Mainstreaming Success
Civil Society Consultation in Emergency Relief and Early Recovery Programming
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Abstract

Around the world 43 million refugees, internally displaced and stateless persons have fled their homes as a result of violence or disaster. Half of these people have found means of supporting themselves, while the other half depend on organizations like the United Nations High Commissioner for Refugees (UNHCR) and the International Organization for Migration (IOM) for survival. The responsibilities and pressures on these organizations are immense, and the obstacles to their success are substantial.

What defines the effectiveness of many refugee assistance programs is the extent to which the project planners are able to understand the local context and apply that knowledge to develop a strategic approach that incorporates the needs and views of the local community. Gaining this insight can be a challenging task however, especially in times of crisis.

Civil society organizations (CSOs) can play a crucial role in this process. While NGOs and intergovernmental organizations (IGOs) often find themselves scrambling to reach a disaster zone in the wake of an emergency, local CSOs are already on the ground and have a contextual understanding that has been built over years. Though the development sector has focused extensively on solidifying a “participatory approach” to project planning, it has, in many cases, failed to recognize the potential of CSOs as a source of information. The humanitarian relief sector is characterized by similar weaknesses in its inclusion of CSOs, often delaying contact until programs are well underway and the emergency phase has passed.

This paper will consider the role of CSO consultation in IGO emergency relief and early recovery programming. The discussion will focus on UNHCR and IOM as a lens through which to view IGOs more broadly, and will include a variety of CSOs ranging from diaspora networks to formal community-based organizations (CBOs). The paper will first look at some of the key concepts in the discussion of CSO consultation, and will then examine the UNHCR and IOM systems for participation and consultation – both formal and operational. The discussion will then turn to four case studies:

- The UNHCR Liberian Repatriation Program
- The IOM Counter-Trafficking Program in the Western Balkans
- The UNHCR Livelihoods Program for Montagnard Refugees
- The IOM Healthcare Program in Somaliland

The first two cases will illustrate how a lack of consultation can damage a program and lead to negative impacts on both the beneficiaries and the organization. The second two cases will demonstrate how when used effectively, CSO consultation can lead to substantially improved results. The subsequent chapter will draw together the lessons learned from the four case studies and the reviews of UNHCR and IOM strategy, and will offer recommendations that can be applied to future projects.

The paper will conclude that despite a general understanding of the value of participation in planning, there is still significant effort required before this awareness is successfully transferred into practice and can improve programming to its fullest potential.
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Acronyms

CBO  Community-based Organization
CSO  Civil Society Organization
DfID  Department for International Development (UK)
GRO  Grassroots Organization
IDP  Internally Displaced Person
IFDO  International Friendship Development Organization
IGO  Intergovernmental Organization
INGO  International Non-governmental Organization
IO  International Organization
IOM  International Organization for Migration
MIDA  Migration for Development in Africa
NFI  Non-food Item
NGO  Non-governmental Organization
OCHA  Office for the Coordination of Humanitarian Affairs
OSCE  Organization for Security and Cooperation in Europe
PCO  Population Caring Organization
PRA  Participatory Rural Appraisal
SIDA  Swedish International Development Agency
SOP  Standard Operating Procedures
SPTF  The Stability Pact Task Force
UN  United Nations
UNHCR  United Nations High Commissioner for Refugees
USAID  United States Agency for International Development
WASH  Water, Sanitation and Hygiene

Note: This document is intended for relief workers and program staff who already have some understanding of the basic elements of emergency relief and early recovery programming. While the report will re-examine the key concepts most relevant to the central topic of this paper, it will assume the reader has a general level of familiarity with the field.
Introduction

1.1 Background, Problem and Rationale

Each morning, 43 million people wake up in a bed that is not their own. As the sun comes up, these people have no jobs to get ready for, no fields to harvest, no home to return to.

2010 was a year defined by disaster. In Pakistan, four million people were made homeless as they watched their streets fill with water. In Haiti, one million people were forced to live under tarps, surrounded by rubble that claimed the lives of 200,000 friends, family members and loved ones. On the brink of renewed civil war, one million Ivoirians fled into neighboring countries, the blood barely washed away from the last round of conflict.

Today the number of refugees, IDPs and stateless persons has soared to its highest figure in nearly two decades. Organizations like UNHCR and IOM struggle to support these vulnerable individuals, providing aid, protection, and shelter to the continually growing displaced population.

The challenges facing organizations like these are daunting. Unlike development management, which allows for extensive planning and evaluation, organizations working in emergency relief must find quick, effective solutions to complex problems, with little time to reflect or create long-term strategies. Despite these obstacles, however, the risk that relief organizations face by compromising efficacy for speed is one too great to accept. Instead, the organizations must find functional, efficient solutions that take into account both the needs and capacities of the local population.

Unfortunately, in the haste to address basic needs and provide immediate relief, organizations sometimes fail to communicate with the local community, specifically with civil society organizations (CSOs). Though the urgency and intensity of a crisis environment make this understandable, the results are no less damaging. Uninformed
decision-making results in programs that are costly, ineffective, and most importantly, programs that do not adequately address the needs of the population at hand.

Regardless of how severe the disaster or conflict, it is important not to underestimate the knowledge and skills of local organizations. In the immediate aftermath of an emergency the groups may not have had time to re-form, but shortly thereafter they can be a valuable tool in the recovery process.

The problems encountered by international relief organizations are many, but they are not insurmountable. Because intergovernmental organizations (IGOs) like UNHCR and IOM are likely to remain the leading actors in most emergency and post-conflict settings, it is essential that their field methodology be as effective as possible in supporting displaced and disaster-affected populations. This study will attempt to determine how that can be better achieved.

1.2 Aim and Objectives

This dissertation seeks to understand the current system for inclusion of local voice in IGO emergency relief and early recovery programming. The paper considers the strengths and weakness of the CSO consultation system, and examines the potential for how those processes could be improved. In order to achieve this aim, a number of objectives need to be met. The coming chapters will:

- Demonstrate how programming is affected when local organizations are marginalized.
- Illustrate how programming that follows from CSO marginalization can impact beneficiaries.
- Identify strategies for consultation that have been successful in past cases.
- Discern how those techniques could be applied on a wider basis in the future.
- Formalize a set of suggestions that could improve program efficacy in relief and post-conflict recovery.

Too often, frustrated relief workers fall into the trap of blaming UN agencies and IGOs for perceived project failures, and demonize their activities. While there are elements of this report that take a critical look at specific aspects of IGO programs, the intention is not to criticize or belittle their efforts. On the contrary, this report is appreciative of the many successes of IGOs, and is critical only in highlighting areas for improvement with the hope of further benefiting program effectiveness. The goal is to make the successes of civil society engagement the norm in policy and programming, and mainstream positive techniques across relief and early recovery implementation.

1.3 Scope

The discussion of beneficiary participation in organizational programming is not new. Since the 1980s, participatory approaches to development have been increasingly thought about, debated, and streamlined by the humanitarian community. What distinguishes this dissertation from the majority of research on the topic of participation are two essential elements:

- The focus of this study is exclusively on participation in emergency relief and early recovery – not long term development; and
- Participation, as it is discussed in this paper, focuses on CSOs rather than individual community members or the population at large.
The reasons for this are twofold. First, while participation has been written about extensively, very little of that discussion has occurred surrounding its potential and necessity in emergency settings. The lessons learned from its uses in development have been applied broadly to emergencies, but few texts have looked specifically at its role in crisis environments. Second, CSOs have been largely excluded from the discussion of participation. Participatory techniques such as PRA, now well-known to most development practitioners, generally work either one-on-one with individuals, or with groups created by the assessment team. Very rarely has the focus been on authentic groups that are organic to the community. Where CSOs are included, it is more commonly in relation to their potential as an implementing partner or the need to build their capacity.

Another important element to this research is that the focus here is on CSO consultation, not partnership. While the value of partnerships cannot be overstated, there are times when that type of relationship is either impossible or undesirable. Even when this is the case however, communication with CSOs has an intrinsic value in and of itself. CSOs have important knowledge that can benefit IGO staff who may be unaware of the specific needs and vulnerabilities of the population, or unfamiliar with the dynamics of the surrounding conflict. Consultation with CSOs can aid program staff to more efficiently develop an understanding of the situation without depending singularly on time-expensive PRAs.

To examine the practices of consultation in emergency relief and early recovery, it was necessary to select a few key actors as a baseline of practice – in this instance, UNHCR and IOM. This paper focuses specifically on intergovernmental organizations, namely the UN and its partners rather than INGOs, but the lessons learned can and should be applied to organizations such as CARE, OXFAM, and Save the Children.

Though the private sector is emerging as an increasingly important partner for IGOs, the discussion here will be restricted to consultation with civil society. An entire paper could be written about the role of the private sector in humanitarian relief, so to discuss it here would do a disservice to the extensive conversation it deserves and would detract from the discussion of CSOs (which are, in many important ways, vastly different and equally worthy of discussion).

While the different benefits of consultation will be briefly touched upon, this paper will focus on the programming benefits of consultation rather than on social benefits such as empowerment. It is worth recognizing, however, that many of these social elements may emerge as a byproduct of an improved programming approach.

Finally, this paper considers emergency relief and early recovery generally and does not distinguish between crises resulting from conflict and crises resulting from natural hazards. Even in light of the many differences that exist between these two contexts, enough similarities are present to allow for a worthwhile discussion of the two together. The paper does acknowledge, however, that there are important distinctions in response strategy, and that CSO consultation must be handled delicately and appropriately to each situation.

1.4 Methodology

This dissertation was conducted largely as a desk-based study. While some general knowledge was gained through experience at a refugee camp in Ghana, the majority of information was gathered through a careful examination of UNHCR and IOM strategy documents, reports on programs, and discussions with agency staff.

The core body of the research is structured around four case studies, two from UNHCR and two from IOM. For each organization, one case study examines an instance where poor consultation and local understanding resulted in negative program outcomes, and another where consultation was particularly successful and
outcomes improved. The goal in this analysis is to show that there already is knowledge and capacity within the IGOs to use CSO engagement effectively – the problem is that consultation is not yet systematic and has not achieved the core position it merits in each new program start-up.

The four case studies were chosen on the basis of availability of information, the extent to which the cases represent a norm from which conclusions can be drawn and applied to similar contexts, and how well the details of the situation fit the parameters of the research. Additionally, the case studies incorporate four different types of potential CSO partners and are situated in four different regions, with the hope establishing a wider platform from which lessons can be learned.

Key informants played an integral role in developing both context and depth of understanding, and in providing details of specific programs and methodology in the field. These informants were identified and contacted through a number of means, generally beginning with one person’s suggestion and further suggestions from that point forward. Contacts made using this strategy were usually more successful than those contacts made without a personal reference.

Discussions with key informants occurred through both formal and informal means. As the majority of research was conducted from Oxford, England, face-to-face conversations were often not possible. Instead, discussions occurred via email and phone, and ranged from casual consultancies for advice to more traditional question-based interviews. Often the initial formal interview generated follow-up questions that led to a subsequent semi-structured interview.

Given that the interviews were conducted exclusively with agency staff rather than the victims of conflict or disaster and that the focus of the dissertation was on programming rather than individual experiences or feelings, ethical concerns were in many ways minimal. Contact with each informant began with a description of the dissertation and its goal so that the person was fully aware of the research aims and could choose whether or not to participate. Those persons with whom more formal interviews were conducted were asked at the beginning of the interview whether they would be comfortable being quoted or having their answers included as part of the text.

1.5 Assumptions

Because both time and word count were limited, certain factors simply could not be explored in this dissertation to the extent that would satisfy every reader. So as to not dismiss these issues however, the following list has been included to provide a look at the assumptions made to allow this dissertation to move forward:

- Local organizations have valuable information and are in most cases willing to talk with IGOs.
- IGOs have an interest in improving programming.
- Programming staff could benefit from an enhanced understanding of local context.
- Consultation with CSOs could provide an efficient source of information in comparison to observation, PRAs or surveys, and can act as a useful triangulation tool.
- IGOs will continue to carry out their normal participatory measures. CSO consultation will be a supplemental tool, not a replacement for other assessment mechanisms.
- IGOs have good intentions and are doing the best they can to support vulnerable populations.
Many of these assumptions could be debated. For the purpose of this dissertation however, these elements will be considered as a given and as starting points from which the rest of the research can build.

1.6 Limitations

The main limitation of this research is that it is largely a desk-based study. While a thorough review of strategy papers, program reports and conversations with agency staff have allowed for a fairly comprehensive understanding of the consultation approach, without actually being present on the ground it is difficult to discern to what degree rhetoric translates into practice. There may be guiding principles that never make it into implementation, misunderstandings over agency directives, or other common issues that do not come across in the literature. Additionally, though the staff members at UNHCR and IOM have been honest and forthcoming about their activities, one must expect a certain amount to be withheld. Organizations are generally not eager to divulge their failures, and the individuals that represent them often feel an obligation to uphold their organizations’ position.

It is impossible to say exactly how much these barriers have affected the analysis and conclusions drawn in this report. Experience with a CSO at Buduburam Refugee Settlement provided significant background without which this paper could not have been written; knowledge gathered through the months spent working there allowed for a level of understanding that could not have been gained through reading alone. The lessons learned from Buduburam have informed much of the analysis in this document, and have offered a more critical perspective from which the other case studies could be viewed. With no firsthand experience of the other three case studies however, one must acknowledge that details may have been missed.

Likewise, there are undoubtedly internal dynamics within UNCHR and IOM that cannot be fully understood by someone outside the organization. Having never personally worked for either organization directly, there are certain to be some gaps in understanding.

Despite these potential limitations, much can be learned through an external examination. In some ways, being outside the system allows for a new perspective, one unclouded by the emotions and politics of agency affiliation or being in the field. This dissertation will seek to highlight some of the disparities between strategy and implementation that can sometimes be difficult to identify when one is too close to the projects or materials involved.

1.7 Structure

The remainder of this report is broken into six chapters. Following this introduction, chapter two highlights the key concepts and actors that frame the discussion of CSO engagement in emergency programming. Because the target for program improvement in this report is intergovernmental organizations, the chapter first considers what it means to be an intergovernmental organization, and why the role of IGOs is particularly important. The chapter looks specifically at UNHCR and IOM and discusses why they were chosen to represent the IGO community. The chapter then looks at civil society, and the different types of civil society organizations. The second part of the chapter considers the dynamics of disaster and the emergency relief and early recovery system. It discusses the origins of disasters, the composition of affected populations, and the emergency management system. Finally, the chapter examines the idea of participation and consultation as it has been applied in the development field, and suggests the potential for its uses in crisis mitigation.
Chapter three looks at the system for local consultation in emergency relief and early recovery. The chapter is further split into two parts: first, the formal philosophy for CSO engagement and community-based planning as enumerated in UNHCR and IOM documents; and second, the operational practices of the organizations on the ground. The chapter aims to highlight the discrepancies between official strategy and practice, and includes opinions on the level of success offered by members of each organization.

