This is the third edition of *The State of the Humanitarian System* to report that coverage is getting worse.

In 2015–2017, coverage was particularly poor in remote regions, in localities where there was a high perceived risk to humanitarian staff and in areas under siege. It was also poor for IDPs and refugees who were not resident in camps, and for irregular migrants.
The number of people affected by lack of coverage – particularly irregular migrants and people in areas under siege – increased over the period. There are signs that some humanitarian agencies have become less willing to operate in areas deemed to be high-risk, and that a number of governments are becoming more adept at using bureaucratic delaying tactics to prevent humanitarian agencies from reaching areas in need of assistance.
Coverage

In brief
This is the third edition of The State of the Humanitarian System to report that coverage is getting worse. In some cases, the humanitarian system has largely overlooked crises – generally because they take place in countries with authoritarian governments which prevent access, or because people in acute need fall outside the accepted scope of humanitarian action. In many cases, the problem is that particular areas or groups of people are missed out during humanitarian programmes. In 2015–17, coverage was particularly poor in remote areas with low population densities, in areas where there was a high risk (or perceived risk) to humanitarian staff and in areas under siege. Coverage was often poor for IDPs and refugees who were not resident in camps, and for irregular migrants. In general, marginalised groups – particularly minority ethnic and cultural groups and the elderly – were most likely to be overlooked.

While none of these problems are new (and several were noted in previous editions), the number of people affected – particularly irregular migrants and people in areas under siege – increased over the period. There are also worrying signs that some humanitarian agencies have become more risk-averse and less willing to operate in areas deemed to be high risk, and that a number of governments are becoming more adept at using bureaucratic delaying tactics to prevent humanitarian agencies from reaching areas in need of assistance.

To what degree do all people in need receive humanitarian assistance and protection?
Failures in coverage take a number of forms. The international humanitarian system can miss crises – and entirely fail to respond to crisis conditions which would, in other circumstances, be seen to merit a response. Alternatively, it can overlook or fail to reach certain geographical areas within a broader response, or it can fail to provide assistance and protection to certain groups, such as populations hosting refugees or IDPs, or people who are not physically able to access distribution points.1

The issue of coverage is difficult to assess because, almost by definition, humanitarian actors know much less about the areas where they are not present than about the areas where they are. They know even less about areas that they have not noticed as requiring assistance. This problem was particularly stark in the evaluation synthesis. Many evaluations concentrated on the degree to which programmes met the needs of identified beneficiaries: often, the number of identified beneficiaries had been revised down over the course of the programme, and little was said about those who had fallen off the lists.

Research for this report produced only very limited information on crises which were entirely overlooked. A very small number of key informants mentioned the failure to respond to the economic crisis in...
Venezuela and the movement of Venezuelans into neighbouring states from 2015 onwards. Similarly, there were isolated mentions of the unmet humanitarian needs of people being trafficked, of urban populations displaced by gang violence (particularly in El Salvador) and of urban populations living with levels of malnutrition and disease morbidity high enough to warrant humanitarian intervention (Twigg and Mosel, 2018; WFP, 2017). All of these examples suggest that people may be overlooked by the humanitarian system because, while they have acute needs, they fall outside the boundaries of humanitarian action as it is commonly understood. The situation in Venezuela has tended to be seen as an economic rather than a humanitarian crisis. Gang warfare is generally seen as a criminal problem, not a humanitarian concern (unlike conflict with other non-state armed groups). Urban poverty is seen as a developmental issue.

Among the key informant interviews there were also isolated mentions of small crises – particularly small ‘natural’ disasters – being overlooked by the international humanitarian system, even when they occurred in places where the government was unable or unwilling to respond. While each individual disaster might affect a small number of people, the total involved globally could be significant. There were also mentions of national-level crises being covered up by authoritarian regimes, and where lack of media coverage, international political will and the affected government’s reluctance to request assistance come together to ensure that large numbers of people are left without assistance. In North Korea, an estimated 70% of the population do not have enough to eat, while in Eritrea up to 2 million people may have been food insecure in 2016 – but it is impossible to know for sure (CARE International, 2017).

