



HPG Report

# Multi-year humanitarian funding

## A thematic evaluation

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# Acronyms

<b>DFID</b>	UK Department for International Development
<b>DRC</b>	Democratic Republic of Congo
<b>ERC</b>	Emergency Response Fund
<b>ETB</b>	Ethiopian Birr
<b>FGM</b>	female genital mutilation
<b>HIEP</b>	Humanitarian, Innovation and Evidence Programme
<b>INGO</b>	international non-governmental organisation
<b>IPL</b>	international poverty line
<b>KP</b>	Khyber Pakhtunkhwa
<b>MY</b>	multi-year
<b>MYHF</b>	multi-year humanitarian funding
<b>OCHA</b>	United Nations Office for the Coordination of Humanitarian Affairs
<b>PPP</b>	purchasing power parity
<b>PSNP</b>	Productive Safety Net Programme
<b>UNHCR</b>	United Nations High Commissioner for Refugees
<b>VFM</b>	value for money
<b>WFP</b>	World Food Programme



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# Executive summary

Humanitarian aid is largely concentrated in crises that are protracted or recurrent. In 2016, 60% of global humanitarian financing went to just 10 countries. Almost three-quarters of this aid went to long-term recipients (where a crisis has lasted eight years or more) and 86% went to crises that had endured over three years (Development Initiatives, 2018).<sup>1</sup> In many of these countries, such as the four studied for this evaluation, crises have endured for decades but humanitarian aid has remained annualised and short term. Despite multiple commitments, development assistance has not filled this gap, remaining largely absent from the most intractable and difficult crises.

DFID introduced multi-year humanitarian funding (MYHF) in 2014 in acknowledgement of these facts. With the introduction of longer funding timeframes, it was anticipated that there would be improvements in cost-efficiency, better preparedness and earlier response, better-quality programming, and the ability to address underlying causes of crises and help build resilience.

To test how far these potential benefits can be realised in practice, DFID commissioned Valid Evaluations to undertake a four-year thematic evaluation of MYHF to run in parallel with the first MYHF business cases in Sudan, the Democratic Republic of Congo (DRC), Ethiopia and Pakistan. The evaluation was asked to answer questions on whether MYHF helped build resilience, whether contingency funding led to quicker response and the extent to which MYHF provided better value for money (VFM).

This report summarises the learning from the thematic evaluation and employs an integrated analysis of separate country and themed studies to identify which factors shaped people's resilience and how far

humanitarian aid was addressing those factors with MYHF.<sup>2</sup> The findings are set out in brief below.

## **The resilience challenge is greater than commonly assumed, and the factors influencing this are multi-dimensional**

Much of the literature and practice in the humanitarian sector defines resilience by reference to shocks, and specifically those shocks that create humanitarian crises. This study found the smaller shocks, e.g. ill-health, were just as important in limiting people's life chances. More importantly, a coherence analysis of people's resilience was impossible if it separated off one set of constraints (those caused by shocks) from all the other structural factors that limited people's agency even in the absence of shocks. For people living in recurrent or protracted crises and in poverty, resilience is reflected in the choices that people are able to make when in difficulty. Resilience as agency-in-crisis is a more useful conceptualisation of resilience than one based on recovery times after large shocks.

The scale of the resilience challenge is far greater than commonly assumed. The significant majority of those interviewed were surviving on incomes just over half the international poverty line (IPL), a threshold at which families could just about manage (in DRC the threshold is less than a third of the IPL). Households were also being continually buffeted by shocks. Other research suggests that households need an income several times higher than the poverty line before they can be confident of not falling back into poverty.<sup>3</sup>

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1 2016 is the latest year available for figures, but this trend has been observed for some time now.

2 The evidence for the analysis is contained in the following research reports: four country (summative) reports; a calculation of the economic cost of ill-health to households in Sudan and Pakistan; two studies of the value for money of MYHF and contingency funds; an analysis of changing gender relations in North West Pakistan as a result of crisis; and a study of the contribution of early response and resilience investments to people's ability to cope in severe drought in south eastern Ethiopia. See the references at the end of the report for full details of all the companion papers of this study.

3 The Chronic Poverty Network have produced a number of longitudinal studies looking at sustainable poverty escapes. See [www.chronicpoverty.org](http://www.chronicpoverty.org) for reports and studies. The order of magnitude quoted here is from studies in South Africa and Uganda, and references other literature from South America.

Under stress, people were forced to make difficult choices and trade-offs. People were more resilient if they could maintain a greater range of choices and if they were able to pursue more of these options without having to trade one against another.

In all four countries, the factors which shaped people's agency in crisis were economic, social and personal. The study found that:

- **Gender was the single biggest determinant of a person's agency**, in and out of crisis.
- **Social connections *outside* people's locality** were an important contribution to coping, especially where these were with people in urban areas.
- **The 'meso-economy' was the most important in determining livelihood opportunities.** This refers to the local economy, but covering a much larger, and typically a combined rural–urban, population than their very immediate, local economy.
- **Asset accumulation and business investment played a surprisingly limited role in creating resilience**, perhaps because people could not get to significant levels of either.
- **Personal adaptive capacity is a critical skill but was comparatively rare.** People's individual ability – part skill, part mindset – to take advantage of opportunities that are available is largely neglected in resilience thinking.
- **Ill-health is a major impediment to people's progress towards resilience.** It typically robs households of over a quarter of their potential income.
- **Access to basic services was critical but was largely determined by political status**, and the ability of people to overcome marginalisation.

The scale of the resilience challenge and the level of vulnerability meant that humanitarian assistance, whether multi-year (MY) or not, was not sufficient to address these issues. **This requires long-term, scalable, development finance over many years.**

## **Humanitarian assistance targets the issues that shape resilience but not in ways that can impact on them**

Although humanitarian agencies nominally addressed many of the issues that *shape* resilience, they did not do so in ways which were likely to have an *impact on* resilience. For example, gender is still too often addressed by ensuring a minimum percentage of recipients of aid are women; humanitarian agencies temporarily provided much-needed basic services, but

did not attempt to address the lack of supervision and management of those services, without which there can be little hope of a longer-term movement towards resilience.

Several factors constrained the ability of humanitarian agencies to address resilience more meaningfully. Other than the scale of resources available and short operational timeframes, they were also governed by traditions of thought and working cultures within the humanitarian sector. The dominant paradigm remains a transfer to individuals and households of either material assets or of skills. Since resilience is shaped at much wider geographical levels and mainly by the performance of institutions, humanitarians struggle to engage effectively. However, this critique must be put into context: the primary goal of emergency relief is to meet immediate and acute needs. It is unfair to demand that humanitarian agencies build resilience. This should not be the standard by which they are judged, or the objective for which they are funded.

## **Multi-year humanitarian funding must be actively managed to achieve improved quality, predictability and cost-effectiveness**

The first iteration of MYHF has shown considerable promise, although the benefits have been uneven. There is evidence that it improves programme quality, through better design and learning, although this is not guaranteed. MY funding allowed longer periods of consultation with beneficiary populations, which enabled agencies to adjust their programming, study interventions and improve them as they learned.

The longer-term presence of agencies on the ground in crisis-prone areas has proven essential for timely response, both as a source of trusted information for decision-makers and to ensure that funds released can be used promptly and effectively. As well as being a strategic asset, MYHF offers some cost benefits, most notably in the ability to purchase food when prices are lowest (e.g. in Ethiopia, food aid bought at the optimal time was 18% cheaper than last-minute emergency purchases would have been). There were also significant savings from being able to front-load investments. There were fewer savings than had been anticipated in administration costs (although agencies' systems were not configured to make such comparisons). Ultimately the greatest



value benefits will likely be in better programmes, delivering better outcomes.

None of these improvements is guaranteed, and in most cases potential benefits were not realised in the first iteration of MYHF business cases. Desired changes from MYHF have to be explicitly identified in each case, built into agreements with partners and then actively managed. These benefits must be passed on in situations where recipient agencies sub-contract.

#### Summary of the evidence from the evaluation

- MYHF can help improve the **quality** of humanitarian programming.
- **Long-term presence** in crises and in crisis-prone situations leads to **faster and more effective response**.
- There is limited evidence that agencies have used MYHF to develop **better context and problem analysis**.
- The existence of **contingency funding** did not lead to better contingency planning or preparedness.
- The **cost-efficiency** benefits of MYHF are more modest than had been hoped.

## Contingency funds must be linked to planning and, where possible, triggers

Contingency funds were intended to ensure a degree of flexibility in humanitarian action in a situation where funds were pre-committed in multi-year contracts. DFID's contingency funds helped make funds available more quickly, in all three countries where they operated. These funds seemed most beneficial when responding to small, localised emergencies, to which donors might otherwise not have responded.

DFID experimented with several types of contingency funding, either holding funds themselves or placing them with partners. This created different incentives and funds were spent slightly differently as a result. In Ethiopia, funds held with partners were used in the first emergency during the three-year business case to respond to refugees from South Sudan. While understandable and relevant, this meant there were no longer contingency funds available for the El Niño drought a year later. In Sudan, contingency funds held by DFID were spent every year due to budgeting.

When there were no big, standout emergencies, funds were disbursed as contributions to the UN Sudan Humanitarian Fund; when there were large-scale floods in Kassala and drought in Darfur, funds were programmed through existing resilience partners.

In the original design of the MYHF business cases, it was intended that contingency funds should be automatically triggered, rather like parametric insurance. This proved technically challenging and the idea was dropped. However, DFID should revisit this as it may help in controlling political and institutional incentives.

## Multi-year humanitarian funding has the potential to support transformative change

Multi-year humanitarian funding has the potential to support greater, transformative change. Funding timeframes alone cannot achieve this, but MYHF has not happened in a vacuum. There has been a long-term trend in international aid to situate crises more in their context; to respond to recurrent needs through social protection; to address regular acute needs by supporting the ability of state services, or by helping crisis-affected people to meet their needs through the market.

MYHF has not yet brought about changes in how agencies undertake contextual analysis. Giving them more time to engage in this could help them to base their programming on a better understanding of the local context – but only if MYHF is managed to achieve this as an explicit objective. Changes to the way in which aid resources are used will not happen merely by changing the funding timeframe.

MYHF can also blur further the dividing lines between humanitarian and development aid resources. Fundamentally, the relevant question is not whether MYHF can help build resilience, but how different aid instruments can be combined most appropriately in different situations to address both short-term acute needs and the underlying constraints of agency.

In the communities studied for this evaluation chronic poverty, marginalisation, structural under-development and poor governance combined to restrict the agency of populations, and make them highly vulnerable to even small shocks. Buffeted by small and large shocks, with incomes well below the IPL, the overwhelming majority were very far from being resilient. This 'resilience gap' cannot be overcome by humanitarian

aid, or even all aid combined. It needs long-term investment, better policy and strategic vision. External assistance must support the long-term development of state services and policies, while simultaneously standing ready to respond in moments of, inevitable, short-term crisis.

#### How MYHF could be transformative

1. At a project level, a MY timeframe gives more **opportunity to address the acute symptoms of crises** in ways that may also engage with some underlying factors behind vulnerabilities
  - If longer-term planning of humanitarian interventions becomes the norm in areas with protracted or recurrent crises, it may help agencies – and particularly donors – to **deepen how they use individual projects as part of a broader strategy**.
  - MYHF can blur the lines between development and humanitarian assistance, and can help raise questions about **which instruments are used in different situations**.

## Multi-year humanitarian funding cannot – in the short term – reduce the humanitarian caseload

While this evaluation has found benefits to MYHF, both observed and potential, claims that resilience investments are a cost-effective way of reducing future humanitarian needs should be treated with a degree of scepticism. Funding instruments alone cannot achieve miracles; changing programmes' timeframes may be sensible but is not revolutionary. The scale of the resilience challenge is huge – bringing populations sustainably out of poverty is a generational project. The Ethiopia droughts from 2014–2017 led to asset losses among pastoralists of an estimated £206 million just in one studied zone (Levine, Kusnierek and Sida,

2019); there are only four DFID country programmes globally that spend more than this on an annual basis. Humanitarian aid cannot build resilience overnight, and we should not judge resilience aid investments by their ability to reduce future humanitarian needs. This is holding both to the wrong standards.

Although humanitarian action cannot be responsible for changing structural causes of vulnerability, these should be taken into account. Humanitarian action could contribute to expanding the agency of crisis-affected people. More importantly, it will enable broader strategies to develop, within which humanitarian and development interventions can work together to address constraints to agency on several levels. Currently, resilience investments from non-humanitarian funds were found to be implemented in an ad hoc way, without an underlying coherent and realistic plan for improving people's resilience. The next iteration of MYHF must promote a shift towards a strategic vision for building resilience, factoring in development instruments and leveraging the broad skill base needed.

## Recommendations

- Support for resilience needs to be based on an analytical framework that is focused on the whole of people's lives and their agency, and not exclusively on those shocks which receive emergency attention.
- A wider transformation is needed in the use of humanitarian funds in countries with protracted or recurrent crises.
- More investment is needed in reducing the burden of ill-health.
- The way that gender analysis is conducted within the humanitarian sector must change radically.
- Contingency finance must be subject to greater discipline, linked to more robust preparedness planning.
- Careful management is needed for MYHF to achieve its potential, including changes to design, action research and measurement systems.

