

IASC Real-Time Evaluation of the Humanitarian Response to the Horn of Africa Drought Crisis in Somalia, Ethiopia and Kenya

Synthesis Report
By Hugo Slim

June 2012



Somali women and children in the Dagahaley refugee camp, Kenya. Credit: UNICEF/Kate Holt

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This synthesis report was prepared by Dr. Hugo Slim, Senior Research Fellow at the Oxford Centre for Ethics, Law and Armed Conflict. The objective of this synthesis report was to summarize and combine key findings and recommendations from the more detailed Inter-Agency Real-Time Evaluations conducted in Somalia, Ethiopia and Kenya, as well as the report of the regional response to the Horn of Africa drought crisis.

The content of this report does not necessarily reflect the policies or views of the IASC or its individual members.

Funding for the evaluations was provided by FAO, OCHA, Save the Children UK, UNICEF, UNHCR and WFP.

Acknowledgements

The Inter-Agency Real-Time Evaluation (IA RTE) teams would like to thank the Governments of Ethiopia, Somalia and Kenya for facilitating these evaluations and participating in their discussions. Thanks are also due to the hundreds of people from NGOs, donor agencies, Government ministries and UN agencies who gave their time to support the process with interviews, logistics, workshop participation and comments on draft reports. Thanks also go to the many communities visited during the evaluations who generously gave their hospitality and time.

This synthesis report is an independent stand-alone report that summarizes and combines the more detailed work conducted by the four separate IA RTE teams. Valid International led the IA RTEs in Somalia and Ethiopia. The Somalia RTE was conducted by James Darcy, Paul Bonard and Shukria Dini. The Ethiopia RTE was conducted by Lewis Sida, Bill Gray and Eleni Asmare. The Kenya RTE and the regional report were led by the Global Emergency Group. The Kenya RTE was conducted by Jeff Duncalf, Langdon Greenhalgh, Marco Marroni, Hadijah Mohammed and Bernard Maina. The regional report was prepared by Abhijit Bhattacharjee and Marco Marroni. The whole process was supported by an inter-agency management group chaired by OCHA.

Special thanks to all those in OCHA, WFP, UNICEF, UNHCR and the IA RTE teams who offered valuable comments on an earlier draft of this report. Particular thanks are due to Jock Paul, OCHA, for his careful oversight of the whole process, to Nina Doyle, OCHA, and Helen Sida, Valid International, for their work copy editing this report.

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1. Executive Summary

1.1 Tens of thousands of people died, hundreds of thousands were displaced, and millions suffered deep erosion of livelihoods and assets in the 2011 drought crisis. However, the majority of the 13 million people affected received life-saving aid that prevented disaster. Suffering and mortality were most extreme for people in Somalia, and for Somali refugees moving to Ethiopia. Humanitarian response reached most people in time in Ethiopia and Kenya, but it failed to prevent a famine in Somalia.

1.2 The crisis was regional across three countries because drought and food price rises were regional, but also because interlocking regional conflict affected people's choices, restricted humanitarian aid, and created internally displaced persons (IDPs) and refugees. Successive rain failure made people dangerously vulnerable to the El Niño affect that hit the region in 2010/11. Actions by all warring parties in the region inhibited and greatly complicated the humanitarian response.

1.3 Late humanitarian response was a problem in all three countries, but the effects of delay were much more disastrous in Somalia where people were in a more desperate situation. Ethiopia's sophisticated food security and humanitarian system ultimately responded well and saved many thousands of lives. Kenya's response was slow but eventually effective. Response in Somalia was profoundly compromised by conflict and the lack of an overarching humanitarian strategy. Humanitarian response only got to scale when the worst had past. Famine could have been avoided.

1.4 Responsibility for failings in Somalia must be shared by the politicized aid strategies of al-Shabaab, Western counter-terrorist policy and the Humanitarian Country Team (HCT). Gradual withdrawals of Western aid seriously reduced food-aid volumes throughout 2010. Potential criminalization of aid agencies inhibited aid requests and aid flows in the important run-up to the famine. Al-Shabaab's bans on the United Nations World Food Programme (WFP), the International Committee of the Red Cross (ICRC) and several non-governmental organizations (NGOs)—with no good alternative humanitarian plan—restricted people's options at a crucial time. The HCT's misreading of the crisis led to insufficient urgency, an inappropriate strategy and a late response.