Key informants had much more to say about areas which had not been reached by ongoing responses. In general, interviewees described strenuous – and often largely successful – efforts to extend coverage as far as possible (for displaced people in Mosul in Iraq, or for Rohingya people fleeing Myanmar for camps in Bangladesh), but set these against an overall failure to reach all people in need. According to one manager at the HQ of an international NGO:

We’re quite proud of what we’ve done in Yemen, but we’re scratching the surface. South Sudan is a black hole, we could be ten times the size. Syria ... well, we have our hands full just in the few places we can get access, let alone the rest which need us more.

This tension between specific successes and general failure seems to be reflected in the practitioner survey, where 7% thought that their sector/operation had performed excellently in reaching all people in need, 33% thought that the response had been good, 37% fair and 23% poor. While higher than might have been expected from the interviews, these responses for coverage were among the lowest ratings in the survey.
Gaps in geographical coverage were noted in almost all of the field studies, in all contexts: Greece, Lebanon, Chad and Cameroon (refugees and migration); Somalia, Afghanistan and Yemen (conflict); Haiti and Nepal (‘natural’ disaster). They were often referred to in evaluations – again in all contexts (Bousquet, 2015; Coste et al., 2016; Kebe and Maiga, 2015; More, 2016): a smaller number of evaluations suggested that attempts to achieve coverage had been broadly successful (for example, Díaz and Betts, 2017; Turnbull, 2016a).

In general, coverage appeared to be poorer for remote, sparsely populated areas. Conversely, there were a number of situations where coverage appeared to be poorer in urban areas – largely as a result of the difficulty of identifying households in need in dense and diverse urban environments (Patel et al., 2017; Smith and Mohiddin, 2015). In some of the field studies (notably Mali and Lebanon), informants felt that urban coverage was, overall, better than in rural areas because urban populations were on the whole wealthier, and so needs were lower, or because urban areas were closer to agency offices and stores, and more secure. It would seem unwise to generalise about coverage in urban areas: each situation presents a different picture of needs, vulnerabilities and access conditions.

As well as problems with geographical coverage, there was some evidence that humanitarian responses failed to reach specific categories of people. In particular, the elderly, women and girls, disabled people and socially marginalised classes, castes or ethnic groups appeared to be less likely to receive assistance than others in their community. Some key informants at country level, and a small number of evaluations, suggested that women and girls may not receive aid as a result of aid agencies failing to consider social norms, family structures and distribution within the household (Bousquet, 2015; Chaffin, 2016; World Vision International, 2015). Similarly, key informants and evaluations noted that marginalised ethnic groups failed to receive aid in settings as diverse as Nepal, the Sahel, CAR (UNICEF, 2016) and Ukraine (Conoir et al., 2017). Recent research by IFRC suggests that elderly and disabled people may not be able to access aid because they cannot physically reach distribution sites, or because they may not be aware that aid is available, or may be left behind by families when they are displaced or they move to find better conditions (IFRC, 2018). Work by Ground Truth Solutions confirms that women are sometimes left out of aid distributions (in two of 11 surveys of crisis-affected people) and that the elderly and disabled are often left out (in eight of 11 surveys). A number of other factors related to powerlessness and marginalisation can lead to people being overlooked or not receiving assistance. These factors will differ depending on the social structure of the area: family size, nationality, lack of social networks and lack of official documents are all important reasons why particular sub-sections of a population may not receive aid (Ground Truth Solutions, 2018).
Coverage in situations of conflict

Poor coverage was a consistent theme in interviews with humanitarians working in situations of conflict: this was echoed in the evaluation synthesis, where a large number of evaluations mentioned coverage and access issues. In the practitioner survey, 29% of respondents in conflict environments said that coverage was ‘poor’, compared with 18% of respondents in ‘natural’ disasters. The fact that the number of poor responses was not higher should remind us that there are many situations (although still a minority) where humanitarian staff feel that good coverage is being achieved, even under very challenging conditions. However, there are also particular areas and populations that are unlikely to be reached.