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# 1 Introduction

## 1.1 Objectives and research questions

Valid Evaluations was commissioned through DFID's Humanitarian, Innovation and Evidence Programme (HIEP) in 2014 to carry out a multi-year (MY), multi-country thematic evaluation of DFID's multi-year humanitarian funding (MYHF) approach. The study was carried out in Ethiopia, the Democratic Republic of Congo (DRC), Sudan and Pakistan.

The thematic evaluation was asked to address three broad research questions on: the potential for MYHF to help build resilience; the contribution of contingency funding to earlier response; and the value for money (VFM) of the MY approach. These were developed as follows.

### Resilience:

1. Are vulnerable individuals and households more resilient to shocks and stresses as a result of the work of DFID-funded (and other) interventions? How do investments in resilience contribute to or compromise delivery of humanitarian relief and eventual outcomes for people affected by crisis? What lessons can be learned about how to best enhance resilience in protracted crisis?

### Contingency funding:

2. Has the availability of contingency funding enabled DFID and its partners to respond more quickly and effectively when conditions deteriorate?

### Value for money:

3. To what extent does DFID's MY and contingency funding provide better VFM than annual funding for DFID and its partners?

## 1.2 Multi-year humanitarian funding

MYHF took slightly different forms in each country. In Ethiopia, just over £200 million went to the World Food Programme (WFP), United Nations High Commissioner for Refugees (UNHCR) and the United Nations Office for the Coordination of Humanitarian Affairs (OCHA)-managed Emergency Response Fund (ERF) between 2014–2017. This included an additional £60 million granted in 2016 to respond to the El Niño emergency. In DRC, the MY portfolio was much smaller, initially just over £16 million for the period between 2013–2016. This was intended to go to UNICEF, Action Contre la Faim and the Norwegian Refugee Council, although the latter grant was cut short early. In Sudan, a three-year partnership from 2013 to 2016 was forged with two NGO consortia (one in Darfur and one in Kassala) and the total value of the two grants was roughly £26 million, as part of a larger £88 million MY humanitarian business case (other grants were single year). In Pakistan, a number of commitments of between two and four years were made to two consortia, one led by the UN and the other led by an international non-governmental organisation (INGO).<sup>4</sup> The individual country summative reports for this thematic evaluation have a detailed breakdown of the portfolios.<sup>5</sup>

All these commitments have since been extended. In three of the four countries, DFID committed contingency funds, which were either held in reserve or by partners.

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4 In addition, DFID Pakistan funded two resilience-building initiatives for its resilience business case, one implemented by a UN consortium and one by a consortium led by an INGO.

5 See the summative reports for Ethiopia, Sudan, DRC and Pakistan as part of this study series, published separately as Sida et al. (2019); Sida and Gray (2019); Levine and Sida (2019); and Sida et al. (2019). These also provide greater detail on research methodologies, sampling and on the constraints faced during the research.

## 1.3 Methodology

The inception report for this evaluation explains the difficulties in studying the potential contribution of MYHF to resilience-building (Gray et al., 2015). These centred on *understanding* what resilience is, its *measurement* and *attribution*. The evaluation used a mixed methods approach, combining qualitative and quantitative primary data-gathering with extensive key informant interviews and literature review. This allowed Valid Evaluations to understand the factors that shaped resilience and vulnerability in the study areas through three routes.

1. *Qualitative panel interviews* visited the same households roughly every six months. The approach was exploratory, asking respondents about:
  - the problems they faced in their lives, and their impacts;
  - the measures that they deploy to solve or mitigate those problems;
  - the assistance they receive in addressing their difficulties, and any expectations that assistance raises (e.g. a dependency relationship); and
  - what kind of recovery trajectory they have experienced.

Households were chosen to maximise diversity. In Pakistan, panel households included people at risk of flooding in Sindh Province and those affected by conflict and displacement in Khyber Pakhtunkhwa (KP) Province. In Ethiopia, the study areas covered highland, middle-highland and lowland agro-ecological zones in Oromia and Somali regions, and refugee populations in two camps in Dolo Ado. In eastern DRC, in North and South Kivu, the study *territoires* ranged from the remote to the peri-urban. And in Sudan, research was conducted in conflict-affected West Darfur and flood- and drought-prone Kassala. Further details on sampling are included in the respective country summative reports.

1. *Discrete, in-depth research studies complemented the qualitative panel interviews*, and investigated critical themes in the four countries. These themes were investigated using *detailed quantitative work*, where enough had been understood about these topics to know what to measure, and how; and *purely qualitative work*, where the research remained exploratory. Studies produced were:
  - *The cost of ill-health*. Two quantitative studies (Levine and Kusnierek, 2019a, 2019b) calculated the total household economic

burden of ill-health in North Kivu, DRC and in West Darfur, Sudan. They explored the extent to which insurance or community support can mitigate this burden.

- *Gender*. Qualitative research was carried out (Levine et al., 2019) in the agro-pastoralist Hadandawa population of Kassala, Sudan and among IDPs in Peshawar district in Pakistan on the changes in women's roles and gender relations as a consequence of conflict and displacement.
  - *Coping in drought*. DFID and USAID requested VE to conduct a major additional study (Levine, Kusnierek and Sida, 2019) on the role of MYHF and resilience investments in reducing loss of lives and assets during the droughts of 2014–2016 in Ethiopia. The research used a mixed methods approach, including qualitative research and a survey of 960 households in Sitti Zone, Somali Region, and in West Hararghe Zone, Oromia Region.
2. *Value for Money*. A third research strand investigated the potential contribution of MYHF to improving the VFM of humanitarian action, and on the role of contingency funds in improving the timeliness and cost-effectiveness of emergency response.
    - *The economic case for early response* used the El Niño 2015–2016 drought in Ethiopia as a case study (Cabot Venton, 2016), looking at various cost scenarios for early response, late response and no response, using data gathered during the peak of the crisis
    - Cabot Venton and Sida (2017) looked at the evidence for VFM gains and the measures that might be needed to consolidate these.

This synthesis report presents an overview of the analysis from all the country studies and from each of these three research strands. Findings were combined analytically to discern the most important determinants of people's life-outcomes in the face of the various hardships they had endured and the factors which shaped their degree of agency – i.e. their resilience. Projects supported through MYHF were then analysed to see how far they addressed these key shapers of resilience in principle (i.e. without investigating the impacts of projects as implemented). Analysis then explored whether there were reasons to believe that MYHF would make humanitarian action more likely to address the factors shaping vulnerability and resilience.

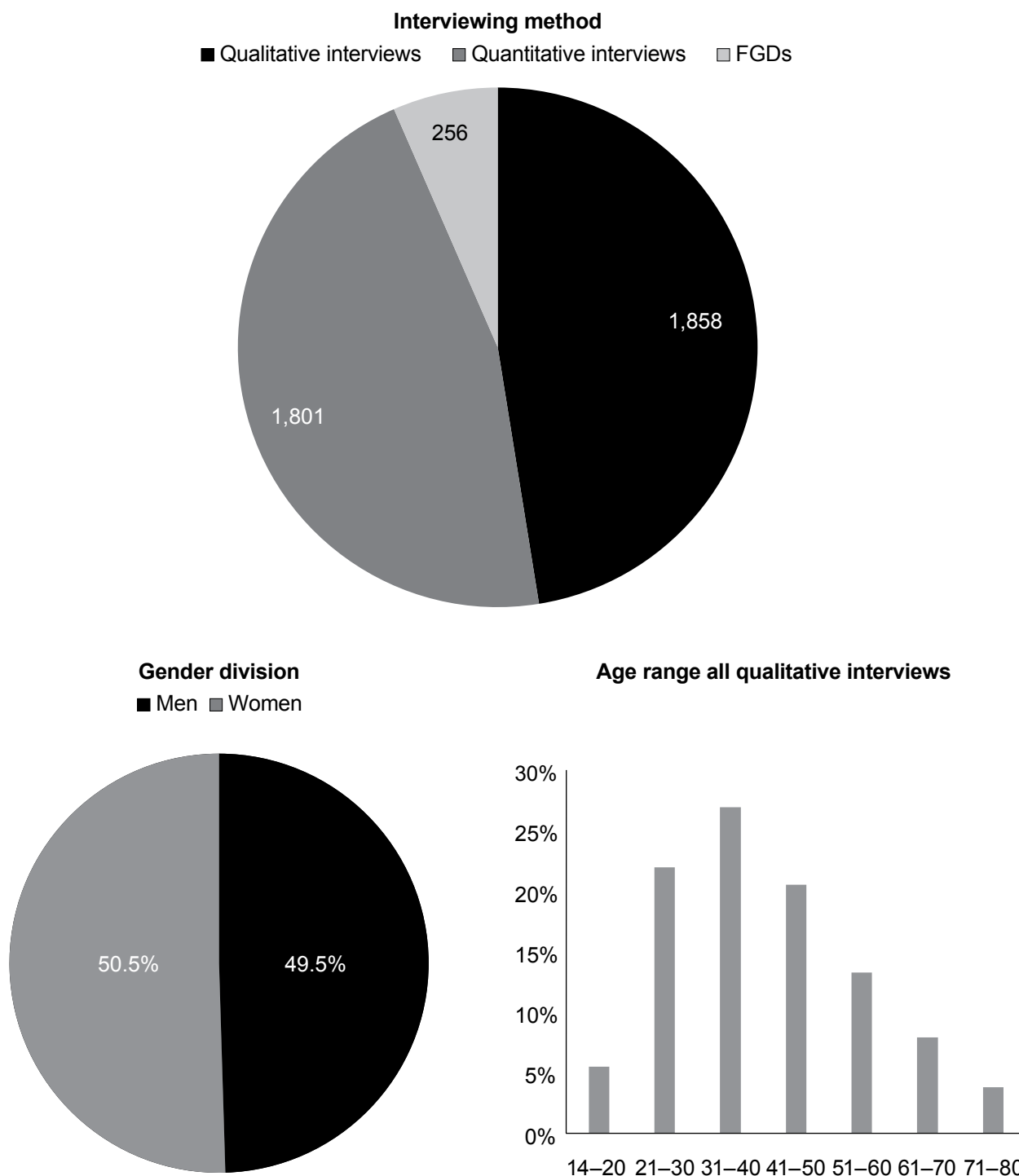
### 1.3.1 Data collection

928 households were included in the initial panel survey and some 1,858 qualitative interviews conducted. The number of return visits varied: Dolo Ado was visited twice, as were the communities in Sindh and KP Province in Pakistan, and West Darfur in Sudan. Communities in Somali region of Ethiopia were visited up to four times, depending on access, and those in West Hararghe and Kassala three times.

Figure 1 shows the breakdown of interviews by interview method, gender and age.

The findings of this report are first set out in relation to MYHF and contingency funds (Section 2), and then on the resilience of the people living in the study areas (Sections 3 and 4). Section 5 examines how far MYHF enabled humanitarian action to better support the resilience of crisis-affected people.

**Figure 1: Breakdown of interviews by method, gender and age**



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# 2 Multi-year humanitarian funding

When this evaluation was commissioned, MYHF was new for DFID and experimental in the wider humanitarian world. The rationale was an emerging consensus that protracted crises constituted a large part of the humanitarian caseload but humanitarian financing for them was almost exclusively short-term (6–12 months) in nature. Various studies had identified benefits to longer-term humanitarian financing, especially if coupled with contingency funds.<sup>6</sup> These were:

1. Better-quality programming through better design, consultation and (more) research. Programming should be better informed by greater awareness and analysis of the context if agencies had a guaranteed longer-term presence.
2. Predictable and flexible funding allows for faster and more effective response.
3. Earlier response through better preparedness, presence and flexible financing (leading to reduced asset loss and faster recovery).
4. Agencies can work better and in a more cost-effective way if they can plan everything from staffing to spending plans over a multi-year timeframe.
5. Transformative programming through enhancing community resilience (also leading to longer-term cost savings and reduced humanitarian needs).

This section examines the first four of these points: how MY financing and contingency have helped with quality programming, earlier response and cost-effectiveness. The last point is addressed from Section 3 onwards, asking what constitutes resilience and how humanitarian aid can and cannot support it.

## 2.1 How MYHF has been used by partners: has it changed the quality of programming?

There were three potential benefits from MYHF, related to planning and quality:

- **Better design and consultation with affected communities.** With a longer timeframe agencies were able to spend longer designing programmes and consulting communities about the design. For example, in Sudan the UN resilience consortium found that some of their initial planning assumptions were wrong; the extended timeframe offered by MYHF allowed them to make the most of the adjustments that the community wanted before commencing work.<sup>7</sup>
- **Greater potential for learning and programme improvements over time.** Where operational learning and research was incentivised in programme design, MYHF allowed learning to be incorporated into the next phase of a project or programme. For example, in DRC, UNICEF ran surveys alongside cash distributions with the aim of working out the optimal delivery mechanism. In the second year, they gave people larger, one off payments that people preferred as it gave them more investment possibilities.
- **Multi-year business is more efficient for DFID.** Where it is clear that DFID will remain engaged for a number of years, longer funding agreements eased the workload of several key departments and posts and allowed for more thoughtful planning. It also enabled faster internal mobilisation of funds in a crisis.

However, none of these benefits was seen systematically, because they did not automatically follow from MYHF. Consultation and learning had to

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<sup>6</sup> See for example Cabot Venton, 2013; FAO, 2017; OECD, 2017b; World Vision International, 2016.