1.5 Most parties later mitigated initial failings in Somalia and caught up on their late starts in Kenya and Ethiopia. In Somalia, US and European donors commendably loosened aid-risk restrictions to respond fast and flexibly once famine was declared. Islamic States, UN agencies, NGOs and Islamic humanitarian organizations became dynamic and effective. Similar international engagement scaled up Government efforts after early inertia in Kenya and delays from political negotiation over numbers in Ethiopia.

1.6 Early warning was accurate and timely across the region. It prompted some early action in Ethiopia but not in Somalia and Kenya. In Somalia, local early warning was good quality but irregular, and the use of proper needs assessments was patchy by UN agencies and NGOs. Early warning in northern Kenya failed to mobilize the Government and the HCT.

1.7 Humanitarian strategies, planning and resource mobilization were very strong in Ethiopia but weak in Kenya. They initially failed in Somalia. Famine prevention in Ethiopia built on strong Government, donor, UN and NGO partnerships. The Kenyan Government response needed strong international support and had a low base of Disaster Risk Reduction (DRR) and resilience links from which to respond. Somalia had very weak Government leadership, and the Inter-Agency Standing Committee (IASC) cluster system failed to design and deliver a coherent strategy on time.

1.8 Coordination and connectedness worked well in Ethiopia, except around the refugee acute emergency response, but were uneven in Kenya and weak in Somalia. Ethiopian inter-agency coordination was improved by a new high-level mechanism co-chaired with the Humanitarian Coordinator (HC). Kenya's sector working groups performed well when strongly supported by international agencies, but most were weak at the field level. Somalia's cluster system failed to achieve strategic coherence and operational coverage in the early stages of the crisis.

1.9 The humanitarian system can learn important policy lessons from this crisis. These lessons indicate the importance of anti-famine governance; the management of "aid risk" in conflict; multi-year funding cycles; cash transfers; more-refined pastoralist responses; and key changes in IASC organizational culture and practice.

1.10 This synthesis report provides a short and immediately usable summary of real-time evaluation (RTE) lessons learned for the benefit of the wider global humanitarian system. It focuses on what worked well and what did not. It will be circulated widely to IASC agencies and stakeholders, and it is the first such synthesis of an RTE.

2. RTE Purpose and Methodology

2.1 The RTE's main purpose was to provide immediate feedback to country teams, and to deliver quick lessons learned from the Horn of Africa drought crisis. Much of this has been done already in the RTE country workshops and the detailed country and regional reports.

2.2 The RTE's main objectives were to evaluate the effectiveness and efficiency of the humanitarian system in four key areas:

- 1) Early warning and needs assessment
- 2) Strategy, operational planning and resource mobilization
- 3) Coordination and connectedness
- 4) Response against needs and standards

These four focus areas were used to target feedback on the system's success in delivering the timely provision of relief and the transition to recovery, and to assess the main outcomes for the affected people.

2.3 The findings below are drawn from a "light footprint" RTE methodology. This involved literature review, personal observations, semi-structured interviews, and focus groups with key stakeholders in the humanitarian system and people affected by the crisis. In Somalia, security restrictions hampered access to reliable data, key geographies and affected people.

3. The Context of the Crisis

3.1 The Horn of Africa drought crisis of 2011 affected 13 million people. Pastoralist and agro-pastoralist communities were the worst affected. The main focus of the crisis was across southern Ethiopia, south-central Somalia and northern Kenya. The pastoralist core of the crisis was a challenge to Governments and humanitarian agencies that have weaker relationships and less developed humanitarian expertise with pastoralist communities than with agriculturalist communities, and that struggle to align necessary cross-border strategies.

3.2 The drought of 2011—the driest year on record in many affected areas—struck deep into an already fragile economy. Regional drought came on top of successive bad rains and rising inflation. It ramped up a chronic livelihoods crisis into a tipping point of potential disaster by putting extreme pressure on food prices, livestock survival, and water and food availability. At the root of the crisis was a chronic vulnerability that sees many poorer pastoralist and farming communities facing almost constant crisis and regular shocks of various types.