Chapters four and five present the case studies that form the core of this dissertation. Chapter four looks at two cases, one from UNHCR and one from IOM, in which a lack of local understanding has had a detrimental impact on program effectiveness. The goal of this section is to determine the problems that led to the negative outcomes and begin to reflect on whether there are ways those issues could be avoided in the future. Chapter five looks at two cases in which the engagement of local CSOs resulted in a positive outcome, and attempts to draw out the methods that made those projects particularly successful.

Chapters six and seven synthesize the information in the previous three chapters, identify the key problems and successes highlighted, and suggest a number of recommendations on how emergency relief and early recovery programming could be improved.
Key Concepts and Actors

The following section introduces some of the important concepts and stakeholders referred to throughout this report. It looks first at intergovernmental organizations and civil society to establish who they are and why they are important, and then discusses emergencies, affected populations, and the emergency response cycle. Lastly it examines the idea of participation and consultation, its history in the development sector, and how it is both relevant and useful in emergency contexts.

2.1 Intergovernmental Organizations

In any emergency response, a variety of actors are visible on the international, national and local levels. Many of these organizations are non-governmental and derive their funding from private donations, grants from government agencies, or financial partnerships with intergovernmental organizations. On the global level, national and international organizations control much of the emergency relief and early recovery process through their command of funding. NGOs and INGOs alike depend on the financial assistance of organizations like DFID, USAID and the UN to execute their programs.

What distinguishes IGOs from other stakeholders is their multi-tiered direction of emergency relief: not only do IGOs run their own programs, but they also determine the projects other organizations will implement (vis-à-vis the choice of who and what to fund), and are frequently in charge of policy-making and coordination on the ground. In doing so, IGOs exert influence over all levels of post-disaster recovery, from the global to the local.
Given this unique status, special consideration into the effectiveness of IGO programming is essential. As the largest IGO in the world, the United Nations is at the forefront of many of these efforts. With approximately $7 billion going to humanitarian aid alone,\(^1\) their role as the leader in emergency relief, early recovery and coordination remains largely unchallenged. The UN supports programs in over 50 countries, and is the global Cluster lead in all eleven areas of the Cluster coordination system.

The influence of the United Nations cannot be overstated, and the importance of ensuring the success of their operations and that of their partners is critical. To discuss intergovernmental organizations and not include the UN would be to marginalize one of the most prominent actors. At the same time, there are a number of other intergovernmental stakeholders that play a key role in emergency recovery. Many of these organizations are partners with the UN, but do not directly fall under the UN’s organizational reach. These actors must also be considered in any review of IGO programming.

To look into IGOs on a broader scale, this paper focuses on two organizations as a catalyst for discussion: UNHCR and IOM. The choice of these two agencies was based on a number of factors. First, it was important to include both a member of the UN and an external IGO. Second, among the many UN departments and IGOs, UNHCR and IOM stand out as the agencies that are frequently first to respond in an emergency. As the joint coordinators for the Camp Coordination and Camp Management cluster, these two organizations are often the first on the scene of a crisis, and remain until the transition to the development phase is well under way. Third, UNHCR and IOM respond to the two main types of emergencies: those resulting from conflict, and those resulting from natural hazards. To create a comprehensive analysis of emergency relief and early recovery, it was necessary to include agencies that worked in both sectors.

The following two sections provide a brief background on UNHCR and IOM.

### 2.1.1 UNHCR

On December 14, 1950, eight years after the founding of the United Nations, UNHCR came into existence through General Assembly Resolution 428(v).\(^2\) With an approximate 40 million people displaced after World War II,\(^3\) the need for an organization to help support the refugees and IDPs was evident. When the resolution was initially adopted, UNHCR was given a three-year mandate to support the remaining displaced persons across Europe, after which time it was intended to disband. As the world continued to experience conflict however, UNHCR’s mandate was extended to the end of the century, and has continued to expand and grow since then.\(^4\)

Today UNHCR supports 36.4 million people around the globe\(^5\) and is the principle organization addressing the needs of refugees, IDPs, and stateless persons resulting from conflict. As one of over 30 key UN sub-organizations, it belongs to a much larger network of UN and external actors.

While UNHCR carries out a number of different roles, it identifies its work as falling into the following categories:

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\(^5\) Ibid.
In practice, UNHCR typically coordinates emergency assistance for displaced persons during and after a conflict, acts as camp managers, and facilitates the provision of basic goods to the affected population. It manages the repatriation, integration and resettlement of refugees, and ensures that protection is prioritized for vulnerable populations. Additionally, UNHCR supplies funding to INGOs and NGOs, and is in charge of overseeing policy and actors on the ground.

UNHCR and IOM are in many ways responsible for similar populations, but under different contexts. While UNHCR focuses primarily on those persons displaced by conflict, IOM works with those displaced by natural hazards. The organizations make up two halves to the same whole, with their programs and strengths complementing one another.

### 2.1.2 IOM

Originally known as the Provisional Intergovernmental Committee for the Movement of Migrants from Europe (PICMME), IOM began, like UNHCR, in the aftermath of World War II. During the 1950s, IOM assisted more than one million affected persons to find shelter following the war. What began as a logistics agency quickly developed into one of the leading migration organizations in the world.\(^7\)

In 2011, IOM is operating in more than 100 countries and has a budget of nearly $1 billion. Its work spans the development and emergency sectors, and includes both highly-industrialized states as well as those struggling with economic development.Unlike UNHCR, IOM’s focus is on general issues relating to migration, as well as forced migration resulting from natural hazards or other non-anthropogenic events.\(^8\)

IOM categorizes their work into the following fields:

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\(^8\) Ibid.
IOM holds a unique position among intergovernmental organizations. Despite its close ties with the UN, IOM is not officially one of the UN member agencies. Rather, the organization has been allocated the title of a Permanent Observer to the United Nations, a position that grants them access to most UN meetings and documents, but excludes official UN status. According to IOM, its mission as a Permanent Observer is “to contribute to the political, social, economic and humanitarian debate and action on migration within the multilateral framework of international dialogue and cooperation of the United Nations.” In practice, IOM works in close coordination with the UN agencies, and while not officially a member of the UN, partners with them through both the planning and implementation phases of emergency response.

2.2 Civil Society

The effectiveness of civil society’s contribution to the development and relief sector is in many ways hindered by the understanding, or more accurately, the misunderstanding of its definition. Over the past three centuries, the concept of civil society has been molded, shifted, and changed by the dominant political theories of the times. The result is a lack of a centralized understanding of what, precisely, civil society is. Despite this lack of cohesion, political thinkers and world leaders alike have not hesitated to brand civil society with their own interpretations, and criticize its role in the international system. Without a common understanding of civil society, however, to dismiss it as a whole is both baseless and highly damaging.

Civil society is composed of such a variety of elements that imprinting it with a singular purpose, function or even set of characteristics would be impossible. Perhaps it is for this reason that civil society is often defined in negative terms – that is, in relation to what it is not. Many times when people describe civil society, the discussion is framed around civil society’s role as a non-state, non-political, non-profit actor. While this approach brings us slightly closer to an understanding, the definition of civil society by what it is not still does not provide further insight into what civil society in fact is.

As a compromise, and because this paper focuses on the interconnectedness of civil society and intergovernmental organizations, the decision was made to adopt the definition used by the United Nations in the report entitled “We the Peoples: Civil Society, the United Nations and Global Governance.” Employing a definition already recognized by the leading IGO offers a common platform for understanding within the UN system and among other international actors. The report defines civil society as:

The associations of citizens (outside their families, friends and businesses) entered into voluntarily to advance their interests, ideas and ideologies. The term does not include profit-making activity (the private sector) or governing (the public sector). Of particular relevance to the United Nations are mass organizations (such as organizations of peasants, women or retired people), trade unions, professional associations, social movements, indigenous people’s organizations, religious and spiritual organizations, academic and public benefit non-governmental organizations.\textsuperscript{13}

This definition is far from perfect. While it establishes a base for discussion, it still provides little information about the individuals who make up civil society organizations, what the organizational composition may look like, or how civil society fits into the international system. To provide greater context for the purposes of this paper, the following description by Peter Uvin will also be considered:

\begin{quote}
The number of GROs is estimated to be in the millions, with new ones being added daily…They are composed of farmers, women, neighbors, informal sector workers, youngsters, Muslims, Christians, or recent immigrants. Their size ranges from a handful of villagers to federated structures composed of tens of thousands of persons. Their budgets are small and hard to measure, for they largely depend on internally mobilized resources that are difficult to quantify: the time and energy of their members, the labor of volunteers, the financial contributions of villagers, the small savings of women and the materials of artisans.\textsuperscript{14}
\end{quote}

In conjunction, these two descriptions illustrate that civil society is not something that can be defined by one simple, universal statement. Rather, civil society is a unique actor that can take different forms and have different roles. For the purposes of this paper, civil society will encompass local NGOs, community-based organizations, grassroots groups, diaspora networks, and unofficial leadership structures in addition to the other bodies described above.

2.3 Emergencies

With the key actors now established, it is possible to discuss the conditions in which these groups become relevant. This paper looks specifically at how emergency relief and early recovery programming can be improved, and is therefore contextualized in post-crisis environments. To understand the different facets of these complex scenarios, it is necessary first to determine what types of events lead to emergencies, and second to consider the recipients of IGO programs and the dynamics of their situation. The following section looks briefly at these two major areas.

2.3.1 Types of Emergencies

At the most general level, emergencies can be broken down into one of two categories: those that are triggered by conflict, and those that are triggered by natural hazards. While the tendency is to think of those disasters caused by a hazard as “natural” and those caused by a conflict as man-made, in reality both forms of emergencies occur as a result of long-standing vulnerabilities rather than because of the

\textsuperscript{13}Ibid, 13.
\textsuperscript{14}Peter Uvin, “Scaling up the grass roots and scaling down the summit: The relations between Third World,” Third World Quarterly 16, no. 3 (September 1995): 495-512. Academic Search Complete, EBSCOhost (accessed April 24, 2011), 496.
immediate trigger. In each case, the persons most affected tend to be those who were weak or marginalized prior to the event.

The triggers of “natural” disasters are well known – they are the earthquakes, tsunamis, floods, and volcanoes that captivate the attention of the international media. While prediction tools vary depending on the specific type of hazard, there is a general inability to predict exactly when the event will occur. As a result, communities often fail to adequately prepare themselves, and the subsequent damage and loss of life can be significant. 2010 witnessed two such events, the earthquake in Haiti and the floods in Pakistan, which together affected over 25 million people and killed 200,000.

Conflicts, on the other hand, generally allow for a much higher level of predictability. Regardless of the primary cause of conflict, there are almost always warning signs that indicate the likelihood of violence. An examination into the underlying vulnerabilities and tensions in a community can offer a prediction tool far more accurate that those that aim to understand earthquakes.

Conflicts can take many forms. While it is the high-cost, interstate wars that typically monopolize the attention of the press, in reality over the past 20 years 90 percent of the world’s conflicts have been internal. These may be in the form of ethnic wars, secessionist movements, coups d'état or complex emergencies, but regardless of the type, all tend to have severe consequences for the regions involved and the civilian populations living in them.

Too often, however, emergencies are defined by the number of people killed. In some cases, the death of 300 people could be tantamount to genocide, if those people were the last of a local indigenous group. Even if violence does not take place but is merely threatened, the displacement of those persons can still constitute an emergency that requires the assistance and support of IGOs. Just as a flood or hurricane can be an emergency even if it does not kill thousands of people, persecution or the threat of violence, even if it has not yet progressed into outright killing, may still be a crisis that demands international attention.

Some emergencies, however, do not fit neatly within either category. Famines, for example, are often the product of a combination of particularly challenging factors. While the temptation is to dismiss them as the result of drought or other environmental failures, a famine would never occur if the political and infrastructure systems were functional. Rather, famines are triggered by environmental hazards that exacerbate pre-existing weaknesses. As Amartya Sen said in his 1981 book on famine, “starvation is the characteristic of some people not having enough food to eat. It is not the characteristic of there not being enough food to eat. While the latter can be a cause of the former, it is but one of many possible causes.”

Understanding these details is critical to determining the best methods for programming and response. Both those disasters resulting from natural hazards and those resulting from conflict are composed of an intricate web of root causes, vulnerabilities, proximate triggers and institutional barriers. Without understanding these different dynamics, meaningful recovery cannot be achieved. To gain the required level of knowledge, however, the inclusion of local voice must be prioritized.

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2.3.2 Affected Populations

In the aftermath of a disaster, there are likely to be large numbers of fatalities, injured and displaced. Depending on the type of disaster and the services available to the population in the first forty-eight hours, those numbers are likely to shift and swell. There are three categories of persons of concern to UNHCR and IOM following a large-scale emergency: refugees, IDPs, and stateless persons. The 1951 UN Convention and Protocol Relating to the Status of Refugees defines a refugee as a person who:

Owing to well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it.\(^\text{17}\)

IDPs are characterized by the same conditions as refugees but have not crossed an international border, and are in many ways in a particularly precarious position. Having not yet made it into a neighboring country, IDPs are likely still in close proximity to violence or other dangers that forced them to flee in the first place. This not only puts their personal security at risk, but makes it extremely challenging for them to receive the support of relief agencies. Once across an international border, refugees are able to seek assistance from international organizations and apply for asylum.

The context in which refugees and IDPs find themselves while displaced depends largely on the regional demographics and the relationships with neighboring countries. If there is little infrastructure in the neighbor country, refugees will likely find themselves in camps supported by IGOs like UNHCR and IOM. If, however, there are sufficient support networks or the populations have strong ethnic or cultural ties, immediate community integration becomes a possibility. While the historic image of a refugee is a woman and child huddled inside a tent, increasingly there is an emergence of what are known as “urban refugees,” that is, refugees migrating directly to city-centers. Though these cases have reduced access to the support of IGOs, urban refugees can begin recovering livelihoods and reclaiming their assets more quickly than those waiting in camps.

