access.

The lack of more serious interrogation of what humanitarian responses cannot see or do not know is also linked to how humanitarian actors interpret the principle of impartiality. We found that impartiality is often only approached passively. As several humanitarian interviewees explained, their work must be impartial – and inclusive – because they are not discriminating or favouring one group over another. But to be meaningful, this needs to involve a process of actively ensuring there is no discrimination in effect, rather than claiming it in principle. Furthermore, there is a persistent belief in some quarters that responding to the specific needs of marginalised groups represents an active breach of impartiality as it supports ‘special interests’. This is a deeply flawed misreading of the principle: as Daigle (2022) points out, reflecting people’s varied needs in how assistance is delivered does not represent privileging one group over another, but the basic foundation of effective assistance.

This attitude also highlights the fact that non-discrimination is only one component of impartiality, and needs to be balanced with equally important efforts to grapple with the question of who constitute the most urgent cases. Again, this is something that requires continued and proactive questioning of who might be missing out. As our study in north-east Nigeria found, this ‘assumed’ impartiality tends to focus more on ‘ensuring there are no inclusion errors (aid going to unintended recipients) as opposed to focusing on exclusion errors’. Ultimately, recentring inclusion agendas around *proactive* impartiality may help to place greater emphasis on seeking out who is being left behind; it could also reframe inclusion away from being an optional, specialist bolt-on, and towards it being a core component of humanitarian action enshrined in one of its most basic principles.

3 How humanitarian responses put inclusion into practice

Alongside issues of conceptualisation, the way the international humanitarian system incentivises and operationalises inclusion is also critical in determining who gets helped or ignored. This relates to questions around who is responsible for promoting more inclusive responses, the balance between mainstreaming and targeted approaches, and how inclusion is assessed, tracked and resourced. We found that dynamics in the structure of the responses we studied tended to result in the downgrading of inclusion relative to other strategic and operational concerns, and a continued focus on reaching as many people as possible over prioritisation of the most urgent cases.

3.1 Inclusion continues to be delayed and deprioritised

In general, issues related to inclusion have tended to be low on the agenda of larger-scale international humanitarian responses. Summarising experiences across our research, one disability specialist explained that efforts to promote earlier integration of inclusion concerns into responses are often met not just with indifference but also active push-back from other actors:

I feel when I ask about inclusion people look at me [as if to say] ‘What are you talking about? We have people selling their kids for meals to be able to feed the rest of their children. Do you think this is the time to ask about inclusion?’

The argument against an early focus on inclusion tends to be framed in terms of practicality: that when getting life-saving assistance out as quickly as possible to as many people as possible is the priority, other concerns that might slow this down need to be secondary. As one donor explained, ‘You don’t want to hamstring your emergency life-saving response with too many caveats because you’re simply not going to work them through in the time.’ By contrasting saving lives with being inclusive, such assertions set achieving speed and breadth of coverage at odds with questions of quality and equity (see also Daigle (2022) for similar findings on gender-focused programming in particular).⁵

However, establishing this distinction bypasses the reality that many people’s life-saving needs are still overlooked or misunderstood during the rush to push out assistance. Despite evidence of inclusion-blind basic assistance delivered in the early days of a crisis causing significant harm or failing to reach

5 This attitude contrasts notably with community-based first responses to crises in the Philippines and elsewhere (Carstensen et al., 2021), in which triage of the most urgent cases is commonly the first step taken in the immediate aftermath of a crisis (see Chapter 4).

significant parts of humanitarian caseloads,⁶ the primacy of ‘life-saving’ as an imperative that trumps all others is rarely accompanied by thinking about the counterfactual: in other words, ‘who did we hurt, or not save, by not being inclusive?’ Here, inclusion is not a question – as is sometimes assumed – of grappling with complex technical challenges from day one. Rather, it demands a greater focus on the processes that determine which people and what needs are considered and prioritised, or left behind.

Worryingly, evidence also suggests that despite assumptions that inclusion can be effectively retrofitted into programming after an initial shock has passed, such a shift can end up being deferred for months or even years. Responses in both north-east Nigeria and Bangladesh found themselves ‘running to stay still’ on inclusion due to various combinations of staff turnover, shrinking funding, an increasingly complex political landscape, and new evolutions in the crisis absorbing attention. While both responses had made inroads into certain specific components of inclusion, such as an increased focus on disability, such efforts had often taken years to establish. In Somalia, Jaspars et al. (2020) document a humanitarian response repeatedly ‘re-learning’ over many years the mechanisms by which certain people and groups are excluded from assistance, yet unable to make the fundamental adjustments to effectively address these issues. In Jordan, while a comparatively stable crisis context has allowed for significantly more focus on the inclusion of Syrian refugees over the best part of a decade, the unequal treatment of refugees from other countries has only recently started to receive mainstream attention.

These delays suggest that practicality is not the main obstacle to humanitarian inclusion: the persistent failure to address inclusion later on in responses demonstrates that there is never a ‘good time’ to do so. Indeed, mistakes and missed opportunities in the early stages of a response may actually render it even harder as bad habits get ‘locked in’, and as normal ways of working, funding cuts and political challenges become more intense.

3.2 Norms around inclusion are shifting – slowly and unevenly

Even as inclusion tends to get pushed behind other concerns in how responses are operationalised, there was a widespread perception among humanitarian workers interviewed for this study that the needs of marginalised groups are – at least rhetorically – taken into much greater consideration now than they have been in previous years and decades. These commitments tend to focus on gender and to a lesser extent disability and age, with people with diverse SOGIESC increasingly a topic of interest if not active engagement. This is true at both the global and response levels: the north-east Nigeria, Jordan and Rohingya responses were characterised by specific efforts and investments

6 See, for example, Silverstein (2008) on the harms perpetuated by gender-blind responses; Barbelet (2018) on how the design of humanitarian responses can compound the social exclusion of older people; and Dubois et al. (2014) and Crawford et al. (2021) on how ignoring appropriate community engagement in the right language in favour of top-down command and outbreak response substantially hampered the Ebola responses in both West Africa and the Democratic Republic of Congo.

in better highlighting and addressing specific axes of exclusion, such as language and translation services, gender hubs, inclusion-specific cross-sector working groups and generous funding for disability programming. Guidelines and policies rolled out at global level in recent years – such as the IASC’s age and disability guidelines (IASC, 2019) and gender handbook (IASC, 2018), or the increased emphasis on programme quality under the Enhanced Humanitarian Programme Cycle (OCHA, 2020) – have had a clear impact in raising expectations and offering opportunities to advocate for more inclusive responses.

However, these shifts are in many respects still at a very early stage. While stronger policies have clearly raised awareness, the translation into action is slower to arrive – inclusion in its various aspects is often still seen as a ‘new’ area of focus, with practitioners only recently awakening to its importance. This is partly a reflection of the comparatively slow pace of change within the humanitarian sector: by comparison, cash-based programming took well over a decade to move from a fringe concept to an operational norm despite concerted advocacy efforts. The proliferation of new commitments and guidance has also created its own bottleneck: so far, much of it is piecemeal and fragmented, with many actors pointing to the need for better prioritisation and contextualisation in order to make them more operationally useful and avoid overwhelming people.

At the same time, there is also a risk that a focus on inclusion will transition from a fashionable agenda to a tick-box item without a serious shift in norms or approach – the reduction of disability inclusion to budgeting for ramps for toilets and other facilities was frequently raised as an example, as was the widespread instance of organisations awarding themselves perfect or near-perfect scores on age and gender markers newly introduced by donors specifically to address perceived weaknesses in these same organisations’ programming. Beyond specific categories of marginalisation, there is ultimately limited evidence of any kind of shift in norms or approaches related to the need to focus on inclusion as a single, overarching challenge requiring a guiding framework or strategy.

3.3 Leadership and accountability for inclusion within response coordination

Reflecting the fragmentation of how inclusion is conceptualised, it is often unclear who (if anyone) is responsible for setting priorities on inclusion and holding others to account for doing so. There was a widespread expectation among global interviewees that being inclusive should be a collective commitment across a response as a whole, meaning that ultimate responsibility for setting strategic direction and holding others to account should lie with Humanitarian Coordinators (HCs) and Humanitarian Country Teams (HCTs), Refugee Coordinators, national disaster management agencies, or equivalent senior leadership positions, depending on the structure of a response. However, without

coherent guidance or elaboration of specific senior leadership responsibilities for HCTs in particular,⁷ which are beset by a range of competing priorities, this does not happen often in practice. In both north-east Nigeria and Cox's Bazar, the absence of impetus from the top had ripple effects throughout responses: without common understandings of what issues were important, common objectives, or common frameworks for achieving them, efforts to strengthen inclusion and participation lacked coherence and urgency. Without internal mechanisms for ensuring impartiality, this can leave change dependent on pressure from outside: in Jordan, for example, it was ultimately advocacy led by national organisations that put the long-marginalised issue of non-Syrian refugees on the agenda for donors and lead agencies.

In the absence of a specific focus at leadership level on analysing and addressing who is and is not able to access assistance and why this might be the case, complex challenges that do not neatly fit into a sector or area of technical expertise – such as political economy of clan-based exclusion in Somalia, or the conflict-related barriers to men and boys accessing assistance in Nigeria – are not always systematically addressed. This highlights the importance of seeing inclusion as a question of high-level advocacy and humanitarian diplomacy as well as an operational challenge (see Box 3).

The lack of strong leadership at HCT level results in the task of promoting various aspects of inclusion within the structure of humanitarian responses being pigeonholed within different parts of the cluster system. In particular, the protection cluster is often assumed to bear the bulk of responsibility for leadership on many aspects of inclusion. This is necessary, but not sufficient: clusters may be best placed to analyse and issue guidance on inclusion challenges related to their specific areas of work – yet as this study found, unless they are adequately resourced, they often lack the capacity to do so in practice. Given the focus of clusters on specific technical sectors such as food and health, they are also poorly placed to address more complex inclusion challenges, reinforcing the wider lack of an intersectional lens across current humanitarian approaches. This focus also means they are likely to tend towards an instrumental approach to inclusion, oriented towards better addressing a specific set of needs within a population, rather than a wider emphasis on more emancipatory or rights-focused approaches that may be equally necessary in a given context. As one UN respondent explained with respect to the protection sector:

It's like this very 'do no harm' approach, but it doesn't then address some of the social dynamics. Some of the more complex issues of inclusion, rights, empowerment, etc. It's more like it's very [focused on] protection from violence, but not protection for empowerment or participation.

7 For example, different aspects of inclusion are elaborated to varying degrees across the standard HCT terms of reference. While a collective approach to AAP is one of four 'mandatory responsibilities', marginalised groups are reduced to one of a number of 'cross-cutting issues' to be accounted for in needs overviews, while questions of prioritisation and barriers to assistance do not feature. At the same time, policies such as the IASC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action highlight additional actions for HCTs to take, but so far these seem to be accruing in a piecemeal fashion without a coherent overarching vision.