3.3 Armed conflict across the region compounded chronic ecological and economic vulnerability, which escalated the crisis and limited people's survival and recovery choices. The Horn of Africa remains deeply affected by the contest over the Somali State, and by Somalia's failure to achieve a national Government, security for its people and the effective extension of Government services. Alongside this epicentre of Somali

conflict, violently contested claims over parts of the Somali region in Ethiopia have restricted development and humanitarian access in recent years. In Kenya, the crisis was shaped by intergroup clashes between Borana, Gabra and Turkana in northern Kenya, Somali communal violence in Kenyan refugee camps and Kenyan counter-terrorist incursions into Somalia. Across significant parts of the affected region, conflict has put a brake on DRR investments, late-stage crisis prevention, humanitarian response and early recovery.

3.4 Although this was a regional crisis, conditions were not the same in each country. People in Somalia were more vulnerable to disaster than those in Ethiopia and Kenya. Political conditions in Somalia made people's risk of death in that country higher from the start, and the UN's official support for one side in the conflict—the Transitional Federal Government (TFG)—greatly restricted international access.

3.5 Ethiopia had a humanitarian caseload of 4.8 million people that included 240,000 Somali refugees, on top of 7.6 million routinely assisted, raising an extra US\$820 million of aid. In 2010/11, the country experienced serious drought across its southern highlands, and its arid and semi-arid lowlands in the south. The Government's Productive Safety Net Programme (PSNP) led the targeting and response with additional support from its Risk Financing Mechanism and Contingency Fund. This response built on a regular annual system. Food aid is imported by WFP and the United States Agency for International Development (USAID), and distributed by Government and NGO networks respectively. In Somali Region, WFP operates a system of 300 distribution points. Ethiopia has adapted the UN's Consolidated Appeal (CAP) and cluster system to its own Government structures.

3.6 In Somalia, 3.2 million people needed life-saving assistance by July 2011. The country raised \$1.3 billion, of which only \$800 million went through the CAP system. An estimated 2.8 million people in need were in the south. Displacement played a big part in people's survival choices in Somalia. Some 253,000 people fled as refugees to Kenya and Ethiopia, while 167,000 became internally displaced mostly in and around Mogadishu. The Somali Government's leadership and response were minimal. Aid policy and distribution were shaped largely by the IASC cluster system, al-Shabaab, ICRC, Somali NGOs and a large humanitarian initiative by the Organisation of Islamic Cooperation (OIC). UN, Red Cross and NGO operations were mostly led remotely from Nairobi.

3.7 Kenya had 3.75 million people needing assistance and a refugee population of 550,000. This meant that 4.3 million people were under Kenyan responsibility in 2011, with funds raised of \$654 million. The Kenyan Government led a national humanitarian response through its system of inter-ministerial sectoral working groups. The cluster system was not activated in 2011 and international agencies aligned with appropriate Government working groups that mirrored IASC clusters. Kenya has been hosting Somali refugees since 1991, during which time refugee numbers have increased five times and camps have become congested and conflicted.

3.8 Governance in the three affected countries is very different and had a significant impact on each country's ability to respond positively to the crisis. Ethiopia has a strong federal Government, devolved regional structures and a firm political contract of famine prevention. The Government has a highly sophisticated and well-resourced national safety net for food security that is backed and trusted by Western donors. Kenya has much weaker safety net systems. Its Food Security Steering Group never achieved strategic leadership and decision-making effect. Kenya's Government of national unity has less humanitarian expertise and attracts less long-term donor confidence. Somalia has no functioning national Government and remains in a state of

international civil war between the TFG, African Union Mission in Somalia (AMISOM), Kenyan forces, Ethiopian-backed militia and al-Shabaab.

3.9 Donors of the Organisation for Economic Co-operation and Development (OECD) have been vital providers of humanitarian assistance in the region for many decades, and some also have a long history of politico-military engagement. These donors have invested in safety nets, supported development aid and led the way in rapid humanitarian response—saving millions of lives across the region. In addition, the US and UK Governments in particular have deep geo-political counter-terrorist interests in the Horn of Africa.

3.10 New, largely Islamic donors have increasingly focused on Somalia. This crisis saw significant and unprecedented engagement in humanitarian response by Saudi Arabia, Turkey and the OIC. Saudi Arabia worked within the CAP system while some others did not.

