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DCHA/OFDA

22nd Biennial NGO Conference Proceedings



*Humanitarian Assistance:
Building on the Basics,
with Designs on the Future*

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EXECUTIVE SUMMARY

The USAID Office of U.S. Foreign Disaster Assistance's (USAID/OFDA) 22nd Biennial Nongovernmental Organization (NGO) Conference coincided with the celebration of USAID/OFDA's 40th anniversary, which afforded the opportunity for attendees to reflect on the office's evolution and present status. Speakers and participants from a variety of U.S. Government (USG) agencies, academic groups, and NGOs came together to focus on central themes facing the humanitarian community, including issues concerning internally displaced persons (IDPs) and protection, security, and the integrity of humanitarian space. The conference also highlighted the tradition of American humanitarianism, the challenges of combining humanitarian assistance and efforts in the war on terror, and the growing importance of the Good Humanitarian Donorship Initiative. In addition, a representative from USAID's Office of the Inspector General (USAID/OIG) shared insights and tips regarding the responsibility of NGOs to prepare adequately for and anticipate USAID audits.

USAID/OFDA revised its Guidelines for Proposals and Reporting in November 2004. The changes were intended to reinforce USAID/OFDA's prioritization of developmental relief and to encourage implementing partners to incorporate these principles in all relief interventions. The new guidelines will also better facilitate implementing partners' and USAID/OFDA's ability to fulfill immediate operational and accountability reporting requirements. For example, proposals must now include a monitoring component to ensure that certain key questions are discussed when a performance plan is being developed, and sample monitoring tools are included in the annex of the new grant guidelines. In addition, USAID/OFDA shared with conference participants the results of the recent "Issues Letter Study" that was undertaken to improve and streamline the USAID/OFDA proposal review process.

Regional teams from USAID/OFDA's Disaster Response and Mitigation Division presented their country portfolios and issues of focus. USAID/OFDA continues to prioritize assistance to countries suffering from protracted complex emergencies. To increase transparency and provide USAID/OFDA with a more flexible way of soliciting creative solutions to problems, the regional teams discussed how they are increasingly utilizing the competitive Annual Program Statement (APS) process to award grants.

In an effort to accentuate innovative approaches to complex humanitarian issues, USAID/OFDA hosted a variety of sector-specific discussions concentrating on the needs of vulnerable populations, the prevention and mitigation of HIV/AIDS and diarrhea, the use of community therapeutic care to address malnutrition, and new directions and products for shelter activities. The discussions focused on identifying best practices, promoting standardized tools and indicators, and enhancing implementation of programs.

USAID/OFDA would like to express its appreciation to all conference keynote speakers, facilitators, presenters, and participants.

SUMMARY OF OPENING REMARKS

Conference Welcome

Ken Isaacs, Director, U.S. Office of Foreign Disaster Assistance

Mr. Isaacs opened the conference by thanking the participants for their attendance. He discussed the theme of the conference, 'Building on the Basics, with Designs for the Future.' The world is becoming more complex for humanitarian response, largely due to military action. There is an increasing need to respond to vulnerable populations and emphasize protection yet there is a shrinking amount of money available to do this work. Mr. Isaacs concluded by sharing his hopes that the conference would stimulate discussion, debate, and ideas that will help us all in our work.

Opening Remarks

Andrew Natsios, USAID Administrator

Mr. Natsios noted that he was pleased to have Mr. Isaacs as USAID/OFDA Director. "He is the ultimate field person. As he knows his stuff already, he does not have to be educated like I was. I have great admiration for his leadership skills and bravery." Mr. Natsios first offered his condolences to CARE for the death of Margaret Hassan. He noted that insecurity is happening not just in Iraq, but also Afghanistan and other places. Furthermore, Mr. Natsios noted that insecurity is getting worse: "The human rights jungle is getting closer rather than getting tamed." People have begun to realize that humanitarians have an affect on conflict, even if it is not intentional. Although humanitarians are neutral in terms of assistance and politics, their effect is not neutral. Mary Anderson has written about the effects of aid on conflict, but humanitarians cannot remain paralyzed for fear of negatively affecting conflict. Humanitarians must be fast and flexible; they must think and act smart. This rings true not just for USAID/OFDA but also for USAID/FFP and USAID/OTI.