Box 3 Inclusion, advocacy and humanitarian diplomacy

In many contexts, who gets to be included in humanitarian assistance is linked to fundamental questions about how people are treated by states or parties to conflicts, whether rights can be upheld, whether humanitarians can have access to populations (and under what kinds of conditions), and what kind of assistance they are permitted to deliver. In this respect, criticisms of humanitarian leadership in both Nigeria and Cox's Bazar were not just about a lack of strategic direction on how the response should operationalise inclusion, but a failure to advocate forcefully enough for the humanitarian space that would facilitate more inclusive action in the first place. There will always be limits to what humanitarian action can achieve in pushing back against political decisions taken outside a response, and there is often a delicate balance to be struck between following principles and maintaining good relations with governments and other actors that mediate humanitarian access to affected people. However, respondents in both case studies felt that leadership had been over-cautious and not adequately informed by considerations of inclusion or impartiality.

These questions also stretch beyond the responsibilities of humanitarian leadership. Given the competing priorities assailing HCTs and the restricted political position they can find themselves in with regard to the states that host them, this also raises the question of whether there is sufficient capacity elsewhere in humanitarian responses for advocacy and coalition-building to address more political blockages to inclusion. Here, several respondents highlighted the need for humanitarian actors to do a better job of linking up with human rights organisations and others outside the 'formal' humanitarian sector to help strengthen these efforts. This is also likely to involve working to build relationships with and elevate the concerns of local organisations working on inclusion issues, who are often among the first to raise advocacy demands, and may be able to frame messages and use their relationships in ways more likely to result in meaningful change in their specific contexts (Davies and Spencer, 2022; Daigle, 2022). A similar link can be drawn between the ability of inclusion and aid actors to engage in effective humanitarian diplomacy: are populations that are excluded from receiving aid due to 'security' challenges genuinely out of reach, or are they being let down by a lack of negotiating capacity, adequate civilian–military relationships, and a default position of risk-avoidance over risk analysis (Healy and Tiller, 2016; Mahoney, 2018; Metcalfe-Hough, 2020)?

In contrast with the siloed approach of the sectors, other efforts have sought to strengthen aspects of inclusion in ways that cut across the verticals of the coordination system. This is often manifested in the form of technical working groups such as those focused on AAP, age or disability, or embedded specialists working under the umbrella of response coordination bodies. These have often played a key role in strengthening technical capacity across responses and advocating on inclusion issues at inter-cluster level. However, they can be limited in their effectiveness when their technical expertise is not matched by the kind of political clout needed to have an impact on strategic decision-making, and when their links to mainstream operational actors are limited (Holloway et al., 2020). Ultimately, these

cross-cutting approaches appear to be most effective when they are built into strong strategic commitments coming from the top, as well as effectively linking across each other, and sharing expertise and experience when working on overlapping issues (see, for an example, Box 4).

Box 4 The Yemen Inclusion Task Force

In 2019, an Inclusion Task Force was established in Yemen at the request of the HC, with the objective to make the humanitarian response more inclusive. While initially under the Protection Cluster, co-chaired with Humanity & Inclusion, as of 2021 the Task Force sits at the Inter-Cluster Coordination Group level so as to ensure that inclusion becomes the responsibility of all clusters, which are represented on the Task Force via often senior-level focal points. Other members include individual UN agencies, INGOs working on inclusion issues and civil society organisations (CSOs).

Inclusion has also benefited from engagement and support by the UN country-based pooled fund (the Yemen Humanitarian Fund – YHF). In 2020, the YHF funded the Danish Refugee Council to lead a study for the Task Force and the Protection Cluster on factors determining exclusion from humanitarian aid; the findings and recommendations of the study were also presented to the HCT. In 2021, the YHF dedicated a full allocation, totalling US\$50 million, to supporting programme adaptation for organisations to become more inclusive. Representatives of the Task Force also take part in the review of applications for standard YHF allocations not dedicated to inclusion in order to incorporate an inclusion lens into projects.

The Task Force does not try to replicate or replace work already being done on gender, for which a separate working group exists. Rather, it includes representatives from the Gender Working Group and Gender-Based Violence Area of Responsibility, and promotes holistic inter-sectional analysis incorporating gender together with issues of disability, older people and minorities. It is a forum where humanitarian actors from a range of clusters that have a large operational footprint can meet with local and international inclusion-specialised organisations and representatives of the affected population, share field findings and experience, and find opportunities to collaborate to reduce and resolve barriers to inclusion. In 2021, clusters at the sub-national level reported against each exclusion barrier identified in the Danish Refugee Council's 2020 exclusion study, the progress made and challenges remaining to reduce those barriers.

The Task Force has made a deliberate effort to ensure that local organisations representing populations that have been marginalised, including a number of organisations of persons with disabilities and of other minorities, can participate effectively and influence how the humanitarian response can become more inclusive and address exclusion. It has identified barriers to participation and is seeking to mobilise resources to address barriers (such as physical access, transport and language) to ensure that its own meetings and work is fully accessible.

Fundamentally, without a common commitment to inclusion as a collective, rights-based effort, backed up by firm leadership, the sheer number of actors and groups focused on different aspects of inclusion can lead to inclusion simultaneously being the responsibility of everybody and nobody at all. This leads to confusion and inefficiencies, such as the failure to draw links between agendas working on parallel lines (see, for example, the case of inclusion, AAP and locally led action discussed in Chapter 4). But it also allows many actors to maintain the convenient fantasy that inclusion is ‘someone else’s job’.

3.4 Mainstreaming and specialisation

A ‘twin-track’ approach is often presented as the ideal operational model for ensuring that different people and needs are adequately included in responses. Along one ‘mainstreaming’ track, organisations delivering services work proactively to facilitate equitable access to assistance, while along a second, targeted track, dedicated efforts are made – often by specialised organisations – to address individuals’ specific needs, enable equal access to assistance, and support their wider empowerment to challenge and address the marginalisation they face (CBM, n.d.).

3.4.1 Mainstreaming within non-specialist operational agencies

Our research found some evidence that mainstreaming around agendas such as protection and (to a lesser extent) AAP can result in more systematic thinking about certain aspects of inclusion across a response. In Nigeria, for example, a properly funded and politically supported push on protection mainstreaming was viewed as effective in ensuring that individuals did not fall through the cracks in the responses by establishing effective referral pathways between agencies and definitions of success for protection-sensitive programming at sector level that touch on key questions of inclusion and exclusion.

However, the way mainstreaming of inclusion issues is handled continues in many cases to place significant limits on its ability to deliver on its potential. Again, without commitments by senior leadership to hold others to account or provide resources and space to take action, response-wide and organisation-level commitments and frameworks around mainstreaming are often not backed up by action in practice (a trend also observed by HPG’s work on gender norms – see Daigle, 2022). But even where there is more impetus for action, mainstreaming within generalist organisations often ends up being interpreted or practised as an effort to replicate more specialised approaches, rather than a complementary focus on access and barriers. As one UN staff member explained, this is often manifested in operational actors adopting an ‘add inclusion and stir’ approach, with inclusion run as a parallel component of projects with its own separate (usually small) budget allocation, rather than integrated as part of their underlying logic. This may also involve creating specialist roles for technical guidance on aspects such as gender, disability or AAP, and sometimes all of them at once. However, staff in these positions – often hired at a junior level – may frequently find themselves both overstretched and stuck on the sidelines, structurally separated from decision-making processes about how projects are actually run.

Handling inclusion in this way may make sense in larger and better resourced organisations, and certain contexts or sectors may call for the development of dedicated in-house specialist capacity. However, for many actors this is simply not feasible. Trying to internally mirror the range of issues that require specialist approaches can rapidly exceed the resources and bandwidth of organisations and programme teams. This leads to the widespread complaint raised by operational actors over the course of this study of being overwhelmed by the sheer volume of inclusion considerations to take into account. It also leads to organisations having to make arbitrary choices over which axis of exclusion to focus on – ‘we can afford a disability specialist, or an age specialist, but not both’. And, as at response level, framing inclusion as a separate discipline within organisations can also lead to it becoming subsumed by other operational concerns.

For non-specialist organisations, a refocus on mainstreaming as a more holistic and intersectional exercise may offer a way out of this impasse. As several interviewees explained, devoting more attention to analysis of barriers and enablers to inclusion rather than trying to work separately to support an increasing number of marginalised groups would make things more manageable (as many of these factors are likely to be common to multiple groups); reduce the risk of narrowing inclusion to a hierarchy of marginalised groups competing for limited attention; and refocus analysis on the actual processes through which people are excluded, rather than resorting to assumptions based on the categories into which they fall (see Box 2):

They [service providers] would have said this group of people (...) this is a group we need to be concerned about. We're saying to them, don't think about 'Somali women in Mandera' as a group, think about what factors are applying to that group. So okay, they're far from the capital, but also they're Muslim, [they're exposed to] FGM [female genital mutilation], they have very low status. There's lots of other things happening there. And you need to think about all of those factors and what causing [them]. And also, then you can think about within that, people who are also simultaneously affected by disability, or people who are also simultaneously affected by age. (INGO staff member)

We're really trying to say, don't do protection mainstreaming, and then gender, age mainstreaming, and then disability inclusion. And then oh, by the way, disaster preparedness mainstreaming, and whatever else you can think of. Do one risk analysis and you do it all. (Donor staff member)

3.4.2 The role of specialist organisations

Specialist organisations have a critical role to play in strengthening inclusion within humanitarian action. This categorisation includes a range of actors, from international organisations with a specific technical focus, to local, place-based organisations advocating for the rights or interests of different groups. In many (but by no means all) cases, these specialist organisations are also directly representative of the interests they seek to support, such as organisations for persons with disabilities, or women-led women's rights actors, carving out space for marginalised groups to be directly involved in discussions about how best to assist them.

In particular, specialist organisations have led advocacy efforts at both global and response level, raising awareness and building constituencies for action around inclusion. Examples include the close involvement of organisations of persons with disabilities in the drafting of the IASC global guidelines on disability, or the success of advocacy and accompaniment by global and national civil society actors representing people with diverse SOGIESC to bring this group out of the realm of policy discussions and onto operational agendas (Dwyer, 2021). When properly funded, these organisations can have a significant positive impact on the capacity of a response as a whole to address specific inclusion issues, as demonstrated by the successes of Translators Without Borders/Clear Global in strengthening language-inclusive two-way communication and assessment processes in both Nigeria and Cox's Bazar. Specialist organisations also stood out in this study and in contrast with other operational actors in grounding both their advocacy and programming approaches in the language of rights and empowerment, discussed further in Section 4.3.

At best, a critical mass of specialist organisations in a response can also contribute to a greater sense that inclusion is a collective responsibility and not something that any one organisation can achieve alone or in-house (Swithern, 2019). However, their presence is by no means guaranteed. Despite comparatively small operating budgets, they regularly struggle to secure funding, and report often being among the first to be cut when donor budgets tighten – a problem that is magnified even further when they are smaller, local actors.⁸ Without clear mandates and leadership on inclusion at response level, there is often comparatively little incentive for others to pick up the slack when specialist organisations are not present or not able to engage in responses. At worst, this can mean that whether the needs of entire population groups are properly considered or addressed can be heavily dependent on whether a handful of small organisations manage to gain a foothold in a response.

There is also a degree of tension between the cross-cutting work of international specialist organisations, as distinct from more locally embedded, place-based organisations, in strengthening the structure and systems of a response and their work as operational actors providing specific services on the ground. While the latter may be critically needed, specialist organisations are often limited in their ability to secure funding and scale up, which means their operational footprint is always likely to be patchy – in Cox's Bazar, the programming of organisations working on age and disability only stretched to a handful of the area's 32 camps, with other areas simply not covered. Again, this is especially problematic when larger organisations or donors outsource 'doing' inclusion to specialists rather than internalising or promoting it as a component of basic good programming.