4. Early Warning and Needs Assessments

Successes

4.1 Early warning systems worked well across the region and were unambiguous about the likelihood of impending crisis. The Famine Early Warning Systems Network (FewsNet) was accurately predicting extreme conditions in all three countries from 2010, and noting an increase in distress migration and nutritional decline. Ethiopia's Household Economy Analysis tracked the emerging crisis effectively. Somalia's Food Security and Nutritional Analysis Unit (FSNAU) was also predicting crisis, as were local Kenyan assessments.

4.2 Technical needs assessments and early warning worked well in Ethiopia before being stalled by political negotiation of needs at the federal level. Ethiopia's early warning and needs-assessment system spotted and recalibrated the emerging crisis facing the country's citizens. Needs were well understood at the local level but then negotiated at the federal level, causing delay in early action. Estimated needs rose dramatically during 2011. Although response remained behind the crisis curve, disaster was averted. The prevention of deaths is a major achievement of Ethiopian Government and OECD donor investment in national, long-term and predictable systems to manage chronic and acute food-security needs.

4.3 Early warning of water needs was well flagged as a priority across all three countries. Water emerged as an area of expertise that will benefit from a more systematic approach. As a deeply pastoralist crisis, the water needs of people and livestock were critical. This crisis shows there is room for significant improvement in water needs assessment to make it as sophisticated and widespread as food-and-livelihoods early warning and assessment.

Failures

4.4 Needs assessments and early action were very weak in Kenya and meant an unnecessarily late start, eventually prompted by media coverage. Kenya had no effective multi-sectoral national system of analysis and

alert for its northern areas, and it did not act early on FewsNet warnings. There was no real preventive and preparedness mindset in Kenyan national institutions around drought and hunger in the north. The policy was to hope for good March rains. HCT leadership was similarly ineffective and failed to prompt Government action. Local NGOs who knew the most about the situation were often marginalized from the Government system and local planning. Only a major international media campaign about the drought engaged Government and agency action just in time.

4.5 In Somalia, needs assessments and early action failed and did not prevent a famine. The long-term lack of sufficient first-hand HCT access to conditions in Somalia created genuine epistemic problems in reading the situation. Although good quality, FSNAU data was patchy, lacked ongoing monitoring (except food prices) and was often outdated by the time it was processed and read by the HCT. Reading these accounts late and remotely made interpretation problematic. Real needs assessment was also deeply problematic in a country where access for UN and other agencies was very difficult. But direct and indirect access were not impossible, and it seems UN agencies and international NGOs had not invested in creative and systematic needs assessments through partners during the years of chronic crisis. They have relied on broad FSNAU warnings, not on deep situational needs analysis.

4.6 Alongside epistemic problems, there were problems related to trust and mindset in Somalia. The HCT seemed dubious of Somali NGO reports and tended to discount them. There was entrenched pessimism about donor generosity. The revised CAP felt pressure to stay low, showing a tendency to shape humanitarian requests to what risk-averse counter-terror donors might give instead of what the situation might demand. A certain Somalia mindset across donors and humanitarians—steeped in long years of perpetual crisis and constrained engagement—hoped too much for good April rains. When these did not come and FSNAU's June nutritional data was appalling, the HCT and donors were not sufficiently prepared.

4.7 The HCT and donors in Somalia missed other key warning signs and failed to develop effective scenario and contingency planning for a food emergency. The most significant warning sign was al-Shabaab's expulsion of WFP in 2010, which automatically meant a 20-30 per cent reduction in the food supply. In a crisis year this should have been read as disastrous—even more so because US aid had declined by 80 per cent since 2009. FAO and WFP expressed serious concerns about the food pipeline in February 2011. UN time would have been better spent urgently creating scenario and contingency plans instead of hoping that WFP could negotiate its way back.

4.8 In Ethiopia there was a significant failure of response to the arrival of Somali refugees. The assistance programme was not mobilized fast enough from February onwards. Lives were lost as a result. Anticipated refugee flows and significant experience of refugee programming in Ethiopian camps should have prompted a far more assertive and pre-emptive operation by the Administration for Refugee and Returnee Affairs (ARRA) and the United Nations High Commissioner for Refugees (UNHCR). People's poor nutritional status on arrival, the magnitude of the influx and the slow response meant exceptionally high rates of infant mortality, morbidity and malnutrition in Dolo Ado, where the child mortality rate was still seven times the emergency threshold in August.

