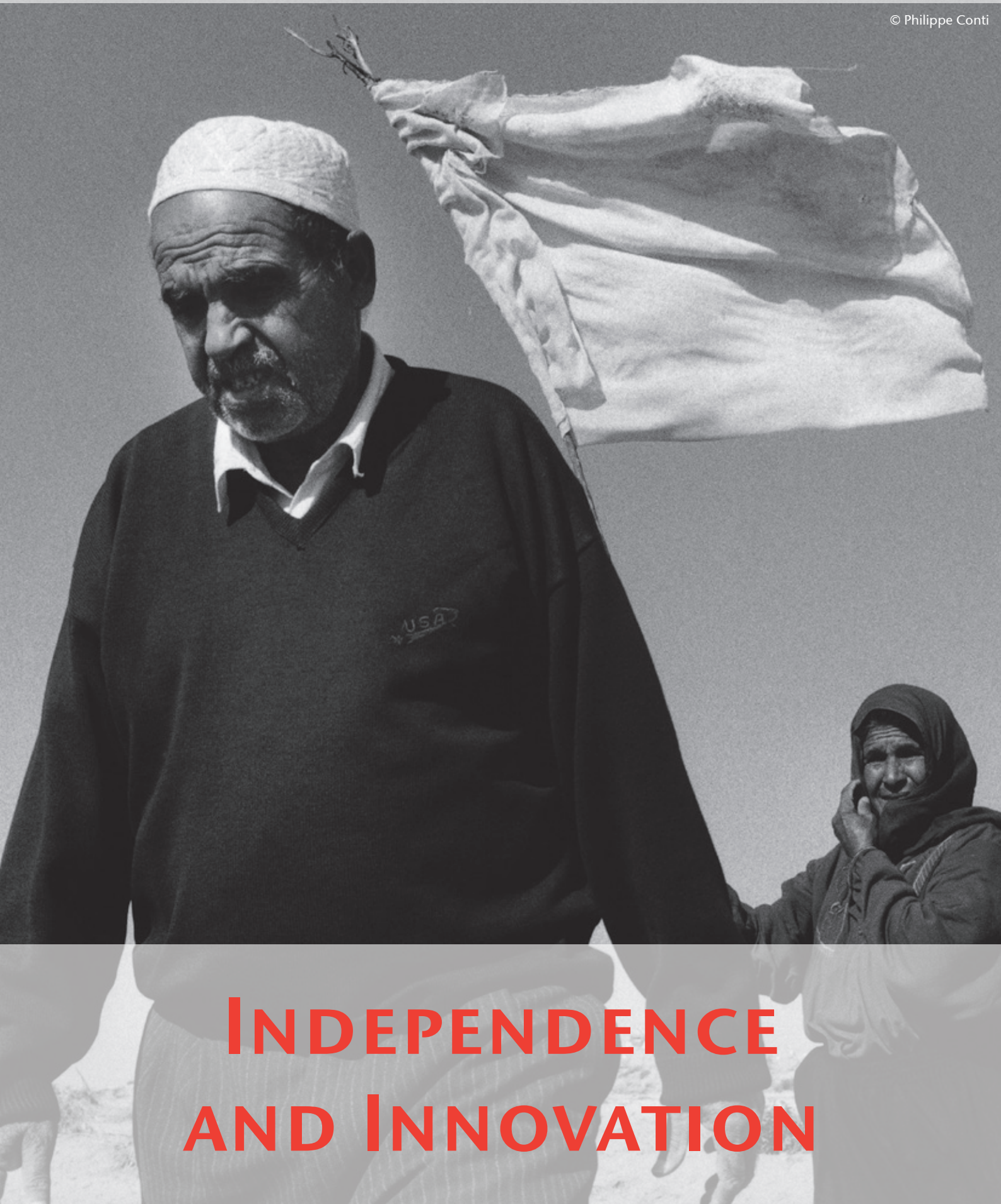


A SERIES OF DISCUSSIONS AIMING TO PROMOTE DEBATE ON SOME OF
THE PRESSING ISSUES FACING HUMANITARIAN ACTION

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INDEPENDENCE AND INNOVATION

Independence and Innovation in Humanitarian Action



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Introduction by David Melody,
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The issue of independence in humanitarian action is not new. It has been discussed and debated since the battle of Solferino in 1859, when Henry Dunant, the founder of the Red Cross, recognised the importance of independence from the military in developing a capacity to save the lives of civilians affected by conflict.