Ultimately, there is a clear need for specialist organisations to be much more fundamental to the core of how responses work. However, this will need to involve not just increased funding for their activities, but also consideration of how the work of both international and local specialist organisations, as well as specialist organisations and mainstream operational actors, intersect with and complement each other.

8 See Lough and Spencer (2020) for a detailed discussion of these dynamics in relation to AAP in particular.

3.5 Assessing and tracking inclusion

Assessment, monitoring and evaluation (M&E) approaches have a critical role to play in helping to understand the dynamics of inclusion and exclusion within a crisis, as well as tracking whether inclusion is being effectively operationalised in the response.

3.5.1 Assessments and profiling

Improvements in coordinated needs assessments over the past decade⁹ have made significant contributions to supporting more impartial responses, shining a clearer light on – if not necessarily resolving – exclusion due to geography, access and certain categories of vulnerability. Joint multi-sector needs assessments (MSNAs) are used in an increasing number of settings to provide better information on severity of needs by geography and displacement status, offering a stronger basis for prioritisation at the macro level. Meanwhile, mapping and profiling exercises have provided a means to better identify potentially ‘hidden’ populations such as in urban contexts or informal settlements, as well as accessing populations that gatekeepers may wish to keep hidden.¹⁰ These kinds of assessment are also starting to see better incorporation of prevalence data related to certain kinds of specific needs, such as the increased use of the Washington Group Short Set on Functioning questions to identify people with disabilities,¹¹ or inclusion of questions related to minority languages. At a more granular level, joint vulnerability assessments developed in the context of urban displacement in the Syria refugee response – such as the Vulnerability Assessment Framework (VAF) in Jordan and the Vulnerability Assessment of Syrian Refugees (VASyR) in Lebanon – have sought to bring greater coherence to targeting approaches, working to strengthen common agreement around how to prioritise scarce resources to meet the most urgent needs at household level. In urban or non-camp responses, settlement or area-based approaches have also tried to assess and interpret needs more holistically – as interlinked across a given social, economic, political space, rather than isolated to certain population groups to the exclusion of others (e.g. Urban Settlements Working Group, 2020). Despite these improvements, significant limitations remain on who is seen and heard in assessments, and how far assessments address the dynamics of inclusion and are informed by capacity, agency and questions of rights.

What kinds of information get collected and used

While the recent evolution of assessment processes has strengthened humanitarians’ understanding on for whom, what and where needs exist, they are generally much weaker on providing information on the drivers of exclusion and vulnerability that are necessary to contextualise these needs and plan appropriate responses. In both Jordan and Lebanon, for example, humanitarian assessments such as

9 The need for improved joint needs assessments was prominently highlighted in the Grand Bargain’s Workstream 5 (<https://interagencystandingcommittee.org/improve-joint-and-impartial-needs-assessments>).

10 In Somalia, Thomas and Opiyo (2021) found that members of minority clans were more likely to be recruited into programming by random mapping exercises run by aid actors, and much less likely than majority clan members to be recruited via community gatekeepers.

11 See Collinson (2020) for more detailed discussion on efforts to close the disability data gap.

the VAF and VASyR have been criticised as taking only limited account of the specific socioeconomic drivers of exclusion related to living in urban contexts, as well as relational factors such as race (Janmyr, 2022) and social class (Carpi, 2019). In Somalia, Jaspars et al. (2020) identify how quantitative approaches to assessing and measuring food security risk contributing to ‘parallel realities’ by not situating household needs within the wider political economy that underpins them. For example, this can result in interventions that put the onus on individual household ‘resilience’ or behaviour change, rather than considering how these households might be structurally constrained by exposure to violence- or clan-based exclusion. Assessments are often similarly limited in providing information on barriers to access to services, as well as providing understanding of people’s capacities and priorities (Swithern, 2019). For example, multiple respondents highlighted that successful advocacy on using the Washington Group questions in assessments had in some cases led to measuring disability prevalence becoming an end in itself. This does not necessarily lead to a better understanding of the access challenges or specific needs people with disabilities face in each setting, or how they are coping with them.

Many of these issues are linked to the types of knowledge that humanitarian assessment and analysis processes tend to promote. While they may be presented as objective knowledge, what gets included or excluded from assessments is necessarily a choice based as much on agency, donor and government priorities, mandates or intervention models – choices which are rarely based on the priorities or ways of understanding the world held by affected people themselves. Here, for example, there is often a tendency to over-focus on households as units of analysis and intervention, which means that collective, community needs and safety nets that are often critical in underpinning local understandings of inclusion (see Section 4.1) are less frequently taken into account, as are the dynamics that can often drive exclusion within households (Oosterhoff and Yunus, 2022). More broadly, multiple actors we spoke to highlighted as a major problem the fact that quantitative data from surveys and other sources tend to be overwhelmingly privileged as the main source of information feeding into humanitarian needs analysis. This is driven in large part by a tendency to equate statistical representativeness with an accurate portrayal of reality; the alignment between surveys that produce numbers and an audit culture that relies on them as a measure of success; and the comparative ease of producing good-quality quantitative data (or data that has the *appearance* of good quality) compared to qualitative. As a result of this bias, qualitative research on complex issues that surveys simply cannot address – such as the political economies driving marginalisation, or how communities understand and experience ‘accountability’ – is often relegated to secondary importance.

The bias towards quantitative data is also linked to how responses validate what constitutes ‘legitimate’ knowledge. Here, for example, MSNAs have evolved as a process of consensus-building and buy-in with sectors and/or clusters, with close ties to the formal process of developing an annual Humanitarian Needs Overview that is ultimately signed off by response leadership. By contrast, similar pathways are less frequently found for qualitative studies, which can all too often be cherry-picked or dismissed as ‘unrepresentative’. Similarly, information emerging from sources outside the formal humanitarian sector, such as research from human rights and peace-building organisations, academia or journalism,

is often overlooked (Daigle, 2022). Despite some efforts at greater alignment,¹² humanitarian assessments also tend to take place in isolation from government planning and monitoring systems, which can leave them at odds over how inclusion is interpreted, or how short-term responses to exclusion can better align with local and national development or peace-building priorities.

Ultimately, a much wider range of expertise and sources of knowledge are required if humanitarian responses are to produce and internalise a better understanding of the drivers and dynamics of inclusion. Important as they are, a single joint needs assessment or vulnerability analysis cannot be all things to all people, and can only do so much before competing and sometimes contradictory demands for different kinds of information render the entire process unwieldy and ineffective. This implies broadening the scope of actors and approaches – such as anthropology, human rights advocacy, or research by affected communities themselves (see the box in Section 4.3) – that can help build a more holistic picture of what is actually happening.¹³ It is equally important to ensure that these forms of knowledge are seen as valid on their own terms, rather than understood as optional supplements to big sample surveys.

Who gets seen and heard in assessments

Despite positive steps such as a widespread push to collect better disaggregated data, assessment methodologies that fail to take people's different experiences into account can structurally exclude groups from taking part in needs assessments in different ways. For example, assessment methodologies that do not build gender analysis in their design are likely to result in skewed outcomes – whether in terms of considerations of how gendered division of labour might affect who is able to speak to enumerators, or in terms of maintaining gendered biases and assumptions about who is 'worth' talking to. In Jordan, the VAF was criticised for failing to adequately consult women, as heads of household (who were generally male) were considered sufficient to provide the requisite information. In other instances, by contrast, men and boys can be excluded from household assessments as they tend to be away from home working or seeking work during the day, when enumerators normally visit. Without specific attempts to reach them, assessments are also likely to leave out populations that might be hidden within their households or communities: in Nigeria, for example, people with disabilities reported rarely if ever being consulted in humanitarian assessment processes, while heads of household were reluctant to even report their presence to external enumerators due to the social stigma of speaking about disability of family members to people outside the household. When quantitative methods predominate, marginalisation can also be exacerbated when random sampling methodologies do not result in enough interviews with members of smaller populations, such as minority language speakers or indigenous groups, to draw statistically significant conclusions about their needs and status. And while more targeted sampling approaches are available to account for this, the resources to employ them are often lacking.

12 See, for example, the Joint Data Center on Forced Displacement run by the World Bank and the UN Refugee Agency (UNHCR) (www.jointdatacenter.org/).

13 For example, see ACAPS (2021) for an attempt to complement a survey-driven MSNA with a cross-sectoral qualitative study of key thematic issues identified by issues of concern within the Rohingya response in Cox's Bazar.

Certain groups, or their specific perspectives, can also be deliberately cut out of assessment processes because of challenges around speaking to them in a safe and appropriate manner. Examples include accessibility challenges related to engaging with people with disabilities in contexts where doing so is culturally stigmatised; attempting to speak with people with SOGIESC, for whom speaking with humanitarian actors may pose risk of exposure to community backlash or hostile responses from government authorities;¹⁴ or discussing politically sensitive issues such as ethnicity, which could potentially put both assessment teams and respondents at risk if their activities are perceived to be promoting a partial agenda. These are genuine challenges and highlight the importance of incorporating proper ‘do no harm’ analysis when running assessments.

However, there is also a danger that concerns around risk can devolve into blanket assumptions if not properly tested. In Somalia, for example, a successful Minority Rights Group assessment on the experience of minority and majority clan members was dismissed by other actors at the design stage as unfeasible (Thomas and Opiyo, 2021). At worst, these habits can feed into vicious cycles where no data is available on a population because of the assumed risks involved, resulting in no actions or programming, a continued lack of understanding or invisibility of the population, and ultimately a permanent assumption that the issue is simply ‘too hard’ to address (HAG, 2018). The solutions here may involve moving away from the comfort zone of household surveys and focus groups, and engaging with different skillsets and partnerships to confront the issue. Nonetheless, this requires a degree of investment and commitment that is rarely forthcoming, and – especially when less conventional, qualitative methodologies are involved – may end up running into the legitimisation challenges discussed previously. As one UN staff member pointed out, making decisions based on assessments that are known to exclude people raises significant ethical questions if they are not accompanied by appropriate mitigation:

That is the risk, we see now in Afghanistan. The ‘Whole of Afghanistan’ assessment was just published. We know that there were [around] 1% female informants interviewed, and that was a barrier, but still, it’s called the ‘Whole of Afghanistan’ assessment. And it’s a political situation: we need to get data out to show that we are operating and we know the humanitarian needs. But (...) if we know it’s not reflective of everyone, can we then publish it?

At a much more basic level, our research found widespread evidence that operational assessment processes run by individual agencies at programme level still frequently collect information through the mediation of gatekeepers or brokers, who can exercise significant influence on the understanding of what needs exist, as well as manipulating who gets to speak to assessment teams and thus who is ‘visible’. In Nigeria, this was perceived as exclusionary by women, youth and older people, who felt cut out of discussions largely run by male community leaders. In Mindanao, this problem was especially acute when humanitarian audit culture that framed (quantitative) legibility as a prerequisite to assistance – ‘we can only manage what we can measure’ – was coupled with poor availability of

14 In Nigeria, almost all of the 79 people with SOGIESC that we spoke to had never participated in humanitarian assessments and did not know how to provide feedback to aid workers.

official statistics or possession of identity documents that can prove eligibility. This created a ‘built-in’ opportunity for ‘elite capture, patronage, and corruption’ as well as ‘systematic exclusion of those considered ‘outgroups’” (Fernandez et al., forthcoming: 32).