Unsurprisingly, the research – and particularly the evaluation synthesis and HQ key informant interviews – strongly suggested that areas with a combination of poor logistics and high perceived risk to aid workers were very under-served relative to needs (Syria, Northern Nigeria and Yemen were repeatedly mentioned), as were areas where, although there may be less conflict, governments prevented access (such as Rakhine State in Myanmar). Some interviewees at country level also said that less support went to areas controlled by non-state armed groups, particularly where these groups were seen as terrorists: ‘civilians associated with terrorists suddenly become ineligible’ for assistance. The failure to reach populations in besieged cities in Syria – a phenomenon that was particularly visible in 2015-17 – was repeatedly mentioned, by informants and in the literature (Stites and Bushby, 2017).5 These findings were given further weight by the SAVE research conducted by Humanitarian Outcomes and GPPI, which showed that ‘Considerably fewer humanitarian organisations ... respond to highly violent, conflict-driven emergencies, irrespective of funding available and the needs of the population’ (Stoddard et al., 2016: 7), and that, within countries suffering from conflict, the majority of agencies tend to avoid areas perceived as being more dangerous – often those areas under the control of non-state armed groups. These conclusions are supported by a number of STAIT Peer Review mission reports.

Less visible, and perhaps less explicable, was the widespread failure to provide assistance to IDPs living outside camps. In many conflicts, the locations and needs of these people are ‘largely undefined and unquantified’ (Darcy, 2016b: 44), although very often there were far more IDPs outside than inside camps. Evaluations suggest that the urgent humanitarian needs of displaced people outside camps were largely unaddressed in responses in South Sudan and CAR, as well as elsewhere (Briggs, 2017; Maxwell et al., 2015; UNICEF, 2016). There were also concerns that, where the needs of IDPs were being addressed (for example in Yemen and Chad), similar needs among the host population were often overlooked (Niland et al., 2015).
Coverage in refugee and irregular migration situations

A quarter (26%) of respondents to the online questionnaire felt that coverage in refugee responses was poor. As with IDPs, concerns centred on refugees who were not in camps: this was a particular issue for Syrian refugees, and came up in field interviews and evaluations (Moughanie, 2015). Again as with IDPs, there was also concern over the failure to extend assistance to refugee-hosting communities (Garcia et al., 2015; Hagen-Sanker et al., 2017), and related concerns over social cohesion in communities where refugees were present. A number of agencies had taken steps to include host communities in programming (Church World Service, 2016; Drummod et al., 2015; Guay, n.d.).

A second concern related to coverage for refugees and irregular migrants was that of status: agencies not providing assistance to people because they did not have – or were not perceived to be likely to obtain – refugee status. This was raised in evaluations and in interviews in agency HQs and in refugee environments, particularly in Greece. Interviewees pointed out the importance of providing humanitarian support on the basis of need, and the consequent imperative to provide assistance and support to all migrants who needed it, irrespective of whether or not they were entitled to the additional protections of the 1951 Refugee Convention. The perceived discrimination against those who were not refugees (and, in some cases, their criminalisation) was generally seen to particularly affect young men and certain nationalities, such as Afghans and Iranians.

Box / Internal displacement: a humanitarian and development challenge

Millions of people flee their homes each year because of conflict, violence, development projects, disasters and climate change. The large majority remain displaced within their countries of residence. These IDPs often remain in situations of protracted displacement or face chronic displacement risks. They are among the most vulnerable people in the world, and face specific challenges arising from their displacement. Between 2015 and 2017, estimates of new internally displaced people globally averaged close to 30 million, though the actual figure is almost certainly higher.

The persistence of high numbers of IDPs is leading to a growing recognition that humanitarian assistance and protection will not be enough to significantly reduce the phenomenon, and that effective development responses will also be critical. While internal displacement was not included as a separate goal in the Sustainable Development Goals (SDGs), progress on preventing and reducing internal displacement will be critical to achieving the SDG targets, and to meeting the UN Secretary-General’s call to ‘leave no one behind’, made at the World Humanitarian Summit in 2016. Internal displacement is mentioned in the Sendai Framework for Disaster Risk Reduction, and has been recognised in other global processes, including the New Urban Agenda, GAUC and the Warsaw
International Mechanism for Loss and Damage under the UN Framework Convention on Climate Change, which in 2017 established a taskforce to develop recommendations for addressing displacement related to climate change. OCHA also looked at the impacts of protracted displacement in its 2017 study *Breaking the Impasse: Reducing Protracted Internal Displacement as a Collective Outcome*. Although the two global compacts on refugees and migration under negotiation in 2017 and 2018 do not address internal displacement, the 2016 New York Declaration for Refugees and Migrants noted the need to prevent displacement and provide protection and assistance to IDPs. In 2018, UN actors, states and international NGOs launched the ‘GP20 Plan of Action’ to mark the twentieth anniversary of the Guiding Principles on Internal Displacement.