5. Strategy, Operational Planning and Resource Mobilization

Successes

5.1 Ethiopian Government strategy was successful over a range of life-saving operations in a mix of food and cash support, therapeutic feeding and water supply. The PSNP's food-and-cash safety net routinely covered 7.6 million people and comprehensively prevented their slide from vulnerability into disaster. This core number was extended by 3.1 million extra relief cases, while 6.5 million existing PSNP clients also received a three-month surge ration. The Outpatient Therapeutic Programme system in Ethiopia swung into action and gave therapeutic feeding to 329,535 severely acutely malnourished children in 7,479 village-level sites. A massive water trucking operation reached 4 million people.

5.2 UN agency and NGO strategic support to Ethiopia's food security and relief system was essential and effectively leveraged Government strategy and capability. Many NGOs helped to surge Government transport requirements and made significant contributions to the water trucking programme in pastoralist areas. WFP's food operation in Somali Region was vital. ARRA and UNHCR's expanded refugee response recovered an initially disastrous situation, also with substantial NGO support.

5.3 The adoption of cash-transfer and market-based strategies in Somalia was bold and NGO led, and Kenya also transitioned into cash. NGOs in Somalia, coordinated through the Cash-Based Response Working Group, played a major and well-organized role advocating and delivering cash and voucher relief, operating through the sophisticated Somali *Hawala* system (a network for brokering remittances) and Somali NGOs. In Kenya, WFP began to introduce market-based interventions as early recovery inputs in October 2011. Cash transfers are routine in Ethiopia's PSNP.

5.4 In each country, innovative strategies to meet specific pastoralist needs showed real effect, and demand increased humanitarian professionalism in this vital field. Efforts to identify and meet water needs were complemented by livestock support strategies of fodder provision and commercial or slaughter destocking. In the Somali Region of Ethiopia, livestock trading links developed with the Gulf in previous development programming created valuable market links that enabled well-networked pastoralists to destock profitably and early. All these strategies could have absorbed more and earlier funding.

5.5 Government and private donors responded fast, effectively and generously when the scale of the emergency was recognized, directly enabling life-saving relief operations. OECD donors moved quickly to fund operations in all three countries. USAID, the European Commission Humanitarian Office (ECHO) and the UK Department for International Development (DFID) were consistently recognized as highly responsive and importantly flexible in all three countries. For example, USAID triggered additional aid early in Ethiopia, and DFID secured WFP's food pipeline. The Kenyan Government allocated \$3.4 million. Private donors from around the world were joined by significant private funding in-country. The Kenyan Red Cross raised \$7.4 million. An appeal for Somalia in Hargeisa raised \$700,000 and private aid accounted for 11 per cent of Somalia funds.

In Kenya and Somalia, sufficient funding enabled UN, international and national NGOs to scale up fast and effectively when the crisis became extreme.

5.6 The rapid response of several Government donors from the OIC had a significant impact on the volume, style and reach of humanitarian response in Somalia. Saudi Arabia contributed strongly within the CAP system to become its third-largest donor with funds of \$58 million. Turkey has been particularly dynamic, announcing a total contribution of \$365 million, and a “new model” of humanitarian aid that builds on Muslim solidarity to achieve easier access and increased efficiency. Islamic NGOs from Europe and North America also seem to have found more room for manoeuvre in Somalia than secular and Christian agencies.

Failures

5.7 Overall HCT strategy and leadership were weak and underdeveloped in Somalia and Kenya. Neither of the country teams managed to develop serious scenario or contingency planning for a major food security crisis. Both country teams failed to strategize and develop effective early action programmes. HCT leadership was biased towards information sharing and consensus instead of strategic coherence and firm decisions. In Kenya, where the security environment was easier and development opportunities more favourable, UN and Government plans never managed to combine relief and recovery objectives to focus on livelihoods as well as lives. DRR remained undeveloped before the crisis and was not strategically considered during the crisis response.