How data is collected

Assessments can also reinforce exclusion through the way they are implemented. Across all case studies, communities reported experiencing many assessments as opaque, extractive and ultimately disempowering processes. The fact that they are run on terms firmly set by humanitarians means that they may produce a picture of needs and priorities that is substantially at odds with the preferences of communities themselves. More implicitly, this approach tends to privilege the technical expertise of outside actors over the way communities themselves think about and understand the world. As a process geared to identify needs to which external providers of assistance can respond, assessments are also rarely used as an opportunity to support communities to identify, act on and request support for priorities on their own terms (see the box in Section 4.3 for a comparatively rare example used in survivor- and community-led response approaches). Although some specialist assessment actors have begun to work harder to build feeding results back to communities into their processes (JIPS, 2017; Africa’s Voices, 2018), communities are rarely aware of their rights around assessment data, are not empowered to use it themselves and are not involved in the decision-making processes that it informs (Alozi and Squire, forthcoming). Ultimately, there is a risk that assessments become a substitute for the kinds of meaningful two-way dialogue that would allow affected people to hold humanitarians to account over inclusion failures, as well as support better negotiation and discussion with communities themselves about what and whose needs are most urgent (see Section 4.3). Without building in this dialogue across assessment processes, there is also a risk that even well-intentioned efforts to include people through better-disaggregated data may end up misrepresenting or further compounding the challenges faced by marginalised groups (Lundkvist-Houndoumadi and Samarah, 2022).

As various actors have highlighted, the growth of increasingly comprehensive and digitised data collection technologies can risk exacerbating the exclusion of marginalised groups when their rights around this data – to decide what information is shared with whom, to participate in the design of systems and mitigation of risk – are not upheld (Kaurin, 2019; Bryant, 2022). The most commonly cited example here is the transfer of biometric data from Rohingya refugees in Bangladesh to Myanmar’s government, despite the latter’s widely known use of registration systems to exclude and marginalise Rohingya populations, but examples of sloppy or top-down design of digital data collection leading to potential harms for at-risk populations continue to emerge (Holloway and Lough, 2021). Here, the ability of affected people to meaningfully consent to these processes falls into question when the processes are both increasingly opaque and difficult to explain, and when the power dynamics between aid providers and affected populations are so substantial. Often, it is the most marginalised who are at greatest risk if their data is misused or exploited, and simultaneously have the least power to have a say in how it is collected. For persecuted communities and individuals who rely on *not* being detected by states or other hostile actors to protect themselves, this can result in withdrawal from humanitarian assistance entirely (Baker and Rahman, 2020; see also Bedoya (2014) for a broader historical perspective on this dynamic).

3.5.2 Tracking, monitoring and evaluating inclusion

Tracking who is excluded from services

Across case studies and interviews, many actors highlighted that mechanisms for tracking inclusion within responses are comparatively weak. Here, the increased emphasis in assessment processes on collecting and using disaggregated data is not always being matched by similar evolutions in day-to-day M&E. While M&E systems may incorporate a focus on certain aspects of inclusion, these can tend towards the generic, rather than a focus on the specific mechanisms of exclusion taking place in a given context, or the barriers that people face accessing assistance (Thomas and Opiyo, 2021). As one UN inclusion specialist explained:

What I get asked so often is, what tool can we use to identify barriers? We have the Washington Group questions as a tool for disaggregation. What's the equivalent for barriers? And the problem is that there isn't one specific tool because it's so context-specific.

While it may not always be the right kind of data, the fact remains that operational actors do collect huge amounts of information on the people they serve (often for compliance reasons), much of which may offer insights into who is using services, and how. Findings from the study suggest that this information is rarely being used to its full potential in terms of informing programming decisions, for example in asking the basic question of who is *not* accessing assistance based on how far user data matches the demographics of target populations.

Understandably, M&E systems also tend to focus on populations that are actually being targeted and covered by assistance. However, without some level of monitoring people who have not been prioritised for support, it is difficult to keep track of whether the basis for not targeting them still holds. Referring to the onset of the Covid-19 pandemic, several interviewees referenced the inflexibility of M&E systems when it came to handling change over time: where populations living within the coverage area of humanitarian agencies but not targeted for assistance slipped into situations of objectively extreme hardship due to loss of livelihoods or accelerated forms of discrimination and marginalisation that the pandemic often produced, this was rarely picked up and acted on. Madianou et al. (2016) describe how aid agencies providing assistance after Typhoon Haiyan in the Philippines tended to simply ignore requests for assistance from people not targeted but potentially in urgent need because, not coming from within their own programming, it was not seen to count as 'feedback.' This kind of closed system can prove especially problematic when people do not receive assistance not because they are ineligible, but because targeting processes have been manipulated specifically to exclude them.

Across the study, there was a sense that substantial investments in M&E to track inclusion errors (ineligible people being mistakenly provided assistance) were not being matched by, or were actively getting in the way of, better understanding of exclusion errors.¹⁵ By contrast, we also saw evidence of growing investment in more concerted efforts, often carried out as a common service independent of any specific programme, to systematically document and track exclusion challenges within a response as a means to supplement or respond to gaps in more conventional response monitoring (see Box 5).

Box 5 Inclusion audits

Moving beyond the analysis of needs and collection of disaggregated data on prevalence, more focused audit processes have much potential to throw greater light on the processes of inclusion and exclusion within humanitarian responses. In northern Nigeria for example, a disability audit conducted by CBM and JONAPWD (2019) highlighted ways people living with disabilities could be better included in the response, such as through greater representation in coordination mechanisms, greater consultation and by using data to adapt humanitarian programming to address barriers. A recent learning review on minority inclusion commissioned by the Swiss Agency for Development and Cooperation (SDC) and carried out by Minority Rights Group (Thomas and Opiyo, 2021) examined how SDC's programming was mainstreaming the inclusion of ethnic minority groups across its work in the Horn of Africa. Similar examples include a recent set of Inter-Agency Humanitarian Evaluations on gender equality (KonTerra Group, 2020) and, more broadly, the UN Population Fund's cross-organisational review of performance against its commitment to 'leave no one behind' (UNFPA, 2020). These audits demonstrate the value of transforming 'data' into knowledge, weaving together context analysis, reviews of programme documentation and primary research with both staff and affected communities to provide a detailed picture of how humanitarian responses are intersecting with wider drivers of exclusion, and what outcomes result. As such, they offer a way to hold decision-makers accountable to their commitments around impartiality and inclusion, as well as providing practical, operationally grounded roadmaps for action.

15 Holloway et al. (2021) highlight how the use of biometrics in the delivery of assistance in Jordan, driven by a commitment to reduce fraud, has made aid harder to access for some older people in particular, as well as raising questions about how far affected people are able to have a say in the way their digital identities are used, managed and shared. Similarly in Mindanao, design flaws in government- and donor-run biometrics systems locked out substantial numbers of internally displaced people from being registered for assistance.

Defining success

Limitations in tracking inclusion are mirrored by a frequent lack of clear definitions of success in terms of what an inclusive programme or response might look like. At a strategic level, this is tied closely to the lack of clear action plans and prioritisation by response leadership, meaning that being inclusive or impartial is not necessarily a well-defined criterion against which responses hold themselves to account or advocate for improvements. In particular, the indicators used as proxies for success across humanitarian programming rarely place significant focus on inclusion and can ultimately drive an incentive structure that actively deprioritises it.

There is still a tendency to focus on output indicators measuring activities implemented or numbers of people reached, rather than outcome indicators measuring the effects these activities have on affected people, or relevant disaggregation exploring impacts on different groups. As with assessments, a reductive understanding of success – as quantitative measures of either output or outcome – can also fail to capture the complexity and interaction of the efforts needed to address inclusion, especially around meeting people’s specific needs. On their own, output indicators tell a limited story about the severity of needs addressed – 10 people supported by case management for gender-based violence have experienced an objectively deeper and more urgent intervention than 1,000 reached by anti-trafficking messaging, yet form a negligible proportion of a total ‘beneficiary count’.

There are some indications that donors and responses are trying to take better account of inclusion in measurement approaches: age, gender and diversity markers are increasingly being used to evaluate project proposals and reports, although as discussed above these can be reduced to tick-box exercises and are still primarily quantitative in nature. Recently, more nuanced attempts have been made to adapt markers to move away from compliance and measurement against thresholds and towards processes applied throughout the project cycle that aim to foster more reflection and learning. Examples include the IASC’s updated Gender with Age Marker (IASC, n.d.) or ECHO’s protection mainstreaming indicator. In the latter case, partners are asked to use a mixture of qualitative and quantitative methods to assess whether affected people feel assistance was delivered in a safe, accessible and participatory manner, and explain how they are adapting their programming to address problems. As one donor explained of these types of process, ‘We don’t really care about the percentage you get. But we care about whether you react.’

Ultimately, our research suggests that output-led approaches continue for the most part to dominate, presenting an unbalanced picture of what responses are actually achieving. Regardless of whether definitions of value for money used by donors to justify investment include quality and equity, a lack of adequate measures for these factors is likely to incentivise reaching as many people as possible over better quality coverage or prioritising the most urgent cases – even if this is not the intended outcome of those funding or designing a response.¹⁶

¹⁶ For example, Wylde (2022) discusses the difficulty in measuring value for money of social assistance programmes in fragile and conflict-affected countries due to a lack of data on effectiveness and equity, in particular how responses benefit different population groups differently.

3.6 Resources for inclusion

3.6.1 The role of donors

Donor governments can have a significant role to play in promoting inclusion-focused agendas in responses and are often more active in doing so than the senior leadership of humanitarian organisations. For instance, in Cox's Bazar, bilateral donors in particular were found to be actively pressuring lead agencies in the response to take a more proactive and structured approach to AAP and participation, while in Nigeria the increased focus on protection mainstreaming and minority-language inclusion had been similarly donor-driven. Donors can also play a critical role as advocacy partners for the operational actors they fund, given their position on HCTs or equivalent bodies, as well as their ability to bring political pressure to bear via their ties to embassies. For better or worse, operational actors and specialists generally viewed donors as the lynchpin of ensuring that responses were more accountable for being inclusive, in terms of the red lines and demands they were able to impose on implementing agencies:

It has to come from donors, I guess it's the reality that everything we do is ultimately driven by the funding we get. And if we don't get funding, because there is a proper accountability, like, 'we're not going to fund you because of this and this', then I think it will make the senior management change and realise, okay, we need to hire more staff to lead on inclusion or we need to completely reprogramme, or we need to set up accountability mechanisms that work, we need to have more refugee staff, I think then it will make them change. (UN staff member)

However, which aspects of inclusion get prioritised is often dependent on the focus of specific donors and can often be fragmented. Widely divergent understandings across donors of what inclusion means, or which aspects need focus are contributing to a lack of overarching direction on what gets funded and how pressure is applied on responses and operating agencies. These differences can also be reflected internally across different parts of donor portfolios and management structures. One interviewee described tensions within a donor agency between humanitarian technical staff trying to promote more attention to good-quality programming and political leadership adopting a more 'tokenistic' approach based on reporting large numbers and coverage. Donor interviewees also highlighted capacity as a significant limitation on their ability to define inclusion agendas along the lines expected by operational actors: large portfolios of funding are often managed by small and stretched teams of staff balancing different priorities, and may be reliant on their partners to push inclusion agendas from below. Here, one donor described having to balance dissatisfaction with the lack of age and gender focus in proposals they had received with a pressure to get funding out during an acute crisis. Overall, the study found that many donor approaches still tend to focus on supporting certain specific needs along certain pre-defined axes of vulnerability such as age or disability. As discussed in Chapter 2, this can reduce support for more inclusive action to a zero-sum competition of different needs in the competitive marketplace that defines much of the humanitarian funding model. With limited resources available, agencies are forced

to justify work on some aspects of inclusion as being de facto more worthy of funding than others. This has so far tended to reinforce common hierarchies around inclusion, with gender and AAP at the top, disability sometimes considered, and other aspects lagging far behind.