While the humanitarian needs of displaced people are of overriding concern to the international community, reversing current trends will require addressing the underlying social, economic, political and environmental factors behind displacement. More research on the complex and intersecting drivers of displacement, the link between internal and cross-border displacement and the economic and social impacts of displacement on IDPs, host communities and states, has been undertaken, and more will be needed if the phenomenon is to be fully addressed. Better data and analysis will also help inform the development of indicators to monitor progress on reducing displacement and IDP vulnerabilities at both the global and national levels. Efforts towards better cooperation on data collection and analysis, and initiatives to build government capacity to collect and use data, have improved the quality of the numbers, but significant gaps remain in data-sharing, interoperability and disaggregation. This makes it difficult to obtain information around specific vulnerabilities, including in relation to health, education and livelihoods. Addressing these data gaps will be a necessary first step in informing development approaches to reducing internal displacement.

**Factors affecting coverage**

This edition of the SOHS asked aid practitioners what they felt the main constraints to coverage were in their programmes – although there were some differences between the responses from conflicts, ‘natural’ disasters/health crises and refugee operations.
Of the 1,170 practitioners who completed the SOHS 2018 survey, 40% saw bureaucracy as the main constraint to reaching people in need in refugee and irregular migration contexts.

**Bureaucratic restrictions**

This is the first time in *The State of the Humanitarian System* series that bureaucratic restrictions have been cited as the most important overall impediment to providing humanitarian support to people in need. Interviewees reported having to obtain clearances from multiple government departments to enter certain geographical areas, long delays in visa processing and unclear and changing rules related to customs and imports. This may simply be part of the legitimate workings of a government, but in situations of internal conflict in particular, interviewees believed that restrictions were a conscious tactic on the part of governments or non-state armed groups to prevent humanitarian aid from reaching particular areas. The problem appeared to be particularly acute in Syria (Al Nabhy et al., 2017; Sule Caglar et al., 2016) and Yemen. Interviewees in Yemen were vocal about the challenges involved in obtaining permission to reach vulnerable communities. As one NGO staff member explained:

> when you arrive with a convoy, wherever you are, you need to deal with interior affairs, air security, political security, public security, local governments, until you reach officials responsible for distribution points.

Issues of bureaucracy also appear in relation to refugees and irregular migrants, where 40% of respondents saw this as the main constraint to reaching people in need. This may reflect the increase in the number of refugee operations taking place in middle- and high-income countries, where the machinery of government may be more present and more active. A number of key informants in Lebanon, for example, noted government policies and behaviour as a constraint to accessing certain groups. It may also reflect an increase in political concern around refugees, leading to less sympathetic treatment and more complex attention from host governments.

Bureaucratic restrictions were also the single most important constraint in ‘natural’ disaster contexts (25% of respondents reported this as the main constraint to accessing people in need). In the aid recipients’ survey, an average of 25% of respondents said that corruption was the biggest challenge to receiving aid in their area – the most common response to that question. This is not necessarily corruption by government officials (it could equally have been by aid agency personnel), but the field interviews with aid recipients clearly indicated that the corruption they saw or suspected was taking place within the government bureaucracy.

**Insecurity**

Insecurity is regularly cited as a major problem in evaluations of humanitarian action in conflict (Clarke et al., 2015; Darcy, 2016; Duncalf et al., 2016; Global Affairs Canada, 2017; Lawday et al., 2016; Poulsen et al., 2015; UNICEF, 2015; 2016), and was a repeated theme in interviews. Interviewees also made the point that constrained access is not just about the delivery of aid – it also prevents assessment and understanding of needs (see also AAN Associates, 2016). In Afghanistan and DRC, aid recipients saw
insecurity as the most important challenge to receiving aid, a reminder that violence and conflict is primarily a problem for the civilians caught up in it, both in its primary effects (leading to humanitarian need) and its secondary ones (making it harder to address those needs).