Since then humanitarian organisations have endeavoured to respect neutrality and impartiality in their operations on the ground. These principles originate in the belief that humanitarian actors should remain independent from political, military and religious agendas in order to ensure access to unstable areas, if necessary through negotiation with warring parties, and thereby benefit from a relatively safe space for the implementation of life-saving activities.

However, broad recognition of the principle of independence is not reflected in the situations increasingly encountered by humanitarian workers on the ground. An ever more complex aid system is becoming subsumed by political and military agendas, in particular since 9/11, with the apparent subordination of humanitarian action to broader political and military objectives in the “global war on terror”. In contexts such as Afghanistan and the Horn of Africa, counter-terrorism strategies involve a mix of military activity and the provision of aid by a confusing array of civil, military and

private sector actors, further shrinking the space available for independent humanitarian action. Independence may remain a laudable principle, but it is increasingly elusive in practice.

In November 2007 MSF organised a roundtable to discuss the question of independence in the light of these realities. The aim was to consider the degree to which independence is still a relevant – and practicable – humanitarian principle. The roundtable brought together NGO representatives, journalists, policy makers, donors and government officials, scientists and other practitioners. Three specific aspects of independence were considered: independence and changes in humanitarian aid and the political environment; independence and financial sustainability; and independence, research and innovation.

This issue of Dialogue will consider the third aspect, innovation. In the face of changing realities and needs, humanitarian practice needs to evolve and to innovate. The relationship between independence and innovation, however, is not always clear. Does independence contribute to, or impede, innovation in the field of humanitarian action? What factors favour innovation? And can the humanitarian sector be considered innovative? Below, three authors – Xavier Crombé of MSF, and Ajaz Ahmed Khan and Willem van Eekelen of Islamic Relief – consider this relationship between independence and innovation in humanitarian action.

Independence and Innovation: Looking Beyond the Magic of Words

By **Xavier Crombé**,

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Independence and Innovation: Absolute or Relative?

Independence and innovation have at least one thing in common – they are both highly valued concepts. This is certainly true for the field of humanitarian action but may also apply more generally to modern states and societies. Which public or private institution, political or social group, would nowadays claim to be opposed to innovation or cherish dependence? In an apparent paradox, however, these two nearly universal values of the “modern world” are commonly held to be under constant threat. Many states keenly defend their right to sovereign independence, opposing interference in their internal affairs from other independence-conscious states or NGOs. Similarly, since 9/11 humanitarian NGOs have been staging an ever-increasing number of roundtable discussions, workshops and conferences around the theme “independence under threat”. In a similar vein, many NGOs, in public or private, resent donors’ overwhelming demands for reports and paperwork to monitor or control their work. At the same time donors have been vowing to bring innovative practices to the aid community.

One important reason for this trend is that, much like the concepts of “good governance”, “sustainable development” and “responsibility to protect”, independence and innovation produce an easy consensus as long as they remain abstract notions or undefined goals or principles. As soon as they start to become concrete, however, one organisation’s claim of independence is often seen by others as arrogant and self-serving opposition to coordinated action, while the groundbreaking innovation heralded by one is dismissed by another as mindless adventurism or a mere smokescreen.