Typically, people have dealt with humanitarian response in an advocacy sense. "Operationalizing" humanitarian response on the ground is much more complex and dangerous. One cannot separate a humanitarian response from protection issues because civilians are being targeted. The atrocities in Sudan and Darfur are not new, although they are more acute than they have been in any place since the Rwandan genocide. In response, USAID staff has begun to develop doctrines around humanitarian response and protection issues before they take place.

Mr. Natsios was converted to the cause of protection when he took leave from the directorship of USAID/OFDA to serve in Operation Desert Storm. Mr. Natsios worked with the civil-military unit on the reconstruction of Kuwait. Fred Cuny and others developed a set of operational interventions for human rights abuses. The civil-military unit stopped what would have been a nightmare scenario, and they did this without using weapons. The civil-military unit strategy could also be carried out by USAID/OFDA, USAID/FFP, and USAID/OTI. USAID/OTI has established a unit to develop protection

and human rights strategies on the ground. USAID/OTI will not seek to engage in protracted negotiations with U.N. agencies around conventions and international law as that is the job of the State Department. Mr. Natsios emphasized that there has been too much discussion and not enough action. USAID is now examining the context of its own operations to see what USAID can do to implement protection issues.

According to Mr. Natsios, an agency engaged in protection will compromise a mandate one way or another. Although protection is not contradictory to mandates, it does overtly challenge combatants in ways that humanitarian relief does not. There are programmatic actions that can be taken to protect civilians against atrocities in the future. Darfur is among the most complex issues facing humanitarians in recent memory, and obtaining information about abuses is critical. Mr. Natsios requested that NGOs share information with USAID's abuse prevention unit. USAID has been working for months on how to deal operationally with human rights abuses. USAID also prepared for human rights abuses in Iraq, even though the planning ultimately was unnecessary.

In one of the first introductions to literature on disaster response, Peter Woodrow and Mary Anderson wrote *Rising from the Ashes: Development Strategies in Times of Disaster*. Fred Cuny wrote a book on disasters and development. These works underscore that, to the extent possible, one should seek to integrate development principles in disaster response. Mr. Natsios noted, "We are not just keeping people alive but attempting to stabilize societies." There are numerous types of economic interventions: stabilizing monetization, job programs, and small-scale infrastructure for employment. In the early 1990s, an estimated 50 percent of USAID/OFDA grants included provisions for developmental relief. During the 1990s, there were attempts to change the doctrine away from economic interventions. However, there should no longer be any confusion. USAID's current doctrine is the same as it was during Mr. Natsios' appointment to USAID/OFDA in the early 1990s: support developmental relief to the extent possible.

Yet developmental relief is a continuum and certain things are beyond USAID/OFDA's mandate due to legal limits. However, there are plenty of areas where developmental relief does fit in the mandate. A secondary restriction is there must be money to pay for developmental relief activities. For example, one NGO submitted proposals that were so extensive USAID did not have the means to pay for all the activities. An NGO should not assume that USAID's failure to approve initiatives is a change in doctrine, but rather could indicate a limitation of resources. NGOs should continue to believe that USAID/OFDA will accompany them behind the lines in the major emergencies of the world such as Haiti, Liberia, Afghanistan, and Darfur. The level of conflict in the world is not diminishing and if anything is increasing. USAID/OFDA, USAID/OTI, and USAID/FFP will be out there on the front lines to support NGOs.

SUMMARY OF KEY NOTE ADDRESSES

USAID/OFDA at 40: A Critical Juncture **Dr. Richard Olson, Florida International University**

Dr. Olson noted that when he prepared his presentation upon invitation from USAID/DCHA he doubted as to whether USAID/OFDA was actually at a critical juncture. However, now he is convinced that USAID/OFDA is in the process of a critical juncture that will likely continue for several years. Dr. Olson's background began in Somoza as he watched the government commit political suicide after a natural disaster in 1972. He then worked with USAID/OFDA, primarily in Latin America.