Organisational constraints
Several studies have suggested that aid organisations are deliberately avoiding areas deemed too high risk (Castellarnau and Stoianova, 2018; Healy and Tiller, 2014; Jackson and Zyck, 2017). In the practitioner survey for this report, only 6% of respondents said that agencies’ reluctance to operate in remote locations/areas of need was the main obstacle to accessing all people in need. Other sources suggest that agency behaviour, and choices, may be more of a problem, and that agencies and agency staff may be assuming that they can’t work in insecure environments when in fact they can. Many of the survey respondents who said that insecurity was the problem could, more correctly, have said that the problem was the reluctance of their agency to work in areas it perceives to be insecure. A number of key informants spoke of donors and agencies becoming more risk-averse in situations of conflict, and felt that this trend was getting worse (see also Castellarnau and Stoianova, 2018). The SAVE project has shown that the link between insecurity and access is complicated, and mediated by many factors that have more to do with the agency than with the environment: some agencies – a minority – are able to continue humanitarian operations in insecure environments because they consciously configure themselves to do so by developing independent logistics capacities, cultivating relationships with belligerents and local communities and securing funding with fewer donor restrictions over were they operate. They also, fundamentally, have to reconsider their attitudes to risk (Stoddard et al., 2016). SAVE researchers found that areas deemed to be high risk by humanitarian agencies were not always seen as dangerous by the people who lived there. Several STAIT missions have found that agencies are taking an overly conservative position on risk, or are failing to understand risk, and assuming that an entire country presents the same level of risk.

Organisational constraints to coverage are not solely a result of risk aversion, and do not only apply to conflict. One evaluation noted that:

> Once aid agencies had established projects and bases ... there was a natural tendency for them to stay there, so it was only the most dynamic agencies that continually sought to address unmet needs in new locations. Some agencies also tied themselves to centres where they were working before the crisis (Clarke et al., 2015).

Some interviewees suggested that, in a number of high-profile responses, they had been able to map the disparity between organisational operating areas and areas of need (the SAVE research backs this up (Stoddard et al., 2016)). ALNAP research also found that, unless directed by the government or confronted by a clear and highly visible crisis, aid agencies do not
routinely monitor new areas to assess whether they should move operations there. Where there are new crises, the key factor facilitating a fast response was pre-existing presence in the locality, suggesting that organisations are not well-equipped to move quickly to meet needs in new areas (Obrecht, 2018). This is supported by MSF’s finding that, over the past five years, few if any agencies have responded to a new conflict crisis within the first few months (Castellarnau and Stoianova, 2018).

**Funding**

Despite the broad consensus that funds are insufficient to meet needs, funding does not appear to be the most important constraint to coverage. This was suggested by the results of the practitioner survey (where 18% of respondents said it was the most important constraint – less than bureaucracy or insecurity), and borne out by interviews: a number of humanitarian managers were at pains to point out that ‘we are overly reliant on the idea that it’s the money’ that prevents effective coverage. However, as noted in the chapters on needs and funding and composition of the system, funding is not spread evenly across the humanitarian system, which means that, in some situations, lack of funding and decreases in funding undoubtedly had an impact on coverage. Field staff pointed to villages, communes or districts where they knew there were needs, but were unable to provide assistance.

**Donor restrictions on operations**

Only 6% of respondents in the practitioner survey suggested that donor restrictions were the main obstacle to reaching people in need. To the degree that interviewees talked about donor restrictions as a constraint to coverage, they tended to discuss one of two issues: earmarked funding and an inability to use funding flexibly to address new and emerging needs; and the impact of counter-terror legislation.

Where lack of flexibility was discussed, it was generally as a constraint to coverage at the global level – earmarking prevented funding from being moved from well-funded situations to less well-funded ones. Some interviewees noted that this issue was being discussed as part of the Grand Bargain, while also noting that they had not, as yet, seen less earmarking actually occurring. ALNAP research in DRC found that responses to people displaced by conflict were often delayed due to the need for donor approvals to shift resources from one area to another (Obrecht, 2018).

Counter-terror legislation and related constraints were mentioned by some interviewees at headquarters level, and also by a small number working in crisis-affected countries. Interviewees mentioned problems in making bank transfers (see the Yemen case study on pages 132–133), hiring staff and partnering with certain organisations – the latter a very real constraint to achieving coverage where these organisations had access to areas international organisations found difficult to reach. In a survey by the Harvard Law School Program on International Law and Armed Conflict, respondents ‘generally
agreed that counterterrorism laws have affected their work and the work of their organizations’ (Burniske and Modirzadeh, 2017: 6). One informant suggested that agencies and donors working to address these issues have come to a ‘stalemate’:

> governments insist that humanitarians need to produce hard evidence that CT restrictions have a negative effect on their ability to respond, [but] ... to establish a direct correlation and hard evidence of such effects is an impossible task – there are far too many volatile variables.