The duration of displacement also depends on the nature of the disaster. In general, refugee relief contexts are divided between those that are short term and those that are protracted. If the cause of displacement is a one-off event such as a natural hazard, displacement will likely occur only for the length of time it takes individuals to rebuild their homes and restore their basic assets. If, however, refugees are displaced as a result of a conflict or complex emergency, it may take years or even decades before the refugees feel safe to return home.

Within the displaced community are a number of additionally vulnerable groups. Women and children are generally the first mentioned, however, the elderly, sick, ethnic and religious minorities, disabled, or socially marginalized are also of significant concern. Each of these groups has specific needs that may be unknown either by the surrounding community or relief organizations. Without seeking information about these people, programming will be ineffective in supporting them.

2.4 Emergency Relief and Early Recovery

The next core topic is the discussion of when civil society engagement ideally occurs. Thus far the terms “emergency relief” and “early recovery” have been used liberally and without clear definition. Because not only is humanitarianism a field overflowing with jargon, but also one in which stakeholders have their own interpretations of that jargon, it is useful to clarify how the terms will be used here.

Most aid workers are familiar with the basic concepts underlying the so-called “disaster management cycle.” Typically referring to the response stages that take place following a disaster, the cycle illustrates the general progression of relief activities in the aftermath of a crisis. There are many different versions of the diagram, each with unique titles and understandings of what is included in the individual phases. The diagram below shows the common approach to disaster management. We will return to the appropriateness of this methodology shortly.

While many would include immediate response and emergency relief in one category, in fact there is value in discussing them as two distinct phases. Following a disaster, the first 48 hours are critical. It is during this time of immediate Response that search and rescue takes place, fires are extinguished and injuries are treated. Often, it takes more than 48 hours for relief workers to even reach the scene due to poor airport conditions, blocked roads or other access failures. Following this initial phase, emergency Relief begins to provide the distribution of food, tarps and other essential materials. The priority during this period is typically ensuring that the basic needs are met and survival conditions are stable enough to allow the progression into recovery.

**Early Recovery** is a continuation from the relief phase, and includes efforts such as the establishment of transitional shelters, the restoration of livelihoods, and the support of government and other local infrastructure. **Development** begins the normative stage we are all more familiar with, including the construction of permanent homes, creation of long-term healthcare facilities, schools, and other public resources, and a prioritization on economic growth.

Prevention and preparedness are two more categories that are often grouped together. The decision to separate them here is to emphasize the importance of long-term planning versus action. During the **Prevention** stage, the major focus is on becoming aware of the factors that will contribute to the next major disaster. This means understanding the vulnerabilities, risks and hazards, as well as beginning the development of general mitigation plans and raising awareness of its components. **Preparedness** takes this one step further, and entails the establishment of specific logistical, communication and response plans. Additionally, it will include the stockpiling of necessary materials and resources.

There is a tendency (one that this paper is partially guilty of in its discussion of immediate response) to define the different phases of the emergency cycle in relation to the time elapsed since the initial disaster. This mistake occurs not only in academia, but also in program design and implementation in the field. No two disasters are the same – they are a complex interaction of factors that make the recovery process unique and changing. Even when the same hazard occurs in two places, the time each phase takes may be vastly different. Following the
1985 earthquake in Mexico City, for example, the leaders decided to skip the traditional recovery approach of temporary shelters and move directly into the construction of new permanent buildings. In Haiti, on the other hand, more than one year after the earthquake people are still living in makeshift tarp and tent shelters that are characteristic of the relief phase. By the traditional theory, Haiti is already well into the recovery and development phases. In practice however, Haiti has not nearly reached that point.

Another weakness of this system is that it suggests that each of these phases takes place independently. Similar to the problem with determining phases by time, thinking of each phase without taking into consideration its role in the larger development context precludes the overall effectiveness of the disaster response. Doing so also fails to recognize the combination of factors that leads up to a disaster and how that interaction continues throughout the response. Returning to the shelter sector as an example, if a project was established in the emergency relief phase without considerations of preparedness, tarps and tents might be distributed without regard for future hazards such as hurricanes. Likewise, if the development phase is not linked to prevention, permanent homes may be constructed without seismic proofing, thereby increasing the potential for future loss of life. For disaster management to be effective, each of these phases must interact and be considered in relation to the whole of the cycle rather than just the individual portions.

Despite these shortcomings, however, the disaster management cycle can provide a helpful framework for discussing the general phases of emergency response. Because this system is also now highly integrated into the programming methodology of most IGOs, it would be counterproductive to exclude it entirely from this discussion. Rather, the strategy here is to focus on the emergency relief and early recovery phases, with the understanding that these may occur after varying periods of time and are part of a larger, inclusive system.

In choosing the phase to focus on in this report, the primary question was to determine how early civil society could be consulted effectively. Traditionally, the discussion of local participation has been centered in the development stage and has extended into prevention and preparedness. This is not early enough. While it is unlikely that in the first 48 hours CSOs would have the time to re-group, as early as the emergency relief phase these organizations can begin to provide vital information about the status of their communities, specific needs, and suggestions for best methods of access. These groups are often already carrying out assessments and PRAs (either formally or informally), and can offer much-needed data to IGO staff. Using the resources available from CSOs can help save IGOs time in the initial weeks while they develop more comprehensive assessment mechanisms. Additionally, because CSOs are locally based, they likely have knowledge of prior vulnerabilities and baseline data against which current figures can be compared.

2.5 Participation and Consultation

The final major concept guiding this report is that of participation and consultation. In response to the perceived failure of top-down development, the participatory approach emerged in the late 1980s and early 1990s as an alternative model that would put development back into the hands of people. Generally viewed as a revolution in the development world, participatory approaches had the potential to once again grant communities a say in how their lives were governed. Throughout the remainder of the 1990s and into the 21st century, participatory approaches have maintained a core position in NGO field methodology.

While the discussion of the value of including the local voice takes place primarily in a development rather than an emergency context, many of the benefits could be easily transposed on a post-crisis environment. Peter
Oakley, one of the leaders in the field of participatory techniques, highlighted the following benefits as some of the values of including local communities in development:

- **Increased efficiency.** Talking to people allows for a more expedient and comprehensive understanding of the problems and enables a quicker response time.
- **Greater resourcefulness.** Communities have a better knowledge of what materials and skills can be sourced locally.
- **Minimized misunderstanding.** Communication promotes better understanding between the development agency and the local population, resulting in less time spent by project staff to mitigate relations and resolve disputes.
- **Improved long-term cost-effectiveness.** Local knowledge can lead to a focused project that more effectively addresses the needs of the people. Getting it right the first time can prevent the need for a long-term project or future intervention. The resourcefulness element mentioned above can also reduce costs.
- **Better coverage.** The local population knows its community better than anyone else. Talking to the public can enable relief workers to identify vulnerable and marginalized groups in need of support.
- **Heightened sustainability.** Involving the community can create a sense of ownership that will help ensure that the project is maintained.
- **Higher levels of overall effectiveness.** Ensuring the local population has a voice in project objectives can result in a program that more effectively and appropriately addresses community needs. A relevant project drives more people to cooperate and be engaged, and can lead to higher levels of success as a result.\(^\text{18}\)

While these benefits were originally described in reference to development, each of these seven points can be applied unequivocally to an emergency context. It is doubtful that anyone would contest the value of cost-effectiveness in a crisis any more than they would under normal development conditions. The bigger question is how these results can be achieved in a disaster zone. According to UNHCR, there are three basic information problems that program staff face in an emergency:

1. Scarcity of information.
2. Reliability of information.
3. Lack of resources for analysis.\(^\text{19}\)

In looking more closely at these problems, UNHCR suggests a number of possible causes:

- “The normal information gathering processes are disrupted.
- Observers are, through shock or inexperience, unable to describe what they have seen in a useful manner.
- There are no special structures for collecting information in a format suitable for the emergency manager.
- There is a lack of skilled people with the ability to analyze the information.
- Political biases or sensitivities alter information in order to further specific agendas.”\(^\text{20}\)

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Given these problems described, conducting a traditional needs assessment can be challenging. When arriving in a new emergency zone, program staff is unfamiliar with the situation and is faced with the problem of deciding where to begin. Not knowing local geography and access routes, vulnerabilities, or often cultural practices specific to the area, the initial diagnostic may miss important (and potentially fatal) problems. Over time many of these problems may be uncovered, but by that point it may be too late to effectively contain them.

There is the additional difficulty of conducting an assessment as an outsider. While the assumption is that disaster-affected populations are without exception willing to divulge their stories in the hopes of receiving aid, this is not always the case. Sensitive issues – matters pertaining to gender, for example – are unlikely to be revealed to someone who does not have an established level of trust. There may be social, cultural or political norms that dictate who can and cannot talk to one another. Furthermore, traumatized individuals may find it difficult to discuss their situation with someone not close to them, and even a simple assessment that is poorly worded can sound like an interrogation. Minor mistakes in these instances can lead to a further compounding of the trauma and can result in potentially long-term damaging results.

In coping with these many complexities, CSOs can play a vital role in providing information and guidance. With a pre-established relationship in the community and knowledge of the local context, CSOs are often in a better position to collect and analyze information than external organizations. Whether through formal or informal data collection, CSOs can move quickly, reach out through local networks, and develop a breadth and depth of understanding of the situation that may be altogether inaccessible to an outsider. They know where to look for particularly vulnerable and at-risk persons, and can more quickly ascertain the extent of the damage and identify those areas in most desperate need of assistance. These groups may take many forms, and may range from a small sewing group of five women, to a religious union of 50 church-leaders.

It is important not to underestimate the capacities of local organizations regardless of their size, appearance or other factors. In many areas, this will not be the first disaster a community has experienced. CSOs have adapted to these types of volatile climates, and can recover quickly and effectively. Even if there has been no prior conflict or disaster, chronic problems such as poverty or disease can force CSOs to strengthen their support mechanisms and prepare for new challenges.

In addition to the programmatic values of consultation, there are a number of social benefits that are often a byproduct of community inclusion. Chief among these are empowerment, a decreased likelihood of dependency, skills training in community planning and organization, and building trust between national and international actors. Sometimes the validation of having one’s voice heard is all that is needed to begin the difficult recovery process.

As a final note, this paper has chosen to prioritize the word “consultation” over “participation.” The reasons for this are entirely subjective, however, participation carries with it the connotation of a more important stakeholder doing a favor to a community by permitting them to participate. Consultation, a term used internationally in professional circles, implies a sharing of knowledge between two equal parties. Because participation is more common in the dialogue of IGOs however, the term will appear at various points in the coming chapters.

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24Ibid, 6.
The Local Consultation System

At every organization there are discrepancies between official policy and what occurs in practice. Despite the best efforts of management and field staff alike, conditions on the ground often determine which policies are implemented, and which are quietly left behind. To fully understand the gaps and strengths of the consultation process, it is necessary to not only look at UNHCR and IOM official strategy, but also how those strategies are transferred into practice.

The following chapter examines the current system for local civil society engagement at UNHCR and IOM. It first considers the philosophy behind civil society inclusion at each organization, and then observes how those strategies translate into action. Looking at these two categories separately allows for the isolation of specific factors that may be hindering success; it becomes possible to recognize problems with strategy versus problems with implementation, and can lead to more detailed possibilities for improvement.
3.1 Formal Systems

3.1.1 The UNHCR Philosophy

“Listening is the most important part of communication…Communicating respectfully means talking with people, not at them.”

21

Local consultation in programming, or as it is known in UNHCR lingo “the community-based approach,” is highly integrated in UNHCR’s formal methodology. Surpassing many other organizations in its field, UNHCR has worked to create a foundation of community inclusion that extends into both the planning and implementation phases of its programs. As one of its core values, all UNHCR staff agree to remain “committed to supporting the fullest possible participation of refugees and other persons of concern – as individuals, families and communities – in decisions that affect their lives.”

22

In 1994, UNHCR signed a declaration that pledged, among other things, the following:

- “To ensure, through an open process of consultation and involvement in the formulation of policies, that the protection and assistance needs of asylum-seekers and refugees are met; to reinforce the mechanisms for monitoring and information-sharing in potential unfolding refugee crises; and to advocate more effectively on behalf of refugees and asylum-seekers.

- To ensure a better coordinated approach to emergencies involving refugees and internally displaced persons through all stages, from early warning to operational responses, including training and funding.

- Refugees, returnees and internally displaced persons should be considered joint partners with UNHCR and NGOs in all programs and activities of concern to them.”

23

In subsequent years after the Oslo Declaration, UNHCR published a number of documents for its program staff regarding the integration of a community-based approach and participation into its programs. With “Reinforcing a Community Development Approach,” “A Community-based Approach in UNHCR Operations,” “The UNHCR Tool for Participatory Assessments in Operations,” and “A Handbook for Emergencies,” UNHCR lays out a comprehensive guide explaining the values of local participation and consultation, and offering suggestions on how to engage different counterparts in the field.