Dr. Olson became the USAID/OFDA historian by accident. He began looking at USAID/OFDA's critical juncture in San Salvador after the 2001 twin earthquakes. Paul Bell mentioned that USAID/OFDA was "losing its history because it was losing its people." As time passed, USAID/OFDA was beginning to lose touch with the formative figures in its history. Dr. Olson thought it was important to capture the major turning points in USAID/OFDA's history. In one's life, there are personal critical junctures, such as university, marriages, and divorces. For an organization, it is slightly different: there are changes in mission, mandate, and direction. For both people and organizations, critical junctures should be relatively infrequent. Organizations that have numerous critical junctures likely will also have a nervous breakdown. A critical juncture happens where nothing is ever the same again: profile, budget, personnel, and operations change and take on new characteristics.

Dr. Olson first discussed the founding of USAID/OFDA. In 1963 after an earthquake in Skopje, Yugoslavia, Junior Foreign Service Officer Lawrence Eagleburger discovered there was 'no *one* place to call' in the USG to discuss foreign disaster assistance. Eagleburger had to call at least 10 places, which was 'impossible from Belgrade, much less from Skopje.' Eagleburger sent a highly critical cable to Washington detailing response deficiencies and how those deficiencies made the USG appear inept. He argued that the USG should get organized or not pretend to help. According to Eagleburger, Columbus arrived in the New World quicker than the U.S. arrived in Yugoslavia. In subsequent congressional hearings Harold Cooley from North Carolina said, "Put up or shut up," or in other words get organized or do not bother to assist. Do not pledge assistance and then not deliver.

In 1964, the Foreign Disaster Relief Coordinator's (FDRC) office within USAID began with three people. As PVOs and NGOs implemented most of the programs, FDRC was not fully operational—a large part of the reason it received political support. The founding principals of FDRC, and thus USAID/OFDA, developed in the 1960s: short-term emergency relief, or the "90 days and we're out of here mentality." USAID/OFDA has always striven to be non-political. In 1990, Andrew Natsios stated, "Our assistance is to suffering people not to governments," and in 1995 Paul Bell remarked, "OFDA's job is to do the right thing." However, Dr. Olson noted that it is sometimes difficult to do the right thing in both the field and Washington. USAID/OFDA's founding principle is to

work with NGOs and PVOs, and the majority of USAID/OFDA's funds are directed toward this purpose.

Next, Dr. Olson described USAID/OFDA's second critical juncture. The International Development and Food Assistance (IDFA) Act of 1975 chartered FDRC to 'alleviate human suffering.' The IDFA Act gave FDRC the 'notwithstanding' authority which permits expedited assistance, and also named the USAID Administrator the President's Special Coordinator for International Disaster Assistance, and the USAID/OFDA Director the Deputy Coordinator. FDRC became USAID/OFDA. Another aspect of notwithstanding is that USAID/OFDA is allowed to work with countries with whom the USG has either hostile relations or no relations at all. Examples include China in the early 1970s and Laos during the floods in the mid-1970s as well as Iran during the 2003 earthquake in Bam. Another aspect of notwithstanding allows USAID/OFDA to work in countries without permission from the host government. For example, Fred Cuny smuggled suitcases across the border when the Government of Ethiopia began targeting people for starvation.

The third (1984-1986) and fourth (1988-1995) critical junctures centered on the nature of disasters. Do famine, broken states, and genocide constitute disasters? During these two critical junctures, the answer was not as clear as one might think. Inside USAID/OFDA there was conflict regarding the nature of disasters. On one hand, there were those who felt that 'if you can see it coming, it's not a disaster.' On the other hand, there were those who argued that 'we have to do something, and who else can do it beside USAID/OFDA?' The latter argument eventually took precedence and as a result, USAID/OFDA became involved in complex humanitarian emergencies in countries such as Sudan, Bosnia, Rwanda, and Angola.

As USAID/OFDA became more involved in Africa, its commodity and service expenditures rose dramatically. In order to respond better to emergencies, USAID/OFDA was granted borrowing authority, enabling it to spend money not in its account and allowing the Administrator to compensate with money from other bureaus. USAID/OFDA's borrowing authority led to conflict with the Africa Bureau in the late 1980s, although the issue has now for the most part been resolved. From 1964 to 1991, USAID/OFDA spent \$59 million. From 1992 to 2000, USAID/OFDA spent \$221 million. Africa was the major driving force in USAID/OFDA's expansion.