If I bring this measure of relativism to the debate from the outset it is because the possible interactions (and sometimes contradictions) between independence and innovation cannot be addressed if they are thought of as positive in and of themselves, as is so often the case. “Independence from whom?” and “For what purpose?” are questions worth asking, especially in the humanitarian field where independence is so often unquestioningly presented as a “core principle”, with little elaboration. The same applies to innovation, whether technical, scientific, organisational or some other form. Innovation for what purpose? For whose benefit? In fact the question might legitimately be asked whether humanitarian action is even meant to be an innovative sector? The stated purpose of development aid is to introduce innovation (whether in farming techniques, marketing practices, medical know-how or some other field) in order to bring about economic, social or political change. On the other hand humanitarian aid, strictly defined, is about alleviating suffering in times of crisis. While development offers a set of innovations for a better future,

humanitarian action is about the provision of means of survival in the here and now. Hence the very different attitudes development and humanitarian NGOs have, in principle, towards independence: development professionals usually insist on “partnerships” with existing authorities, administrations and “communities”; humanitarians, on the other hand, see themselves as filling voids and acting as temporary substitutes for local institutions in disarray or for uncaring, reluctant or incapacitated authorities, whether legitimate or de facto.

Lessons from Niger¹

This very distinction lies at the heart of the controversies that divided the various aid-related institutions in Niger in the course of the 2005 food crisis. To development advocates, “emergency” humanitarian agencies were guilty of arrogance, disrespect for the sovereignty of the Niger government and ignorance of the local context. They emphasized the need for long-term policies and stable market practices to fix what, to them, was not an emergency but a chronic crisis. As a result they opposed emergency responses, especially free food distributions. They argued that this failed to address the structural causes of the problem and would jeopardize efforts made over the previous twenty years to foster sustained development, instead trapping Niger’s rural communities in a vicious circle of dependence. Humanitarian “emergency” NGOs like MSF counter-attacked by arguing that the ongoing food crisis was evidence of the failure of past policies based on market deregulation to ensure food security for the poorest families. They further criticized development policy-makers for turning a blind eye to the present suffering of the population, in particular ignoring the deaths of tens of thousands of malnourished children, all in the name of food security improvements and the autonomy of individual producers at some distant point in the future.

This protracted debate along the all-too-familiar lines of emergency vs. development aid actually served to obscure the more complex reasons and interactions that shaped the 2005 crisis in Niger. Innovation and independence played a part in these, but not necessarily in the ways that might have been expected.

To all its stakeholders the food security system put in place in Niger at the end of the 1990s was highly innovative. It relied on state-of-the-art technology for data collection to monitor food crops, including satellite images provided by NASA, and was meant to break away from former bureaucratic control by emphasizing market deregulation and monitoring. It was also innovative in that its “core principles” were partnership and consensus among its stakeholders (the government of Niger, the European Union, several bilateral donor countries and the World Food Programme). These partners in the new approach to food security also had an independence objective, namely Niger’s independence from food aid (although donors would continue to fund grain reserves to cover possible shortages before that ultimate goal could be achieved).

Contrary to an accusation commonly made by development agencies, not all the organizations ringing the emergency bell in 2005 were newcomers to Niger. Nor were they necessarily emergency-oriented in their programming prior to that year. Following a series of interventions addressing either nutritional

needs or epidemics in Niger since the mid-1980s, MSF France had settled down in the Maradi region in early 2002 and embarked on a medium-term nutrition programme. The driver behind this decision, quite debated at the time, was innovation, both scientific and organisational. The scientific (and technical) innovation was Plumpy'nut, a ready-to-use therapeutic food (RUTF) available in a sachet, the result of progress in nutrition research that had identified the cause of malnutrition as micronutrient deficiency rather than lack of protein, a long-time creed of nutritionists. Plumpy'nut was the product of cooperation between the nutrition department of the French public research unit, IRD (Institute for Development Research), and a private small-scale food company, Nutriset. It was not MSF but the nutrition consultancy Valid International that first saw the potential of RUTF. Its members developed a new protocol called Community Therapeutic Care (CTC) which was designed to increase the reach of existing feeding centres by allowing a majority of severely malnourished children to be treated at home with the use of RUTF. It was this combination of innovations that convinced two members of MSF, a nutritionist from the medical-technical department and the medical doctor heading the emergency department, to try and implement this new protocol in Niger in 2002.