According to UNHCR, participation:

- “Is a right, and essential for informed decision-making;”


• Promotes protection and reduces feelings of powerlessness;
• Enables UNHCR to draw on the insights, knowledge, capacities, skills and resources of persons of concern;
• Empowers women, men, girls and boys of different backgrounds to rebuild self-esteem and self-confidence; and
• Helps people of concern cope with the trauma of forced displacement.\textsuperscript{28}

These five points reflect an understanding of some of the crucial social benefits of including communities in the recovery process. Beyond its role solely as a service provider, UNHCR has the capacity to support personal and emotional recovery – an element as critical as, if not more critical than physical relief. It is clear that UNHCR understands its potential in this aspect, and is taking steps to promote inclusion as a means of empowerment. From a programmatic perspective, UNHCR illustrates five additional benefits:

• “It builds or strengthens the capacities and autonomy of individuals and communities;
• It promotes respect for rights and the accountability of leadership structures, agencies and states;
• It underpins age, gender and diversity mainstreaming;
• It improves the quality and effectiveness of UNHCR operations;
• It provides a basis for sustainable responses and durable solutions.”\textsuperscript{29}

While the benefits are well-understood, UNHCR also recognizes that the implementation of a community-based approach implies a number of significant shifts that would need to take place in order for it to be successful. First:

\textit{[It] requires that UNHCR and partner staff regard people of concern not as dependent beneficiaries who are able to be ‘saved and assisted,’ but rather as equal partners who have an active role in protecting themselves and organizing for their own basic needs, even in emergencies.}\textsuperscript{30}

This is a critical point. If refugees are viewed as weak, opinion-less, and ineffectual, there is little wonder why they are excluded from the planning process. Instead, UNHCR suggests that program staff must recognize the inherent knowledge, skills and capacities held by the affected population. Furthermore, by viewing the persons of concern as “rights-holders” instead of simply beneficiaries, it invokes an understanding of their equality, as well as reminds the staff of their responsibilities as “duty-bearers.”\textsuperscript{31}

Another major shift that needs to take place concerns how participation occurs. Too often, participation is conducted as more of a “briefing” than a consultation.\textsuperscript{32} This is constructive for neither the program staff nor the beneficiaries. Information and learning needs to occur both from UNHCR to the population, and from the population to UNHCR.\textsuperscript{33}

\textsuperscript{28}UNHCR, “A Community Based Approach in UNHCR Operations;” 18.
\textsuperscript{29}Ibid, 25.
\textsuperscript{30}Ibid, 6.
\textsuperscript{31}Ibid, 16.
\textsuperscript{33}UNHCR, “A Community Based Approach in UNHCR Operations,” 81.
Finally, UNHCR needs to carefully consider its assumptions about the populations with which it works. For example, if it appears that a group of refugees is unmotivated to help themselves, says UNHCR, the question to ask is why they are responding the way they are, and recognizing that it may have little to do with motivation.\textsuperscript{34} Similarly, IGOs often assume that in an emergency context, refugees, specifically CSOs, have lost all capacity. In reality, UNHCR recognizes that “people have remarkable coping capacities, even under extreme circumstances. In a relatively short period, community structures reappear or new ones are formed as people begin to rebuild their lives and provide for and protect their families and dependents.”\textsuperscript{35}

In discussing how these understandings can be implemented in the field, UNHCR agreed in 2001 that:

- “Refugees are the key players in any refugee situation, and should therefore be involved in the planning of services. The refugee community, represented by all groups (women, men, children, the elderly, minorities, etc.) should be actively involved in assessment, implementation, monitoring and evaluation of these services.
- A community development approach will be applied from the very early stages of operations, whether an emergency or not, and continue until and including the durable solution phases, such as voluntary repatriation and reintegration.
- Identification and distribution of food and non-food items should be done in consultation with the refugees and people of concern to UNHCR. Distributed items (food items, cooking utensils, school books, sanitary napkins, etc.) should reflect the cultural habits and needs of the refugee communities.”\textsuperscript{36}

More recently, UNHCR has added a number of subsequent suggestions:

- “Staff should keep community groups informed about outcomes and changes, both good and bad, to the program. Their participation in implementing, monitoring and evaluating the program is crucial.”\textsuperscript{37}
- In an emergency, conditions change all the time, so the situation analysis will require updating.\textsuperscript{38}
- Although rapid responses are essential during emergencies, brief conversations with different groups…can elicit information about the population at risk, including both protection concerns and the community’s capacities.”\textsuperscript{39}
- Members of these groups will help explain the community structures and suggest ways of establishing contact with those who might not have regular access to humanitarian workers, such as persons with disabilities and older people.”\textsuperscript{40}
- Failure to meet, in advance, those people recognized as leaders by the community can result in hostility and mistrust, which might hinder the implementation of activities and undermine the relationship with the rest of the community.”\textsuperscript{41}

\textsuperscript{34} Ibid, 47.
\textsuperscript{35} Ibid, 12.
\textsuperscript{36} UNHCR, “Reinforcing a Community Development Approach,” 2.
\textsuperscript{37} Ibid, 107.
\textsuperscript{38} Ibid, 50.
\textsuperscript{39} Ibid, 43.
\textsuperscript{40} Ibid, 40.
• Representatives of community-based organizations should be involved in inter-agency and stakeholder planning meetings.\(^{42}\)

UNHCR has a well thought out and comprehensive understanding of the value of participation. Its recommendations to program staff are meaningful and undoubtedly have improved the effectiveness of UNHCR operations. What is almost entirely absent from UNHCR documents, however, is any mention of civil society organizations. Despite the emphasis placed on developing a “community-based approach,” the community partners in consultation have almost exclusively been individuals. The participatory assessments suggested by UNHCR have involved meeting with groups assembled by UNHCR rather than pre-existing organizations. Perhaps the only mention of CSOs is the last line above, that a representative of CBOs be present at planning meetings.

The implications of this are at the same time both encouraging and troublesome. While it is clear that UNHCR understands the value of participation, it seemingly has yet to recognize the potential of CSOs. For any approach to be truly “community-based,” UNHCR must recognize and learn from those community-based organizations that are already in place. All of the points made by UNHCR about coping capacities and skills also apply to CSOs, and their ability to contribute is significant. Section 3.4 at the end of the chapter revisits these points.

3.1.2 The IOM Philosophy

Unlike the wealth of information available from UNHCR concerning participation and consultation, the discussion of community engagement in programming is nearly non-existent within IOM. In reviewing IOM’s publications since 1995, no text is singularly devoted to local consultation or participation of any kind. While the importance of understanding vulnerabilities – specifically those relating to gender – has featured in some texts, the body of documents is largely absent of dialogue on the local voice. Looking at the IOM website this becomes immediately apparent. Under the “Partnerships” heading (a seemingly positive start) are five key affiliates: governments, IGOs, NGOs, the research community, and the private sector.\(^{43}\) Nowhere under this section are communities or local CSOs mentioned. NGOs here, as in most other IOM documents, are defined under a very limited scope, a topic which will be returned to shortly.

Much of this may stem from IOM’s original constitution. Unlike many of the UN bodies that have community inclusion at their core, IOM’s constitution focuses instead on its relationship with international actors. Chapter 1, Article 1.2 says:

\textit{In carrying out its functions, the Organization shall co-operate closely with international organizations, governmental and non-governmental, concerned with migration, refugees and human resources in order, inter alia, to facilitate the coordination of international activities in these fields. Such co-operation shall be carried out in the mutual respect of the competences of the organizations concerned.}\(^{44}\)

\(^{42}\)Ibid, 28.


While the constitution recognizes the importance of partnering with both governmental and non-governmental organizations, it refers exclusively to international actors. In practice it is well known that IOM works with a much broader range of partners, however in its formal, public documentation, none of these other partnerships are acknowledged.

It is not only in the constitution that this occurs: in every strategy paper and strategy review since at least 1995, the sole partners mentioned are international actors. At various points IOM does suggest that it needs to seek out improved sources of information, but suggests that the forum for doing so will be academic and research institutions. Local communities and CSOs are once again not included in this list.

Where IOM does begin to discuss its relationship with other actors is in looking at what IOM can contribute (rather than what it could learn). In this context, IOM sees itself as having a unique capacity to offer expert advice to governments, IGOs and NGOs. Similarly, it sees the need to strengthen the ties between these international organizations so as to improve the overall quality of assistance provided.

In 2002, IOM took a closer look at its partnerships with NGOs. The document resulting from the eighty-fourth session offers a clear, compelling view of the values of an IOM/NGO relationship:

*The flexibility of many NGOs, their extensive networks, their knowledge of and access to communities at the grass-roots level and their emphasis on the well-being of the individual make them ideal partners for IOM. IOM's activities are highly diverse, as are the range and scope of NGOs. Such organizations vary greatly in their mandate, structure, means and objectives, and operate at the local, national, regional and international level, resulting in a diversity of relationships with IOM.*

The willingness here to recognize the comparative advantage of NGOs is encouraging. What remains problematic, however, is that even in this document, the introduction makes clear that the focus is still exclusively on international NGOs. While it may recognize that INGOs work with local partners, it does not include local NGOs directly as a potential partner. IOM seemingly understands the value of grass-roots knowledge, but has yet to express willingness to engage with grass-roots level actors. Instead, it relies on the interpretation of international agencies and depends on a dangerous game of “telephone” to understand the local context.

With that said, IOM does regard itself as having a particularly strong capacity to contact and survey displaced populations. Keeping this in mind, it would seem a natural progression for IOM to begin a wider, community-led approach and employ a variety of qualitative analytical tools in addition to its successes with the quantitative methods.

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46Ibid, 9.


49Ibid, paragraph 2.

IOM has a basic comprehension of the value of local knowledge and the potential of NGOs – what is lacking is its understanding of how those two elements fit together. By focusing almost exclusively on international actors, IOM prevents itself from gaining access to the grass-roots knowledge that it knows is necessary. While UNHCR may be working towards progression from participation of individuals up to CSOs, the challenge for IOM may be from consultation with INGOs down to CSOs.

There are a number of additional points that IOM would benefit from considering. At present, the focus of the vast majority of IOM’s strategy papers is on what IOM can do. While this is understandable given their use as guiding documents, there is a stark absence of any discussion of how IOM will carry out those activities. If the focus could be shifted from the simple what to the why and the how, IOM would undoubtedly have greater success in developing truly informed programs. Along these same lines, IOM must consider not only what they have to offer to the different actors, but also what it can learn from them. IOM has valuable partnerships with organizations around the world, and if IOM were to look at how its own capacity could be built rather than simply working towards building the capacity of others, it would likely see beneficial outcomes.

3.2 Operational Systems

3.2.1 UNHCR Systems in Practice

UNHCR regards the well-being of refugees as the most important element of project planning. While in strategy this has resulted in the formation of “A Community Based Approach in UNHCR Operations,” in practice this often means that planning takes place through whatever means is determined to yield the most positive outcome for the refugees – regardless of whether the planning is “community based” or not.

This refugee-centric approach is, of course, not a bad thing. All humanitarian organizations ideally place their beneficiaries at the forefront of all decision-making. What is slightly troubling, however, is that in this effort to achieve the best results, refugees and CSOs are often left out of the planning process.

UNHCR standard operating procedures (SOPs) require consultation with a variety of stakeholders, typically including government officials at the national and local level, religious leaders, and partner INGOs. Since the second most important beneficiary group is the host community, local officials and religious leaders are consulted to discuss the potential impacts of a project on the host community, as well as consider what resources and personnel could be sourced locally.

INGOs, then, are often the primary link to the refugees. Because INGOs are generally more specialized than UNHCR (whose mandate is broad and covers a number of sectors), UNHCR relies on organizations like Save the Children and CARE to report the needs of the refugee community. These organizations each have their own methods for collecting community opinion, ranging from surveys and other quantitative techniques, to simple observation. The extent to which these INGOs consult CSOs depends on the individual organization and context.

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Information guiding this section was obtained from a number of sources within UNHCR and IOM, many of whom felt uncomfortable having their names included since the information provided indicates a break away from official SOPs.

In some cases, UNHCR does come one step closer to direct consultation with the disaster-affected populations. In many large camps, UNHCR encourages the creation of a refugee council to speak on behalf of the refugee population. Representatives are elected by the community and meet with UNHCR to discuss important issues. While all camps in theory have some form of representative body, the amount of contact they have with UNHCR depends, in many ways, on how urgent the situation at the camp is considered to be. In those locations where UNHCR has a heavy presence and there is a continual need for UNHCR support, UNHCR may meet frequently with the camp council. In protracted refugee contexts where UNHCR has limited involvement, meetings with the refugee council may occur rarely, if at all.

Dadaab refugee camp in Kenya is currently the largest refugee camp in the world. Composed of three smaller camps, Dadaab is home to over 400,000 refugees. UNHCR is heavily involved in the support of the camp, coordinating the majority of relief efforts and overseeing distributions of essential materials. In project planning and decisions on implementation, UNHCR follows the SOPs outlined by its headquarters: the project team consults government officials, meets with unofficial leaders such as heads of churches in the host community, and holds quarterly meetings with the camp council.53

In attempting to ascertain the needs of the refugees however, the scope of UNHCR’s direct role at Dadaab is fairly limited. While project staff do meet with the elected representatives of the refugee population, UNHCR does not consult refugee organizations or CSOs within the camp. Instead they rely on data gathered at refugee intake and registration, and for current information depend on information from INGOs working in the camps.54 Some of these INGOs consult directly with CSOs, but the extent to which knowledge is transferred from the CSOs to the INGOs to UNHCR is unclear.

This is not to say that UNHCR never consults disaster-affected populations directly. Certainly there are innumerable places around the world where UNHCR has employed participatory techniques either with community members at large or with CSOs. What this indicates, however, is that the process for participation and consultation is not yet systematically employed in the locations where UNHCR works, despite the official emphasis on the “community-based approach.” Rather, UNHCR often relies on other INGOs as an intermediary in determining refugee needs. As such, UNHCR not only depends on the interpretations of another NGO, but is unable to consult the CSOs directly about specific project details.

3.2.2 IOM Systems in Practice

Like UNHCR, IOM frequently works under difficult conditions. Be they warzones or areas recently affected by disaster, IOM is responsible for assisting local populations while simultaneously coping with a variety of other, often challenging factors. Regardless of the good intentions of IOM, governments, businesses and landlords, among others, often develop obstacles to the implementation of IOM’s programs.

For these reasons, among others, IOM’s project planning processes depend highly on location and access. In places where IOM is able to move freely and implement large-scale programs without significant barriers, the organization has the ability to work relatively independently. In these situations,

53 Interview with Francis M’nkubipu, Project Officer for Resettlement, UNHCR – Dadaab. 20 August, 2011.
54 Ibid.
Chapter 3 – The Local Consultation System

IOM may use its own staff, sometimes local, sometimes international, to carry out its needs assessments and project activities.

In other locations where IOM’s movement is restricted or relationships with the necessary institutions are not fully functional, IOM may instead operate its programs through a network of local organizations. The form of these relationships again varies. In some cases, organizations are viewed as more “service providers” than actual partners; where this is the case, the local CSO may have little or no input on the project, and is engaged only to carry out a specific task that IOM is unable or unwilling to do on its own.

In other cases, local CSOs become full implementing partners that propose their own methodology and operate with a large degree of autonomy. IOM delegates local staff members to check in with the CSOs, but the day to day operations are managed by the CSO with limited involvement from IOM. In Somaliland, for example, the government has prohibited the UN from funding its programs in the region through INGOs. Instead, they are required to work with local partners and depend heavily on CSOs within Somaliland for the implementation of its programs.55

Though it varies significantly by region, IOM has, in many places, worked effectively with CSOs. Despite these successes, however, the role of consultation in the CSO partnership remains an area in need of further exploration by IOM. In the places where IOM does work directly with CSOs, the scope of the CSO’s role is frequently very restricted. The CSO may be entrusted to manage their individual project and may be highly autonomous in doing so, but that is often the extent of their influence; they have little decision making power or ability to contribute their insights to other aspects of IOM’s programs.