Critical junctures can typically be identified only after at least 10 years have passed, as most people are unable to identify that fundamental changes are occurring without the benefit of hindsight. Dr. Olson noted, however, that USAID/OFDA's fifth critical juncture began in 2003 and continues today as evidenced by the following trends.

First, USAID/OFDA's role in economic reactivation is growing. There will no longer be a "tonnage game." USAID/OFDA is moving to focus more on economics and less on supplies. This requires a different way of looking at disaster situations.

Second, there is continuous debate about where disaster assistance should stop in the 18-month window between disaster and development. The answer: it should not stop; there should be a bridge to ensure continuity.

Third, will USAID/OFDA move toward decentralization and devolving authority for essential decision-making to the Regional Advisors and Disaster Assistance Response Teams (DARTs) or toward centralizing coordination and management in Washington?

Fourth, where does USAID/OFDA stand on civil-military relations, specifically the need for operations versus the need for security? In the early 1960s, USAID/OFDA was almost placed in the U.S. Department of Defense. In the end, the winning argument was that the USG needed a civilian office. Later USAID/OFDA was almost put in the Federal Emergency Management Agency (FEMA). It required Secretary of State's intervention to keep it within USAID and the Department of State. This tension will likely continue.

Fifth, will USAID/OFDA maintain its traditional autonomy or will it be more incorporated into a USG 'Team'? There are major challenges to be resolved. Dr. Olson predicts that two modes will develop in the next 5 to 10 years. On one hand, USAID/OFDA will respond to traditional disasters with USAID/OFDA's traditional 'go-it-alone' mentality. On the other hand, USAID/OFDA will respond to complex humanitarian emergencies in a manner that is much more involved and coordinated with the USG. This is because complex emergencies receive more attention and place USAID/OFDA on the radar screen more than usual.

Dr. Olson concluded that the challenge for USAID/OFDA will be to maintain and mainstream a non-political voice in overtly political situations where USAID/OFDA is only *one part* of a USG response—in both the field and Washington. Complex humanitarian emergencies are very political situations that receive a great deal of funding. The fundamental challenge for USAID/OFDA in the future will be to maintain a humanitarian voice in increasingly political humanitarian emergencies.

Questions and Answers

Q: You talked about the devolution of decision-making. How have percentages of devolution changed? What amount of USAID/OFDA decisions are now field driven?

A: Dr. Olson explained that when USAID/OFDA established regional teams in the mid-1980s, they devolved operational authority, particularly in LAC but also in Asia and in Africa. However, as the communications revolution began, it became more feasible to have direct communications between the field and Washington. The possibility of direct communication began to clip the decision-making wings of the regional team and overloaded Washington with information. The most effective USAID/OFDA responses have been field based. It is difficult for the RMT to receive so much information. Mr. Isaacs noted that USAID/OFDA is now looking for ways to reestablish more authority at the field level.

Q: Can you please elaborate on why maintaining and mainstreaming a non-political voice will be USAID/OFDA's main challenge and share recommendations on how to meet this challenge?

A: Dr. Olson replied that Andrew Natsios wrote a relatively unknown article in the *Mediterranean Affairs Quarterly*. In this article, he stated that one of USAID/OFDA's difficulties is speaking for victims while fitting within USG policy. This tension will never go away. In Michel Halpert's report, he criticized USAID/OFDA, stating that USAID/OFDA's voice was sidelined in some emergencies, because USAID/OFDA was not in the room and therefore was not listened to. Dr. Olson stressed that USAID/OFDA must speak "unpopularly" at times. USAID/OFDA must speak with a humanitarian voice and be in the room, however difficult that may be. Mr. Isaacs added to Dr. Olson's response, stating that assistance must be delivered based on need. However, USAID/OFDA is not an NGO but rather an arm of the USG.