In addition, while donor pressure has provided serious impetus for responses to take elements of inclusion more seriously, their actions can – often at the same time – actively drive other forms of exclusion. In some cases this can be quite direct. In Jordan, for example, the overwhelming focus by donors on Syrian refugees as both a funding and a political priority has marginalised refugees from other countries, who regularly experience exclusion from humanitarian services, and were not incorporated into the provisions of the Jordan Compact that have opened up formal labour market access to Syrian refugees.¹⁷ The Compact has also had knock-on exclusionary impacts on other marginalised communities in Jordan, with both Palestinian–Jordanians and migrant labourers seeing an erosion of wages and job opportunities after its inception. Similarly, the need to adhere to anti-terror legislation (El Tarablousi-McCarthy, 2018), as well as more basic aversion to funding riskier, higher cost-per-beneficiary activities (Healy and Tiller, 2016) can result in entire populations being deprioritised from receiving humanitarian assistance in ways largely decoupled from the severity of their needs.

At a more basic level, inflexible, audit-focused approaches to designing, funding and contracting programming on the part of donors – whether government or multilateral – can impose significant limitations on inclusion. This can result in the top-down imposition of project models and targeting approaches that are not contextually appropriate or fit for purpose – widely criticised by communities and local aid actors in Mindanao in particular – as well as limiting programme responsiveness. Across both this research and other studies, slow and inflexible approaches to contracting often mean that organisations are unable to either respond quickly enough to urgent needs when they emerge, or adapt their programming in line with changing needs and sustained dialogue with affected people themselves.

These problems can be further exacerbated when projects are subcontracted, which for subgrantees often involves even more restrictions and less input into design. Local organisations widely perceived to be better placed to identify and respond to urgent or specific needs (see Chapter 5) are often paradoxically the least able to do so as they usually sit at the bottom of subgranting chains or consortia, with shorter contract durations and tighter restrictions on deliverables, and few opportunities to access funding directly (Barbelet, 2019; Daigle, 2022). Several actors in the study highlighted the potential for more flexible multi-year funding to strengthen inclusion by allowing for adaptation and growth across project life cycles. This would potentially create space to apply lessons learned within projects as well as across responses more broadly, and provide increased scope for more co-creation with affected communities as opposed to top-down design.

¹⁷ The Jordan Compact is a bilateral agreement between the European Union and the Jordanian government that involves substantial grants, loans and preferential access to trade agreements for Jordan in exchange for supporting better access to labour markets and education for Syrian refugees. See Barbelet et al. (2018b) for further discussion and lessons learned from its initial three years.

3.6.2 Resources and capacity

Even as some donors have taken an increasingly prominent role in promoting responses that are more sensitive to aspects of inclusion, we found that specialist activities aimed at addressing specific needs are, in general, chronically under-resourced. As one INGO interviewee explained, for organisations without access to unrestricted funding, the equation is a simple one:

You have funding for LGBTQI, you can do projects. You have funding for people with disabilities, you can do work (...) FCDO – when they had the multi-year funding for disability, every organisation is having a bit of that and doing disability. When they took away I don't know how many percent of that, you can see how organisations are struggling with their work on disability inclusion.

This is especially true for inclusion-specialised organisations, which described the negative impact a perpetual struggle to access enough funding often has on their activities, even as they are held up publicly by donors and partners as exemplars of more inclusive approaches. However, funding can also be over-emphasised as a barrier to more inclusive responses as a whole, reflecting the tendency, discussed in Chapter 3, to narrow inclusion to an activity rather than an approach. Beyond the specific resources required for specialist activities, being able to ask and address the implications of basic questions such as 'who is not accessing our services and why' do not necessarily require large amounts of additional resources. Rather, they require a reorienting of priorities, structure and systems to make sure these are central to how organisations run their activities.

Beyond money, human resources can also be a significant bottleneck for inclusion. Even with enough money to pay for them, the challenge of training and retaining staff qualified to work in specialist roles is substantial. More broadly, rapid staff turnover in large-scale emergencies (especially in more insecure contexts) can result in responses continually stuck in 'basics' mode, unable to develop and act on more nuanced understandings of contextual dynamics and the drivers of exclusion, and constantly haemorrhaging institutional memory on the good practices and lessons learned that could support the evolution of more inclusive responses over time. The question of what capacity is deployed at what levels is also important: fundamentally, whether projects are able to ensure equitable access to information and services, ensure feedback is taken into account, or translate technical guidance into practical actions is dependent on the actions of staff who are tasked with delivering programmes on the ground through their day-to-day interactions with affected people. Paradoxically, these staff are often the most junior, least trained and least supported. Describing the response to the Ebola outbreak in the Democratic Republic of Congo, one INGO interviewee explained how:

Outreach workers were expected simply to figure out how to take often quite technical language and unfamiliar concepts, in a context of life-and-death scariness, and just mechanically communicate them in the local languages that people were actually [using] to ask them questions in, and want their information in.

As Rohingya refugees in Cox's Bazar frequently highlighted, the Rohingya 'volunteer' field staff who were their main point of contact at the humanitarian agencies providing them with assistance, were also invariably the people with the least access to decision-making power, occupying marginalised spaces even within their own organisations. This highlights a related question of who actually gets to set the agenda within humanitarian agencies themselves, and the impact that more or less inclusive hiring practices can have.

Across the study, there were calls for the diversity of affected people to be better reflected in humanitarian staffing structures – including at senior leadership level.¹⁸ Partly, this relates to questions of proximity – staff with similar experiences and backgrounds to the people they are trying to support are likely to be better able to engage with, listen to and understand those people, as well as navigate the specific drivers of exclusion they face. In addition, having more inclusive staff can also be important in mitigating biases – such as sexism, racism or heteronormativity – and worldviews such as colonial or neoliberal approaches that may distort how organisations prioritise their work. For example, Daigle (2022: 16) highlights how a continued prevalence of white, European or North American men in senior leadership positions is linked to a persistent tendency to see gender as secondary to life-saving concerns when prioritising their organisations' operations. Not having affected people in general and marginalised groups in particular as leaders and colleagues can also reinforce exclusion through processes of 'othering',¹⁹ where staff begin to treat these groups as caricatures based on flawed and simplistic assumptions around their behaviour or capacities. Ultimately, however, as a wealth of research has shown, having more diverse staffing is not in itself sufficient if those staff are unable to have a meaningful impact on decision-making processes. Worse, it can actively reinforce their marginalisation if they are reduced to tokenised roles or expected to change organisational behaviour single-handedly (Avalon et al., 2021; Paige and Kotsiras, 2021).

These capacity challenges point to the limitations of any one actor or approach being able to effectively promote inclusion, implying more careful consideration of the complementary strengths existing between different actors. Much of the discussion around this issue in the context of inclusion has focused on horizontal complementarities – that is, those between different actors with different sectoral focuses or specialisms. However, the continued struggles by external actors to properly address context, 'see' certain forms of inclusion, or translate inclusion policies developed by specialists in head offices to a remote 'field', also imply the need for vertical complementarities in which the capacities of local organisations and affected people themselves are more fully brought to the fore.

18 These issues are explored in more depth in the Humanitarian Advisory Group's work on inclusive humanitarian leadership, for example, Sutton et al. (2018) and Avalon et al. (2021).

19 "Othering" is described as 'the process through which a dominant group defines into existence a subordinate group. This is done through the invention of categories and labels, and ideas about what characterises people belonging to these categories. "Othering" occurs when a person, group or category is treated as an "object" by another group.' (Khan et al., 2015 in Barbelet and Wake, 2020: 13).

4 Inclusion, local leadership and participation

Inclusion in humanitarian action is fundamentally about power – power to determine which people and whose needs are prioritised or sidelined, and on what basis, and power to influence how these determinations are made. More inclusive humanitarian action is thus going to involve working to make sure that more power in these processes is transferred into the hands of the most marginalised, and thinking carefully about the power dynamics at play between the different actors involved. These dynamics may be between international humanitarians and local actors, between humanitarians and affected populations, and between different parts of these populations, including among the most marginalised themselves.

This means that inclusion is closely related to discussions around locally led humanitarian action and the ‘participation revolution’, both of which seek to facilitate a greater transfer of power away from the international humanitarian system and towards those most directly affected by and responding to crises. The relationship between inclusion on the one hand and localisation and participation on the other flows in both directions and can be mutually reinforcing (Dietrich Ortega et al., 2020). While inclusion must be locally led and participatory, participation and localisation must also be inclusive. However, in practice these links are not always made explicit, whether in global policy or in practice on the ground. This chapter explores three linked challenges related to the power dynamics of inclusion: who gets to set the terms for inclusion, how far local leadership supports inclusion, and the importance of inclusive participation for inclusion writ large.

4.1 The risks of a top-down approach to inclusion

Inclusion as conceptualised by many international actors – along with related concepts such as vulnerability and impartiality – often does not fit neatly with local understandings of who and what should be prioritised in a crisis, and how that should happen. These understandings, and the sense of obligation that drives them, can be grounded in various combinations of ethical and religious principles, culturally and contextually specific moral economies, and national or subnational legal frameworks (see Box 6).

Box 6 Inclusive, or ‘all-encompassing’ humanitarian responses?

In Mindanao case study for this project, international understandings of inclusion sat uneasily with the analogous but distinctive terms *langkap* (in Maguindanao and Mranaw), *lapay* (Sinug) or *merafeg/meamung* (in Teduray) – all of which translate roughly to ‘all-encompassing’. However, these terms for inclusion have no antonym equivalent to ‘exclusion’. This is closely linked to expectations of what an ‘all-encompassing’ response should look like. While there is widespread acceptance that limited resources should be subject to triage to support the most urgent cases in the immediate aftermath of a crisis, this is paired with an understanding that aid should, over time, extend to benefit the community as a whole, even those who are less vulnerable or better off. The concept is also explicitly linked to the politics of representation. All-encompassing actions are ones where ‘everyone’, or at least enough of the key stakeholder groups and networks in a community, are involved in discussions that build consent around how they will play out. In contrast to the individualised, static approaches to inclusion that characterise international responses, inclusion in Mindanao is thus about balancing individual and collective needs, being grounded in negotiation, and extending well beyond the narrow present of humanitarian intervention. These debates often extend into longer trajectories of development – for example, in relation to ongoing discussions around how shocks such as the onset of Covid-19 can be mitigated via universal basic income or social safety nets.