IOM also frequently delays its contact with local CSOs until its programs are already well established. While it is understandable that IOM would want to ensure that its feet are firmly on the ground before involving other stakeholders, failing to consult knowledgeable local CSOs during the initial planning phase can result in long-term negative impacts.

IOM’s partnership successes in some regions indicate significant potential for organizational growth. Like UNHCR, the knowledge and understanding already exist within the organization – it is simply not yet being applied in a systematic enough format to allow the success that should be achieved.

3.3 Opinions on Levels of Success

It would be impossible to find a consensus on whether the consultative mechanisms employed by UNHCR and IOM are successful. To say that UNHCR staff universally believe consultation to be effective would discredit those individuals who see room for improvement – and vice versa. The purpose of asking for staff opinions was twofold: first, to investigate whether there were any ideas that consistently emerged for ways to improve the consultation process, and second, to determine whether staff members were cognizant of the system’s current weaknesses.

In discussions with key informants and other project staff at each organization, many of the same responses emerged. At UNHCR in particular, emphasis was placed on overall project outcomes rather than the steps leading to that result; because program outcomes were positive, consultation was, in their eyes, working as it

55 Interview with Natalia MacDonald, Project Officer, IOM – Nairobi. August 09, 2011.
should – regardless of the role consultation actually played in the process. There was very little recognition of ways program outcomes could potentially be further improved through enhanced consultation.

IOM staff expressed similar views. Because projects were meeting expectations, and because in some locations IOM worked well with CSOs, staff perceived the consultation and participation systems to be effective. There was again limited consideration of how that process could benefit from improved consultation. Despite acknowledgement by the staff that IOM’s programs improved as a result of working with CSOs, there was still minimal concern over the lack of consultation occurring at other project sites.

Staff at both organizations take pride in their work and are understandably hesitant to divulge sensitive or negative information to an unknown researcher. It is not clear whether the staff members were unaware of the weaknesses in the consultation system or were simply uncomfortable discussing them, but in either case there was limited willingness to talk about possibilities for improvement. External evaluations such as “The Cardoso Report” have included such compelling arguments in favor of better coordination that IGOs (the UN in particular) were forced to reconsider their relationship with civil society. These types of critical examinations have yet to emerge from within UNHCR and IOM however, or if they are occurring, are not yet doing so in a venue public enough to benefit project staff.

3.4 Lessons Learned

It is clear from looking at the UNHCR and IOM formal and operational systems that there is a respect within both organizations for the principles of participation. In examining the core documents on participatory approaches, it is apparent that the two organizations understand the value of including beneficiaries in the planning process and are striving to improve their programming methods. Despite this however, there remain a number of areas which need to be further considered if UNHCR and IOM hope for their consultative mechanisms and programming to be truly improved. The following section discusses some of the lessons that can be learned from an examination of the strategy documents and operational practices.

The IGO participatory strategy is almost exclusively focused on opportunities for creating new groups rather than recognizing pre-existing organizations. While it is without a doubt that both UNHCR and IOM are receptive to conducting participatory assessments in the field, the emphasis in both cases is on creating and asking questions of new groups. Though this is certainly a meaningful exercise, it excludes groups (namely CSOs) that are already in existence and may have already asked those questions and others. CSOs have valuable information to offer that is being missed because of the singular focus on bringing together groups of people for the purpose of extracting information. While an understanding of the value of participation exists, there is not yet equal recognition of the role CSOs can play in this process.

Where CSOs are mentioned it is more commonly in regard to building their capacity than acknowledging possible CSO contributions. Both UNHCR and IOM at various points discuss the role of CSOs in the community. In these instances, however, CSOs are framed more as a beneficiary than a valuable source of information. Rather than recognizing the capacity already held by the CSO, the focus instead is placed on their weaknesses and areas they could improve. In doing this, the IGO removes the potential for the CSO to be seen as a contributing consultative partner, and groups them instead with the people labeled as in need of help.

In discussing potential learning partners, the orientation is at the meta level and external. Both UNHCR and IOM have suggested that they are engaged in learning and information sharing. In looking at the key texts
pertaining to institutional learning, however, it emerges that the primary partners referred to are INGOs. Though these organizations have extensive knowledge about aid and emergency relief, consulting with a major INGO is different from consulting with a small, local CSO. Each has its own value, but yields different outcomes. While INGOs perhaps can present more advice on strategy and programming, they are unable to provide the contextual insights that can be learned from CSOs. In discussing organizational learning, it is important that the IGOs begin to distinguish between the international and the local, the large and the grassroots, and recognize the values of each.

There is a general unwillingness to acknowledge programming elements that are implemented ineffectively. As will be seen in the case studies, official consultation and participation strategies are not always implemented effectively. Despite this, the informants’ persistence in saying that consultation does occur successfully is indicative of a number of potential problems. While it is understandable that an organization may be uncomfortable admitting failures to an external researcher, it is vital to its growth and long-term success that it is able to learn from those failures. Another key point is that if consultation is truly a universal first step and yet there continue to be problems that result from a lack of understanding, the consultation is either being conducted ineffectively or the information gained is not guiding programming as it should. There is no one answer to this. In some cases, as seen in Chapter 5, successful consultation has significantly enhanced the outcome of the project. In other cases, consultation has not taken place at all. In other cases still, consultation has taken place but the advice has not been applied to project planning. What is clear is that consultation implementation needs to occur more systematically and IGO staff must be more willing to acknowledge areas in need of improvement.

Even when the understanding of the value of participation and consultation exists, it may not be appropriately implemented in the field. Rhetoric is not being systematically applied. The discussion of rights-holders and beneficiaries as equals has not been turned into action; in many programs, members of the public can participate in answering questions but not in providing consultation. Although the informants indicate that consultation is part of the planning process, it is clear that this is not always the case. This is further illuminated in the case studies that follow.
The following section examines two cases in which programs suffered as a result of a lack of local understanding and the absence of meaningful civil society consultation. The first case, the UNHCR-supported repatriation program from Buduburam Refugee Settlement, illustrates the detrimental impacts of not responding to community needs and opinion. The second case, the IOM counter-trafficking program in the Western Balkans, shows how success can be greatly reduced as a result of seemingly minor problems. The goal of including these examples is threefold: first, to show that the formal practices are not always transferred into practice; second, to illustrate how damaging the effects of this can be; and third, to analyze the weaknesses of these programs and understand how their problems could be prevented in the future. In each of these cases, information was available from CSOs that could have significantly improved the outcome of the project. Had better communication been established, many of the resulting issues could have been avoided.

4.1 Repatriation from Buduburam Refugee Settlement, Ghana

4.1.1 Background: The Liberian Civil War

Between 1980 and 2003 approximately 250,000 people were killed in a series of outbreaks of violence and war across Liberia.\(^{56}\) Periods of conflict were followed by brief interludes of stability, only to be succeeded again by further violence. While the Liberian civil war is often described as an ethnic or factional conflict, it was in fact characterized by a multi-layered struggle stemming from both within

Liberia and from its neighboring countries across West Africa. The roots can be found in ethnic and economic tensions, and manifested in a divisive fight for power.

By December of 2003, approximately 340,000 Liberian refugees were spread across West Africa. An additional 500,000 remained as IDPs within Liberia, some in IGO-supported camps and some with relatives or in informal settlements. In the two decades that the war persisted, the number of refugees fluctuated as people fled the country, returned home and then were forced to flee again. As the direct neighbors of Liberia, Guinea, Cote d’Ivoire and Sierra Leone experienced the highest numbers of refugees, followed by Ghana, Nigeria and Gambia. The table to the right shows the approximate distribution as determined by UNHCR.

<table>
<thead>
<tr>
<th>Country of Asylum</th>
<th>Number of Liberian Refugees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guinea</td>
<td>149,000</td>
</tr>
<tr>
<td>Cote d’Ivoire</td>
<td>74,200</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>67,200</td>
</tr>
<tr>
<td>Ghana</td>
<td>42,400</td>
</tr>
<tr>
<td>Nigeria</td>
<td>6,000</td>
</tr>
<tr>
<td>Gambia</td>
<td>750^57</td>
</tr>
</tbody>
</table>

4.1.2 Context: Life at Buduburam

Buduburam refugee camp was established in 1990 following the onset of the first Liberian civil war. Supported by UNHCR, Buduburam emerged as one of the oldest camps in Africa as the violence in Liberia continued and more refugees fled to Ghana. By 2003, this formerly small camp one hour outside of the Ghanaian capitol had grown to house 40,000 Liberian refugees and was spread across approximately two miles. UNHCR and WFP initially provided aid and food to the refugees, however, over the years the camp became increasingly self-sufficient. By 2007, the camp included a number of primary and secondary schools, a clinic and a small market. Despite these advances, however, the refugees continued to rely on trucked water, had extremely limited access to sanitation facilities and electricity, and had few options for employment.

4.1.3 Civil Society at Buduburam

As of June 2007, there were a number of CSOs actively working at Buduburam. Like many camps, Buduburam had its own Welfare Council, Tribal Leaders forum, and many smaller community-based organizations and cooperatives. In addition, there were two grassroots organizations that had been founded by Liberian refugees. The first, Children’s Better Way, managed a variety of education, WASH, and outreach programs. The second, Population Caring Organization, worked primarily with peace and reconciliation efforts, as well as preparing reports on the status, concerns and needs of refugees at the camp.

4.1.4 The Repatriation Program

With the end of the second Liberian civil war in 2003, UNHCR began a multi-year, regional repatriation and reintegration program for the 340,000 refugees that remained outside of Liberian borders. As part of


^58 Ibid.
the program, UNHCR supplied transport from the asylum country to Liberia and provided a four month stock of food; basic NFIs such as shelter materials, jerry cans, buckets, and soap; livelihood support through agricultural tool kits and small cash grants; and information about HIV/AIDS. Additionally, UNHCR worked in local Liberian communities on infrastructure projects with the hope of easing the transition of refugees back into their original homelands.\(^5^9\)

When the project was first envisioned in 2003, it was decided that it would run between October of 2004 and June 2007; it aimed to assist the repatriation of 203,000 refugees by the end of 2006, and estimated that a further 140,000 would likely return on their own.\(^6^0\)

It remains unclear what measures UNHCR took to determine what would be included in the repatriation program. Neither of the CSOs at Buduburam was consulted, making the local organizations feel marginalized and isolating the refugee population at the camp. Though UNHCR’s own assessments were conducted, the refugees at Buduburam were unaware of this process and felt excluded from decision making.

### 4.1.5 Levels of Success

By the end of its program in 2007, UNHCR had assisted the repatriation of approximately 105,000 Liberian refugees from across West Africa. According to UNHCR, half of these persons were from Ghana, and the vast majority of those from Buduburam camp.\(^6^1\) While UNHCR frequently holds this figure up as a success, it often fails to acknowledge that this was only half of the intended target. By 2007, Ghana was supposed to have just over 4,000 Liberian refugees remaining within its borders.\(^6^2\) Instead, approximately 38,000 continued to live at Buduburam. Given this, one must wonder where the 50,000 refugees who supposedly returned from Buduburam truly originated – or if that many even returned at all.

At Buduburam, refugees avoided the repatriation program for a variety of reasons. Many felt that the compensation was too small. Others were concerned that though they were given food, they would have no materials with which to cook it, or a home to cook it in. Others still worried that the seeming amnesty granted to war criminals would allow for a renewed outbreak of violence. While some of the concerns were issues UNHCR would be unlikely to resolve to the satisfaction of the refugees (i.e., demands for significantly higher cash grants), many of the problems had more to do with the refugees’ perception of the program and lack of understanding of the available resources.\(^6^3\)

### 4.1.6 Aftereffects

When UNHCR concluded the repatriation program in 2007, the consequences were severe. As the camp was no longer supported by an IGO, the refugees lost their official refugee status and became, for all intents and purposes, illegal squatters. Not welcome in Ghana, not welcome in a third country, the

\(^5^9\) Ibid.  
\(^6^3\) Firsthand research, Buduburam Refugee Camp, July-September 2007.
refugees had little choice but to return to Liberia. Without the support of UNHCR, however, this was a near impossibility.

On the 19th of February, 2008, approximately 600 women, many of whom were carrying their children, lined the main road leading through the camp to demonstrate against the termination of the repatriation program. While the protest was peaceful, the Ghanaian government saw the women as a threat and instructed the military to detain them. 630 women and children were brought to a detention facility in the eastern part of Ghana, where they were held until UNHCR could secure their release. On the morning of the 22nd of March, an additional 70 people were arrested from the camp. Thirteen refugees were subsequently deported to Liberia, much to the alarm of the international community.64

As tensions continued to rise between the refugee community and the Ghanaian government in 2008, UNHCR determined it was necessary to launch a new repatriation program for the remaining refugees to provide them with a safe exit from the country. While the desperate circumstances led to higher numbers of refugees returning, the entire problem could likely have been avoided had there been an improved strategy in the 2004-2007 attempt.

4.1.7 What Went Wrong?

Despite UNHCR’s value of a “community-based approach,” such a methodology was notably lacking in their planning and implementation of the voluntary repatriation program. Although UNHCR knew that there were two CSOs active on the camp, neither was consulted about what was hampering the repatriation efforts. Similarly, while participatory assessments may have been conducted in the initial planning phases, they were absent in the later stages of the project. UNHCR had no presence in the camp, and therefore had no way of knowing the concerns of the refugees.

One of the CSOs, however, had been carrying out extensive assessments of what was preventing the refugees from returning home. Not only did Population Caring Organization (PCO) have this information, but it tried multiple times to meet with UNHCR to discuss the problems. Unfortunately, PCO had little success in arranging a meeting with UNHCR, and the knowledge that could have benefitted UNHCR’s programming was lost.65

Minor changes to the program, or even an effective information campaign, could have addressed many of the refugees’ concerns and avoided many of the program’s problems. Had these issues been addressed, UNHCR would undoubtedly have had significantly higher return rates than the figures they saw. Instead, UNHCR was forced to start a second, costly operation to support the refugees who had not returned the first time. CSO staff became frustrated by the seeming lack of respect for their knowledge, and the IGO-CSO support network became fractured.

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4.2 Counter-Trafficking in the Western Balkans

4.2.1 Background: The Balkan Wars

Between 1991 and 2001, the Balkan states of Yugoslavia, Bosnia and Herzegovina, Serbia and Montenegro, Kosovo, Albania and Macedonia experienced nearly constant conflict. Hundreds of thousands were killed and millions displaced as the war spread first through Bosnia and Serbia, and later into Kosovo and Croatia. Mass exoduses of refugees were followed by some of the fastest returns in history, and emergency humanitarian operations and IGOs were challenged to adapt to the uniquely difficult circumstances surrounding aid delivery.