Humanitarian Work with a Government at War
Dr. Hugo Slim, Chief Scholar, Centre for Humanitarian Dialogue

The epoch of the war on terror is an interesting time to grasp the meaning of what American humanitarianism needs to be. The USG views NGOs as having a critical role in fighting the war on terror, both to alleviate any suffering from U.S. military action and to prevent the suffering of war. The USG hopes that the Iraqi population and the populations of other countries will prefer the opportunities that arise through international assistance to those of insurgency. It is elitist to assert that only professional humanitarians can operate in the humanitarian sphere since power in war is linked to aid. Everyone should be a humanitarian in a conflict, since being a humanitarian is a core human value. The challenge is to encourage governments to promote the humanitarian ethic.

The tradition of American humanitarianism has been remarkable and has included extraordinary achievements. Some of the biggest and best NGOs in the world are American NGOs. American humanitarianism has its roots in the assistance that followed both world wars and has since spread to Africa and Asia in a pragmatic way. Dr. Slim noted that in his experience, American relief workers from the International Rescue Committee (IRC), World Vision, CARE, and other organizations were particularly impressive in East Sudan and Ethiopia. American humanitarians routinely do more than the minimum by going beyond providing basic relief in order to make a lasting impact on the populations assisted.

In examining contemporary global humanitarian trends, the 1990s were extraordinary because the humanitarian community started to examine human rights law and principles, established codes of conduct such as the Sphere standards, and began to define humanitarian space. During the 1990s, the concept of ensuring rights of civilians returned to the mainstream agenda through advocacy for the International Criminal Court (ICC) and the movement to ban landmines. The Good Humanitarian Donorship Initiative was established to challenge donors to provide assistance based on need.

Despite this progress, in recent years the situation on the ground has remained dangerous, problems have persisted such as the rejection and obstruction of humanitarian aid, and the tendency of Western donors to provide aid based on their interests. Humanitarians must remember that not all countries are like Iraq and the Iraq experience cannot be imposed on other situations. Humanitarians have learned more about the range and depth of civilian suffering both directly—killed, raped, sexually exploited, given HIV/AIDS, or indirectly—died from displacement, disease, destitution, loss of services, or social and economic opportunities. As more accurate information about the status of civilians has emerged, expectations of how the international community can assist have increased. Humanitarians endeavor to mitigate these problems.

One issue confronting American humanitarians is their role as a “belligerent donor” during the war on terror. In September 2004, the USAID Administrator testified about reconstruction efforts in Afghanistan that combine international humanitarian assistance and efforts in the war on terror. The idea of trying to win over a population through aid is not new; the USG has employed assistance to further national interests in the past.

In the mid-1990s, humanitarians in Goma complained as refugee camps were co-opted by Hutu militias. It was a deeply ambiguous environment, yet most NGOs decided to stay and provide assistance. The current dilemma facing NGOs of whether to remain engaged in countries like Iraq despite U.S. military action is far more nuanced than the Goma scenario. In Goma, the NGOs did not share Hutu values. However, the USG and the NGOs do share a vision of what constitutes a good society. The United States aims to save lives, protect civilians, and win the political argument by encouraging this vision of good society. There is a moral overlap since the NGOs and the USG share common goals. Nevertheless, NGOs find it hard to embrace this overlap because they do not want to be perceived as being on one side of a conflict. Yet, it is the moral duty of humanitarians to monitor the USG’s humanitarian policy in the wars that the USG fights.

Humanitarian action in war is always ambiguous and it is impossible to demarcate clearly what is humanitarian space. At the heart of any U.S. action, whether governmental or non-governmental, is humanity. Humanitarians must spend funds on the responses where resources are most needed and maintain operational autonomy so that their choices and actions are their own. Even though the USG is their largest donor, the International Committee of the Red Cross (ICRC) maintains operational autonomy because the USG believes in ICRC values. Humanitarians should advocate for ICRC and U.N. action when they are the best organizations to respond. Humanitarians should also influence political and military decision-makers in the USG and encourage them to think more about humanitarian issues. Creativity is needed to determine new ways to give aid and support.

Dr. Slim concluded with the statement that American humanitarians think beyond the relief stage to anticipate long-term issues and the U.S tradition of humanitarian assistance is long and well resourced. American NGOs are largely reliant on the USG; however,

tension exists. There is enough moral overlap for NGOs to work within the framework of the war on terror if NGOs have wise managers.

Questions and Answers

Q: How does the increasing role of civilian humanitarians working within military structures affect NGOs?