The programme they established was about filling a void: with the attention and funding of donors focused on preventing food crises through crop monitoring and food market liberalisation, therapeutic treatment of severe malnutrition was no longer available in Niger's health system. In addition, Niger was a stable country in which progressive experimentation

with this new approach was feasible; its results would also be useful for more "classical" emergency situations in war zones. MSF was soon running an independent therapeutic feeding centre in Maradi, financed by its own private funds. However, independence in this case bordered on isolation - while not opposed to it, neither Niger's Ministry of Health nor the aid community showed any interest in this nutrition project. In contrast, the MSF team's efforts to get a new and more effective protocol for malaria treatment registered at national level met with strong resistance from the medical authorities, who saw it as impinging on the state's sovereignty. Within MSF, the Niger nutrition programme also received little attention or support. Niger's peaceful context meant that it was not a priority for the MSF operations department where many doctors, both at headquarters and field level, remained sceptical about a programme that reduced medical supervision of the treatment of children with severe malnutrition. To overcome this internal resistance external expertise (a nutritionist and a psycho-anthropologist) was sought and dispatched to the field.

In 2004 the programme started to show impressive results: 10,000 children treated, more than 80% of them cured. It also began to generate increasing interest: the WFP representative in Niamey was willing for the agency to reinvest in severe malnutrition in Niger and to purchase Plumpy'nut from the local production facility MSF had helped to set up in an attempt to lower its cost. This encouraged MSF to push for donors and medical authorities to recognise the scale of malnutrition in Niger and to include adoption of the innovative therapeutic protocol in their strategic objectives for 2005. Indeed, central to



MSF's operational choices, public statements and overall role in the 2005 food crisis in Niger was the goal, set prior to the crisis, of publicising this tested innovation for the treatment of severe malnutrition. The controversies that subsequently erupted reflected resistance from donors and local authorities to this process, notably because the images of starving children filmed in MSF feeding centres were used as evidence of the failing of the food security apparatus and were undermining the culture of consensus upon which it was built. The MSF programme was marked by both independence and dependence. Financial independence allowed the organisation to carry out its nutrition programme on an unprecedented scale, with 40,000 children treated in 2005. At the same time MSF remained dependent on a number of other factors: on media coverage of the food crisis, which contributed to a blurring of its message; on the capacity of other NGOs to adapt to the situation; on the ambivalent position of WFP, torn between its role as donor representative in the food security system and that of emergency food agency; on political infighting within the Niger government; and on local understanding of the crisis and the belated international response to it.

How did the food crisis and the way it was reported help to publicise the nutritional innovation promoted by MSF? The use of RUTF for severe malnutrition was registered as the national protocol in Niger; nutritional surveys, rare prior to the crisis, are now routinely undertaken by UN agencies and NGOs to monitor the situation; and therapeutic feeding centres funded by international donors have flourished. At the global level, WHO, UNICEF and WFP published a joint press communiqué calling for the international community to mobilise to treat severe malnutrition worldwide and recommending the use of RUTF combined with the CTC method. The Niger crisis certainly had an accelerating effect on the renewed interest of international health institutions in a more medical approach to malnutrition, although this was also part of a more general trend following a decade of exclusive public health focus on infectious diseases. Finally, it is also worth noting that the dynamics of the 2005 crisis and the process by which MSF in Niger adopted, implemented and publicised innovation have resulted in important changes in MSF's outlook. MSF's historical approach to nutrition was limited to emergency situations; having only reluctantly engaged in a medium-term programme in Niger's context of chronic malnutrition, the organisation has now launched an international campaign to promote increased use of ready-to-use food, not only to treat but also to prevent malnutrition where it is endemic.

Social and Political Processes

As this lengthy account of MSF's experience with nutrition in Niger has attempted to show, there is no simple equation between independence and innovation. Interdependence is more often than not the *modus operandi* of humanitarian NGOs in the field. What enables them to avoid being tied to the agendas of others (albeit not always) is not their invoking of a "core principle" but their readiness to oppose, where necessary, the culture of consensus, allied to the weight and credibility their voice has acquired through years of effective relief action. Historically, the humanitarian sector has developed through a series of innovations, usually referred to as "professionalisation". This process began in the 1980s,

when NGOs were faced with the daunting task of meeting the needs of populations living in refugee camps. The purpose of professionalisation was to develop the means of delivering effective assistance to large groups of people, but it also increased humanitarian agencies' autonomy of decision and action. In the Cold War context, however, aid provided by primarily Western NGOs was hardly perceived as independent.