Source: Adapted from Fernandez et al. (forthcoming).

A failure to engage with and acknowledge affected people’s conceptions of what an inclusive response should look like, as well as a default assumption that a ‘pure’ humanitarian approach should trump these concerns, can significantly limit efforts to promote inclusion in a number of ways. In particular, trying to address exclusion without contextualising these efforts and grounding them in dialogue with affected people can promote significant backlash or rejection of activities, especially if these efforts are perceived to be taking place within the frame of imposing alien or foreign concepts. In Cox’s Bazar, for example, well-meaning but poorly designed efforts to challenge women’s social exclusion through the hiring of more female staff or the mixing of genders in programming activities were met with hostile reactions within their communities. This was doubly problematic since Rohingya women themselves were rarely involved in conversations about what a context-sensitive approach to gender equity might look like (Coyle et al., 2020). Daigle (2022) highlights that humanitarian actors need to be especially sensitive to how their efforts to support inclusion intersect with the disruptions to existing norms that periods of crisis can drive. These can create opportunities to promote greater equity for more marginalised groups as people take on new roles and power relations are unsettled, but also heightened risks when perceived threats to existing norms – refugees in particular – come to be seen as existential challenges to populations and their sense of collective identity.

Beyond causing backlash, if efforts to support the most vulnerable are not carefully balanced against community understandings of who is deserving of support, or analysis of social roles and relationships, they also risk causing harm. In some cases, this may involve undermining social cohesion and sparking conflict. This was the case in Mindanao, where a rigid adherence to humanitarian targeting over and above community perceptions of fairness – in particular, the perceived privileging of some vulnerable groups over others – posed risks to social cohesion, and was likened by one respondent to ‘mak[ing] the community fight over a pittance’ (Fernandez et al., forthcoming: 35; see also Brigden and Ahluwalia, 2020: 10–11, for a description of similar dynamics in Iraq). In other places, this dynamic can work in reverse: in Somalia, Thomas and Opiyo (2021) describe a tendency among humanitarian actors to privilege conflict avoidance above the inclusion of marginalised groups, often without more serious analysis or negotiation around what might be possible in a given setting. More broadly, efforts to promote inclusion that are not properly adapted to local context can also violate the principle of humanity when, as Mosel and Holloway (2019) outline, they are sharply at odds with what people perceive to be a ‘dignified’ response at both the individual and collective levels.

Across the study, we saw top-down approaches to various aspects of inclusion that were characterised by a lack of transparency, efforts to explain why decisions around prioritisation were being made, discussions about what trade-offs were taking place, or even management of expectations around what was possible. As one INGO interviewee explained, these dynamics sometimes also extend to a surprising lack of effort to translate into comprehensible local equivalents what can be the complex, even academic, terminology used to explain and justify inclusion. This lack of effective communication can substantially undermine trust in aid actors among affected people, leading to perceptions that aid is being delivered in a partial manner, diverted, aligned with outside agendas, or fundamentally ineffective. In Jordan, a lack of communication and dialogue around how the VAF was implemented meant that many refugees perceived its approach to vulnerability targeting as unfair, arbitrary and fundamentally undignified, feeding into wider suspicions about the motives and competence of the UNHCR as the agency in charge of running it. Ultimately, breakdowns of trust can have significant implications for humanitarian access and programme effectiveness, at worst leading to individuals or communities choosing to disengage entirely from outside assistance.

All of these issues point to the centrality of effective community engagement and participation to more inclusive responses. While transparency is an important component, this goes far beyond simply informing people what is going on. One key consideration is trying to understand how humanitarian inclusion can align more effectively with local understandings of the world: for example, one agency in Cox’s Bazar was working with religious leaders to build community acceptance for gender-equitable programming approaches by framing them as indigenous to Muslim values. Similarly, Jaspars et al. (2020) argue that precedents in Somali customary law may open more opportunities for advocacy for including the most marginalised than trying to frame these issues in traditional humanitarian terminology. Although there is a clear need to frame inclusion within more rights-based approaches to assistance, there is a need to think through the synergies between ‘western’ rights outlined in international treaties, and bottom-up ‘vernacular rights cultures’ and how these are developed and deployed by marginalised groups themselves (Madhok, 2021).

More broadly, promoting inclusion when engaging directly with affected communities requires negotiation, advocacy and balancing out different priorities, just as it does within humanitarian coordination and programming itself. These conversations are often difficult to have, and may involve bringing out grievances and tensions that are intrinsically uncomfortable for humanitarian actors committed to the principle of neutrality. As such, they may require the kinds of knowledge and facilitation, mediation and conflict analysis skills not present in many agencies' repertoires, especially actors attempting to intervene from outside. In many cases, these discussions also highlight the importance of a strong conflict-sensitivity lens – as distinct from conflict avoidance – to more inclusive responses.

4.2 Proximity and local leadership

The challenges posed by the distance – both literal and metaphorical – between decision-makers and activities on the ground was a common theme across the research. Especially when paired with responses run by external actors without strong links to local communities or familiarity with local contexts, this distance can hamper aid providers' ability to promote inclusion in a number of ways. In particular, it can result in a lack of detailed understanding of who is being left out, why and what the most appropriate solution might be. Agencies' frequent reliance on standardised vulnerability categories as proxy indicators of the presence of urgent needs is often seen as a solution to imperfect access to information. But as our case studies show, responses are full of examples of people falling through the cracks of these systems, because their needs are complex (such as multiple chronic health issues within a household incurring high expenses and limiting access to labour markets, but not ticking the right boxes to be considered 'vulnerable'); shifting (such as health or livelihood shocks pushing people suddenly into poverty); hard to measure (such as limited access to social ties or experience of racism); or because people cannot even make themselves visible to humanitarian actors in the first place (such as people living in remote areas with poor humanitarian coverage not being aware that the option exists to undergo a vulnerability assessment). Just as a lack of visibility can limit outside actors' ability to identify the most urgent needs, a lack of understanding of local sociopolitical dynamics can also result in a failure to engage with the right people or take the right conventions and norms into account when working to promote inclusion.

Limited or no proximity can also inhibit inclusion by hindering responsiveness and accountability. When interactions between decision-makers and communities are carried out at arm's length, and insulated by layers of junior staff who are not empowered to change and adapt programming, the scope for genuine 'two-way dialogue' or 'co-design' between humanitarians and affected people is severely limited. This can risk reducing accountability to a single event – a piece of research or a compliance cross-check – rather than an ongoing process. Here, findings from consultations with communities at the start of a project are presented at programme management meetings and coordination forums, but they are not accompanied by the kinds of discussion and negotiation critical to sustaining more inclusive action as circumstances evolve over time. It is also arguable that a lack of close relations with affected people can lower the stakes of ignoring their input and priorities. Decision-makers who do not live and work alongside the people that their decisions directly affect

have less ‘skin in the game’ and are less likely to face consequences if their actions run counter to what affected communities want or expect. And when consultations or negotiations are initiated by outside actors, they can potentially introduce power imbalances that limit the kinds of open conversation needed for meaningful participation if, for example, these outsiders are from more powerful majority groups, or speak a language that the people they are engaging with do not fully understand.

These challenges of understanding and responsiveness can be especially acute in environments that do not straightforwardly align with the design choices and assumptions embedded in many conventional humanitarian responses. In contrast to camps or camp-like settings, where clearly demarcated humanitarian spaces lend themselves to regular and in-depth assessment and monitoring without necessarily requiring strong relationships or familiarity with affected communities, displacements to urban settings or dispersed rural areas can result in much patchier understandings of people’s needs and priorities if service providers are not familiar with these contexts or understanding them as coherent spaces. In Mindanao, for example, the formal humanitarian response to conflict-related displacement from Marawi City was initially geared heavily towards evacuation centres as the most visible and familiar concentrations of need, despite the fact that 95% of those displaced had sheltered outside these with relatives or friends (Fernandez et al., forthcoming). Meanwhile in Jordan, a rigid, sector-based response focusing on addressing needs independently in different silos struggled to coordinate effectively and left significant service gaps in a context where refugees were scattered across urban spaces and often relied on the same – often state-provided – services as the local population to meet them.

There was a widespread consensus both across our research and in the wider literature that local actors have a vital role to play in mitigating many of the issues related to proximity and inclusion. In particular, groups based within communities themselves – whether pre-existing structures such as village committees or emergent groups arising during crises – are much more able to see where the most urgent needs are. Thus, they have a vital role in performing triage in the immediate aftermath of a new shock, as well as highlighting more chronic or complex cases that external actors might miss later on. More broadly, local actors were widely seen as better able to navigate the local cultural, social and political dynamics around inclusion. In Mindanao, for example, local organisations were found to be more sensitive to the need for inclusion to be a process of negotiation and representation in order to be successful, as well as understanding which representatives of which groups needed to be brought into these discussions. As our study in Cox’s Bazar indicates, people are also fundamentally more likely to trust and participate in a response facilitated by aid staff who have closer ties to their communities and who speak the same language as them. Locally driven responses can also be more likely to see short-term individual needs as interlinked with both root causes and collective priorities, and view crisis response as existing on a continuum with longer-term development objectives (Corbett et al., 2021; Carstensen et al., 2021; Buchanan-Smith, 2021; Davies and Spencer, 2022). As such, they offer alternative models of assistance that address the limited conceptualisations of inclusion discussed in Chapter 2, which characterise externally driven assistance within the ‘formal’ humanitarian system.

However, the link between locally led action and inclusion writ large is not necessarily a straightforward one. Local actors – especially those operating outside the ‘formal’ humanitarian system – reflect a diversity of interests and ideologies, many of which may not align with, and in some cases run directly counter to, the principle of impartiality. In Mindanao, local responses to crises are closely bound up with the post-conflict politics of the area. This has meant that which communities aid actors prioritise for emergency assistance and reconstruction may be linked to which armed group they were associated with, or where they sit in delicately negotiated balances of power between different ethnic and religious groups. Looking at local support to Syrian refugees in Turkey, Sözer (2019) also describes how the basis for determining which people are most eligible for support can vary significantly depending on the animating principles of the different organisations involved (in this case, whether they were oriented towards nationalism, religion, technocratic approaches, or mutual solidarity).

The positionality of local organisations with respect to the affected communities they serve is also important: in socioeconomically marginalised areas such as north-east Nigeria, organisations based in national capitals with staff drawn largely from outside the region may struggle to navigate the local dynamics of inclusion as much as international actors do. This divide is especially important in refugee settings such as Cox’s Bazar, where the priorities of national organisations in hosting countries and the refugees they serve – or the refugee-led organisations they work alongside – may be fundamentally different (Wake and Bryant, 2018). Local organisations may also be less interested or comfortable working with communities perceived as belonging to out-groups or those facing higher levels of stigma. For example, in the locally led response to Myanmar’s Cyclone Komen in 2015, the bulk of local volunteering and fundraising efforts tended to focus on Buddhist-majority parts of the country’s cultural core, while providing less support to its equally affected, religious minority borderlands (Desportes, 2019; McCarthy, 2020).