A: There is a need for empirical data on how effective it is for civilian humanitarians to work within these structures, such as the Provincial Reconstruction Teams (PRTs) in Afghanistan. Humanitarians should argue from the facts and not assume that simply because the structure is military that it is bad. The military and humanitarian assistance are not mutually exclusive and there are times when the military can assist.

Q: Many of us read your article on politics. Could you comment on examples of a successful integration of humanitarian assistance and peacekeeping?

A: There have not been many examples lately. Humanitarians need to be honest about their own politics. ICRC and MSF are the only non-political organizations. Most NGOs have wider goals. NGOs should not criticize the military for trying to build schools or contribute to other development projects because NGOs share these political goals.

Good Humanitarian Donorship Initiative **Nance Kyloh, USAID Representative in Geneva**

“Most donor behavior is rational from a donor point of view. However the sum total of all donor behavior does not produce a rational whole.” Carolyn McAskie, the then Deputy Head of the U.N. Office for the Coordination of Humanitarian Affairs, made this rather damning statement in 2002 based on her experience as a senior U.N. official, as well as a former donor. According to Ms. Kyloh, her statement is unfortunately still as relevant today as it was two years ago. Since 2002, donors have embarked on an introspective reflection on how they can do a better job in humanitarian assistance. This has become known as the Good Humanitarian Donorship Initiative (GHD). During the session, Ms. Kyloh offered background on GHD, where the work stands, and where the initiative will likely head in the future.

GHD is relevant to discussions at the USAID/OFDA NGO conference for three reasons. First, donors can learn from NGO experiences, particularly the work NGOs have done in improving coordination and coherence in the NGO network. Second, some NGOs are also donors and may find that the efforts government donors are undertaking as part of GHD could also apply to them. Finally, as partners of more than one donor government, most NGOs should benefit from greater harmonization of practice among donors. If donor governments can improve their consistency in the way they provide assistance, it will make the job of NGOs much easier.

Aside from Ms. McAskie’s rather critical comment, a few other factors motivated donors to look more closely at the way they provide humanitarian assistance.

First, an increasing amount of donors' resources is spent on humanitarian activities. The amount of funds spent on emergencies increased dramatically over the past four years, totaling \$5.5 billion in 2003. In the early 1990s, humanitarian assistance comprised about 3 percent of overall development assistance; during the past decade it has grown more than three-fold to equal about 10 percent of the total assistance provided. These figures do not even include humanitarian aid from non-government sources that are estimated at about \$1.5 billion per year.

Second, it is an increasingly complex political and security environment for humanitarian action. Emergencies have become more protracted. Non-state actors are playing a larger role in crises. More players are entering the humanitarian arena, including the military and peacekeepers. The political aspects of humanitarian assistance have become more apparent.

Finally, humanitarian needs worldwide are increasing. While it is difficult to put an exact figure on global humanitarian need, it is safe to say that it is not being met. Donor governments are spending more money than ever, but is it being spent in the best way possible? Are donor governments allocating resources optimally, not just within their own organization and government, but across donor governments as well?

Thus a small group of donors, including USAID/OFDA, commissioned four studies to look at some of the underlying issues that were making their collective approach less than rational. The first study, quantifying and qualifying humanitarian aid flows, was conducted by Development Initiatives and comprised a comprehensive analysis of financial aid flows from all sources. The second study, needs assessments and decision-making, was completed by the Overseas Development Institute and looked at needs assessment practices and the link with agency and donor decision-making. The third study, donor behavior in humanitarian financing, was conducted by the Tufts Institute and focused on factors motivating donor decision-making. Finally, the fourth study, completed by the U.N. Office for the Coordination of Humanitarian Affairs (OCHA), looked more closely at possible roles for the U.N. in this changing environment.

Ms. Kyloh offered a sampling of the findings from the four commissioned studies. Donors have no shared definition of the humanitarian agenda. Donors' funding decisions are not solely or sometimes even primarily based on needs. Few situations are assessed as a whole, making prioritization within and across contexts difficult. There is weak accountability for the overall humanitarian response. Ms. Kyloh noted that the studies' findings were rather dismaying. Although the conclusions from the studies may not accurately reflect the situation in every emergency or for every donor, they were a cause for concern and certainly a call for action.