<sup>7</sup> With one notable exception. When communities identified water as their greatest need, the UN consortium was unable to make the change, as water provision was theoretically funded through a different DFID partner.



be built into programmes from the outset, for example in an inception phase (unusual for humanitarian interventions). Operational research had to be agreed as part of the budget and be well-designed, with timing optimised to fit the programme cycle. There were several barriers to MYHF achieving its intended effect even in the simplest form.

- **MYHF was not usually passed on to downstream partners.** In Ethiopia, none of the three UN agencies in receipt of MYHF passed this on to their implementing non-governmental organisation (NGO) partners, who were still operating on six-month or one-year timeframes.
- **Payment schedules could undermine potential MYHF benefits.** Even when funding was MY, demanding six-month reporting and payment schedules forced agencies to work on short-term timeframes. This was particularly challenging for the NGO consortium in Sudan.
- **The timeframes for achieving the objectives set could be unrealistic.** For example, the principal indicator of success of the UN Joint Resilience Programme consortium in Sudan was a reduction in stunting, unachievable in three years.

Once identified, it should be possible to overcome such technical and administrative challenges in future MYHF programmes.

## 2.2 Predictable funding: the importance of presence

The main crises to strike in the course of the evaluation were consecutive droughts in Ethiopia between 2014 and 2017.<sup>8</sup> During these droughts, aid clearly saved lives. Although there are serious concerns that aid was not timely enough, the long-term presence of agencies and programmes in areas hit by the drought ensured that it was not too late to save lives.

*A de facto* MY system has operated in Ethiopia for some years, with international organisations running near-continuous programmes in many parts of the country. This presence means that humanitarian organisations see first-hand what is happening and could provide quicker and more reliable information than the formal early warning system (see also Léon et al., 2019). For example, Save the Children in Sitti in

2014, and MSF in Gode in 2016, were both warning about developing crises months earlier than the official systems.

Agencies with established operations could also respond faster. When a new agency was financed to work in Gode as part of the drought response, it was not operational until May 2017, nine months after an already-present NGO had raised the alarm. When drought hit Sitti Zone of the Somali Regional State in Ethiopia in 2014, much of the meaningful help that people received early on in the slow-onset crisis was attributable to the established Productive Safety Net Programme (PSNP) and the long-term presence of implementing agencies.

In DRC, the response of aid agencies to emergencies was less predictable. Stop-start funding meant that services were sometimes available and sometimes not. The presence of an operating INGO meant a response was more likely. If not, spikes in urgent needs might pass unnoticed because of poor communication, restricted movement, insecurity, eroded trust, and because chronic needs already took up so much attention. In Masisi, one medium-sized conflict with significant displacement attracted no international action, whilst a later cholera outbreak in one of the same villages did prompt an NGO response.

In protracted crises, there were constant minor as well as major shocks, and people's ability to cope was minimal. Predictable funding allowed some, albeit patchy, support to be maintained. Current capacity is maintained as much by accident as by design. In Ethiopia one of the NGOs reported operating on back-to-back six-monthly grants for 12 years to respond to structural under-nutrition in West Hararghe. Many of the humanitarian agencies in Ethiopia have operated there for several decades, but this has required creativity on their part to maintain capacity.

## 2.3 Contingency funding

Contingency funding was a key component in three of the four business cases, partly designed to maintain flexibility where significant funds were already allocated over a number of years, and to allow partners to respond more quickly, bypassing bureaucracy or political decision-making.

8 Parts of northern Somali region and eastern Oromia suffered drought from 2014. In 2015, an El Niño-type drought affected much of the Ethiopian highlands including the Eastern Escarpment and the northern parts of the south eastern lowlands. In 2016, a La Niña-type drought (possibly associated with an Indian Ocean Dipole event) hit the southern parts of the south eastern lowlands.

Contingency funding enabled timely response, which in turn potentially led to efficiency gains. Study of food price movements during the drought in Ethiopia showed that late local purchase of in-kind food aid could have been 18% more expensive than purchasing earlier in the drought.<sup>9</sup> Ambroso et al. (2016) found that regional response to the 2014 refugee crisis was timely and effective, and that the work of other partners, some funded with DFID contingency funds, had been critical in this regard.

*In spite of the limited usefulness of the contingency plans and the limited preparedness, the UNHCR-coordinated response on a whole was timely and effective in saving lives and met the RRP's broad objectives. This was partly thanks to support received through the crucial UNICEF partnership and from other partners who intervened with their own funds, in addition to ARRA's openness to early international interventions (Ambroso et al., 2016, p 110).*

While the headline conclusions are encouraging, nuance is needed from a closer consideration of both technical and broader conceptual issues.

Each of the countries that had contingency funds built into their business case configured them differently, allowing for interesting comparisons. Table 1 shows, in brief, the different types, amounts, and how they were used.

In all three countries there were emergencies that merited contingency fund use within the timeframe of the business case.

In Ethiopia, funds were placed with the agencies who then requested approval for their use from DFID. In Sudan, funds were held by DFID on an annual basis and allocated as they saw fit. The Pakistan model was similar to Ethiopia's, but there was also a consortium convened for rapid response. Lessons are hard to generalise but, on the evidence of this evaluation, the way in which contingency is structured created different incentives:

- Agencies tended to spend early because they knew that a big emergency would attract additional funds.
- DFID tended to conserve funds in case of a larger emergency, but also ensured that there was no underspend at the end of the financial year.

Several other lessons emerge:

- **Contingency funding did not lead to better contingency or emergency planning.** This was clear in Ethiopia and Sudan and less so in Pakistan, where the business case is less advanced. In Ethiopia an evaluation of UNHCR (one of the three main grantees) found inadequate emergency planning for the South Sudan refugee influx. In Sudan, evaluation of the JRP consortium found they had not planned for flooding, despite this being the focus of the programme.
- **Contingency funding allows for response to small- and medium-sized emergencies that might not otherwise be funded.** In both Ethiopia (South Sudan refugees) and Sudan (flooding in Kassala and drought in Darfur), contingency was used for emergencies that DFID might not have funded.

**Table 1: Contingency funds by country and their usage**

	Allocation	Modality	Usage
<b>Ethiopia</b>	£15 million for WFP £6 million for OCHA EHF £1 million for UNHCR	Held by the partners and released after consultation with DFID.	For the South Sudanese refugee influx in 2014. The El Niño emergency required additional funds from the centre (see below).
<b>Sudan</b>	£7 million per year for three years in SHARP business case. SHIP was initially £2 million per year for two years.	Held by DFID. Roughly earmarked annually.	Allocated annually. Initially this topped up the UN Pooled Fund but was later used in response to the South Sudanese refugee crisis and the El Niño drought and floods.
<b>Pakistan</b>	£20 million for WFP	Allocated to WFP in principle, but held by DFID.	Used by WFP in Chitral earthquake.

<sup>9</sup> This is the cost to the donor. The long-term cost to individuals and to the country from lost economic activity and lost human potential are not included in this figure.

- **Contingency can help mobilise a response while waiting for larger funds to come on stream.** In Ethiopia in 2015, DFID contingency funding was ahead of some other big donors and helped agencies change gear (funds were also reassigned from development to humanitarian use<sup>10</sup>).<sup>11</sup>

### 2.3.1 Early and timely response

In the course of this thematic evaluation, the largest emergency in any of the four countries studied was in Ethiopia, providing perhaps the best opportunity to understand whether new funding instruments could facilitate early or timely response.

During the El Niño emergency of 2015–2016, DFID was one of the first donors to release additional funds to their partners, WFP and OCHA (although this was technically from the central reserve and not from contingency funds). These funds were released soon after the government declared an emergency in June 2015. Although contingency funding can, in principle, enable faster response, the experience of the successive droughts in Ethiopia from 2014–2017 showed that funding arrangements and administrative procedures related to approval processes are not the main factors in delaying response. Problems for early and timely response were:

- **Politicisation of decision-making.** The government was concerned about tarnishing the positive image of the country with talk of crises. Some international actors were also involved in politicisation, e.g. countering the evidence of looming crisis, because they felt that the government and/or the social protection system were being underestimated by the humanitarian sector. Mixed messages emanating from the UN-led system caused serious delays in donor decision-making.
- **An unwillingness to respond to meteorological forecasts,** even to the extent of taking preparedness measures based on forecast. Knowledge of a probable drought was widely available from El Niño forecasts in April 2015. It was several months before preparedness was increased and a response began to be scaled up.
- **An insistence on waiting for ‘official’ early warning,** despite the well-known inability of these systems to be timely. Officially, nothing was known until the report of the failed 2015 *meher* harvest was released in October–November, despite it being clear in July that farmers had not been able to plant.
- **An unwillingness to respond based on an analysis of the inevitable trajectory of livelihoods and humanitarian indicators,** but an insistence instead on waiting until such indicators, especially child malnutrition, are already critical. The humanitarian caseload jumped from 4.5 million in August 2015 to 10.3 million in December 2015, although no new drought event or failed rain had occurred – in other words, the trajectory to 10.3 million was already set by August.
- **An unwillingness to divert development resources** to scale up support where critically needed (for livelihoods, water, etc.) in the absence of a government-recognised emergency. Resources for investment in water continued to be invested as planned, rather than ensuring that all available resources were used to repair water points in the run-up to the different droughts. There was no guiding plan based on ensuring minimum access to water across affected regions.
- **Slow bureaucratic processes, exacerbated by centralised decision-making.** For example, as discussed below, crisis modifiers intended for rapid response still took several months to organise.
- **Lack of preparedness by operational agencies,** leading to long delays between deciding to act and those actions reaching people in need. It typically took upwards of four months between receiving funds and delivering assistance.

Because of the efforts of a few individuals and organisations, a major response was launched just in time to prevent major loss of life. However, this was achieved despite the system and not because of it.

The situation was even worse in those areas already hit by severe drought in 2014, notably around the border of northern Somali region and eastern Oromia. Despite agencies on the ground sounding the alarm, response was not forthcoming. The local business community organised food aid months before an emergency response was scaled up.

A distinction can be made between *timely* response (aid that arrives when the first impacts of a crisis are being felt and prevents them from developing too seriously) and *early* response (aid given before a crisis that prevents or mitigates it, e.g. livelihood protection responses or repairing water points before a drought). Early response was largely absent from the humanitarian efforts in 2015–2016 and 2016–2017.

10 As was the case for UNICEF’s WASH programme.

11 By contrast, the crisis modifier embedded in many European Union and USAID grants, designed for use in the same manner, was often slow and bureaucratic and thus had less immediate impact.

In addition to the hindrances to timely response listed above, early response faces an additional difficulty: what can be done, even if resources are available? This proved difficult in a very serious drought, where even measures to support livestock were largely ineffective.

What does this tell us about early aid and the effectiveness of contingency?

- Timely aid was important to stop children dying of malnutrition. Contingency funds can and did facilitate this.
- Contingency and rapid emergency funds did not come *early* in the trajectory of the crisis as felt by the people affected.
- Early aid was important (because people were suffering early), *but would not have prevented suffering or loss unless maintained throughout the crisis.*<sup>12</sup>

## 2.4 Cost-effectiveness

The evaluation found that MYHF proved to be better VFM than annual humanitarian funding in some areas. This was particularly true for procurement of in-kind aid. Value for money gains of MYHF included those associated with the purchasing and logistics of aid. Because food prices vary seasonally even in the absence of drought, predictable funding is important for in-kind food aid, to allow an annual purchasing plan. Droughts can make these fluctuations more severe and, in Ethiopia, it was calculated that buying food at the most efficient time (i.e. minimising combined purchasing and warehousing costs) would have been 20–30% cheaper than buying it at the height of the El Niño emergency (Cabot Venton, 2016). UNHCR in Ethiopia

also calculated that predictable MYHF allowed them to front-load investment costs in shelter and water, producing savings over the medium term.

Large UN agencies like WFP can achieve such efficiencies by other means, for example combining annual funding with internal smoothing measures. However, MYHF was appreciated for making it easier to develop longer-term spending plans. How far such savings will accrue will depend largely on whether in-kind delivery continues to be used as a major aid modality. Cash programming does not offer the same opportunities for efficiencies.

Value for money gains were less than anticipated for administrative savings. WFP in Ethiopia reported some small gains associated with less proposal writing, but the evaluation did not observe major savings from, for instance, reduced recruitment. One difficulty in monitoring VFM is that agency systems are not configured for costs to be disaggregated in this way, particularly where MYHF only constituted a small percentage of their overall budgets (MYHF funds were less than 2% for the biggest MYHF country budget studied).<sup>13</sup> There were hopes for intangible cost benefits, such as longer staff retention, but frustratingly these could not be measured for this evaluation.

In overall terms the evaluation concluded that the greatest cost-effectiveness associated with MYHF was likely to come from programme quality, relevance and appropriateness. Value is far greater when people receive what they need. Fast response through predictable presence is another clear example of cost-effectiveness; reaching those in need of humanitarian assistance before they are in distress or worse is of much greater value than a late or ineffective response.

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12 For a fuller explanation of why this was the case see: Levine, Kusnierek and Sida, 2019.

13 In Ethiopia the humanitarian requirements for 2015, 2016 and 2017 (the lifetime of the MYHF business case) combined were roughly \$3 billion. The DFID MYH funding was roughly \$100 million, which was the largest MYHF commitment in the four countries studied. This constitutes roughly 3.5% of the total; in Sudan and DRC the figures were less than 1%.