The peacekeeping failures during this period are well-known; the harrowing tales of Sarajevo and Srebrenica will likely remain forever scarred in the memories of anyone who watched television during those periods. Less discussed, however, are the long-term implications that followed from the political vacuum and economic decline precipitated by the violence. After a decade of instability and conflict, much of the population had been forced in and out of displacement, leaving assets and livelihoods in their wake. With little resources at their disposal and in an environment largely characterized by violence, trafficking took hold with relative impunity. Poverty necessitated many people to look for jobs in neighboring countries under desperate circumstances, a desperation that led many women unknowingly into the grasp of traffickers. As poverty affected the population and the officials alike, corruption among police and federal authorities allowed trafficking to continue largely unchecked.

4.2.2 Context: Post-War Trafficking in the Balkans

It is impossible to know exactly how many people are trafficked each year. During the period of the IOM counter-trafficking program in the Balkans (May 2001 to December 2002), it can be estimated that over 300,000 people, mostly women and children, were trafficked in the region. According to the Organization for Security and Cooperation in Europe (OSCE), in the years leading up to the IOM program approximately 200,000 people were trafficked in the Balkans annually. Despite the typical media portrayals of women being blindfolded and thrown in the backs of vans, an IOM study in one major city showed that only 12 percent of trafficked women were forced into trafficking through kidnapping. Over half believed they were migrating to legitimate, well-paid jobs.

Once in the hands of traffickers, women endure conditions that have been likened to modern-day slavery. They are forced onto streets and into clubs to work as prostitutes, told that they will be receiving compensation that never arrives. Traffickers often conjure a “debt” owed for transporting a person across the border, a debt that essentially binds them into servitude as the amount due rises and changes. The women and children are given drugs and alcohol to make them numb and less likely to escape, and create a dependency that the trafficker controls.

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4.2.3 Civil Society in Bosnia and Serbia

Civil society in the Balkan states has been very active in combating trafficking. Following years of conflict and high rates of domestic abuse, these small organizations are well equipped to manage complex issues of trauma and violence. Among the organizations are the following:

- **ASTRA**: Prevention and education campaigns, SOS hotlines
- **Counselling Against Family Violence**: Counseling, awareness, emergency shelter
- **Lara**: Counseling, medical and legal support, emergency shelter
- **La Strada**: Referrals, shelter/safe houses
- **International Forum of Solidarity**: Shelter, assistance to males and LGBT

Each of these organizations is based in either Bosnia or Serbia, but has built networks that extend throughout the Balkans and allow for sharing of information and resources. ASTRA, for example, not only convened a conference to improve the communication between the major counter-trafficking NGOs, but works with 40 smaller women’s groups to ensure communication at all levels. These five CSOs have also been the primary local counterparts for IOM’s regional counter-trafficking program in Bosnia and Serbia.

4.2.4 The Counter-Trafficking Program

In recognizing the extent of the trafficking problem in the Western Balkans and in realizing its effect on the trafficking situation in the greater region, IOM determined it would begin a 12-month program designed to, “in cooperation with other international organizations, facilitate the orderly, safe and dignified return and reintegration of 1,120 trafficking victims stranded in the Balkan countries.”

The SIDA-funded program was initially designed to cover Albania, Bosnia and Herzegovina, Serbia and Montenegro, Kosovo, and Macedonia. It was later expanded to include Croatia.

The program encompassed a number of different elements. As the primary goal was to promote a “safe and dignified return” to the country of origin, much of IOM’s efforts were directed towards assisting the victims to receive any necessary treatment, and then helping them to exit the country promptly and return to their families. This process involved a number of other actors, including district and federal police forces, local shelters and CSOs, and government and judicial officials.

Most women were initially identified through bar raids conducted by either the local police or Stability Pact Task Force (SPTF). Following a raid, the women identified were asked whether they wanted to return to their country of origin. If the answer was yes, the women signed an IOM document identifying them as having been trafficked and gave a statement, followed by a number of interviews. They were then transferred either to a detention center or, once IOM is present, to a shelter administered by either IOM or a local CSO. At the shelter the women receive medical and psychological assistance, and depending on their length of stay, educational and vocational training. The women were eventually sent back to their home countries. They were given a grant of 150 USD, had their passports stamped with a

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"denied re-entry" note for the country they were leaving, and received an IOM bag so they could be identified by IOM staff upon arrival in their home country airport. A number of subsequent reintegration activities were carried out there.74

4.2.5 Levels of Success

Despite the program having been extended by eight months and another country added, the IOM counter-trafficking program fell far short of meeting its targets. Out of the 1,120 people that were supposed to receive support, only 763 did – 68 percent of the intended beneficiaries. A further 163 women and girls received temporary assistance in a shelter, but refused further involvement with IOM.75 A smaller number of women and children also sought support in returning to their countries of origin but declined IOM assistance.76

4.2.6 Aftereffects

As IOM has conducted little research into why the figures were so low77 it is difficult to know the full extent of the aftereffects. A number of factors point to potentially damaging outcomes however. Because only those women who were willing to return to their countries of origin received assistance, an exorbitant number of trafficked women were returned to the hands of traffickers following bar raids, or were incarcerated in detention centers to be treated like criminals instead of victims. In these cases, the women were not asked why they did not want to return, and were at times sent back to even more dangerous conditions than that of being trafficked. Potential flaws in the IOM program that dissuaded women from becoming involved were not considered. Because of details such as being told to carry an IOM bag, the trafficked women also became more susceptible to identification and re-trafficking.78

4.2.7 What Went Wrong?

Following the failures of the IOM program, SIDA commissioned an evaluation of the counter-trafficking program to determine what went wrong. Its first conclusion: IOM had failed to consult effectively with local NGOs and make use of their expertise.79 Despite IOM’s recognition of the value of NGOs, this has not, in this instance, translated into practice. As part of the SIDA study, the evaluators contacted some of the CSOs that had been involved in the program and asked for their opinions on the IOM approach. The criticisms were many, a few of which are described below:

- IOM’s dependency on local officials to identify trafficked women resulted in significantly lower numbers than would have been expected had there been a more thorough vetting of the officials. Bar owners could find out easily when their bar would be raided and would hide the women and/or pay off the police.80
- The interview process for a woman identified as trafficked was often unduly traumatizing; in Belgrade women were interviewed three times prior to being admitted to the program. There

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74 Ibid, 28.
75 SIDA, “IOM Regional Counter-Trafficking Program in the Western Balkans,” 55.
76 Ibid, 90.
77 Ibid, 56.
78 Ibid, 73.
79 Ibid, 8.
80 Ibid, 27.
was a clear need to consolidate interviews so as not to put women under additional unnecessary stress. 81

- IOM staff was not trained on proper techniques for dealing with traumatized persons until the last month of the program’s duration. Local CSOs had extensive experience in this area but were not consulted. 82

- IOM’s vocational training did not take into account the special circumstances of the women. Women were trained in hairdressing and giving manicures without consideration that they might find it difficult to touch another person after having been exploited. 83

- Women were mandated to attend a psychiatrist who was male, despite the trust and personal issues this caused psychologically. 84

- Carrying an IOM bag through the airport and to their home community identified women to traffickers and made it known to friends and family that the women had been trafficked. The result is often a damaging stigma. 85

- Receiving a stamp denying re-entry to the second country meant women had little escape options should they need to flee from their homes.

Each of these issues, while perhaps seemingly minor, acted as a deterrent for trafficked women to become involved in the program. If a woman learned that should she admit to being trafficked, she would undergo multiple interviews and medical exams, and by carrying the IOM bag have her experience advertized to her home community, she would be much less likely to speak out about her experiences.

Local CSOs recognized these issues. As has been highlighted through the SIDA evaluation, however, IOM failed entirely to recognize the expertise of its CSO partners. Furthermore, the view of the CSOs as mere “service providers” and IOM’s overbearing approach limited the extent to which the CSOs could act independently to correct the problems they identified.

4.3 Lessons Learned

Although the UNHCR repatriation program and the IOM counter-trafficking program were in many ways very different, both suffered from largely the same problem: a failure to understand aspects of the local context that were critical to the programs’ success. In each case, the number of beneficiaries assisted was severely diminished as a result of these programmatic issues and the lack of consultation with knowledgeable parties (namely CSOs). What is worse, the problems that occurred were, in both cases, largely avoidable had the proper consultation taken place. The remainder of this chapter examines some of the lessons that can be extrapolated from these two cases.

Regardless of how humble the appearance of the CSO (and sometimes because of it), CSOs have insights that can greatly enhance the success of a project – or in some cases, prevent its failure. While there may be a tendency among major IGOs to view CSOs as small “service providers,” too basic to have any substantial expertise, these local organizations often have insight into the local context that can significantly improve the outcome of a program. CSOs are part of the community and have trust and access to information

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81 Ibid. 64.
82 Ibid.
83 Ibid. 68.
84 Ibid. 94.
85 Ibid. 73.
that is sometimes unavailable to IGOs. In Buduburam, one meeting with the local CSO PCO would have highlighted easily solvable problems with the repatriation program that could have greatly improved its success. Had it been made clear to the refugees that cooking materials were already provided as part of the program, it is impossible to say how many more women would have considered repatriation. CSOs in the Balkans had extensive experience working with traumatized persons and could have assisted in making minor changes to exponentially reduce the stress for the incoming victims of trafficking. Instead, both programs failed to assist anywhere near the number of intended beneficiaries.

**Failing to recognize the expertise of CSOs or understand the intricacies of the local context can lead to long-term problems for both the refugees and the organizations supporting them.** Both the Liberian repatriation program and the Balkans counter-trafficking program saw substandard project outcomes as a result of avoidable problems. In both cases, CSOs were present that had information and suggestions that could have repaired these issues and very likely recovered the success of the program. At Buduburam, the perception of an inadequate repatriation package meant that many refugees did not return home. As a result, the refugees required prolonged assistance in the host country, continued to be dependent on NGOs and the Ghanaian government, and eventually necessitated a second UNHCR-supported program. The short-term program failure caused a long-term problem. Similarly in the Balkans, the insensitive and uninformed elements of the counter-trafficking program were sufficient to dissuade women from becoming involved. At some point in the future these women will require assistance however, potentially after they have been exposed to further violence and health dangers and will need far more extensive support.

**Consultation failures can endanger the personal safety of the beneficiaries and the security of the region.** One of the guiding principles of aid work is the concept of “do no harm”—that is, aid should never do more to damage the community than it does to assist it. While it can be assumed that no IGO would intentionally cause harm to a population, a failure to consult the necessary parties and a lack of understanding can inadvertently lead to that same result. The closure of the repatriation program at Buduburam led to protests that culminated in the incarceration of 600 women and children and caused tensions between Ghana and the Liberian refugee population. Hostilities became so precarious that UNHCR was forced to step in. While security had largely been a non-issue at Buduburam, it suddenly became the top priority. The IOM counter-trafficking program posed similar dangers for personal security. By using an IOM bag for identification, traffickers could recognize the trafficked women just as easily as the IOM officials. Once IOM and CSO involvement with the women diminished, traffickers knew who the women were and could simply pick them back up again. Having escaped trafficking once, the women then had to experience the same trauma all over again.

**Lack of consultation can result in increased costs for the organization.** IGOs and NGOs alike operate within a limited budget. With each program failure, the cost to the organization increases. While the impacts may not be readily apparent in the immediate period, over subsequent years the organization will likely continue to encounter the same recurrent problems that demanded attention in the first place. When the organization decides to revisit the issue, the problems will have grown and manifested, and addressing them will often be much more costly. In Buduburam, had UNHCR consulted the local CSOs and rectified the problems with the repatriation program in the beginning, a second program may not have been necessary. Instead, UNHCR was forced to pay for yet another expensive program two years later. With the counter-trafficking program, the women who did not receive help from IOM will likely continue under dangerous circumstances until finally they seek assistance. Once that

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occurs, the physical and emotional issues will require much more comprehensive support than had the woman left early on, and the assistance provided to her will likely be much more costly.
Case Studies: Implementation Successes

The following chapter examines two cases in which consultation with local CSOs improved project appropriateness, effectiveness, and overall levels of success. The first case looks at a UNHCR livelihood support program for Montagnard refugees where culture and traditions were recognized and made a central facet of the strategic approach. By learning from a local grassroots organization, UNHCR succeeded in creating a program that improved the quality of life in the Montagnard community. The second case considers an IOM mission to improve the healthcare of conflict-affected and vulnerable populations in Somaliland. IOM engaged the help of the Somali diaspora network and used its expertise to enhance the targeting and efficacy of the program. These two cases not only illustrate the value of meaningful consultation and engagement with civil society, but also begin to draw out successful strategies that can be applied to future programs.

5.1 Livelihood Support for Vietnamese Montagnard Refugees

5.1.1 Background: The Montagnard and the Central Highlands

The Montagnard, literally “the people of the mountains,” are a small indigenous minority in the central highlands of Vietnam. As a primarily Christian community, the Montagnard have been in conflict with the Communist Vietnamese government for nearly half a century. It is estimated that between 1965 and 1972, up to 25 percent of the highland population lost their lives. According to Charles Keys, an expert on ethnicity in Vietnam, the massacres that took place against the central highlanders during this period

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must be considered borderline genocidal. In 1976, the Vice-Minister for culture declared that it was "necessary to eradicate all outmoded customs," further inciting hatred for the Montagnards and continuing the cycle of violence.

While international attention drifted away from Vietnam following the end of the war in the 1970s, the persecution of the Montagnards did not stop. Today the Vietnamese government uses more subtle tactics to displace the Montagnard, such as seizing their land, removing elders to secluded villages, and prohibiting freedom of movement, prompting some to call this a new "cultural genocide." Over the 20th century, it is estimated that 85 percent of Montagnard villages were either destroyed or abandoned, the Montagnard forced to flee into neighboring countries. Reports of abuse and torture continue even in 2011, leaving many refugees unwilling to return home.

5.1.2 Context: Life in Cambodia

Following continued violence and persecution, hundreds of Montagnards fled into Cambodia throughout the 1990s and 2000s. The official number supported by UNHCR has averaged around 1,000 however, it is estimated that many more are hiding in dense jungle areas without IGO assistance.