The question of which local actors are able to access funding or wield influence in humanitarian crises is also dependent on the dynamics of inclusion and exclusion in the contexts within which they are embedded. Reflecting wider social prejudices and priorities, organisations focusing on marginalised groups, such as those focusing on or representing women or people with disabilities, may end up being sidelined within local civil society ecosystems (Barbelet et al., 2021b). This can often be compounded by hostile legal and political environments, and further exacerbated by the demands of international humanitarian audit cultures. In Cox’s Bazar, refugee-led community-based organisations are legally barred from registering by the government of Bangladesh, and have consequently struggled to access funding, or gain entry as legitimate actors to decision-making spaces within the response. Similarly, Thomas and Opiyo (2021) found in Somalia that donors requiring civil society partners to have a reference from local authorities dominated by majority clans created significant disadvantages for organisations representing minority clans when seeking funding. At a basic level, Daigle (2022) also notes that small, place-based CSOs working on inclusion issues are often among the hardest for international donors to fund due to the comparatively high transaction costs associated with small grant disbursements. As several interviewees noted, exclusionary dynamics can also be replicated within inclusion-focused CSOs, which can be just as elite-dominated as their mainstream counterparts, and

just as likely to focus on certain aspects of marginalisation over others. For example, organisations for people with disabilities tending to under-represent people with intellectual disabilities and groups for people with diverse SOGIESC focus more heavily on HIV prevention than other issues.²⁰

It is equally important not to assume that international actors are themselves immune from these dynamics. While in some cases they may be less subject to certain specific pressures and biases – some actors in Mindanao highlighted the role external organisations could play as ‘honest brokers’ during delicate discussions over the post-conflict division of resources – this needs to be balanced against the other ways externally driven forms of assistance can drive exclusion, as documented in the previous chapters. In addition, given the reliance of all aid actors – regardless of where they are headquartered – on relationships with local staff, governments, non-state actors and communities themselves, it is unfair to assume that outside actors will automatically be more impartial than their local peers. Ultimately, while proximity is clearly one part of the puzzle of more inclusive responses, it needs to be balanced out with consideration of whose voices are being heard.

4.3 Inclusive participation

Ensuring that assistance reflects the priorities and capacities of affected people has been both a priority issue and an uphill struggle for the humanitarian sector for some time (Metcalf-Hough et al., 2021; HAG, 2021). Yet, while commitments around accountability and participation explicitly highlight the importance of ensuring that all voices are heard (IASC, 2017),²¹ evidence from our study suggests that the interests of the most marginalised are still under-represented across humanitarian action.

At a basic level, many of the tools through which humanitarian agencies provide information and channel feedback or complaints for affected people are not necessarily designed with inclusion in mind. In the early stages of the Cox’s Bazar response, many communication channels were implemented in languages that Rohingya refugees did not speak, or were dependent on a basic level of literacy that much of the population – especially women – lack. In Jordan and elsewhere, the choice of hotlines and digital feedback channels requiring access to mobile devices has, while significantly expanding the reach and relevance of humanitarian engagement for some people, also left out those without the resources, skills or ability to access or use technology.²² Feedback points or even face-to-face interactions with humanitarian staff are often inaccessible for people with physical disabilities, or women restricted from moving outside the household by social norms or gendered care responsibilities. And many of these

20 Arguably a trend driven itself by earlier international donor priorities.

21 As an illustrative example, the Grand Bargain’s agreed definition of participation reads as follows: “Effective ‘participation’ of people affected by humanitarian crises puts the needs and interests of those people at the core of humanitarian decision making, by actively engaging them throughout decision-making processes. This requires an ongoing dialogue about the design, implementation and evaluation of humanitarian responses with people, local actors and communities who are vulnerable or at risk, *including those who often tend to be disproportionately disadvantaged, such as women, girls, and older people.*” (IASC, 2017; emphasis added).

22 The dynamics of ‘digital divides’ in the humanitarian sector, are explored in more depth in a parallel stream of HPG research, summarised in Bryant (2022).

systems are dependent on affected people having a level of capacity and confidence to engage within a framework of ‘feedback’ that may be both culturally unfamiliar and underpinned by significant power imbalances between recipients and aid providers. In many cases, the shortcomings of these systems in reaching the most marginalised are well understood by those who design and run them, but – once again reflecting inclusion as a ‘bolt-on’ – they are rarely well integrated with concerted efforts to ensure that alternative channels exist (Holloway et al., 2020).

These issues are also reflected in more active efforts at two-way dialogue, and who gets represented in discussions over how programming is designed and run. In particular, the role local leadership structures can play in the success or failure of inclusion is not always well accounted for. Community leaders often act as brokers – or ‘gatekeepers’ – mediating the inflow of resources, priorities and approaches from outside actors, and facilitating or manipulating the intra-community relationships and dynamics that determine how these are actually distributed or adopted in practice. The relationship between these forms of brokerage and inclusion is complex: on the one hand, the significant power and influence brokers wield can often result in exploitation or diversion. Aid regularly flows down local patronage networks and bypasses socially excluded out-groups, while predominantly older, male brokers may not be fully aware of or motivated to support the specific needs of women or people with disabilities (see, for example, recent research by Mora and Yousuf (2021) in Cox’s Bazar documenting male community leaders’ preference for maintaining social cohesion over upholding women’s rights). On the other hand (and often at the same time), brokers also have a vital role to play as advocates for their communities, ensuring the areas under their responsibility get adequate attention in often-crowded landscapes of need in the aftermath of crises, as in Mindanao, or serving as a bridge between affected people and humanitarian agencies when formal ‘feedback’ channels are hard to access or ineffective, as in Cox’s Bazar and Nigeria.

By contrast, outside actors’ engagement with these actors can sometimes be quite simplistic, in ways that both marginalise and overdetermine the role they play. The focus is often on the negative influence gatekeepers can wield and how to bypass it, rather than a more balanced appraisal of where and how they can support or undermine inclusion. At the same time, ‘community engagement’ is all too often reduced to engagement with these gatekeepers alone. Across our study, we saw that agencies continue to rely heavily on community leaders to perform vital functions such as providing information on needs or drawing up beneficiary lists, usually driven by both a need to move fast in the aftermath of a crisis, and a lack of familiarity with local power dynamics. There is a tendency to focus on the most obvious formal or customary ‘community leaders’, rather than a wider engagement with other ‘leaders in their communities’ – who might be anyone from youth activists to Red Cross and Red Crescent volunteers to business-owners – that might offer a way to balance the limited perspective or interests of the most obvious representatives. As Dietrich Ortega et al. (2020) point out, a narrow focus on ‘traditional’ leaders can actively marginalise other actors who might otherwise wield more influence in decision-making, especially when the focus maps along norms that fail to acknowledge leadership work done by women or other marginalised groups, interpreting such work as ‘volunteering’ by ‘beneficiaries’ rather than labour worthy of recognition and remuneration.

This lack of nuance is reflected in wider efforts to strengthen more inclusive participation, especially in terms of the efforts to bring marginalised groups into decision-making processes. A particular focus of these efforts are the ‘invited spaces’²³ – such as school or water, sanitation and hygiene committees, nutrition support groups, or camp management committees – that are often convened by aid actors to monitor and facilitate programming or act as intermediaries with communities. These spaces generally have inclusion objectives built into their design, usually in the form of quotas for women, youth, people with disabilities or other marginalised groups. However, across our research, we found that being present in these spaces does not always translate into people’s voices being heard. This can be because they are drowned by other concerns: for example, when the objectives and focus of these spaces do not allow enough scope for the discussion of specific needs. But it can also be because they are actively silenced, such as when cultural norms and power dynamics limit the ability of women or minority ethnic and religious groups to make meaningful contributions or even speak.

The challenges of spaces where inclusion features as a secondary objective to operational concerns stand in contrast to spaces where inclusive participation is the primary concern, such as self-help groups for people with disabilities, old people’s associations, or women’s leadership programmes. While these spaces may be established or supported by external actors, their existence often pre-dates and outlasts the arrival of humanitarian assistance in a given setting. Therefore, the focus is on supporting people’s capacity to identify and act on their own priorities together – understanding their rights, building solidarity with each other, and developing confidence and voice. ‘Participation’ in these spaces begins to look a lot more holistic, focusing on at least some of the root causes and barriers that limit people’s ability to exercise their voice, situating individuals within frameworks of collective support, emphasising their capacity and rights, and merging an immediate humanitarian focus with longer-term work towards emancipation (see Box 7). While appearing to stray beyond the mandate of ‘life-saving assistance’, these forms of participation may ultimately feed back into humanitarian operational processes more meaningfully than more immediately utilitarian, by-the-numbers approaches. In Uganda, for example, Dietrich Ortega et al. (2020) outline how open-ended support to women’s groups and women-led organisations to identify issues and build alliances has resulted in these groups playing a more prominent role in inter-agency planning processes and ensuring they are informed by gender concerns.

It is important to note that opportunities for supporting more equitable engagement of marginalised groups in humanitarian responses do not necessarily need to emerge from specialist activities or organisations, but can emerge from more pragmatic changes to everyday programming. In Cox’s Bazar, an initiative to improve the reporting and handling of a gender-based violence case created a wider space for women to take leadership positions within their communities and ensure better representation of their interests in a way that was both culturally acceptable and would not have been possible prior to displacement.

23 ‘Invited spaces’ are intermediary institutions, groups, forums, etc., convened by governments or other powerholders to facilitate citizen participation in governance processes (Cornwall, 2004).

Box 7 Survivor- and community-led responses

Survivor- and community-led response (sclr) refers to a set of programming approaches that aims to support stronger autonomous, collective self-help among people affected by crises as a complement to more traditional humanitarian programming. Critically, the objectives of sclr combine a focus on immediate needs with a wider emphasis on dignity, social cohesion and longer-term efforts to address the root causes of crises. In contrast to the more extractive needs assessment processes described in Section 3.5, they are rooted in externally facilitated but community-led ‘action research’ that directly links efforts to identify and understand problems with planning and implementing ways to address them. This is generally accompanied with the awarding of microgrants, skills training and networking community responses horizontally with each other, and vertically with duty-bearers in humanitarian response architectures and government disaster-management agencies. Addressing the power dynamics of marginalisation within communities is an acknowledged challenge among sclr practitioners. These practitioners identify the importance of explicitly addressing and managing power dynamics as part of the process and working opportunistically with different groups within communities such as women and youth, rather than adopting a single approach and mapping it onto the existing dominant power structures. They emphasise the importance of sustained engagements across preparedness, crisis response and recovery as a means to open up time and space to work through these issues properly.

Source: Adapted from Corbett et al., 2021.

Ultimately, more inclusive responses will have to find ways to balance ensuring that a diverse range of voices are present in decision-making spaces, that they are able to have a meaningful impact on those decisions and that the power dynamics between them are mitigated. As our research suggests, this is likely to involve thinking much more carefully and holistically about issues of representation than international humanitarian action in particular has been comfortable with to date. At a minimum, it will require embracing a wide plurality of different entry points at different levels, rather than limiting engagement to a small number of brokers or externally curated consultations. It may also involve extending conceptions of ‘community’ beyond the confines of the geographically bounded areas – the villages, wards, or camp blocks that humanitarians tend to work with as units of analysis and intervention – to consider what other forms of solidarity and shared experience exist within and outside them – from groups of parents, to networks of youth activists, to online groups for people with diverse SOGIESC – and how to work effectively with them.