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# 3 The scale of the resilience challenge

The scale of the resilience challenge was found to be much larger than was recognised by proposals and strategies for building resilience. There are two main reasons for this: the *depth of poverty* and the *diversity, frequency and intensity of shocks* that people experienced.

The research covered four examples of countries where humanitarian aid is used:

- Pakistan, a lower-middle-income country with a GDP per capita of more than \$5,000;
- DRC, the country with the lowest GDP per capita of \$468;
- Ethiopia, the country with the sixth lowest GDP at \$938 per capita; and
- Sudan, with GDP at approximately \$2,100 per capita.

All countries have been regular recipients of humanitarian relief this century, but for various reasons:

- protracted conflict (Eastern DRC, W Darfur);
- recurrent drought-induced spikes in acute needs (large parts of Ethiopia, Sudan);
- sudden-onset crises caused by floods, earthquakes and conflict-related displacement (Pakistan, Sudan, DRC, Ethiopia).

Livelihoods in the study areas ranged across daily labour, smallholder farming, tenant farming, agro-pastoralism and pastoralism, fishing, craft production or trading and business of different scales.

Despite the differences between the countries, the lives of those affected by shocks had many commonalities.

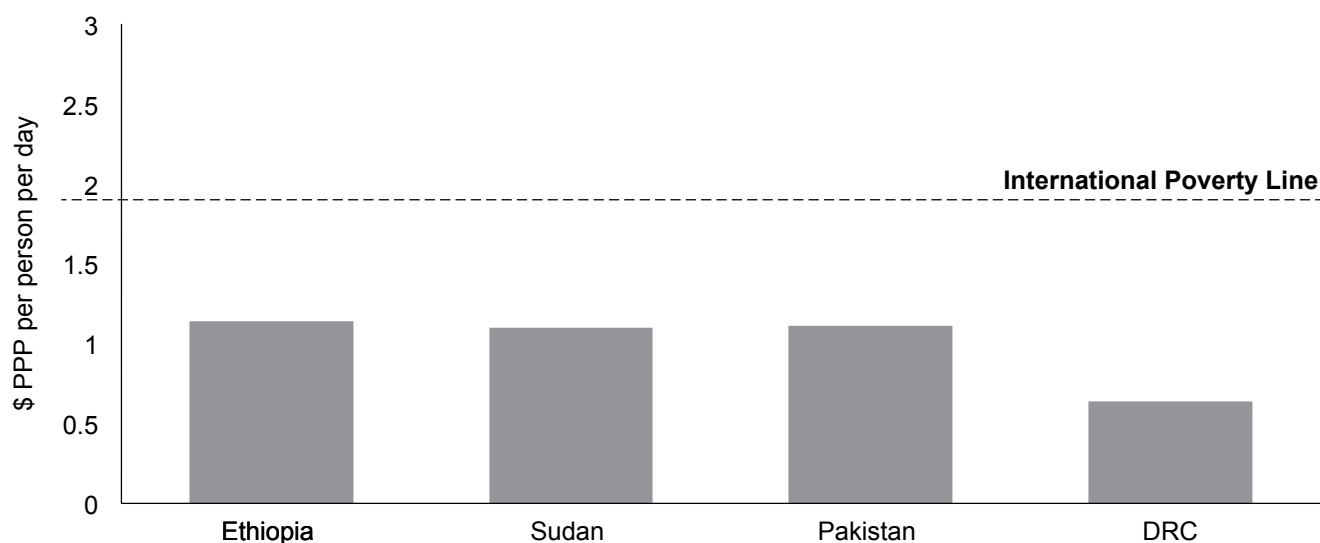
First, in all study areas poverty was widespread, chronic and very deep. Second, although humanitarian assistance was triggered as a response to large covariate shocks (including drought, earthquakes, flooding, displacement and conflict), households suffered from a wider range of frequent shocks, which often constituted bigger problems for them. Third, there were common underlying causes of vulnerability, such as structural underdevelopment in marginalised areas and elite capture of resources.

## 3.1 The scale of the poverty challenge

Poverty was profound in the research areas studied, with most families existing on incomes well below the IPL. The livelihood stories from the diverse household panel gave a reasonably consistent picture of the levels of household income needed to reach a point where families could get by.

In Ethiopia, households in rural West Hararghe considered themselves just managing if they earned around 1,750–2,000 Ethiopian Birr (ETB) (c. US\$70–80) per month, and in peri-urban Somali region ETB 3,000 (\$120) per month. In DRC, a household of six needs to earn around \$50 per month in more remote areas and around \$60 in areas closer to an urban centre, while in West Darfur, \$125 per month sufficed; and in Pakistan, around \$60 would be considered a reasonable monthly income. Purchasing power parity (PPP) allows us to compare these figures with the IPL of US\$1.90 per person per day (see Figure 2).

**Figure 2: Typical income of the non-poor, or ‘just managing’, in \$ PPP per person per day**



The similarity of these income levels in Ethiopia, Sudan and Pakistan is striking.<sup>14</sup> These figures tell two stories, which remain valid even though the figures are imprecise:

- First, they show the prevalence and depth of poverty. These estimates come from households that would not be considered ‘very poor’, and they do not represent income in very difficult years.
- Second, if *typical* families live well *below* the poverty line, this suggests that in the areas of most concern to international aid actors only a very small minority of people live *above* the poverty line.

From our figures, and even with an average economic growth rate of 5% p.a. and current population growth,<sup>15</sup> it would take around 20 years for these *average*-poor to reach the IPL (assuming that no further shocks disturbed them). These findings appear at odds with official poverty rates.<sup>16</sup> The figures in this paper do not come from survey data, but they do pass a reality check – i.e. there has to be an explanation of where reported levels of income come from.

Using a resilience standard increases this poverty challenge considerably. Many people who escape poverty quickly fall back into it – often because they are hit by any one of the long list of regular shocks (most often, ill-health). Research has shown that to be fairly confident that an escape from poverty will be sustainable, people need an income several times greater than the poverty line. ‘A sustainable exit from poverty’ is a good way of thinking about resilience, at least in its economic sense. Shepherd et al. (2014) looked at evidence from household data sets on where this threshold might lie. Although they did not conclude that there was such a thing as a clear threshold, in rural Uganda they estimated that at about five times the poverty line there would be a 90% chance of remaining out of poverty in the coming five years. However, the data for Ethiopia did not reveal any clear threshold, probably because none of the populations sampled were living at a level where the curve would start to flatten. The illustrative estimates in Box 1 show that Ethiopia would need to invest almost half of its entire government spending in one Zone alone to help the population reach a sustainable exit from poverty.

14 The levels (prevalence and depth) of poverty suggested by our figures from DRC are especially worrying, because they are drawn from North Kivu, a province that UNDP in 2012 estimated was ‘close to achieving the [MDG] target of 40% [by 2015]’. Our figures suggest that the rate of 73% reported by UNDP in 2009 remains largely unchanged, at least in rural areas.

15 Averaged conservatively at 2.2% p.a. across the three countries.

16 These can vary enormously depending on how they are calculated – for example in Pakistan, the official national poverty figure in 2015 was 24% while the World Bank estimated that just 4% lived below the IPL (source: <http://povertydata.worldbank.org/poverty/country/PAK>). In Ethiopia, the poverty rate in 2015 was given at 23.5% (source: World Development Indicators) with an IPL rate of 26.7% (source: <http://povertydata.worldbank.org/poverty/country/ETH>). While it could be that geographic variations account for part of this discrepancy, this still suggests that national-level statistics are of little relevance for guiding development policy or investment.



## Box 1: How big is the resilience challenge?

Reliable income data are hard to find, but it is sometimes helpful make some broad calculations to get a sense of the scale of a problem, and to set out the explicit assumptions behind them. Here, we make implausibly conservative assumptions about the scale of poverty to ensure that the problem is not overestimated.

We assume that only half the population live at the 'just about managing' level, that no one lives below this level and that everyone else lives above the IPL – and even above the notional resilience line (five times the IPL). We further assume that all economic investments in the local economy will be successful and bring about a 15% rate of return in real terms. Table 2 illustrates the size of investment needed to bring the populations of the study areas out of poverty, and further, to ensure this escape from poverty was likely to be sustainable.

**Table 2: An order of magnitude assessment of the resilience investment challenge**

	pop. (m)	annual poverty deficit (per person), \$ PPP	investment to reach IPL @15%	investment to IPL x 5 ("resilience") @ 15%
West Hararghe, Ethiopia	2	277	\$638m	\$ 7.4bn
Darfur, Sudan	9.2	292	\$5,597m	\$ 62.3bn
Sindh, Pakistan	48	288	\$13,981m	\$157.3bn
N and S Kivu, DRC	12	460	\$9,198m	\$ 68.3 bn

Even with these optimistic assumptions, West Hararghe Zone alone (population around two million) would need investment of over \$600 million to help everyone reach the poverty line, and over \$7 billion of highly profitable investment to reach some form of economic resilience. This latter figure is over 20 times DFID's annual spending in Ethiopia, and greater than its annual global programme spending.<sup>18</sup>

These estimates go some way to explaining findings that donor investments in resilience had not yet made a visible impact on the population's resilience to the recent drought.<sup>17</sup>

## 3.2 The scale of the vulnerability challenge

Most households studied in this evaluation experienced frequent shocks, both individual (idiosyncratic) and at a wider scale (covariate). Table 3 lists the most common shocks faced in each of the study areas. Their exposure to these is closely related to their inability to escape chronic and deep

poverty, and it therefore made little sense to think about resilience only in terms of the ability to cope with the major crises to which humanitarian action is geared. While these major covariate shocks affected most people, interviews show that other problems or shocks affected them more frequently and, often, just as deeply. The range and number of shocks faced by individual households is striking<sup>19</sup> and these are likely to increase with climate change and further population growth.

The evaluation measured the impacts of both idiosyncratic and covariate shocks in some detail. Two examples illustrate the impact – the cost of ill-health, and the cost of the 2014–2016 drought for pastoralists in northern Somali region, Ethiopia.

<sup>17</sup> See Levine, Kusnierek and Sida (2019).

<sup>18</sup> Source: DFID Annual Report and Accounts, 2017–18 (web accessible version).

<sup>19</sup> Many of these problems would perhaps not normally be thought of as shocks (e.g. forced early marriage) and not all would always be considered in an analysis of resilience. However, It is difficult to make a distinction between problems such as FGM, divorce or drug addiction on the one hand, and ill-health, earthquakes or drought on the other.

**Table 3: Shocks encountered by individuals and/or households in the recent past in the study areas**

Ethiopia	DRC
<ul style="list-style-type: none"> <li>• Drought</li> <li>• Local economic recession (often drought related)</li> <li>• Political unrest/ conflict and mass internal displacement</li> <li>• Flooding</li> <li>• Invasive species (prosopis)</li> <li>• Land grabbing, alienation of former rangeland property</li> <li>• Army worm</li> <li>• Health shocks – various, acute and chronic</li> <li>• Disability from accident, disease</li> <li>• Mortality from cholera and measles outbreaks</li> <li>• Family member with severe acute malnutrition</li> <li>• Divorce, separation, widowhood, exacerbated by lack of rights</li> </ul>	<ul style="list-style-type: none"> <li>• Armed conflict and displacement</li> <li>• Cholera</li> <li>• Disease of main staple crop, cassava (CMV)</li> <li>• Disease of main cash crop, bananas (Xanthomonas wilt)</li> <li>• Army worm, locusts</li> <li>• Flooding</li> <li>• Landslides</li> <li>• Health shocks (acute and chronic)</li> <li>• Disability from accident, disease</li> <li>• Land grabbing</li> <li>• Theft/burglary</li> <li>• Inter-ethnic conflict</li> </ul>
Sudan	Pakistan
<ul style="list-style-type: none"> <li>• Conflict</li> <li>• Forced displacement</li> <li>• Drought</li> <li>• Flooding</li> <li>• Parasitic plants (striga) destroying yields of staple crop</li> <li>• Health shocks.</li> <li>• Female genital mutilation (FGM)</li> <li>• Forced early marriage</li> </ul>	<ul style="list-style-type: none"> <li>• Armed conflict (ANSAs)</li> <li>• Conflict-related displacement</li> <li>• Communal or family feuds/caste violence</li> <li>• Floods</li> <li>• Earthquake</li> <li>• Drug addiction</li> <li>• Health shocks</li> <li>• Forced early marriage</li> <li>• Domestic violence</li> <li>• ‘Honour killings’</li> <li>• Land grabbing</li> <li>• Enclosure of fishing grounds in river</li> </ul>

### 3.2.1 Cost of ill-health

Although ill-health is a commonly recognised problem for the poor, especially the rural poor, its seriousness has probably been underestimated, due to lack of evidence of its full cost. This question was examined in detail in North Kivu (DRC) and West Darfur (Sudan) (Levine and Kusnierek, 2019a, 2019b), quantifying the full economic burden of ill-health, including the costs of medical treatment, of accessing medical care (including transport and subsistence costs) and the cost of labour lost when sick or caring for a patient. After excluding households who had particularly expensive treatment or high costs of accessing treatment, a typical

household was losing \$200–\$300 a year, or between a quarter and a third of its total potential annual income in DRC. In West Darfur, households were losing up to \$600 in villages where malaria was most prevalent; this is 40% of a household’s potential annual income.<sup>20</sup>

### 3.2.2 Cost of drought in Sitti Zone, Ethiopia

The drought in parts of Ethiopia from 2014–2016 affected pastoralists in the north of Somali region particularly harshly. A sister study for this evaluation showed livestock herders lost most of their animals, and thus their productive assets and wealth. Table 4, below, shows the extent of these losses.