The situation for Montagnard refugees in Cambodia is tenuous at best. Despite numerous agreements between Cambodia, Vietnam and UNHCR, refugees continue to find themselves unwelcome in their home country as well as in their country of temporary asylum. Cambodia has consistently demonstrated its unwillingness to provide protection for Montagnard refugees, agreeing to house them only for a brief period until they can be repatriated or resettled. This pressure has presented challenges for both the refugees themselves, and for UNHCR in finding ways of adequately assisting them.

In an attempt to mitigate these various concerns, UNHCR established a number of "protected sites" in Phnom Penh. These facilities, often nothing more than a large concrete building, act as homes to the refugees until a more durable solution can be established. Refugees in these compounds are entirely dependent on UNHCR for food, medicine and other essential items, and their ability to seek employment or travel outside their residence is highly restricted.

5.1.3 Civil Society at Montagnard Sites

Given the relative isolation and transient culture of refugee life in Cambodia, civil society was never allowed to grow and flourish as it could have in a slightly more stable environment. Though the traditional networks and structures have remained despite displacement, elders and tribal leaders have found themselves acting in a more informal context rather than within an organized system. At least one Cambodian NGO, the International Friendship Development Organization (IFDO), has been working...

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88Ibid, 181.
89Ibid, 182.
91Keyes, 176.
93UNHCR, “Montagnard Community Development Initiative Cambodia.” Available online at http://www.unhcr.org/4ad72fbd0.html (Accessed April 24, 2011).
with the refugees however, and has sought out ways to support the vulnerable population despite the constraints placed on the refugees’ access and movement.  

5.1.4 The Livelihood Program

In October 2008, UNHCR began a program supporting livelihood and skills training for Montagnard refugee women at their sites in Cambodia. More familiar with local traditions and customs, the Cambodian organization IFDO had established a small project seeking to assist in livelihood development for the refugees. Through this program, IFDO provided yarn to the women to be used for crocheting and weaving. In talking with IFDO and seeing how popular the program was among the refugees, UNHCR determined that a similar, expanded project would permit more of the Montagnard women to participate.

In the 10 months following the initial launch of the program, UNHCR provided materials for crocheting and weaving and organized a semi-formal network through which the women could learn different skills. The women were broken into groups of 10, each group with their own more experienced leader, and learned to make a variety of items such as scarves, hats and children’s clothes. While the women were not able to sell the items within Cambodia, they gained knowledge and experience that could be used upon their return home or in resettlement to a third country.

5.1.5 Levels of Success and Aftereffects

The UNHCR livelihood program was effective on many fronts. Not only did the program achieve its immediate goal of providing skills-training to the women, but it also had a number of social benefits. As the women are traditionally responsible for watching over children, mothers frequently brought their children to the groups. Doing so allowed the mothers to care for the children collectively and reduced the stress placed on individual mothers. Likewise, given the strong constraints placed on refugees in Cambodia, these groups provided the women with an outlet for their stress and boredom, and helped to ease feelings of isolation. The groups acted not only as a skills-training class, but as a support network where women could share their thoughts and concerns, and feel engaged as part of a larger community. Finally, because the program was rooted in local traditions and customs, it allowed younger generations to learn about their heritage, even if they had grown up in a refugee context and had never experienced their culture firsthand.

5.1.6 What Went Right?

The success of UNHCR’s livelihood program can be derived from a few different factors. By consulting with a local CSO and learning what had succeeded in the past, UNHCR was able to use the CSO’s experience and knowledge to design a program that would function effectively despite the complex environment. Given the many limitations placed on the refugees’ movement and access to information,
materials and technology, the challenges to establishing a meaningful program were significant. Through following a truly community-based approach, however, UNHCR accomplished just that.

Because the core of the livelihoods program was structured around local customs like crocheting and weaving, and local practices, like learning from tribal elders, the program succeeded where more traditional skills-training programs might have failed. Had it not been for the understanding of the local context and insights into coping with the many constraints the refugees faced, UNHCR might not have received the positive feedback they did. While this understanding came from a number of sources, the local CSO provided critical support to UNHCR.98 Not only did UNHCR consult the refugees and the CSOs assisting them, but used the knowledge gained through consultation to benefit programming. UNHCR was able to improve both the short-term and long-term quality of life for the women involved and, by working through local elders, was able to keep its budget limited to the basic costs of raw materials.

5.2 Strengthening Healthcare in Somaliland

5.2.1 Background: War in Somalia

Somalia has come to be synonymous with the definition of a failed state. Following the collapse of Siad Barre’s military dictatorship in 1991, Somalia descended into a period of violence that would not see its end for at least two decades. Today Somalia is characterized by factionalized anarchy driven loosely by religious tensions, and perhaps more directly by a struggle for power and control of trade. Fighting is intense throughout much of the country, but is most concentrated in Mogadishu where the Transitional Federal Government and Al Shabaab engage in what can only be described as street wars. The clan-based culture has been exploited and manipulated to create political enemies, resulting in high mortality rates and continually increasing displacement levels.

In the six weeks prior to the writing of this chapter, UNHCR reported that 33,000 Somalis have been newly displaced within Somalia.99 This figure is marginal, however, compared to the 200,000 that have been displaced over the past three months, or the two million already spread across East Africa.100 Exact figures of mortality rates are difficult to determine given the lack of reporting from Somalia and the challenges aid agencies face in gaining and maintaining access. NGOs are frequently expelled from the country, adding further strain to an already severe humanitarian crisis.

5.2.2 Context: Life in Somaliland

When Siad Barre fled in 1991, the population of Somaliland decided to break away from Somalia’s conflict and control and secede as its own nation. Today a semi-autonomous state, Somaliland benefits from a functional economy fostered by a major trading port, and a political system that remains largely peaceful and stable. While it has yet to be universally recognized by the international community,
Somaliland exists completely independently of Somalia, with its own government, currency and infrastructure.

Recognizing this oasis of calm in the midst of such pervasive violence, many of the displaced persons fleeing conflict in the southern parts of Somalia have escaped north to Somaliland. In July 2010, UNHCR estimated that approximately 67,000 displaced Somalis were seeking shelter in Somaliland.\(^{101}\) Most of these displaced persons live in temporary settlements or have attempted to integrate into local communities and towns. Because Somaliland has declared itself an independent state however, the Somaliland government does not recognize the Somalis who have fled to this region as IDPs. Instead the authorities consider the Somalis illegal immigrants, making it difficult for these vulnerable persons to receive official assistance.\(^{102}\)

While the situation in Somaliland is significantly better than in the rest of Somalia, Somaliland still suffers from weak infrastructure and a general “brain drain.” The years of conflict both within Somalia and in its neighbor countries has caused many educated Somalis to migrate to other parts of the world. As a result, infrastructure has not developed and there is a lack of qualified professionals such as teachers and doctors.\(^{103}\)

5.2.3 Somali Civil Society

Civil society in Somalia faces many challenges. While local organizations have fared better than international groups, the conflict has created a hostile environment to large- and small-scale aid organizations alike. Al Shabaab, one of the two major factions, expelled three aid agencies in 2010, and shows no signs of abating this practice in the future. INGOs have found local partners to help them implement projects, however, and continue to rely on them heavily for information, access and assistance in ensuring that humanitarian supplies reach those most in need. Because of the reduced violence, Somaliland has a stronger civil society than southern Somalia, where the fighting has led to an environment extremely hostile to everything except warfare.

While civil society faces many challenges within Somalia, the large numbers of refugees and asylum seekers has led to a strong diaspora community. Educated Somalis across Europe and North America are valuable sources of information for aid agencies, specifically those organizations that must design programs to support Somalis without the benefit of being able to travel to Somalia themselves.

5.2.4 The Healthcare Project

In 2008, IOM began a 12-month project focused on strengthening the healthcare services in Somaliland. Known as MIDA Health, the project aimed to identify gaps in the existing health services in Somalia, train healthcare professionals, and target marginalized groups such as women and refugees.\(^{104}\) Rather than opening new clinics to support the increasing demand, IOM hoped to instead build up existing

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\(^{103}\) Interview with Edna Adan Ismail, Director Edna Adan University Hospital – Somaliland, IOM/MIDA Health local partner. August 15, 2011.

medical facilities. Given the complexity of the local context, both with the conflict and the many cultural and religious considerations, it was evident that any program would need to be highly informed of local issues to be successful.

While IOM had the resources to fund the project, it alone did not have the contextual knowledge required to make the project both effective and sustainable. For the health system to be meaningfully strengthened, its weaknesses needed to be analyzed by experts with both medical knowledge and an understanding of the local environment. Likewise, the initial steps for repairing those weaknesses and highlighting what was needed for the future had to originate from someone from within the community.

IOM recognized the potential of the diaspora community in helping to address these issues. Over the 12 months the program ran, IOM contracted 22 Somali medical professionals to visit Somaliland, make assessments of the weaknesses in current efforts and provide preliminary training to medical workers at the local hospitals.\(^\text{105}\) Once the Somali consultants had left, the hospitals and local CSOs began long-term work on improving healthcare in Somaliland with the support of IOM and other IGOs.

### 5.2.5 Levels of Success and Aftereffects

The MIDA Health project was broadly regarded as a success. For IOM, consulting with the Somali diaspora ensured that funding was targeted in the most effective way possible. IOM could be confident that time and money was not wasted on efforts that were unnecessary or inappropriate. For the local institutions, meeting with Somali professionals allowed for a frank discussion of needs and practices. Host hospitals and clinics were desperate for technical expertise, but more importantly, for assistance from individuals with knowledge of their language, customs and culture.\(^\text{106}\) The Somali consultants could see problems from both a cultural and medical perspective, and could offer advice for the local hospitals and IOM that took into account the more delicate issues of the Somali context.\(^\text{107}\)

The initial investment in consulting with members of the Somali diaspora paid off long term. Through the consultations with the Somali professionals, IOM was able to gain a better understanding of where and how to direct their efforts going forward. Not only did the individual program benefit, but IOM also decided that a similar program model could be applied to other sectors. MIDA has since expanded and now includes projects in human rights, law, governance, human resources, and information technologies.

### 5.2.6 What Went Right?

In executing the MIDA Health program, IOM successfully employed a series of locally-based strategies that significantly improved overall success rates. IOM worked through two separate levels of civil society: the Somali diaspora and local institutions in Somaliland. First, consulting the diaspora allowed for improved targeting and an enhanced understanding of how health programming had to take into


consideration local issues such as the role of religion and gender. Second, by working through pre-existing institutions like hospitals, IOM prevented duplication and supported infrastructure rather than replacing it. In this case, CSOs were employed in two different ways: as consultants and as operational partners. This dual approach allowed IOM to develop a successful program that was strategically designed in the initial stages through input from Somali professionals, and could be sustained long-term through the engagement of local institutions. If in the future IOM is expelled from the region, as so many other NGOs and IGOs have been, the information learned through the consultations and the relationships formed with local institutions will likely remain strong enough to sustain the program.

5.3 Lessons Learned

The Montagnard livelihood program and the Somaliland healthcare projects were in many ways very different. What brings these two projects together, however, was their successful use of CSO knowledge in support of the overall efficacy of the UNHCR and IOM projects. Despite the varied circumstances which provoked the displacement and the different conditions of asylum, CSO consultation was able to contribute to programming that could more directly and effectively address the needs of the affected populations. The rest of this paper considers some of the core lessons that can be extracted from these two success stories.

CSOs can have a variety of structures and can be useful in their differences. The CSOs consulted by UNHCR and IOM were both somewhat atypical for a refugee setting. While there is often an assumption that a civil society organization must originate from within the refugee community, this is not always the case – nor does it need to be. In Cambodia, Vietnamese refugees were kept in almost complete isolation, an environment that is not conducive to the formation of CSOs. The neighboring Cambodian communities were thriving with CSOs, however, and having worked with the Vietnamese for decades, they had valuable information to share with UNHCR. Because the Cambodian CSO IFDO had been in the area for such an extended period, they not only could assist with providing a contextual understanding of the refugees, but also their larger place in Cambodia – something a new Vietnamese CSO may have been unable to do. In Somalia, civil society was enduring such intense pressure that there were few opportunities for collaboration. While diaspora networks are not traditionally thought of as part of the CSO spectrum, in practice they can often function in much the same role. By consulting with the Somali diaspora, IOM was able to gain both a local perspective, and knowledge of technical issues. IOM benefitted from a cultural understanding as well as an understanding of how those issues relate to medical needs.

Relationships with CSOs can take many forms and may overlap and change. When discussing community-based initiatives, IGOs often refer to either local participation or partnership. Very little acknowledgement is made of the important relationships in between, or how CSOs may be consultants in one project and a partner in another. IFDO began its work with the Vietnamese refugees as a UNHCR implementing partner. It ran its own projects with the support of UNHCR. When UNHCR wanted to begin a livelihoods project however, IFDO acted as a consultant, providing advice on what had been successful for their projects in the past. In Somaliland, the diaspora professionals were both consultants and, in some cases, temporary partners. They helped to identify gaps, but also conducted short trainings.

Projects should be based on local practices and customs. CSOs can help to identify those cultural elements. Few IGOs would doubt the value of designing programs that complement traditional practices. The

108 Ibid.
challenge is to understand not only what those practices are, but how they can be applied to programming. In Cambodia, IFDO recognized that weaving and crocheting were an important part of Vietnamese culture, and could be used to support livelihood and skills training efforts. While more formal programs like teaching English were already in place, the success levels were low. IFDO encouraged UNHCR to pursue the handiwork program as being more contextually appropriate, and the results were significantly better. In Somalia, the religious, clan and cultural underpinnings carry immense weight and simply cannot be fully understood by someone who is an outsider. The Somali diaspora consultants were familiar with these sensitive issues and could use that background as a lens through which healthcare could be viewed and suggestions made on how to improve programs to reflect the cultural context.

A small but community-based program may be more effective than a large, externally-driven one. The two programs reviewed in this chapter were both relatively small. This is not to suggest that large programs cannot work, but rather to show that small programs can still be beneficial despite their more limited scope. A project that is effectively targeted and designed to reflect the local culture will often be more successful than a larger, generic program. The UNHCR program in Cambodia was effective not because livelihoods were so desperately needed, but because the training was culturally informed and based on pre-existing practices. Had UNHCR instead supported training in catering or some other similar task, it is unlikely that the women would have benefitted as they did. Approximately 60 people were targeted by the livelihoods program, and one can extrapolate that an additional five family members per participant will benefit from the women’s newfound empowerment and ability to contribute to the household income. In Somalia, the project needed to start small in order to later grow. IOM’s choice to target a few specific hospitals and clinics allowed it to learn from the success of the healthcare project, and later use a similar strategy for other programs in rights and governance.