Medical kits, new logistics tools and water engineering are the most obvious innovations of this period. But "professionalisation" subsequently incorporated other forms of innovation, including some borrowed from the commercial and other sectors, like new means of communication, standardized recruitment techniques and accounting standards. With consultants and employees from these sectors being sought by NGOs to bring new expertise to humanitarian action, this process of professionalisation reflects a more general evolution in the concept of "professionalism" in Western societies. Increasingly professionalized NGOs in turn witnessed a change in their working environment, one in which they had played an important part, willingly or not. The successive reforms of USAID and the creation of DFID in the UK reflected the way in which donors were adapting to the evolution of NGOs. This process was accompanied by new requirements and channels of control, in much the same way as local authorities and communities in the field were adjusting and increasing the demands they made of better-resourced aid organizations.

As the work of sociologists and anthropologists shows², innovation and its diffusion can only be understood with reference to the societal context in which they occur. Existing conflicts largely determine the acceptance or rejection of a given innovation, as any innovation inevitably serves some interests while running counter to others. As the Niger case illustrates, this may be the case within a single NGO, between the various departments, professions and individuals of which it is made up, in the broader aid community or in the local societies receiving international assistance. The political stakes may of course differ depending on the aim of innovation - to raise "humanitarian standards", change public health policies or improve the living conditions of local communities - but these various objectives and the type of resistance they may encounter are often interconnected. Hence, questioning the links between independence and innovation in humanitarian action is to reflect upon the many unexpected ways in which our own evolution has changed the social and political environment in which we now work, for better or for worse.

Footnotes

¹ The following section is derived from various contributions in Xavier Crombé & Jean-Hervé Jezequel (ed.), *Niger 2005, Une Catastrophe Si Naturelle*, Paris Karthala/MSF, 2007 (English version forthcoming 2008).

² For a useful synthesis, see Jean-Pierre Olivier de Sardan, *Anthropology and Development, Understanding Contemporary Social Change*, London, Zed Books, 2005.

Institutional Funding, the Penny Box and Innovation

By **Ajaz Ahmed Khan & Willem van Eekelen**,
Senior Policy Advisor and Head of Policy & Research,
respectively, for Islamic Relief

In the aftermath of 9/11, governments have been increasingly inclined to make humanitarian action subordinate to broader political and military objectives¹. Since many non-governmental organisations (NGOs) are financially dependent on governments, this raises issues related to their independence and neutrality. At worst, NGOs may be reduced to contract agencies, or even, as some politicians would wish, mere “force multipliers”² in the “global war on terror”.

Does dependence on government funding indeed equate with the erosion of institutional independence? Is independence a determining factor for research and innovation in the humanitarian field? Do donor-driven agendas limit creative thinking and innovation? In recent years there has been pressure to improve the delivery of humanitarian aid by increasing coordination, “professionalism” and accountability between agencies that is making missions more integrated³. Will such a trend relegate concerns about the quality of response and, in particular, the scope for innovation? Certainly, as Xavier Crombé contends, the relationship between independence and innovation in the field of humanitarian and development work is complex and “there is no simple equation between independence and innovation”.

This paper, with reference to the experiences of Islamic Relief, argues that both institutional funding and private donations allow NGOs to innovate, depending upon the particular context and circumstances. For non-Western or faith-based NGOs, institutional funding may help to break open taboo areas of work such as HIV/AIDS. Conversely, considerable private or “penny box” income provides organisations with the freedom to follow their own priorities. Consequently, financially independent NGOs may be the first to identify and act upon gaps created by inappropriate prioritisation or the rigid political choices of donor agencies, and may lead the way to more effective and appropriate programming.