20 Potential annual income was defined as the income which a household would have earned if all things remained the same, but there were no cases of sickness. The reduction in household income is defined as the total annual economic burden of ill-health (all cost and lost income) divided by the annual potential income.

## Box 2: The cost of ill-health

Quantitative research to assess the full cost of ill-health to a household was conducted in eight villages of two *territoires* in North Kivu, DRC, and in five villages in West Darfur. Household interviews investigated all the economic costs, formal and informal, of a single episode of ill-health for adults and for children, and the total prevalence of episodes of ill-health for men, women, boys and girls. Calculations of annual costs were based either on median figures or on excluding the highest 5% for any particular expenditure to give a typical picture of the cost a normal household would expect to bear if it was lucky enough to avoid serious or complicated ill-health.

The results were startling. In North Kivu, in the area closer to town and with better access to healthcare, households spent almost \$100 a year on healthcare, and an additional \$20–\$25 in accessing that care. In a more remote area, an NGO-supported local hospital provided subsidised or free care, and so households only spent less than \$20 on care – but another \$25 to access that care. These costs were outstripped by the value of the labour they lost – between \$100 and \$130. Including all other costs, households typically lost a total of \$170 a year in the remote *territoire* and \$300 in the *territoire* closer to town – representing 24% and 33% of their total potential income<sup>21</sup> respectively.

In Darfur there were spatial differences caused by different disease prevalence and the uneven distribution of health facilities. In the village facing the lowest cost, households spent almost \$50 p.a. on medical care, and \$100 p.a. to access care. The annual cost including lost labour was typically around \$225 per household. In villages with higher disease rates, healthcare cost over \$170; and the cost of accessing that care was over \$180. An additional \$70 was spent on non-Western healthcare (presumably because of the costs of accessing Western medicine). The highest cost, however, was lost labour (\$600), with almost a quarter of all working days taken up with ill-health or caring for a patient, at a total cost of over \$600. The total burden of ill-health was almost 40% of the potential annual income of a typical household.

**Table 4: Losses incurred in Sitti Zone during the 2014–2016 drought**

	% of sample	Pre-crisis value of herd	Percentage loss (reported)	Percentage losses (best case scenario)	Financial loss per household (assuming best case)
Very poor	18%	\$800	64%	40%	\$320
Poor	36%	\$2,500	74%	40%	\$1,000
Middle	23%	\$5,500	82%	60%	\$3,300
Better-off	23%	\$14,000	85%	60%	\$8,400

21 That is, theoretical annual household income in the absence of ill-health.

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# 4 What shapes people's resilience

The research programme deliberately began with no preconceptions about where resilience lay or any specific definition of it. The starting point was to look at three broad issues of concern: people's ability to cope with difficult times; sustainable movement out of economic poverty; and sustainable improvements in the non-economic aspects of well-being.

Most people somehow survived when faced with a crisis. The question is on what *terms* they survived. People often had to make difficult choices, to forego one need to meet another. Standard frameworks for assessing this did not prove useful, because they did not fit people's lives in two key respects. People made different choices in the face of difficulty (e.g. taking on debt, skipping meals, selling assets, migrating). However, there were no correlations in the choices they made: people who skipped meals were not necessarily those in most debt or those who sold assets (Levine, Kusnierek and Sida, 2019). It proved impossible to use any one parameter as an indicator that households would be suffering in any other way, and thus even to rank these choices in order of severity.

It is no surprise that people in crisis-prone areas are exposed to a wide range of shocks in addition to those that cause humanitarian crises. Most are a part of normal life: ill-health, lack of justice, price rises, etc. People's choices were permanently limited by structural factors such as poverty, lack of access to education or, if they were female, by their sex. They were further constrained by each shock they suffered. Resilience frameworks typically assess vulnerability and resilience in relation to shocks, taking the exposure to shocks and impact of shocks as their starting point. However, it quickly became apparent that it was unhelpful to separately examine how people's choices were constrained by large-scale (humanitarian) shocks; everyday idiosyncratic shocks; and permanent or structural features of their lives.

There was no clear reason, when analysing an individual's resilience, not to consider their lack of access to education. This directly affected a person's life, whatever its cause (e.g. due to displacement, because

their parents could not afford the fees or because a girl was not allowed to attend school because of her gender). A framework for analysing resilience was thus needed that could encompass both everyday life, idiosyncratic shocks and major humanitarian crises; and which could understand resilience by seeing how far people could make choices in the face of difficulty without having to forego other needs. Speaking of 'disaster resilience', narrowly related to vulnerability to a major shock, is useful when thinking about the lives of people living at an acceptable standard, but where this could be threatened by a disaster or crisis. It did not prove useful when considering those in protracted and recurrent crises who are essentially living in, or close to, permanent crisis.

The ways in which resilience was shaped for people in each study location is discussed in the respective country report. Despite all the differences between countries, there were several strong common themes that ran through most, if not all, situations. These are briefly described below.

## 4.1 Gender is the key determinant of people's lives

The single biggest determinant of an individual's life chances in all four countries was whether they were born male or female. Discussion of resilience at household or community level can mask the fact that what may be considered advantageous for a household or community is not necessarily in the interests of 50% of their members. It is impossible to detail every way that gender shapes someone's life, but several themes were striking across the study countries.

The most extreme situation was in FATA in Pakistan, where girls and women lived under the sufferance of men – their survival was permanently precarious because they lived under a code set by men. If they were accused of breaking this code, they could be murdered ('honour killing') with impunity. The state offered little or no protection, so they were forced

to give up agency for the sake of their personal security.<sup>22</sup> In DRC, boys and girls are vulnerable to forced recruitment into armed groups; girls could also be recruited as sex slaves and they were permanently vulnerable to rape and its associated stigma. These are rarely viewed as resilience issues, although they shape every life choice a person makes and may be the most significant constraint to an individual's agency.

Most girls in Sudan and Pakistan had little, if any, say in their marriage partner – for many, this would be the person who would control them. Girls in several of the study areas were commonly betrothed as babies and forced to marry when very young (as young as 12 or 13 in Kassala, Sudan or in FATA, Pakistan).

In general, neither the benefits of economic resources (assets and income) nor decision-making about their use were generally shared equally. Although there was a degree of joint enterprise between husbands and wives in many families, women could not depend on this, making the *possibility* of an independent economic life essential for them. Such a possibility was often denied them.

Women's access to assets was usually insecure. In most places they were vulnerable to separation or divorce on difficult terms – losing access to family assets (especially land) and with limited ability to claim support for children, whatever the formal legal situation. In other places,<sup>23</sup> they were highly vulnerable to losing property rights if their husband died.

Among the Muslim populations studied, women had considerable constraints on their freedom of movement. Often their only options were to work in the family fields (where they may have no ownership of the harvest) or to take home-based work such as sewing, where returns were so low that they could not support themselves, let alone a family. In non-Muslim populations, although there were fewer religious or cultural barriers to movement and taking on work, women's additional domestic responsibilities limited their ability to earn money out of the home, reducing a typical return on a day's labour by around 25–30%.<sup>24</sup> Women were less likely to be able to migrate to towns for work and, although there are populations where many women migrate to work in domestic service, no such cases were found among our study cohorts.

Across all the areas studied, girls were less likely to receive education. Although there is a growing appreciation of the value of educating girls, this remains limited in Sudan and Pakistan and, even elsewhere, boys were more likely to be in secondary education.

## 4.2 Asset accumulation played a surprisingly limited role in creating resilience

Most exercises at stratifying local population groups by economic or resilience status rely to a high degree on the ownership of productive assets (most typically land and livestock). Many interventions to support resilience or combat poverty have at their centre the provision of some productive assets to households, which will theoretically allow them to increase their income and enter a virtuous circle of asset accumulation and increased production. However, it was rare to find examples of this progression in our cohort. This may be for a number of reasons:

1. Returns are currently very low on rural production. This is either due to how production is currently organised or how markets distribute the value of what has been produced. The local economy does not currently enable asset ownership, for most people, at a level that would confer resilience or allow a sustainable exit from poverty. The total arable land area is limited and, where it is valuable, it is controlled by elites or population density is such that even marginal lands are cultivated; irrigation potential is limited; and livestock numbers cannot be increased indefinitely.
2. In times of crisis, coping is not necessarily enhanced by the possession of assets. Across all four countries, crisis usually involved either conflict and displacement, or drought. In both situations, assets were often vulnerable (e.g. property was lost or abandoned in displacement or conflict, and livestock either died or were sold for next to nothing in times of drought).
3. Productive assets are vulnerable: livestock are lost to disease and drought, while land is effectively lost in displacement (Pakistan, Sudan, Ethiopia and DRC) and from other threats.

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22 Wood's (2003) notion of well-being captures much of what we include in resilience. Wood and Copestake (2007), writing about Peru, show how poverty and powerlessness combine, especially in places where people have little formal protection from a state – and that the physical, economic and other aspects of protection have to be taken together.

23 Though notably not in Sindh Province in Pakistan.

24 See Levine and Kusnierek (2019a) for typical income figures for DRC.

4. Assets could make people targets in conflict. In West Darfur and Eastern Congo, assets were targeted by militias, leading to families purposely avoiding accumulation for security reasons.
5. Most people started from a very low base compared to needs, often at about 50% of the IPL (see Section 3.1). Any increased income was taken in meeting recurrent costs, making it impossible to gradually accumulate investment capital. Financial services to assist capital accumulation were often lacking, as were viable investment opportunities.
6. Finally, although markets continue to function during crises, and are often highly adaptable, this does not mean that the interests of primary producers in marginalised areas are resilient to market forces in crises. During droughts, livestock markets in pastoral areas were too remote for livestock owners to sell their stock at prices that reflected their real value. The poor and vulnerable were exploited in uncompetitive, thin markets.<sup>25</sup> Even in non-crisis times, small-holder and tenant farmers in Pakistan found that legal minimum prices for crops applied only to better-off farmers, and they had to sell at a significant discount.

### 4.3 Business investment also had a limited role in creating resilience

There was little evidence that investment in alternative business enterprises was an option for the majority of households interviewed. Income when people did invest was very small, either because of low levels of available capital or because market demand was too limited and margins too low. Petty trade was the default, with stocks often used to subsidise the running of the household, and profits consumed daily to supplement essential household expenditure.

Business diversification was no real protection from shocks. The El Niño drought in Ethiopia caused many small businesses to close because clients had no disposable income. Self-employment brought the same problems, and in one example new market entrants from vocational training programmes flooded the market, reducing income by 50%. Despite these downsides, micro-business and self-employment were often very helpful to women, although not in times of shock.

### 4.4 People need connections – outside their communities and especially in towns

Social capital is critical in a crisis, but it cannot be treated generically. Families in all four countries benefited enormously if they had strong social connections in the wider community. The importance of urban linkages (and of urban migration by friends and family) was evident, for example:

- providing opportunities to send children to the town for education or employment;
- as a source of remittances (most evident in Ethiopia and Pakistan);
- as a refuge for family members in times of extreme hardship (most evident amongst drought-affected clan members in Sitti Zone, Ethiopia); or
- If a rural area was suffering from a crisis (such as drought) that did not have such a serious impact on peri-urban dwellers.<sup>26</sup>

The importance of *bridging social capital* (Putnam, 2000) was clearest in its absence, and especially in times of ethnic, clan or caste tensions. This was not limited to the fall-out from conflict, but also included direct, targeted attacks on persons and property of those of minority populations. The problems of the Twa of Eastern DRC were the most extreme, but far from the only, examples.

Community cohesion is regarded as an important source of resilience (see, for example, Aldrich and Meyer, 2014). This study found that such *bonding social capital* played a limited role, possibly because the societies studied were poorer and more fragile than those in other studies.

When a community faced a specific threat, the degree of sharing and inter-community assistance usually rose and was an important factor in people's survival, but varied from place to place. It was notable in Kassala, Eastern Sudan, in the 2015 floods and in Peshawar following conflict in FATA.<sup>27</sup>

In times of trouble, most people received a degree of *non-material* help (e.g. support for burials or prayers when sick) from others in their community,. *Economic*

<sup>25</sup> The notion of a real value that is distinct from a market price is a difficult one, and is based here on the very high short-term profit that can be made by buying livestock in poor condition and feeding them for a month or two.

<sup>26</sup> It is hard to exaggerate the importance of these connections: Maxwell and Majid (2016) consider the lack of social capital to be a major reason why some populations in Somalia in 2011 suffered from famine and mass mortality whilst others did not.

<sup>27</sup> This demonstrates the importance of social capital within the immediate community and social capital outside the locality



assistance, however, was often limited to a level that helped keep people alive. Our analysis of the costs of ill-health in North Kivu, DRC and in West Darfur, Sudan showed that family and community assistance was insignificant when coping with the huge burden of shocks such as ill-health.<sup>28</sup> There were some examples of a community benefitting from the ability of particular individuals to champion their rights, either due to the individual's education and social standing or connections to more powerful people (e.g. local politicians).