In June 2003, the 16 largest government donors along with U.N. humanitarian agencies, the Red Cross and Red Crescent Movement (ICRC), academics, and NGOs represented by the Steering Committee for Humanitarian Response, Interaction, and International Council for Voluntary Agencies met in Stockholm. The government donors and NGOs considered how to do better collectively as well as individually, how to become more

coherent, and how to make the sum of individual actions at least equal to a whole. This was the first time that donors and NGOs had met to look for a common solution.

Donors reached agreement on a reform agenda that included a common set of objectives for humanitarian action, 23 principles for good Donorship, and a five-part implementation plan. The principles and best practices agreed to in Stockholm were not revolutionary or new. In fact, donors drew extensively from existing literature, including the Code of Conduct for ICRC and NGOs. However, agreement on principles and best practices were nevertheless fundamental. The focus of the work was not on the ‘how much’ per se—how much in the way of new resources—but rather on the ‘how’—how to do better with what donors are spending.

The following is a sampling of the principles from the Stockholm meetings. These documents along with the studies referred to earlier and subsequent reports on GHD can be found on [ReliefWeb](http://www.reliefweb.int) (www.reliefweb.int).

- Humanitarian action should be guided by humanity, impartiality, neutrality, and independence.
- Donors will strive to ensure flexible and timely funding.
- Funding will be allocated based on needs assessments.
- The capacity of local communities will be strengthened to prevent, prepare for, and mitigate and respond to humanitarian crises.
- Assistance should support recovery and long-term development.
- The central role of the U.N. in providing leadership and coordination will be supported and promoted.

Donors also pledged to

- Actively support the formulation of common humanitarian action plans,
- Reduce earmarking,
- Promote the use of existing standards, such as the Sphere guidelines,
- Facilitate safe humanitarian access,
- Ensure that the use of military assets conforms with International Humanitarian Law and humanitarian principles,
- Ensure adequate involvement of beneficiaries in designing projects,
- Report contributions in a timely fashion, and
- Undertake regular evaluations.

Ms. Kyloh noted that donors agreed on a long list of issues. However, while donors agreed at the policy level, they were still faced with Carolyn McAskie’s assessment of their collective performance. Donor practice does not always match policy. This is true both within donor governments, across the range of donors, and across regions. An initiative was needed to provide a framework for donor action.

What is the GHD Initiative? First, it is a platform for further informed debate on key issues. There is scope for continuing debate on a number of aspects of humanitarian action, and GHD provides a framework for this debate among donors and partners. Second, it is a partnership with the NGO community, the U.N., and the ICRC. Several of

the best practices outlined at Stockholm involve partners, especially in the section on ‘promoting standards and enhancing implementation.’ GHD fully recognized that real progress would only be made with donors and partners working together. Third, GHD is a step forward as an accountability tool. Most donors are accountable to their taxpayers through their parliaments or Congresses, but they are not collectively accountable to each other. Fourth, GHD is a focus on improving existing processes. GHD is not a reinvention of the humanitarian wheel and it is not the creation of a parallel process. GHD is an attempt to strengthen the efficiency, effectiveness, and timeliness of humanitarian action by taking a fresh look at existing tools—tools such as the Common Humanitarian Action Plans (CHAP), the Consolidated Appeals Process (CAP), and needs assessments. What tools are available and how can we work with them better? Fifth, GHD is the work of the five-implementation groups that reinforce numbers one through four above.

The first group chose two countries—Burundi and the Democratic Republic of the Congo (DRC)—to serve as pilot studies for GHD. The goal was to see to what extent best practices were applicable and were being applied to the humanitarian effort and to see how existing processes—such as the CHAP and the CAP—could be improved.

The second group engaged the OECD Development Assistance Committee in Paris to consider ways to strengthen the donor peer review process to include humanitarian action.

The third group also worked with the OECD Development Assistance Committee to agree on a comprehensive common definition for reporting humanitarian assistance. This group is also working with OCHA’s Financial Tracking Service (FTS) to improve donor reporting. The goal is to harmonize the reporting and management records and thus improve the FTS, which aims to show what has been contributed against the CAPs, and identify the funding gaps.