The problem may also relate to the complexity of this legislation, and to limited understanding of the implications of the legislation among operational agency staff. In the Harvard survey, the majority of respondents said that the laws failed to provide clear direction, and 88% of respondents felt that further guidance would be helpful. This may explain why, over the reporting period, some agencies have established units to specifically address issues of compliance and the regulatory environment – an area into which discussions on counter-terrorism have increasingly been incorporated.

**Logistics and accessibility**

In some cases the main constraint to achieving coverage was simply a result of physical conditions: a lack of roads or infrastructure. Physical and logistical constraints were mentioned by 11% of respondents to the practitioner questionnaire, and by 18% of those in situations of ‘natural’ disaster. Poor logistics can also be a problem in situations of conflict: key informants in Yemen and Mali both spoke of the challenges of accessing communities in areas with no roads. Overall, 20% of people in receipt of aid said that physical access difficulties were the main challenge to receiving aid in their area – a response similar to that for insecurity.

**Box / Humanitarian action in urban environments**

Throughout the period covered by this edition of The State of the Humanitarian System, humanitarian actors have had to contend with an increasing number of urban crises, including the Ebola Epidemic in West Africa, urban conflict in Syria, Ukraine and Yemen and displacement in many cities worldwide. These crises challenge existing ways of working, which were generally developed in rural areas. Over three-quarters of the world’s 685 million forcibly displaced people are in urban areas (Cosgrave et al., 2016), and more than 50 million people now live in conflict-affected cities (ICRC, 2017). With more than half of the world’s population living in urban areas, and that number growing all the time (UN, 2016), humanitarian engagement in crises in urban areas is only going to increase.

Several new initiatives to improve responses to urban crises emerged over the period. The Global Alliance for Urban Crises (GAUC), a network originally established to inform the World
Humanitarian Summit and Habitat 3, brings together humanitarian actors, local government representatives and built-environment professionals. A number of donors and agencies also took steps to develop their capacity and understanding of urban crises. European Civil Protection and Humanitarian Aid Operations (ECHO), which now has a Policy Officer dedicated to urban issues, undertook an internal review and released a policy paper in 2017 (European Commission (DG ECHO), 2017). The World Bank issued a policy note on forced displacement in cities (World Bank, 2017), and the UK’s Department for International Development (DFID) funded a three-year learning initiative, the Urban Crises Learning Fund (see Sanderson and Sitko, 2017), in partnership with the International Institute for Environment and Development (IIED), which developed a large number of reports and tools aimed at improving response to urban crises.

While it is difficult to say whether humanitarian response in urban contexts has actually improved – and responses during the focus period for this edition of the SOHS have been criticised for many of the same issues that have come up in previous urban crises – humanitarian actors have at least tried new approaches and generated learning in a number of areas, including:

• The need to adapt analysis mechanisms for urban response, including needs assessment (Mohiddin and Smith, 2016), and the need to better understand the context as well as the crisis (Campbell, 2017).
• The impact of urban crises on infrastructure and services in cities (ICRC, 2015) and preparedness measures to mitigate this impact (Grünewald and Thakur, 2015).
• The need to understand and support social cohesion between displaced people and urban host communities (World Vision International, 2015).
• The importance of supporting and working alongside local governments and built-environment professionals (GAUC, 2016).
• The critical role of coordination at city and neighbourhood levels, both between humanitarians themselves and between humanitarians and local actors (GAUC, 2016; Sanderson and Sitko, 2017). • LEAH CAMPBELL, ALNAP
The war in Yemen is now the world’s worst humanitarian crisis, with more than 22 million people – three-quarters of the population – in desperate need of aid and protection.

UN Secretary-General Antonio Guterres, speaking at a donor conference in Geneva, April 2018.