5 Conclusions and recommendations

Failing to include people who are marginalised and discriminated against is not a failure of inclusion but a failure of humanitarian action. Humanitarian actors' commitment to impartiality requires a focus on prioritising the most urgent cases and non-discrimination. Yet as evidence from this study shows, humanitarian responses often fail to effectively assist and protect those most urgent cases.

Centring inclusion from the start

Part of a move towards more inclusive humanitarian responses will need to involve greater commitment to centring inclusion as a core component from their inception. Waiting until 'later' to start acting on exclusion both condemns marginalised people to receiving unequal or inferior assistance and is an exercise in wishful thinking. Retrofitting inclusion where it has been deprioritised is always likely to be an uphill battle against competing demands, established practices, tricky politics and shrinking funding. Getting inclusion right from the start is not about moving away from saving lives, or focusing on technical minutiae at the expense of coverage. Rather, it is about asking whose lives the humanitarian response is saving, critically reflecting on whether the response is being impartial in practice, and transparently negotiating the dilemmas and trade-offs involved in making it so.

Inclusion from the bottom up

Inclusion also cannot be delivered from above: well-intentioned attempts to support the most vulnerable are likely to have limited impact or be counter-productive if they do not meaningfully engage with local priorities, power dynamics or ways of understanding the world. It is vital to recognise the capacity of local organisations and affected people themselves to triage the most urgent needs in emergencies, as well as pursue grounded approaches to inclusion that both navigate competing needs and link to longer-term aspirations for their communities' well-being. But the relationship between inclusion and local leadership is not straightforward: while local groups representing the most marginalised are vital to ensuring more inclusive responses, they are often sidelined both by humanitarian actors and within their own civil societies, and need space and support to make their voices heard. This speaks to the importance of participation as a critical component of inclusion: not just as a way to improve programming, but as a way for people to organise, demand their rights from duty-bearers and push back against the processes of exclusion that they face.

Inclusion and the humanitarian-development-peace-building 'nexus'

Humanitarian crises are always embedded in broader histories and societies, and many of the inclusion challenges they must grapple with have roots in long-term dynamics of social exclusion. It is not generally within the mandate of humanitarian actors to resolve these root causes, but they have a responsibility to engage with them and address their implications within a response. While part of this involves changes to humanitarian processes, it also means thinking more carefully about how

humanitarian work interacts with its wider environment, and in particular with the efforts of other actors working along parallel lines towards similar outcomes. Actions outside the humanitarian sector – such as human rights advocacy, gender transformative approaches, or civil society strengthening – can have significant implications for humanitarian inclusion, especially within protracted crises. Similarly, decisions taken within the confines of humanitarian action can have significant impacts on longer-term efforts to support more inclusive development. While inclusion has been identified as a priority in the humanitarian–development–peace-building ‘nexus’, in practice it is rarely central to discussions on the issue (Fanning and Fullwood-Thomas, 2019), and much more needs to be done to bring it to the fore.

Recommendations

In order to incentivise and achieve more inclusive, effective and impartial humanitarian action, humanitarian leadership, operational actors, specialist organisations and donors should work together with affected communities to:

Adopt strong inclusion policies and inclusive humanitarian policies

- To the IASC:
 - Develop a policy on inclusion in humanitarian responses. The aim of this process would be to ensure clearer and stronger policies on inclusion across the sector based on the elements outlined in this policy brief.²⁴
- To the Operational Policy and Advocacy Group (OPAG) of the IASC:
 - Adopt key indicators of success for all workstreams and Task Forces to hold the IASC to account on its commitment to mainstreaming ‘leaving no one behind’. Allocate adequate resources for advisory services, capacity support and monitoring. Use this opportunity to support the development of a clear IASC policy on inclusion.
- To humanitarian organisations and global clusters:
 - Review humanitarian policies and adopt clear and strong policies on inclusion in humanitarian action informed by this report and any future IASC inclusion policy. Ensure that these policies are translated into clear strategies that lead to change towards more inclusive humanitarian action in crisis response.

24 Such a policy should clarify that inclusion is a fundamental element of principled humanitarian action; adopt an inclusion definition including its different elements (impartiality, equitable access, diverse needs, participation and AAP); and outline the policy’s operational implications, as well as links to existing policies on disability inclusion, gender, protection, AAP, and the Grand Bargain reform agenda towards more local leadership and a participation revolution. A policy paper would also need to outline the roles and responsibilities of different actors in the sector and collaboration across the nexus.

Rebalance humanitarian responses towards quality and equity

- To the Emergency Relief Coordinator and HCs:
 - Introduce greater attention to inclusion and impartiality in the HC and HCT compacts, incentivising greater focus on quality and equity as a measure of success, including as key indicators to be reviewed and evaluated as part of the Operational Peer Reviews and Inter-Agency Humanitarian Evaluations.
- To OCHA:
 - Reframe the Humanitarian Programme Cycle to be much more focused on inclusion (beyond disability inclusion) and participation with greater attention to impartiality. Support HCs and HCTs through training on inclusive responses as well as bringing coherence to increasing demands with regards to gender, protection from sexual exploitation and abuse, protection, AAP and inclusion.
- To donors:
 - Critically review reporting requirements to focus on more streamlined reporting that focuses on core issues for quality and equity: namely inclusion, impartiality and the effectiveness of humanitarian responses. Revise indicators of success away from quantity, coverage and reach to focus on quality and equity in humanitarian responses.²⁵
- To HCTs:
 - Open a dialogue on how rebalancing towards quality and equity changes decisions on the prioritisation of limited financial, human and other resources. Make clear commitments to dedicating greater resources to issues of quality and equity in humanitarian responses.

Adopt strategic indicators and approaches to operationalise impartiality in humanitarian responses

- To HCTs:
 - Adopt a response-wide strategy and related strategic indicators on inclusion as core elements of the response linked with the principles of humanity and impartiality, and with efforts towards accountability, participation and the IASC commitment to the centrality of protection.
 - Employ a twin-track approach to inclusion that supports more inclusive programming led by mainstream humanitarian organisations as well as support for inclusion-specific programming led by inclusion-specialised organisations. This should include the establishment of an inter-sectoral inclusion working group or task force as well as the deployment of inclusion advisory services to the response.

²⁵ While acknowledging that there are efforts to push for a value-for-money approach that focuses on impact, quality and equity, the reality remains that the quantity of people reached is more readily branded as a metric of success. See for instance Wylde (2022), who discusses the difficulty in measuring the value for money of social assistance programmes in fragile and conflict-affected countries due to a lack of data on effectiveness and equity, in particular how responses benefit different population groups differently.

- To donors:
 - Ensure adequate resources are provided to inclusion-specialised organisations and CSOs led by marginalised people to address diverse needs in crises. Deploy advisory and technical support to ensure mainstream actors are adopting inclusive programming (including through tailored responses).
 - Support diverse inclusion-specialised organisations to continue advocating for inclusive humanitarian action globally.

Address the fragmented nature of inclusion work through more intersectional approaches and greater collaboration

- To international, national and local inclusion-specialised organisations:
 - Adopt more intersectional approaches in guidance, training, advisory and targeted programming by integrating other inclusion issues. Collaborate and collectively advocate on common challenges undermining inclusive humanitarian action.
- To donors:
 - Reduce competition and hierarchy between different forms of discrimination by adequately supporting a greater diversity of inclusion-specialised organisations and demanding greater intersectional approaches in all inclusion-specific funding allocations.

Ensure sufficient resources and capacity exist in appropriate configurations to support inclusion at an operational level

- To humanitarian organisations:
 - Beginning with commitments at senior leadership level, ensure that inclusion is adopted and mainstreamed as a cross-cutting organisational priority. Bring inclusion out of ‘advisory’ or ‘specialist’ roles and into the realm of decision-making over programme design and resource allocation – such as having inclusion-focused members of senior leadership teams, or refocusing programme manager terms of reference and performance expectations. Ensure commitments to impartiality and inclusion are incorporated into all staff training and on-boarding processes.
 - Address the lack of diversity in employment within the humanitarian sector by adopting inclusive human resources and employment policies.
- To donors:
 - Prioritise multi-year, flexible funding as a way to allow programmes to adapt to developing understandings of evolving inclusion–exclusion dynamics and needs, as well as provide the necessary time and space for the learning and co-creation of more inclusive programming with affected communities themselves.

Inform inclusive responses by adopting a rights-based understanding of needs and vulnerabilities

- To HCTs and crisis response leaders:
 - Complement multi-sectoral needs assessments with an analysis of drivers of exclusion in the response and an analysis of barriers and enablers of access to assistance, services, protection, information, communication and participation.
 - Work closely and collaboratively with development, peace-building and human rights actors as well as civil society representing a diversity of people (sociologists, anthropologists and other social scientists, in particular from crisis-affected locations) to analyse and account for patterns of discrimination and marginalisation.

Track exclusion in humanitarian response as part of a renewed commitment to effective impartiality

- To humanitarian organisations:
 - Critically interrogate data as part of your monitoring processes to understand who is not seen and heard in the response and evaluate why. Adapt and tailor your programmes based on these findings to be more inclusive and impartial.
 - Ensure that specific indicators on inclusion, exclusion and impartiality are part of your evaluation standard operating procedures.
- To donors:
 - Commission inclusion audits on donors' own international humanitarian programming and in large-scale humanitarian responses to ensure that no one is being pushed back.

Uphold participation and accountability as a right for all people in crisis

- To humanitarian organisations:
 - Adopt policies, strategies and programming that uphold participation and accountability as a right, including by adopting community engagement approaches that support self-organisation and people claiming their own rights.
 - Adopt a pluralistic approach to participation and accountability that goes beyond engaging community leaders, and focus on engaging with a diverse range of communities and groups including through existing organisations representing a diversity of identities.

Centre the role of local actors in supporting more inclusive responses

- To HCTs and crisis response leaders:
 - Ensure that those organisations representing marginalised individuals are embedded in decision-making forums in the coordination of responses. Where these organisations' capacity does not allow them to participate in response coordination, proactively engage with them and listen to them to inform the humanitarian response.
 - Support the effective participation and leadership of these organisations in global and national policy conversations on local leadership in crisis.
 - Equally, ensure that dialogue and coordination around inclusion embraces and supports local leadership, equal partnerships and complementarity between international and local actors.
- To donors:
 - Work creatively to ensure that smaller, place-based local organisations and those representing marginalised groups in particular can access direct, flexible funding on equitable terms.

Strengthen links between humanitarian inclusion and the development-peace-building 'nexus'

- To humanitarian organisations:
 - Advocate for stronger focus on inclusion as a 'nexus' issue in ongoing policy discussions at global and national level, ensuring stronger linkages and coherence between common humanitarian and development commitments to leave no one behind.
 - Identify and engage with non-humanitarian actors working on inclusion, taking advantage of complementary strengths to support more inclusive humanitarian outcomes.
 - Work with development actors, including national and local authorities, to ensure that humanitarian responses to crises do not exacerbate social exclusion and contribute positively to more inclusive preparedness, resilience and development outcomes over longer timescales.
- To donors:
 - Work to ensure coherence and complementarity between humanitarian and development funding portfolios, and identify opportunities for development funding to be deployed more effectively in crisis settings, especially in protracted contexts.

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