5.8 The strategic weakness of the HCT in Somalia is significantly, but not entirely, mitigated by deeply problematic operational circumstances. Very poor access, remote management, weak contested Government, plus armed conflict and its politicization of humanitarian policy made the right strategy difficult to find. But there was still too much hesitation and indecision over strategic choices: to improve needs assessment, to plan for the worst, and to develop explicit food-aid and cash-transfer strategies. Lead agency strategies tended to dominate joined-up cluster strategies. Strategic emphasis became vertically based on mandate, and not horizontally based on life-saving and livelihood outcomes jointly owned by the HCT.

5.9 Regional strategy, planning and fundraising were effectively non-existent in UN and regional organizations. The Regional Directors’ Team and the United Nations Development Group played no meaningful role across the three countries of the emergency. The only regional humanitarian body to engage strategically in any way was the Regional Humanitarian Partnership Team in Nairobi. It limited its role to basic information sharing with low UN agency attendance. A combined UN/Red Cross/NGO platform produced a Horn of Africa plan of action that achieved minimal traction. The Intergovernmental Authority on Development organized a summit of affected countries that produced country action plans, and the African Union (AU) Humanitarian Affairs, Refugees and Displaced Persons division organized an AU funding conference with support from the United Nations Office for the Coordination of Humanitarian Affairs (OCHA). The conference produced pledges of \$350 million but funds of only \$4.2 million. Regional coordination was not helped by the “split site” of political and humanitarian hubs between Addis and Nairobi.

6. Coordination and Connectedness

Successes

6.1 In Ethiopia and Kenya, IASC coordination structures effectively adapted to support complex non-cluster Government systems. The new Strategic Multi-Agency Coordination group (S-MAC) and its technical subgroup, established by the Ethiopian Government in the 2011 crisis, has proved efficient and effective at binding the Government system with its international partners. S-MAC is co-chaired by a State minister and the HC. Ethiopia also pioneered the use of sector road maps in the agriculture task force. In Kenya, the international cluster structure has combined well with the Government's sectoral working groups and formed an intersector working group that coordinated well horizontally during the crisis. The nutrition sector was a model of response: scaling up early, with high levels of expertise seconded into Government and significant resources invested in coordination.

6.2 Technically empowered regional and zonal Governments, and local district and *kebele* (village) committees proved to be a great strength in Ethiopia's response. With international organization and NGO support, these parts of the Government took responsibility for assessing, planning, coordinating and implementing Government response. They were advised by experts from federal Government in new incident command posts, modelled on the Federal Emergency Management Agency in the USA.

6.3 OCHA Somalia and Nairobi-based clusters made important efforts to support field-level hubs and clusters in Somalia in difficult and dangerous circumstances in al-Shabaab areas. Remote support by telephone and visits by senior staff were designed to encourage and advise devolved cluster strategy making. This showed real intent to build effective clusters, but it was ultimately dependent on local members' commitment and skills.

Failures

6.4 UN humanitarian response in Somalia operated with a cluster strategy, but it failed to gain maximum value from the cluster system or innovate an appropriate alternative. This was largely due to the practical difficulties of rolling out an effective cluster network across the drought-affected area, and the management distance between cluster leads, the Inter-Cluster Working Group in Nairobi and field operations on the ground. The Water Sanitation and Hygiene Cluster, the Agricultural Cluster and the Livelihood Cluster worked well, but clusters at all levels never achieved meaningful inter-cluster strategy or efficient decision-making. Field-level meetings became information-only or funding-only discussions, and they seldom had sufficiently expert and senior staff to chair and lead them. Low NGO engagement also undermined clusters and created parallel structures that further degraded cluster effectiveness.

6.5 In Kenya, field-level sector meetings also slipped into an information-only mindset and never achieved traction on intersectoral strategy, local inclusion and decision-making. This was because OCHA's field-level coordination and support to Government sector leads was underresourced, and because Kenyan Government officials had very limited humanitarian experience with which to lead coordination. The potential value of local NGOs and representatives from affected communities was never included in the sector working groups at the field level. Their knowledge and networks could have been a significant asset.

6.6 The main problems in Ethiopian Government coordination involved scepticism about regional estimates and mistrust of international NGOs. The zones' carefully calculated assessments of need and numbers are routinely trimmed down by federal civil servants who assume local exaggeration. This risks creating a bargaining culture in needs assessment. If the Government is suspicious of information coming from the zones, it is equally wary of giving information to NGOs. The Government has access to large amounts of good-quality data from around the country, but it instinctively guards rather than disseminates this data. This breeds a reciprocal reluctance in information sharing from NGOs to Government.