The conflict in Yemen between Houthi rebels and forces loyal to the government of Abdrabbuh Mansour Hadi has displaced some 3 million people. It has also had a devastating impact on food security and livelihoods, the economy and the health and sanitation sectors, leading to crippling poverty and high rates of malnutrition and disease, including a cholera outbreak in April 2017 that led to almost a million cases and more than 2,000 associated deaths (WHO, 2018). Almost 2 million children (27% of the 7.3 million school-age children in Yemen) are unable to attend school, with more than 1,800 institutions affected by the conflict.

The humanitarian response
Delivering aid in Yemen is extremely challenging, with numerous constraints ranging from insecurity in frontline areas to administrative restrictions and the logistical difficulties associated with rough and mountainous terrain. All parties to the conflict have been criticised for increasing the suffering of civilians by impeding the delivery of humanitarian aid. Humanitarian workers have accused the Saudi-led coalition supporting Hadi’s government of obstructing assistance, first by imposing a
Delivering aid in Yemen is extremely challenging, with numerous constraints ranging from insecurity in frontline areas to administrative restrictions and the logistical difficulties associated with rough and mountainous terrain.

Despite these constraints, life-saving operations have continued. Case fatality rates in the last cholera outbreak were low thanks to the combined efforts of local actors and the international community in responding to and containing the outbreak, and famine has so far been averted. Aid agencies have also engaged in active advocacy with conflict parties around IHHL. This work appears to have contributed to a reduction in the number of medical facilities targeted between 2015 and 2018.

Rethinking approaches to community resilience

Basic preparedness measures are essential to cope properly in light of the multitude of risks Yemenis face, but very few resources are available for preparedness and prevention activities. As one aid worker put it in relation to the cholera outbreak: ‘Because the intervention is short-term in nature, donors were not willing to continue funding the facilities, so they were closed. For future outbreaks, which are likely, donors will need to invest again to get these facilities working’. This conflict also highlights the need for, and relevance of, new approaches to aid in fragile situations and middle-income countries. In a context where the economy is in transition and extremely dependent on key infrastructure and institutions, the consequences of their stopping due to the war are dire. More support to the health system and for the rehabilitation of basic infrastructure, such as water pumps, electricity plants and communications infrastructure, would have a major impact on daily life.

The crisis in Yemen shows no signs of abating. With basic infrastructure no longer functioning and the risk of further health crises and famine, the humanitarian sector has managed to limit the damage, but more attention and resources are required to rehabilitate infrastructure, support preparedness and address the blockages in the banking system. However, this will be of no avail if IHHL is not respected. Unfortunately, the drastic reduction of ICRC presence in June 2018 and the second bombing of MSF-supported health infrastructure in Abs do not augur well in this respect. As such, regardless of the quality of technical programmes, they will be a drop in the ocean when set against the scale of the suffering in this terrible crisis. • VÉRONIQUE DE GEOFFROY, GROUPE URD

This write-up is based on a case study conducted for the SOHS 2018 by Groupe URD. The full case study can be found at: sohs.alnap.org
Endnotes for this criterion

1. The system can also reach people, but then fail to provide enough of the right type of support – for example, protection. This challenge is discussed in the section on relevance.

2. Responses from representatives of governments of crisis-affected countries were very similar.

3. Generally, the evidence was much stronger that humanitarian assistance did reach these people, but it did not address their specific needs – see section on relevance.

4. Unpublished data used to produce the cited report.

5. Between January 2014 and January 2017, according to successive reports of the Secretary-General on the implementation of Security Council Resolutions 2139 (2014), 2165 (2014), 2191 (2014) and 2258 (2015), the number of people under siege in Syria increased from 240,000 to 700,000. It then declined in 2017, and by the end of the period stood at 420,000.

6. 26% of total responses overall: 21% of responses in conflict; 40% in refugee and irregular migration; 25% in ‘natural’ disasters. This made it the single most important constraint in refugee and irregular migration situations and in ‘natural’ disasters, and the second most important in conflict responses (after insecurity).

7. 32% in Afghanistan and 29% in DRC. Surprisingly, insecurity was seen as less of an issue in Iraq, where only 6% of respondents thought it was the most important challenge.

8. Donors aim to achieve a certain level of geographical coverage in-country, through a set group of partners. If a partner wishes to shift their work to another area, donors may refuse this, as it would reduce their geographical coverage in the country.

9. The small number of interviewees who discussed this may reflect the countries selected for case studies/interviews.