Institutional Funding and Top-down Innovation

Dependence on institutional funding can stifle independent thought and action. This is particularly noticeable at field level, where contacts between representatives of institutional donors and NGOs are often direct and funding allocations depend partly on links between these individuals. NGOs may be reluctant to criticise the policy positions of institutional donors for fear of antagonising them and losing access to future funding. Similarly, there may be an inclination to tailor the design and implementation of projects to the expressed priorities and preferences of donors, even if this is at the expense of project impact and appropriateness. The danger of becoming contractors, merely implementing projects on behalf of donors, is particularly pronounced when institutional donors provide short-term and inflexible funding.

Islamic Relief has been providing emergency relief to internally displaced persons (IDPs) in the state of West Darfur in Sudan since 2004, largely through the management of IDP camps. It has consistently identified the provision of water and sanitation facilities as crucial for the welfare of both IDPs and domiciled populations in the region. In recent months, the organisation has been unable to attract institutional funding for these activities because donor agencies have prioritised other, and in the organisation’s opinion less crucial, sectors. As a consequence, Islamic Relief has found it increasingly difficult to meet the most pressing needs of IDPs residing in camps.

However, institutional funding may also provide NGOs – particularly those with a constituency that represents a religious, cultural or philosophical minority – with an opportunity to access the funding and support required to initiate discourse and action in fields that individual sponsors may be reluctant to enter for cultural, religious or even security reasons. Thus, institutional funding may allow Muslim NGOs an opportunity to instigate dialogue on issues considered taboo such as HIV/AIDS and reproductive health. It may also enable local NGOs operating under dictatorial regimes to address issues related to human rights, and support grassroots organisations which want to start advocacy activities.

During 2007 the award of institutional donor funding encouraged (possibly even obliged) Islamic Relief to formulate policy positions, initiate dialogue and start projects on several important but “sensitive” issues, including HIV/AIDS. As we will discuss in the next section it is extremely unlikely that private funding for a faith-based organisation such as Islamic Relief would have been forthcoming for work in such “sensitive” areas. Islamic Relief utilised this institutional funding to support, for example, extensive and ongoing dialogue among Islamic scholars, development practitioners (including many Muslim NGOs) and people living with HIV/AIDS. This interaction has facilitated two types of innovation.

Firstly, among Muslim institutional donors and humanitarian organisations, areas previously unexplored are now more openly discussed. Furthermore, Islamic scholars have moved from simplistic and judgmental statements to better informed and contextualised recommendations. The resultant reduction of taboo and stigma has enabled humanitarian and development activities to be started. In mutually reinforcing processes, Muslim donors have provided funding for HIV/AIDS-related interventions; Muslim NGOs are more willing to design and implement HIV/AIDS related programmes; and some HIV positive Muslims are more willing to talk openly.

Secondly, there is innovation within the mainstream development discourse. Faith has been central to this. So important in the lives of millions of people but often ignored by western and secular humanitarian organisations and donors, faith has gained prominence now that there are people to engage with, and now that Islamic religious analyses and pronouncements have shifted from sin and blame to context, understanding of complexities, and compassion. Such innovative work would not have been possible, or at least would have been considerably delayed, without access to institutional funding which explicitly supported dialogue between the various parties.

The Penny Box and Bottom-up Innovation

Reliance on the penny box can, however, also stifle innovation. Islamic Relief has many thousands of private donors who regularly contribute relatively small amounts of money for both emergency and long-term activities. With such funding the organisation is given almost complete freedom to create, implement and develop projects as it wishes. However, there is one significant drawback with this funding: it is generally given for “traditional” sectors of intervention such as water and sanitation, primary health care and education and, in particular, high visibility emergency projects supporting those affected by natural disasters or conflict. Support for slow-onset emergencies or for interventions in “non-traditional” areas (such as HIV/AIDS or reproductive health) is less forthcoming. There is also a perception within Islamic Relief (and, probably, in other faith-based organisations) that such activities may actually alienate many small private donors, particularly those who hold relatively conservative beliefs. Clearly, therefore, complete reliance upon penny box income would actually restrict Islamic Relief to interventions in “traditional” sectors. Furthermore, small private donors tend to want most if not all of their donations to be spent directly on project implementation rather than on research or advocacy activities, even if these activities may produce tangible results in the long-term.