## 4.5 The (meso-)economy

To significantly improve the resilience of the study populations, the opportunities offered by their economies must be transformed. People's opportunities are rarely determined by the very local economy (e.g. within their village) and only minimally by the national economy.<sup>29</sup> People in the evaluation cohort engaged economically at what can be described at the *meso-economy* level. The meso-economy has no neat borders, is shaped by national (and global) factors, and can transcend national boundaries.

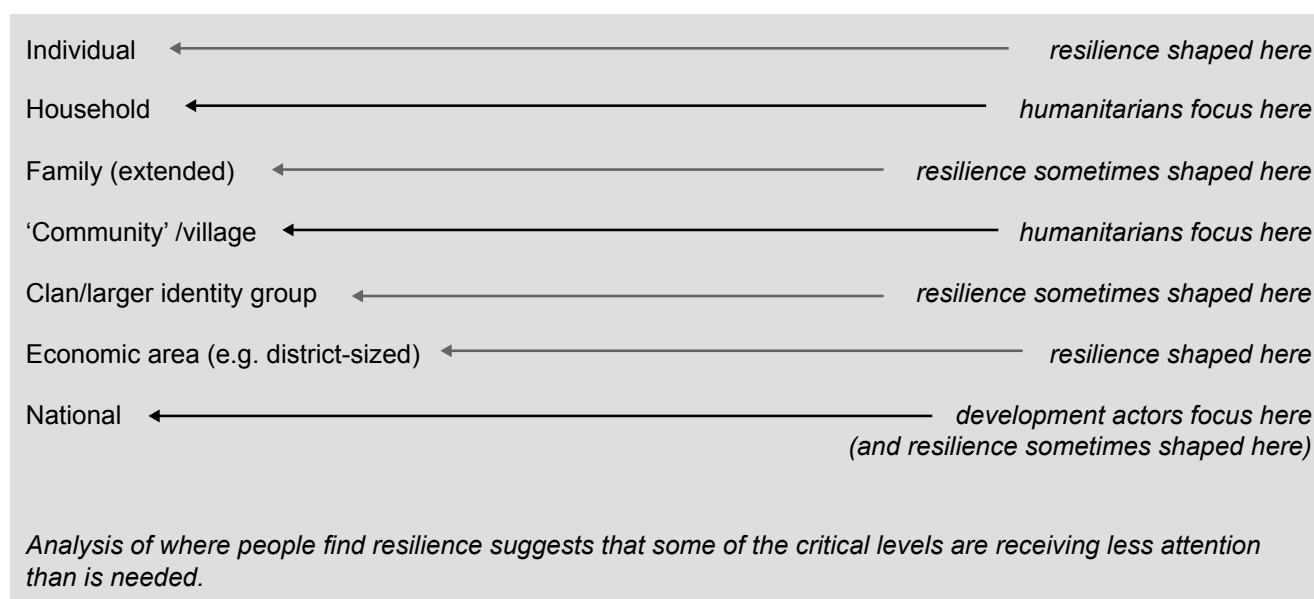
The importance of the meso-economy to resilience is clear: how well value chains distribute the value of production, particularly in times of crisis;

the availability and allocation of employment opportunities, for men and women and for different levels of skill and education; and the availability, and terms, of obtaining capital for investment or consumption smoothing.

Humanitarian response has tended to focus on households and on communities, while most large-scale development efforts focus on national-level economies or institutions. Although there is no doubt that these influence people's resilience and agency, research for this evaluation suggests that the critical levels are the individual and the meso-economy, and that insufficient attention has been paid to these.

The meso-perspective allows rural and urban areas to be seen as parts of the same economy. Urban economies offer critical opportunities for rural households: through migration, through markets for rural produce and through connections (see Figure 3). The urban economy also services rural production in other ways. The vulnerability of *pastoral* economies to drought is due to a lack of economic infrastructure that, for crop producers, is based in the town. The pastoral economy needs a yarding base for fodder; a responsive market that prices livestock at its true value; and formal financial services for production, marketing and investing in new livestock.

**Figure 3: Levels of engagement for resilience**



<sup>28</sup> At an individual level, people who were completely destitute could usually rely on their neighbours or family to keep them alive, but could not rely on much more than limited assistance – often, largely due to the extreme poverty of the community in general.

<sup>29</sup> Ethiopia, for example, boasts impressive GDP growth, with little noticeable impact on most of the rural poor.

## 4.6 Adaptive capacity is a critical skill – for a few

The factors above have been discussed in terms of *shaping* (or sometimes *constraining*) resilience, but never of *determining* it. Individuals responded differently to challenges and some coped better than others. A small number took advantage of opportunities that others did not see, or perhaps did not feel able to embrace.

It is difficult to pin down exactly what constitutes such adaptive capacity. It is partly the ability to think for yourself, a willingness to experiment, an entrepreneurial spirit, quick-wittedness or *savoir-faire*. It is a question of personal character and psychology, but is simultaneously shaped by upbringing and culture. Although adaptive capacity has come to be used more in relation to *systems'* adaptability, this evaluation regards it through the lens of individual agency. This 'X factor', as described above, has been relatively neglected in resilience literature.

From our research, adaptive capacity had three essential characteristics:

1. People's level of initiative and the coping strategies that they adopted varied and did not depend solely on income or wealth. The way that couples sought each other's advice and supported each other's plans, for example, varied enormously. As a result, some were able to take on ventures that others were not, or which they simply did not see. This affected their own well-being and, often, that of their families.
2. Resilience demands a high (and rare) degree of adaptive capacity. Almost everyone interviewed had been forced to adapt, but that did not demonstrate a *talent* or *capacity* for adaptation, and was not evidence of resilience. A few individuals had succeeded from nothing where others had not, but they were exceptional.
3. Individual adaptive capacity is not a substitute for opportunity. Hustling and squeezing the last drop out of every opportunity does not bring resilience; it only allows people to survive when their opportunities are limited.

Although it is difficult to pin down an individual's adaptive capacity or where it comes from, it is easier to see what limited it. This report has already recorded the limited economic and political environment in

which people live. Adaptive capacity relies as much on structural factors as individual traits. With so few choices available, it is hard to see how people can adapt.

In three of the four countries *drug dependency* (including alcoholism) was a major impediment to a family's resilience: the drain on household income through drug and alcohol purchase; through labour lost to addiction; and reducing people's initiative and their adaptive capacity. Analyses of vulnerability and resilience have tended not to include addiction as an issue, possibly because of a reluctance to blame the poor for their own poverty.

In some societies, *social conformity* may hinder adaptive capacity by discouraging innovation and the willingness to go against accepted norms (see Ludi et al., 2012). It is possible that this unwillingness to be seen to challenge societal norms, even on matters such as what crops to plant, is partly due to a perceived need to show loyalty to the community in return for personal security (see Box 3).

## 4.7 Basic services and marginalisation

In all study areas the evaluation found problems with access to the basic services of education, health, water and justice. In particular:

- The *costs of ill-health* were a constant problem for most households (see Section 3.2).
- *Ensuring an education* for their children – or at least for their sons – was a priority for most families and a constant economic preoccupation (and a major drain on limited resources).
- *The importance of a water supply* for resilience was seen: *negatively*, in parts of Ethiopia and Sudan, where droughts and a lack of water caused displacement; and *positively* in Pakistan, where piped water freed displaced women in Peshawar from the burden of transporting it.<sup>30</sup>
- *Limited access to justice* meant that many transgressions such as land-grabbing, domestic violence, inequitable divorce terms and usurious credit terms went uncontested.

Access to these services were never solely or even primarily technical issues, but always about political priorities and governance. They were symptoms of a *broader political marginalisation*.

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30 Although the time freed up could have been far more profitably used had social restrictions not intervened.

### Box 3: Who has a shop and what does it involve?

When dissatisfied with your lot there are three strategies available. You can change (exit); you can complain (voice); or you can choose to seek safety in accepting the situation for the time being (subservience).

Exit was the preferred strategy for many who were looking for better economic opportunities and services in urban areas. This sometimes included temporary migration, e.g. to the Gulf from Pakistan and Ethiopia, or to Djibouti from northern parts of Somali Region in Ethiopia. It is unsurprising that towns neighbouring areas where humanitarian aid has been common are among the fastest growing in the world (e.g. Goma in DRC; Nyala in Darfur, Sudan; Peshawar, in Pakistan).<sup>31</sup>

Voice, asserting one's agency to try to change one's situation, was not often visible in challenging the situation at local level, though there were examples of people going to court to assert their rights, or co-opting people of higher status in the village to lobby on behalf of the community. It is unclear whether voice should be viewed positively as a strategy indicating higher agency and assertiveness, or whether it indicates more restricted exit opportunities.

The economic parallel of voice might be seen as those who strove to invest in new economic enterprises, using their agency to challenge their household's economic status quo.

Although it is fair to argue that the general availability nationally of each of these services is partly a resource issue, access across different population groups was so unequal that the national resource envelope cannot be considered the main determinant of what people in marginalised areas receive. The level of service people could enjoy was principally a question of management and politics.

Marginalisation also existed within marginalised areas. Minority tribes or castes could be victims of land grabbing, physical violence and could be chased

from their homes with impunity. States gave them no protection, constraining their economic and social opportunities. Marginalisation existed at an individual level too: disabled children could be prevented from going to school, discouraged by their families and communities from leading an independent life.

The main way to combat marginalisation was to escape it. This usually involved urban migration: moving to places where services were more accessible, and where economic opportunities were more available and less constrained by social status.

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31 Exit is sometimes thought of as a *lack of resilience* (e.g. the discourse around 'pastoral drop-outs'), rather than as *resilience-seeking* behaviour. Some states, including Ethiopia, try to prevent or restrict it, and it has rarely been promoted by resilience-building programmes or by aid in general.

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# 5 Does MYHF support resilience?

One of MYHF's aspirations was that it would prove transformative by supporting community resilience. Evidence for this evaluation suggests this is not yet the case.

The first iteration of MYHF business cases provoked no great change in the approaches used by DFID's partners, either in strategy or in discourse, compared to previous, short-term humanitarian action. This is unsurprising – MYHF constituted only a small percentage of overall budgets of agencies like WFP in Ethiopia and was part of a complex system that has evolved over many years. Achieving transformative change will take a great deal of time, even if it is possible.

There are other obstacles to MYHF achieving transformation. These include the scale of the resilience challenge, discussed above, and more subtly, some characteristics of humanitarian aid itself.

## 5.1 Has MY humanitarian assistance addressed the issues that shape people's resilience?

Our research found that humanitarian assistance has *nominally* tried to address many of the issues we found to be critical in shaping people's resilience, e.g. gender, asset accumulation, social capital, the meso economy, inclusion/marginalisation, adaptive capacity, etc.

- **Gender:** Emergency proposals commonly have a section detailing how and why the project shows *gender awareness* or is trying to help women. Most projects funded under MYHF, as with much other humanitarian assistance, provided some reporting on how far women are targeted by programming. Some portfolios included explicit gender projects, for example sewing projects in Peshawar and nutrition education in Kassala.
- **Assets and small businesses:** The degree to which humanitarian aid has targeted *asset accumulation* or supported income generation through small or micro-businesses varied between countries. For example, in DRC emergency cash transfers were intended to help with immediate consumption or to restore basic household items rather than to contribute to asset accumulation and income generation.<sup>32</sup> Assets were sometimes distributed directly, especially in recovery (e.g. to returnees in FATA, Pakistan; seed distributions in Darfur and cash transfers in DRC). Sometimes technical or vocational training has been given to help people diversify income sources by opening up trades or businesses.
- **Social capital:** Many agencies argue that they support activities that strengthen *social capital* within communities; for example, many programmes supported village disaster management committees and community disaster planning. It could be argued that the creation of project committees at local level in so many communities is a way of creating social capital.
- **Meso-economy:** Humanitarian assistance more usually addresses livelihood or economic issues at the *local*- rather than *meso*-economy level, but there are more recent initiatives in market-centred approaches.
- **Marginalisation:** Humanitarian agencies have tried to improve the capacity of national systems to target and deliver aid, including, for example, when vulnerable groups, such as the disabled, have been missed by aid interventions (e.g. in Pakistan). Many humanitarian donors, including DFID, try to target their funds towards marginalised areas and populations. This has included building the capacity of state systems to deliver emergency services, for example supporting health services and emergency nutrition intervention capacity in DRC and Ethiopia.

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<sup>32</sup> As discussed above, UNICEF found in DRC that larger one-off transfers were preferred to multiple smaller transfers because they allowed people to invest (in assets, including land).

- **Adaptive capacity:** This is arguably addressed less often by humanitarian aid, although agencies may claim that this done through support for education.<sup>33</sup> In addition, MY projects, including resilience programmes, have often put significant resources into skills training. This has included agricultural training (often combined with the provision of agricultural inputs) with the aim of improving yields and enabling households to achieve surpluses for progressive capital accumulation and to act as a cushion in times of shock.

However, humanitarian action has rarely addressed the underlying factors shaping resilience in any meaningful way. Although agencies have often recognised many of the issues central to resilience, they address them in what could be called a humanitarian way. Humanitarian agencies generally see their remit as apolitical, which is implicitly interpreted as technocratic. This is understandable, especially in crises involving conflict, but it is in tension with the simultaneous desires to widen the mandate and objectives of humanitarian aid to incorporate resilience-building. The humanitarian model looks to address urgent needs directly where they are felt, i.e. at the individual or household level. Assistance most usually consists of a transfer of goods (or cash) or services to meet needs or fill a gap. In the case of building resilience, these transfers are most typically of assets or of knowledge/skills.