7. Response Against Needs and Standards

Successes

7.1 The majority of the 13 million people pushed towards disaster by this crisis were reached with humanitarian assistance that saved lives and prevented destitution and mass migration. Ethiopia stands out for its preparedness, coverage and high technical standards. In Somalia, after recognition of famine in south-central regions, aid reached accessible areas to mitigate the food-and-livelihood crisis, and seems to have prevented the spread of famine into Gedo region. In Kenya, pastoralist and refugee needs were met and prevented excess mortality and destitution.

7.2 Technical standards were being consciously applied in Ethiopia and Kenya, but they were beyond the direct control of much remote management in Somalia. Ethiopian standards in therapeutic feeding were very high and water standards met Sphere survival guidelines. Livestock emergency guidelines and standards were largely followed in Ethiopia, but sufficient livestock funding lost out to a preference for food-aid investments. Kenya's main technical challenge was in linking relief and development. Most agencies in Somalia cannot yet report comprehensively to standards, and they stress that building the capacity of their network of Somali partners is a priority. Cash-transfer standards have been developed in Somalia since 2008 by the Cash-Based Response Working Group, in association with the Cash Learning Partnership.

7.3 Some aid will have made an important contribution to livelihood needs, or deferred livelihood erosion, but the main achievement of this response was saving lives. For most of the 13 million people affected, fragile livelihoods are a more profound structural crisis than armed conflict. The ideal response to this crisis would have been a multi-billion dollar multi-year livelihoods programme. This was beyond the remit of this humanitarian operation.

Failures

7.4 Two main exceptions to the mainly positive coverage of needs and high standards were the many deaths in Somalia and the excess mortality in refugee camps in Ethiopia. Estimated famine deaths are in the tens of thousands. Refugee deaths in Ethiopia were in the hundreds. Both situations require a much more detailed inquiry into their causes.

7.5 Some areas also faced more problems than others in receiving timely and appropriate aid, mainly because of conflict. In Ethiopia, PSNP outreach was weaker and slower in Somali Region because of armed conflict that limited international humanitarian access and verification in 2010. Access was much improved in 2011, but some areas were still off-limits. In Kenya, refugee care and protection met basic needs but was compromised in its ability to guarantee effective protection and extend wider services, such as education. The many IDPs in Mogadishu were not well served despite their proximity to IASC's humanitarian hub.

7.6 Insecurity also put Somali women at greater risk of gender-based violence and robbery as they travelled to Kenyan refugee camps. Reports of rape and attack when approaching Dadaab camps and chronic insecurity in the camps indicate significant unmet protection needs.

8. Policy Lessons

8.1 The following policy lessons emerge from looking at the humanitarian response across this sample of three different countries.

Political

- 8.2 **The quality of State governance and a society's political contract around famine are the most significant factors in determining effective humanitarian response.** Ethiopia's humanitarian performance and intent were markedly different to that in Kenya and Somalia.
- 8.3 **The policies of warring parties to limit unfair advantage gained by their enemies from humanitarian aid can be disastrous for ordinary people.** Al-Shabaab's strategy of managing aid risks by evicting what it viewed as Western influence and interference proved extremely punitive to millions of people. The US Government's assertive management of terrorist-related aid risks reduced non-humanitarian aid diversions, but underestimated the amount of inhibition it placed on the humanitarian system. Since the introduction of aid-risk legislation in 2009, US funding for Somalia reduced by 88 per cent until restrictions were commendably eased at crisis point in July 2011. This was a huge dip, as US funds had been 40 per cent of all aid financing. Many agencies simply did not risk applying for US funds.

Technical

- 8.4 **Good national safety-net programmes work to prevent famine and are also best placed to quickly scale up humanitarian response.** Ethiopia's response was a success.
- 8.5 **Prevention via national safety nets and concerted DRR gives the best value for money in areas of chronic emergency.** The cost of routine support to 7.2 million people via Ethiopia's PSNP was \$270 million compared with \$822 million for relief to 5 million people. Initial evidence from Kenya suggests that areas with DRR programmes were less severely affected by this crisis.