Nevertheless, financial and institutional independence can also stimulate humanitarian innovation. Penny box income is crucial for any humanitarian organisation that wishes to respond immediately and in the manner it desires, particularly if this is contrary to mainstream development discourse. Thus, in the aftermath of the 1992-95 war in Bosnia and Herzegovina, institutional donors followed a policy of encouraging minority return. The reasoning behind this approach was laudable: without return, the country would be divided into mono-ethnic entities and the instigators of the conflict would have achieved their objectives. It was clear that NGOs who did not concur

with this approach would be unable to access the considerable amounts of institutional funding available. However, Islamic Relief acknowledged that many widows, often severely traumatised, would never return to their pre-war homes in towns such as Srebrenica in Eastern Bosnia where their male relatives had been killed. In such instances, relative financial independence permitted Islamic Relief to seek alternative solutions focused on building new lives and creating income and employment opportunities for displaced persons away from their pre-war homes. This approach opposed what Xavier Crombé terms the “culture of consensus”, in this case among institutional donors and other international NGOs who together had created a perceived imperative of minority return. Once it had become apparent that minority return to certain areas in Bosnia and Herzegovina had failed, some donor agencies examined and adopted these alternative solutions.

The key to Islamic Relief’s work in Bosnia and Herzegovina was the development of an innovative Islamic microfinance programme based on Shariah-compliant financing principles that has provided thousands of business and housing loans to displaced persons. The success of this programme encouraged the organisation to initiate similar microfinance programmes in a number of its other country programmes in Eastern Europe, the Middle East, Africa and Asia. These programmes have aroused interest among other NGOs, donor agencies and even commercial financial intermediaries. There are two reasons for this. Firstly, the absence of interest makes Islamic microfinance programmes acceptable to the many millions of Muslims who for religious reasons refrain from utilising interest-based finance. Secondly, there is anecdotal evidence to suggest that such programmes generate higher levels of economic growth (largely through greater risk-sharing between the financier and entrepreneur) and promote more ethical investment and behaviour among borrowers than conventional interest-based microfinance programmes.



As the experiences of Islamic Relief illustrate, the relationship between NGO independence and innovation is complex. Independence may facilitate as well as hinder innovation depending upon context and circumstances. Similarly, institutional support may encourage but also stifle independent thinking and innovation. The increasing diversity of institutional donors⁴ is likely to complicate this relationship still further. This is particularly the case for a humanitarian organisation like Islamic Relief which has institutional support from a variety of donors and does not rely on a relatively small number of funding bodies from Western Europe and North America. The increasingly significant institutional donors from the Middle East, for example, may not employ the same rationale as major western donors when it comes to development interventions, and their policy priorities and methods of response may be different.

Footnotes

¹ For example, see Stoddard, A (2003) "With us or Against us? NGO Neutrality on the Line" Humanitarian Practice Network December 2003, available online at <http://www.globalpolicy.org/ngos/fund/2003/1200against.htm>; and Médecins sans Frontières and Weissman, F (2004) *In the Shadow of 'Just Wars': Violence, Politics and Humanitarian Action*, Ithaca, USA: Cornell University Press.

² Colin Powell, 'Remarks by Secretary of State Colin L. Powell to the National Foreign Policy Conference For Leaders of Non-Governmental Organizations', 26 October 2001, available online at <http://usinfo.state.gov/topical/pol/terror/01102606.htm>.

³ Stobbaerts, E., Martin, S and K Derderian (2007) "Integration and UN humanitarian reforms". *Forced Migration Review*, Issue 29, pp 18-20.

⁴ Harmer, A and Cotterell, L., (2005) *Diversity in donorship: The changing landscape of official humanitarian aid*. Humanitarian Policy Group Research Report 20. ODI: London.

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