Transfers are undoubtedly useful, particularly when people are in immediate distress, but more must be done to build resilience over the long term. Gender is an illustrative example – distributions of seeds in FATA, Pakistan, whether directed to women or men, support a male-dominated social and economic system. Although giving women seeds was being called ‘gender programming’, it is not clear how it could improve women’s lives: the constraints on their agency included the terms of their co-option in the male-controlled agricultural economy, but did not include sub-optimal vegetable yields. When women were displaced to Peshawar they encountered new opportunities beyond this traditional system, but these could only have been supported through a deep understanding of social and gender changes. Humanitarian aid is not configured for this type of analysis. This is equally the case for supporting the

meso-economy, social capital and adaptive capacity – deeper analysis, larger-scale support, longer-term strategies and joined-up thinking are required to have real impact in these areas.

Multi-year humanitarian aid makes these conversations possible as longer timeframes allow for analysis of problems and vulnerabilities and enable donors and agencies to ask uncomfortable questions about why people are in constant crisis. It is this aspect of MYHF that has the potential to be transformative, although a great deal of work is needed to realise this.

## 5.2 Social protection – multi-year humanitarian aid by another name

Some form of state social protection was available in three countries: a regular cash transfer in Ethiopia (PSNP) and Pakistan (BISP) and free health insurance in Sudan. The cash transfers were an important, budgeted element in the household economy, constituting around 20%–40% of the subsistence budget. The BISP appears to be less widely available for the poor and was not available to IDP households. Another difficulty was that women needed an identity card to be included, though many had been prevented from holding one. Health insurance in Sudan appeared to be less beneficial to most households. Most were faced with the normal costs of ill-health, which were only very slightly reduced by enrolment in insurance.

Although an important source of consumption expenditure for recipients, it would be difficult to argue that safety nets make people more independently resilient. They can be an important ingredient of resilience and personal security where people can depend on them, but this does not mean that they help people to graduate from reliance on assistance, or that they are a way of paying for emergency relief in advance – by reducing future humanitarian needs – as is sometimes described.

Social protection is a critically important component of resilience, where people can rely on it as extra household income – but it appears highly unlikely that it will help most people to achieve independent resilience through graduation.

33 Some resilience frameworks measure adaptive capacity by the proxy of number of years of education.

#### Box 4: Social protection, asset accumulation and graduation – the PSNP in Ethiopia

The role played by PSNP in helping people to get by is not in question. It is less clear whether it helps households accumulate assets and ‘graduate’ to independence.

Berhane et al. (2011) found that there were statistically significant increases in household wealth after five years of PSNP support. But the amounts accumulated were less significant than the statistics – an increase in value of only around \$6, or, among livestock keepers, of around four goats.<sup>34</sup> Even if we optimistically assume that the \$6 asset increase can be invested with a 15% return, that gives extra annual income of just \$1 per household per year. At that rate, just-about-managing households would need another 467 years of support to reach the IPL. There is no published study assessing the medium-term impact on household income of the community assets built by communal labour from social protection schemes, but in a very small sample of watersheds, Ludi et al. (forthcoming) found that, even on optimistic assumptions, this would not go beyond \$5 p.a. per household.

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<sup>34</sup> Since a household of six has been estimated to need a herd of around 270 goats to ensure a sustained minimum welfare level (Little et al., 2008), this represents just 1.5% of that herd after five years’ support.



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# 6 Conclusions

In places where lives are shaped significantly by marginalisation, recurrent or protracted crises, covariate shocks are not always the most significant difficulty in people's lives. Their lack of resilience is revealed in the narrowness of the range of choices that they can make without having to make trade-offs between them. The constraints to these choices, or to their agency, in crises are usually the same as those that restrict their agency in normal times.

MYHF has helped improve the quality of some humanitarian programming, and through predictable funding has demonstrated that it supports timely and effective response in protracted crises. However, there is less evidence at this stage that it supports resilience-building.

This should not be understood pessimistically: this evaluation covered only the first iteration of MYHF business cases and it would be unreasonable to expect optimal ways of using MYHF to emerge so early on. Change has been limited so far, but the potential for future change is much greater. There is a risk, however, that this potential will not be achieved if the rhetoric around MYHF encourages a belief that it has already occurred or that it will occur merely by changing the funding mechanism.

The introduction set out current thinking on how MYHF can contribute to better humanitarian and resilience outcomes and the following evidence was found during this evaluation.

In some cases, MYHF has helped improve the **quality** of humanitarian programming, principally through better design and the ability to adapt programmes over time as a result of learning. However, most MYH programming was a continuation of previous annual programmes that had run successively. There were also cases where agencies still implemented programming on annual cycles, despite DFID administering grants as MYHF.

There is evidence that **long-term presence** in crises and in crisis-prone areas leads to **faster and more effective response**. A pre-existing presence on the ground has proved to be the most essential factor of early

warning, giving decision-makers credible evidence of developing crises months before official early warning. Familiarity with the problems and politics of affected areas and existing relations with state structures and other important actors helped agencies to design and deliver appropriate interventions. Agencies working in protracted crises and in areas highly vulnerable to crisis had often succeeded in maintaining their presence over several years, even with annual funding.

Evidence from both Ethiopia and Sudan showed that the existence of **contingency funding** did not lead to better contingency planning or preparedness. The overall level of preparedness for drought was poor in Ethiopia, as the slowness in response proved. An evaluation of UNHCR found inadequate emergency planning for the influx of South Sudanese refugees, despite using DFID contingency for the response. In Sudan, the evaluation of the UNICEF-led consortium found no planning for flooding – despite resilience to flooding being the programme's aim.

Contingency funding helped to bring about more timely response: funds were made available faster for both the refugee response (Ethiopia) and flooding (Sudan) as a result of being held as contingency. In the Ethiopia droughts, however, such instruments did not always result in speedy response. Many crisis modifiers from different donors took months to be approved and, more importantly, were often not requested until very late.

Valid Evaluations found that the **cost-efficiency** benefits of MYHF are more modest than had been hoped. There were significant efficiency benefits from purchasing food in Ethiopia when prices were lowest, which predictability of funds facilitated. UNHCR also reported using funds to front-load investment in Ethiopia, making theoretical cost savings down the line. Aside from these examples there were disappointingly few areas where agencies used MYHF in this way. The savings made from administrative efficiency were insignificant in relation to the size of humanitarian budgets. MYHF's contribution to improving VFM will almost certainly depend on its potential ability to increase value (i.e. by improving programme quality) rather than by reducing cost.

There is limited evidence that agencies have used MYHF to develop **better context and problem analysis**. While there were some elements of design improvement in Sudan and learning in DRC, there were also examples of standard and formulaic solutions to very different problems. MYHF gives donors the opportunity to demand more sophisticated thinking from their operational partners (e.g. on issues such as gender). The degree to which this potential is realised depends largely on how far it is made an explicit objective and how far grants are managed and evaluated with this objective in mind.

## 6.1 Transformative change

As discussed in Section 5, MYHF has not addressed the key issues that create ongoing vulnerabilities, and which restrict agency. Although there are elements (e.g. assets, access to quality services, skills) which, taken together, help increase people's agency or their ability to take advantage of opportunities, this evaluation has found that resilience is not built up in a modular, linear way. Resilience is not a commodity or an output that can be transferred. Nor does resilience have component parts.

Transfers of skills or assets are not incremental transfers of partial resilience, though this image may retain some power. The benefits of skills depend upon opportunities; the benefits of assets depend upon institutions; all of these factors depend upon people's voice. Humanitarian programmes have not addressed resilience in a holistic way, which is quite distinct from running a multi-sectoral project. The need for resilience-building to broaden from a narrow focus on household- and community-level engagement (see Figure 3 above) is just one aspect of the changes needed for a more holistic engagement.

The second reason MY humanitarian programmes have not been able to address causes of vulnerability is the mismatch between the scale of the resources and the needs. The resources available to humanitarian programmes are small in relation to the resilience challenge, and their timescale, even with MYHF, is very short. Acknowledging that MYHF-funded projects have not built resilience is not an admission of their failure, but a critique of the expectation that they could or should do so. Measuring emergency relief interventions against their contribution to resilience is holding them to an unfair standard for evaluation, the wrong objective for their design and management and a mistaken rationale for their funding.

Valid Evaluation's study analysing coping in the recent drought in Ethiopia also assessed the contribution of resilience investments over several years to helping people cope with drought. The lack of evidence for any significant impact was striking. Resilience projects were not funded on a large enough scale to make a noticeable difference and they were further constrained by the absence of a coherent vision of what an equitable and resilient local economy would look like or a plan for achieving such a vision.

Despite these challenges, MYHF offers the potential to improve the ability of external aid to address vulnerability on three levels.

1. At a project level, a MY timeframe gives more opportunity to address the acute symptoms of crises in ways that may also engage with some of the underlying factors behind vulnerabilities. This parallels the reason for believing that MYHF may improve programming quality and with the same condition. It has to be made an explicit objective that MY programmes address the underlying factors of vulnerability, and this objective then has to be explicitly planned and managed for. Two further caveats are required. First, the potential contribution of improved humanitarian action is likely to remain small. Second, we should not underestimate the difficulty of delivering relief in ways that continue to meet the primary emergency objective while contributing to addressing structural vulnerabilities. In principle this could be possible, but it is not clear that we know how to do this effectively yet. MYHF does, at least, offer the possibility to experiment and the hope that the challenge may be overcome.
2. If longer-term planning of humanitarian interventions becomes the norm in areas with protracted or recurrent crises, it may help agencies – and in particular donors – to treat individual projects as part of a broader strategy. Currently, collaboration is sought at implementation level, by bringing separate projects under the umbrella of a single consortium. MYHF offers ways to build strategic collaboration, where different agencies can be addressing the same problems but, for example, at different levels.
3. MYHF can blur the lines between development and humanitarian assistance, and can raise questions about which instruments are used in different situations. This can inform discussions under the labels of 'the humanitarian–development nexus' and 'humanitarian–development coherence' (WHS, 2016; OECD, 2017a), which are not always necessarily based

on fact. Humanitarian assistance, it is often said, does not go through governments, but is offered directly, whereas development assistance is supposed to support states, with the government as the partner.<sup>35</sup> Urgent life-saving assistance is the hallmark of humanitarian assistance – it may be impossible to distinguish between social protection and emergency cash transfers, but some of the most important providers of life-saving support in the East African 2015/2016 and 2016/2017 droughts were development donors, working through state systems.

Enabling countries and societies experiencing situations of crisis and structural under-development to handle acute poverty and shocks themselves is a long-term and unpredictable journey. There is a need for long-term investment in skills, capacities and systems; to retain response capacities (often with high levels of external support); and to offer additional surge response capacity in times of peak need. Figure 4 (below) illustrates this blend of long- and short-term assistance in Ethiopia.

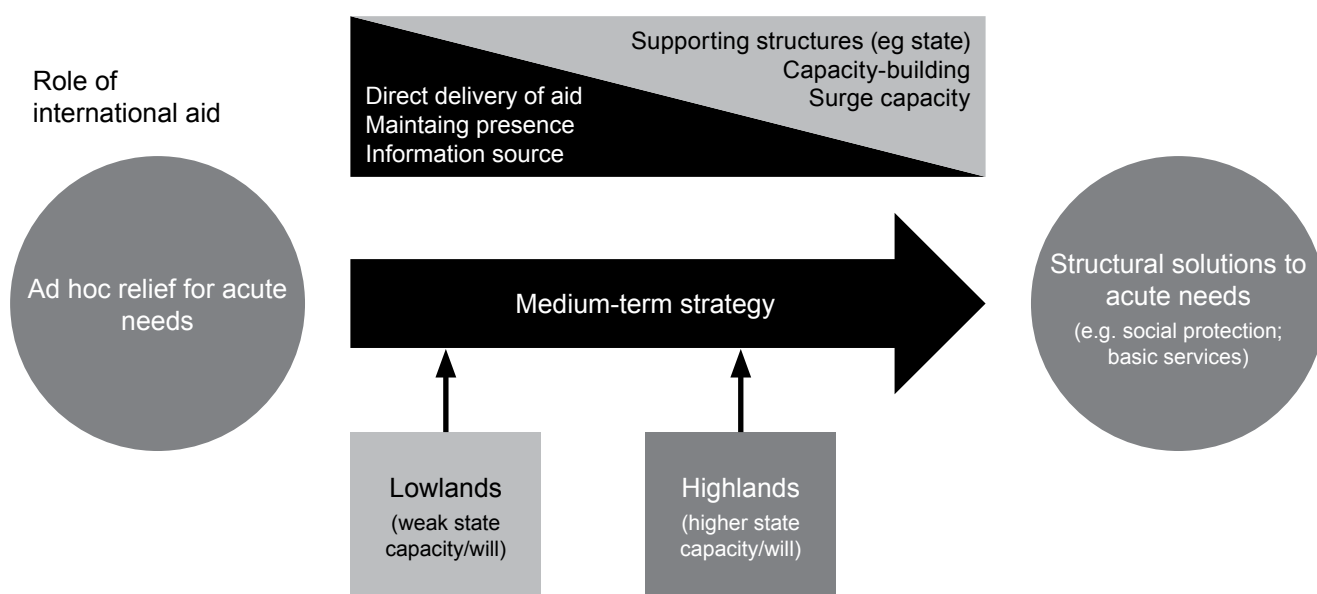
The Government of Ethiopia, with donor and UN support, has put in place two major and significant structural solutions to humanitarian need in recent years: PSNP and decentralised nutrition services. Both have had a major impact on food insecurity-related crises in recent years and have undoubtedly saved lives

(Sida et al. 2012, Sida et al. 2019). But there was still a need for major UN and NGO action in large-scale acute crises, such as the recent droughts, particularly in marginalised parts of the country where state services work less well.