- 8.6 **Humanitarian response to pastoralist societies needs refinement and mainstreaming.** Water-and-livestock security programmes for pastoralists need to become as routine and sophisticated as food-and-livelihood security for agricultural societies. Water-and-livestock early warning needs assessments and response options must be widely understood so they receive early investment and are not marginalized by a food-aid bias in donor funding.
- 8.7 **Cash transfers and market-based programming used in this crisis offer a rich opportunity for learning from a diverse sample.** All three countries used these programmes. Ethiopia offers the chance of learning about transfers from a sophisticated Government system during crisis. Kenya offers an agency-led early recovery model. Somalia provides an extreme example of rapidly deployed transfers through local banking and NGO systems.
- 8.8 **The IASC model needs to find synergy with the new donorship patterns that emerged in this crisis.** Strong OIC donors worked inside and outside the CAP structure in Somalia, as did some OECD donors and local giving was impressive. Creative and effective ways of working with non-CAP humanitarian resources need to be found.
- 8.9 **One-year planning cycles for humanitarian investment make no programming sense in chronic conditions of livelihood erosion and very high levels of vulnerability.** One reason that this crisis was so extreme was a downward spiral of entrenched poverty in large sections of sedentary and pastoralist society. The most logical planning and best value for money in such settings would be delivered by multi-year planning and investment cycles. The annual CAP model is too reactive, superficial and inefficient.

Organizational

- 8.10 **Regional crisis can benefit from regional leadership and planning.** The humanitarian system should explore effective regional leadership of cross-country strategy in multi-country emergencies that are geographically coherent and obviously interlinked by cause and effect.
- 8.11 **The cluster system runs the psychological risk of diffusing responsibility and deferring strategic decisions.** Empowered and strategic humanitarian leadership needs to be combined with a strong decision-making culture to make sure that the system decides and acts, even when it does not always agree.
- 8.12 **Mindsets of overly hopeful and overly despairing fatalism can become entrenched in chronic emergency settings.** In Somalia and Kenya, donors and humanitarians shared an implicit policy of hoping for good rains in 2011. This stalled their initiative to prepare for the worst. Also in Somalia, humanitarians were despairing of Western donors' desire to engage deeply in crisis prevention. This pessimism shaped the CAP. Internal critics need to be appointed to challenge group thinking, key decisions and non-decisions
- 8.13 **Declaring an emergency is counter-intuitive and requires courage and encouragement.** Expecting people to "call" a major disaster in a complicated, geo-political and uncertain environment is a big request. IASC culture needs to work on the clear principle of "better wrong than late", and to be attentive and supportive of humanitarians when they call emergencies from any operational level.

- 8.14 **Management distance was a major dynamic in Somali operations that needs better understanding, greater risk management and innovation.** So-called Nairobi Syndrome is hard to resist. It was even reported by people working for the Kenya response regarding the emotional and cultural distance they felt between operations in northern Kenya and Nairobi. The political negotiation of needs by Government officials in Addis reflects a similar dynamic in Ethiopia.
- 8.15 **The development of intrasystem trust is an essential determinant of humanitarian success.** National civil servants need to trust local civil servants. CAP appeals need to be accurate and trusted by donors. International agencies and local NGOs need to be able to trust each other. Drought-affected people need Governments they can trust to ensure their right to life and food. Mandated agencies need to trust each other.

9. Improving Response – Key Findings

9.1 Each country report has detailed and targeted recommendations. The HCT and its stakeholders have developed specific actions to respond to them.

9.2 From all these recommendations, it is possible to condense a number of common key findings for improvement in the humanitarian system that should be considered in preparing for and responding to similar emergencies.

Key findings

1. Early warning is no substitute for situation-based needs assessment.
2. Early action needs to be a priority as late-stage crisis prevention.
3. Safety nets and DRR are the best value and most scalable first line of response.
4. Strategy to build and localize response in Government and national NGOs works best.
5. Multi-year CAP planning & investments cycle are essential in chronic-crisis countries.
6. Strategy needs to focus more on humanitarian outcomes and cross-sector strategy.
7. Clusters must be powerfully led decision-making not consensus-seeking groups.
8. Coasted scenario and contingency planning should be required in all crisis planning.
9. More cluster time needs to be spent on planning and deciding than on information.
10. IASC response needs to find harmony and synergy with non-CAP donors and actors.