What has worked before will often work again. Local CSOs have seen previous successes and failures. While the Somali diaspora consultants do not benefit from having been in the area to witness many project impacts, in Cambodia IFDO had spent many years working with Vietnamese and had seen strategies work and strategies fail. It was because of this wisdom and having executed a successful crocheting program before, that it could advise UNHCR on the benefits of conducting a similar project.

Programs can benefit from the information and trust given to CSOs. In many circumstances, people may feel more comfortable divulging problems and sensitive issues to someone within their community or from their culture rather than someone who is seen to be an outsider. The Somali healthcare project, for example, relied heavily on the Somali consultants having access to information and opinions that would have been challenging for an international staff member to gain. Patients at the hospitals or clinic staff likely felt more able to be candid with someone who understood their situation. That is not to say that this is always the case: there are undoubtedly circumstances in which people may feel judged by those within their communities and would prefer talking to an international staffer. Rather, including CSOs can provide a more well-rounded accrual of information for those who do prefer sharing with someone from their culture.
Mainstreaming the Successes

It is clear from the successful case studies and the formal UNHCR and IOM strategy papers that the foundation for meaningful CSO consultation is already in place. In programs where CSO participation has been conducted effectively, both organizations have seen significantly improved results. There are individuals and program teams who are already applying the principals of beneficiary participation and consultation in the field, and those projects are often the most contextually appropriate and successful at addressing the needs of the people. The implication of this is key: IGOs already have the knowledge and skills needed to improve program outcomes. Despite this, there have also been failures. What is needed now is a clearer understanding of what has worked in the past and how it can be applied in the future.

This following chapter builds on the lessons derived from the previous three sections and attempts to extract key points for IGOs in improving consultation moving forward. The suggestions here are designed to be general so that they can be applied across regions, sectors and organizations. In many ways these recommendations are basic: none of the information here is new. Instead, these points seek to reiterate what has seemingly been forgotten or fallen out of practice, whether because the concept was not adequately transferred from design to implementation, or because it was missing from the strategy in the first place. Regardless of which is the case, organizations need to begin seriously considering how to improve their consultation processes, and based on what was learned from these case studies, can do so though minor changes that are already within the scope of their project planning guidelines.
Consultation must truly be consultative. Many programs now require a certain degree of beneficiary participation. While this can understandably be challenging in a crisis environment, that consultation is essential in ensuring that the program adequately takes into consideration the local context and appropriately addresses the needs of the people. It is not enough for program staff to “consult” the public about a program by simply telling them what they are going to do; rather, the consultation must be a discussion, a two-way sharing of information in which the IGO staff can learn from the beneficiaries and use the information gained to improve programming. Following this logic, consultation should be proactively included as part of the planning process. Meeting with beneficiaries and CSOs after the plans are already in place deters meaningful influence, as any changes would need to occur retroactively. Consultation should be formalized as one of the first steps for every new program, prior to creating a logframe or reporting to the donors.

Consultation should take place with as wide a variety of actors as possible. As was seen in Chapter 3, the participatory system at present is largely designed around groups created by the assessors. CSOs, while respected as service providers and sometimes even implementing partners, have not yet been widely recognized for their value as consultants. Given what has been learned through the positive case studies, it is clear that improved consultation with CSOs can greatly enhance the success of a project. In order to achieve the best outcomes, participation and consultation should take place with the public at large as well as CSOs and any other community leaders or authorities who might have insight into the situation.

With an increasing shift towards the urbanization of the refugee complex, IGOs need to seek out non-traditional CSOs as new and alternative sources of information. Life as a refugee is changing. While a decade ago most refugees lived in traditional tented camps, today more and more refugees are moving towards immediate integration in local communities. Since job prospects and social services are often more available in urban areas, this shift is occurring largely in major cities and capitols. It is unclear how exactly CSOs will be affected given this reality. What is certain, however, is that IGOs will need to more actively seek out CSOs as they will be spread across a greater area. Likewise, resources such as diaspora community networks should be recognized as important potential sources of information and assistance. Working with CSOs in an urban area will require increased dedication from the IGOs as it will demand more effort in locating the CSOs, however it is vital to the success of the support provided that these consultations be made.

IGOs must recognize that CSOs have value even if they are not potential implementing partners. There is a tendency at the moment to view CSOs with an all-or-nothing perspective: either they are implementing partners or they exist completely independently of IGOs. IGOs must consider that even if a CSO does not qualify or want to be a formalized partner with the IGO, it can still be consulted and can be a useful source of information. Such CSOs could include small women’s groups or co-ops that have a specialized knowledge, or weekly town hall committees that can provide a broader contextual understanding.

IGO program staff should critically reflect on their assumptions about the local community and CSOs, be aware of how these perceptions affect their program choices, and take steps to mitigate the impacts of these perspectives. The UNHCR Community Participation document goes further than most in recognizing not only the negative impact assumptions can have, but identifying what some of those assumptions commonly are. Both at headquarters and in the field it is vital that program staff is constantly evaluating its mindset and actions to ensure that it is cognizant of how staff feelings affect their work. If, for example, a staff member believes all government officials to be corrupt, the person may miss an opportunity to learn from a potentially valuable community leader. This is not to say that there are not corrupt politicians, but rather than adopting a condemnatory mindset can have a highly detrimental effect on a program when unchecked.
**Risk of CSO bias should not deter consultation.** In every country there will be CSOs that are biased or have an agenda. Although the aid work mentality of remaining neutral causes many to dismiss CSOs that have an ulterior motive, this is not necessarily the best option. CSOs can be a useful triangulation tool. If there is concern about CSO bias, there should be similar concern about bias coming from traditional participatory assessments with the public. By gathering information from both sources (the public and the CSO), in addition to the information collected by the IGO or IGO network, a clearer picture of the true situation can be established. As long as the assessor is aware that the bias exists or at least has sufficient comparison information, the fact that a CSO has an agenda should not hinder the consultation. Talking to strongly affiliated sides can provide insight into an alternative perspective, and as long as the IGO is careful to keep its own actions neutral, that dialogue can be highly beneficial to the planning process.

**Where possible, consultation should take place at the location of the affected community.** No matter how much discussion takes place, IGO staff will learn more from five minutes in a refugee camp than an hour sitting in a meeting room at country headquarters. Program planning will be greatly enhanced if the policy makers and program staff are able to visit the field and view the conditions firsthand. Traveling to the site will also begin to build a relationship with the affected community and will be a stepping stone for improved communication and relations. Beneficiaries need to see that program leaders are concerned with their wellbeing, and visiting people in their own communities can be a useful tool in trust and confidence building. Having an understanding that is developed through face to face conversations with beneficiaries can greatly improve program outcomes.

**CSO and local authority consultation must take place as soon as possible following a disaster.** While in the immediate aftermath of an emergency or conflict it is understandably difficult to prioritize consultation (or sometimes to even physically reach the parties needed), it is of paramount importance to the future success of the project that all efforts be made to contact local organizations and authorities as soon as possible. Delaying contact will result in hostilities and perceptions of exclusion that will diminish the productivity of the relationship long-term. Likewise, small local groups can often act more quickly to gather information about their communities, data that will be more accurate and timely than that obtained by IGOs. Duplication of these efforts is a waste of valuable hours and resources that could be better spent in other areas.

**Consultation must be a continual process.** Crisis environments are constantly changing. What is needed in the first 48 hours is completely different from what is needed one week later, or one month after that. To ensure that programs are relevant and appropriate for the local community, consultations should not simply be made at the beginning of a project, but should be included throughout the project’s duration. Strategy should be adapted to reflect the changing needs of the population, and discussions with CSOs should be held to understand these shifting dynamics.

**To be effective, the inclusion of CSOs needs to be accepted and integrated into the approach by all levels of IGO management – from field staff to headquarters.** While one motivated person in the field can be a major asset to any programming team, the inclusion of consultation needs to be valued and encouraged systematically. Until consultation’s merit is understood at every level of leadership within an organization, discussions with CSOs will continue to be conducted on a convenience basis. This is not sufficient to ensure program success. Rather, consultation needs to be given a priority in every new project to be implemented.

**Learn from lessons of the participatory approach in development.** The development sector is far ahead of the emergency sector in understanding the importance of beneficiary participation in planning. While the contexts clearly have many dissimilar elements, the core practice of beneficiary-informed programming is the same. Because development has many more years of experience in local consultation, emergency programming teams
could learn from the successes and failures of development strategies. Most major IGOs have both a development and emergency department, providing a prime opportunity for intra-agency collaboration. Even if the development side has not yet fully included CSOs in their main participatory strategy, the emergency team may still benefit from understanding the consultation strategy more broadly. Likewise it may present an opportunity for the emergency department to advise the development team on the benefits of discussions with CSOs.

**Agencies must be more willing to acknowledge areas for improvement.** Donors should foster an environment in which admitting failure is welcomed rather than persecuted. Program staff can learn valuable lessons through the mistakes of others, as can other IGOs. As was discussed in Chapter three, in order to move forward in providing the best support possible, IGOs must begin reflecting on those practices that have been successful and those that have had weaknesses. In identifying programs that have not met expectations, staff has a responsibility to analyze what went wrong and attempt to correct those actions in the future. Without admitting when a program has failed there is no opportunity for improvements to be made.

**IGOs should look for innovative ways to enhance consultation and strategy planning.** IGOs must constantly seek ways to improve. As there is presently little formalized CSO consultation included as part of the project planning process, IGOs have much to gain by developing new approaches for beneficiary participation and project design. UNHCR has taken an important first step with the establishment of “multi-functional teams” that include members from different sectors as well as representatives from implementing partners. UNHCR could perhaps consider bringing in a representative of a local CSO as a member or consultant to this team. IGOs should resist failing to adapt because of policies or customary practices — policies can change and practices grow.
Conclusion

This paper has considered the ways two major IGOs include CSO consultation in their project planning processes. Despite numerous documents from each organization espousing the value of participatory approaches, it is clear that those principles and strategies have not yet been transferred systematically into practice. For the organizations to assist beneficiaries to their fullest potential, CSO consultation needs to be mainstreamed as one of the core components of every new project start-up.

If one were to judge all of UNHCR’s projects based on the approach and outcomes of the Liberian repatriation program, the result would be highly discouraging. Not only did the repatriation program fail to return even half of the total number it had planned, but the program’s closure caused such a high degree of discontent that it jeopardized the security of refugees in the entire region. Through looking at UNHCR’s other projects however, it is apparent that UNHCR does recognize the value of CSOs and has used their input effectively in many cases to achieve highly successful outcomes. The key is to learn from successes, like the Montagnard livelihoods program, and apply the lessons learned from those cases more methodically.

Like UNHCR, IOM’s focus must now be on ensuring that more programs follow the success of the Somaliland healthcare program and fewer fall into the traps experienced by the counter-trafficking initiative in the Balkans. It is clear that IOM has the official understanding needed to be able to implement CSO consultation more effectively, but the emphasis now needs to be on ensuring that that understanding is applied to practice in the field. CSO consultation must become the norm rather than the exception. This will take a concerted effort from field and headquarters staff alike.

These points are not just true for UNHCR and IOM however. Because most (hopefully all) international development and humanitarian organizations have the best interest of the beneficiaries in mind, all should be dedicated to self-improvement. It is clear from the case studies and the discussion of formal versus operational
participatory systems that IGOs can benefit significantly from implementing a consultative scheme more systematically in the field. Programs unquestionably benefit from a meaningful understanding of the local context, and CSOs can be a critical tool in developing this awareness. If adhered to rigorously, the recommendations described in Chapter 6 have the potential to greatly improve the project planning process and ensure that the aid provided to disaster-affected populations truly and effectively addresses the beneficiaries’ needs.
Appendices

Ethics Form

SCHOOL OF THE BUILT ENVIRONMENT, OXFORD BROOKES UNIVERSITY
2010/2011

RESEARCH ETHICS FORM E1BE FOR STUDENTS ON TAUGHT COURSES
Please read the Built Environment FormE1BE guidance notes at www.brookes.ac.uk/res/ethics/forms

Section A - You & your project
What is your name?
First name
S. Briggs
Surname

What is your student number?
100640606

What is your email address?
100640606@brookes.ac.uk

What is your supervisor's name?
First name
Richard
Surname
Carver

What is your supervisor's email address?
R.Carver@brookes.ac.uk

In which Department are you studying?
Architecture
Planning
REC

What course are you taking?
Development & Emergency Plans

What is the topic area of your research?
Civil Society & Programming

On what kinds of topics will you be collecting data from the participants in the research?
Info on CSE engagement in project planning

Section B - Your participants
What kind of participants will be involved in your research? (Please tick one - if more than one, then complete a separate form)

☑ Professional/management group
☑ Members of the general public
☑ Vulnerable individuals

Briefly describe these participants

UN, Tom: CSE staff

How many participants will be involved?
6-10

How will the participants be selected?
Position at org

Section C - Your data collection
When is your data collection likely to start?
6

What will be your method of data collection?
☑ In-depth interviews
☑ Telephone
☑ Face-to-face surveys
☑ Email
☑ Direct observation
☑ Post
☑ Other, please specify

What kind of data will you be collecting?
☑ Quantitative/statistical/numerical
☑ Qualitative/written/foot
☑ Images/drawings/maps

Will it be possible to avoid asking for personal data from the participants?
☑ Yes ☑ No

Will it be possible to ensure the participants are not being deceived in any way?
☑ Yes ☑ No

Will it be possible to ensure the participants remain completely anonymous?
☑ Yes ☑ No

Will it be possible to ensure the participants do not suffer any negative consequences?
☑ Yes ☑ No

Section D - Declaration
I declare that I will
- give all participants an information sheet conforming to university guidelines
- not contact any participant until my supervisor has approved my information sheet, research questions and methodology
- be sufficiently well-trained in necessary methods of data collection and analysis

Student signature
Date

Supervisor signature
Date

Research Ethics Officer signature
Date
Statement of Originality

This thesis is the result of my own independent work/investigation, except where otherwise stated. Other sources are acknowledged by explicit references.

Signed……………………Caelin Briggs Date………………August 24, 2011

I hereby give my consent for my thesis, if accepted, to be available for photocopying and for inter-library loan, and for the title and summary to be made available to outside organizations.

Signed……………………Caelin Briggs Date………………August 24, 2011
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