Crises can be imagined to occur in places that fit along a continuum from where the state has little or no response capacity – or political will to respond – to where the state has most of the capacities and resources they need. The blend of interventions and assistance modalities shifts along this continuum, with a more fully resourced and independent humanitarian system at one end and a greater reliance on support, and possibly technical advice, at the other. Movement along the continuum is facilitated by long-term investment in institutions, policies, capacities, etc. It is not important whether interventions are labelled as and/or financed by humanitarian or development assistance; but it is essential to ensure that the most appropriate mix of instruments is used, and each instrument is used on the right timescale.

MYHF could potentially be both a catalyst for asking questions about how best to use humanitarian assistance and also in itself a valuable instrument within a strategic approach. It is useful to distinguish between the timeframes needed for an overall strategy and of any particular instrument. The floods in Sindh, Pakistan in 2010 needed international support

**Figure 4: Blending instruments to support structural solutions to acute needs**



<sup>35</sup> This myth is so prevalent that some assistance is even categorised by agencies as humanitarian solely because they want to work directly with communities rather than work through a government.

for a direct relief operation. The flood crisis drew attention to the need for supporting the development of indigenous response capacity at many levels (state, province, community, private sector); and encouraged owners to invest in supporting disaster risk reduction and crisis prevention, which also need to be addressed at multiple levels (international, river basin, watershed, province, district).

For each of these kinds of intervention, we can consider the timescale needed for financing a particular project, and for implementing the overall strategy into which these fit. For example, immediate relief may best be financed in the standard short-term way. Disaster risk reduction projects may be funded with three–four-year budgets, but must be designed

as part of an overall strategy with a much longer timescale. Such interventions can also be thought of as falling on a skillset continuum, with direct operational skills prioritised at one end (a more conventional view of emergency relief) and skills related to contextual analysis and political engagement at the other (conventionally associated with development approaches). The most appropriate use of MYHF will depend upon how much humanitarian paradigms change. Bearing in mind current traditions of thought and working cultures associated with each of the aid bureaucracies, development and humanitarian, MYHF will be most useful in cases where operational skillsets are important and when it is deployed within the framework of a much longer-term overall assistance strategy.

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# 7 Recommendations

- **Support for resilience should be based on an analytical framework that is focused on the whole of people's lives and their agency, and not exclusively on those shocks which receive emergency attention.** Where support is intended to go beyond the immediate relief of acute symptoms, DFID should develop, ideally with its partners, a new set of analytical tools to understand agency and how idiosyncratic and covariate shocks interact with 'the whole of peoples lives'. This should be the basis for interventions rather than a crude focus on replacing lost assets, or trying to return people to 'normal'.
- **Wider transformation is needed in the use of humanitarian funds in countries with protracted or recurrent crises.** This requires:
  - The use of scaled-up development investment and humanitarian funds needs to be underpinned by a coherent long-term vision and a medium-term operational plan, based on a detailed context analysis that includes analysis of the factors shaping gender relations and a keen understanding of the historical context.
  - Greater coherence in the use of different humanitarian and development aid tools, including both annual and MY humanitarian funds. This is not about combining or compromising humanitarian principles, but acknowledging different roles and planning accordingly.
  - In acute responses, some humanitarian programming must continue to target individuals and households most in need, but MY interventions should complement this by addressing problems at higher levels (e.g. market interventions at the meso-economy, supporting the ability of state structures to respond to crises).
  - Since humanitarian funds are too limited to make a significant contribution to addressing underlying constraints to people's agency, development funds should be used to maintain partners' presence in marginalised areas and to address more structural problems over the medium term, allowing humanitarian funds to be used to increase response at critical times.
- **More investment is needed in reducing the burden of ill-health.** Because direct costs of healthcare only constitute a minority of this burden, investment should be guided by the three Ps: prevention, proximity, payment. It should focus first on disease prevention, second on improving people's access to healthcare (proximity), and finally reducing the direct costs at point of use.
- **There is a need for a radical change in the way gender analysis is conducted within the humanitarian sector. Gender is the single biggest determinant of a person's agency, in and out of crisis.** Humanitarian programmes need to pay much greater attention to gender power dynamics. Agencies must transform their mechanisms for listening to women's and girls' voices, to have much deeper conversations about their lives that go beyond current needs. Donors should reject any gender strategy that simply says that a minimum number of beneficiaries will be female.
- **Contingency finance must be subject to greater discipline and linked to more robust preparedness planning.** Donors can usefully hold funds for rapid release at different levels: modest sums in MYHF business cases to allow partners to respond to small- and medium-scale shocks early; and larger sums at central level to cope with the first impacts of sudden larger emergencies. If contingency funds are to lead to earlier response, better management of contingency plans and of ongoing preparedness must be put in place and monitored. While triggers have proved technically difficult to design, they should be considered as a way to mitigate overly political decision-making.

- **MYHF grants need to be designed and managed differently from annual humanitarian grants to maximise their added value.** DFID and recipient agencies must identify and agree on the desired changes to MY humanitarian programmes from the outset. These changes need to form part of the contractual agreements between donors and recipient agencies, including in frameworks for reporting, monitoring and evaluation. Factors to consider at the outset include:
  - Better gender analysis, including a dynamic perspective to see how the crisis may be affecting gender roles and norms.
  - Greater understanding of the underlying causes of constraints to agency and ensuring more sophisticated monitoring of the changes brought about by interventions.
  - Building in learning and operational research.
  - Building in inception and design phases to allow for community consultation.
  - Support for organisations to assess their cost-effectiveness.
- MYHF business cases and large grants must be supported by proper context-resilience analysis. DFID and other donors using MYHF should consider:
  - Context analysis to be commissioned as part of MYHF business case renewal.
  - Context-resilience analysis needs to be in-depth and external. It should consider both socio-economic historical factors (Section 1) and current humanitarian problems and opportunities (Section 2). This should include (but not be restricted to) factors identified in this evaluation (gender, meso-economy, urban linkages and adaptive capacity).
  - Context analysis to inform selection of partners and programme design. The timing should be such that business case design is informed by context analysis and should be shared with partners to inform programme design.



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# Bibliography

## Companion papers from this research project

Cabot Venton, C. (2016) *The economic case for early humanitarian response to the Ethiopia 2015/2016 drought*. Oxford: Valid Evaluations ([www.bit.ly/valid-VFM-Et](http://www.bit.ly/valid-VFM-Et))

Cabot Venton, C. and Sida, L. (2017) *The value for money of multi-year humanitarian funding: emerging findings*. Oxford: Valid Evaluations ([www.bit.ly/valid-VFM-emerging](http://www.bit.ly/valid-VFM-emerging))

Gray, W., Cabot Venton, C., Sida, L. and Levine, S. (2015) *Building resilience and managing risk in fragile and conflict affected states: a thematic evaluation of DFID's multiyear approaches to humanitarian action in the Democratic Republic of Congo, Ethiopia, Sudan and Yemen*. Inception Report. Oxford: Valid Evaluations ([www.bit.ly/valid-inception](http://www.bit.ly/valid-inception))

Levine, S. and Kusnierek, A. (2019a) *Can't afford to be sick: assessing the full economic cost of ill-health in North Kivu, Eastern DRC*. London: ODI ([www.odi.org/publications/11287-assessing-cost-ill-health-two-case-studies](http://www.odi.org/publications/11287-assessing-cost-ill-health-two-case-studies))

Levine, S. and Kusnierek, A. (2019b) *Counting the cost: assessing the full economic cost of ill-health in West Darfur, Sudan*. London: ODI ([www.odi.org/publications/11287-assessing-cost-ill-health-two-case-studies](http://www.odi.org/publications/11287-assessing-cost-ill-health-two-case-studies))

Levine, S., Kusnierek, A. and Sida, L. (2019) *Did early response and resilience investments help people cope with drought in Eastern Ethiopia in 2015–16?* London: ODI

Levine, S. and Sida, L. (2019) *A thematic evaluation of multi-year humanitarian funding in Pakistan*. Oxford: Valid Evaluations

Levine, S. with Ullah, Z., Khan, S., Ahmad, M., Ghulam, S., Iqbal, R. and Uddin, S. (2019) *The impact of displacement on gender roles and relations: the case of IDPs from FATA, Pakistan*. London: ODI ([www.bit.ly/valid-gender](http://www.bit.ly/valid-gender))

Sida, L., Levine, S., Gray, W. and Cabot Venton, C. (2019) *A thematic evaluation of multi-year humanitarian funding in Ethiopia*. Oxford: Valid Evaluations

Sida, L., Gray, W., Benda, B., Cabot Venton, C. (2019) *A thematic evaluation of multi-year humanitarian funding in the Democratic Republic of Congo*. Oxford: Valid Evaluations

Sida, L. and Gray, W. (2019) *A thematic evaluation of multi-year humanitarian funding in Sudan*. Oxford: Valid Evaluations

## Other references

Aldrich, D. and Meyer, M. (2014) 'Social capital and community resilience' *American Behavioral Scientist* 59(2): 254–269

Ambroso, G., Meier-Ewert, G.S., Parker, J. and Richardson, L. (2016) *Evaluation of UNHCR's response to the L3 South Sudan refugee crisis In Uganda and Ethiopia*. Geneva: UNHCR

Berhane, G., Hoddinott, J., Kumar, N., Seyoum Taffesse, A., Tedla Diressie, M., Yohannes, Y., Sabates-Wheeler, R., Handino, M., Lind, J., Tefera, M. and Sima, F. (2011) *Evaluation of Ethiopia's Food Security Program: documenting progress in the implementation of the Productive Safety Nets Programme and the Household Asset Building Programme*. ESSP II – EDRI Report. Washington DC: IFPRI and Sussex: IDS

Cabot Venton, C. (2013) *Value for money of multi-year approaches to humanitarian funding*. London: DFID

Development Initiatives (2018) *Global humanitarian assistance report 2018* (<http://devinit.org/wp-content/uploads/2018/06/GHA-Report-2018.pdf>)

De Waal, A. (2017) *The history and future of famine*. London: Wiley, London

FAO (2017) *Living up to the Promise of Multi-Year Humanitarian Financing*. Rome: FAO

- Léon, V., Grünewald, F. and Levine, S. (2019) i. Brussels: ECHO
- Little P D, McPeak J, Barrett C, and Kristjanson P. (2008) ‘Challenging orthodoxies: understanding pastoral poverty in East Africa’ *Development and Change* 39(4): 585–609
- Ludi, E., Getnet, M., Wilson, K., Tesfaye, K. and Shimelis, B. (2012) *Understanding adaptive capacity at the local level in Ethiopia. Africa Climate Change Resilience Alliance (ACCRA) Ethiopia Synthesis Report* ([www.bit.ly/ACCRA-Et](http://www.bit.ly/ACCRA-Et))
- Ludi, E., Levine, S. and McCord, A. (forthcoming) *Evaluating the impacts of public works assets on livelihoods: natural resource management in Ethiopia*. London: ODI
- Maxwell, D. and Majid, N. (2016) *Famine in Somalia. competing imperatives, Collective Failures, 2011–12*. Oxford: OUP
- OECD – Organisation for Economic Co-operation and Development (2017a) *Humanitarian development coherence*. OECD
- OECD (2017b) *Multi-year humanitarian funding*. France: OECD
- Putnam, R.D. (2000) ‘Bowling alone: America’s declining social capital’ *Journal of Democracy* 6(1): 65–78
- Shepherd, A., Scott, L., Mariotti, C., Kessy, F., Gaiha, R., da Corta, L., Hanifnia, K., Kaicker, N., Lenhardt, A., Lwanga-Ntale, C., Sen, B., Sijapati, B., Strawson, T., Thapa, G., Underhill, H. and Wild, L. (2014) *The chronic poverty report 2014–2015: The road to zero extreme poverty*. London: ODI
- Sida, L., Gray, W. and Asmare, E. (2012) *IASC real-time evaluation of the humanitarian response to the Horn of Africa drought crisis: Ethiopia* ([www.bit.ly/valid-RTE-Et-2012](http://www.bit.ly/valid-RTE-Et-2012))
- Wood G (2003) ‘Staying secure, staying poor: the “Faustian bargain”’ *World Development* 31(3): 455–471
- Wood, G. and Copestake, J. (2007) *Reproducing unequal security. Peru as a well-being regime*, WeD paper. University of Bath
- World Humanitarian Summit (2016) *Commitments to action*. UN-OCHA
- World Vision International (2016) ‘Can humanitarian implementers achieve multiple benefits from multi-year funding?’, blog, 17 March ([www.wvi.org](http://www.wvi.org))







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