The fourth group focused on ways of harmonizing the reporting and managerial demands made by donors on humanitarian agencies—specifically on U.N. High Commissioner for Refugees (UNHCR), OCHA, and ICRC. The group focused on the three U.N. agencies to determine what demands are being placed on NGOs, as too much oversight can outweigh its usefulness. If donors can agree on a common format and indicators, this would make the process more efficient. In addition, different memoranda of understanding (MOU) and framework agreements impose a managerial burden on partner agency.

Finally, donors agreed to develop plans in their own governments to promote the wider use of GHD principles and good practice.

Sixteen months later, what has GHD accomplished? In general, Ms. Kyloh noted that governments now realize that this effort is more involved than previously thought. GHD is not easy, and it takes time. There are differences in conceptual approaches. The inertia of bureaucracies works against change. The urgency of day-to-day assistance

mitigates against policy changes and greater coordination. GHD involves institutional change and is thus a long-term project. Donors met in Ottawa in October 2004 to take stock of progress to date. The Overseas Development Institute was commissioned to prepare a mid-term review of donors' efforts.

The report noted that GHD is a long-term effort. Only a few donors have developed specific action plans for domestic implementation. Dialogue with partners has been limited. Knowledge about GHD is limited but growing. There is a need for measures of success. Without measure, it is difficult to determine progress and where gaps remain. It also impedes accountability among donors. At the same time, the endorsement of GHD signaled the political will among donors to improve behavior, which is no small accomplishment. In addition, there has been an increase in participants in both governments and NGOs.

According to Ms. Kyloh, progress has been made in all of the working groups. The Burundi pilot group undertook a mapping exercise of all donor programs for the first time and will continue to meet in Bujumbura every two months. The DRC pilot developed a set of impact indicators for donor behavior, and a baseline survey is being completed. Donors actively participated along with U.N. agencies and NGOs in Kinshasa to draft a CHAP. The group also undertook a prioritization exercise for the CHAP using a common definition for humanitarian assistance. In both DRC and Burundi, a new needs assessment matrix was piloted. This is an attempt to look at gauging vulnerability rather than sectoral needs. Although much work remains to be done, a good start has been made.

Peer reviews have also made progress, operating on a rotating basis with a certain number of donors reviewed each year. Pilot reviews of Norway and Australia are being completed, and the Development Assistance Committee will assess the results in January 2005. Because of this exercise, Australia revised its humanitarian policy to adhere to GHD principles and practices. Ireland has also used GHD as a framework for its humanitarian policy. Sweden and Switzerland have agreed to have their humanitarian programs reviewed by the OECD in 2005. (Reviews are conducted on a rotating basis, and the U.S. will not be reviewed in 2005.)

The OECD and OCHA are working together—which is very much a first—on a common definition of humanitarian assistance. USAID/OFDA is spearheading an effort to improve the timeliness and accuracy of our own reporting of contributions to OCHA's Financial Tracking System and is working with the group on a reporting format.

Donors have conducted a mapping exercise of their reporting and management demands on the three agencies to see where harmonization should take place. The next step will be to examine whether donors can agree on a common reporting format and/or common set of reporting indicators.

On domestic implementation, USAID/OFDA has recently drafted an internal 'roadmap' on how to pursue GHD within the USG. As part of this exercise, USAID/OFDA has

drafted an implementation plan for the office.

Most importantly, donors concluded the Ottawa conference by recommitting to GHD and pressed GHD to be more ambitious. In the future, GHD will continue to work in the five groups and maintain the momentum from Ottawa. Donors plan to expand their outreach to new and emerging donors. One example of this is from the E.U., which is using GHD as a guide for new entrants as they develop and harmonize their policies on assistance with the E.U. Donors also pledged to involve more partners. One way to do this is through better dissemination of information about GHD through conferences such as this one. More importantly, however, donors need to involve more partners in the field. Donors are also in the process of identifying GHD focal points in their capitals.

Canada will host a follow-up meeting in July 2005 to take stock of GHD. Donors will also continue to use GHD as a platform to elaborate on principles and best practices for humanitarian action. Although this was not on the original Stockholm agenda, the Ottawa meeting brought to the surface a few issues related to GHD that require greater reflection and debate. These issues include the use of Provincial Reconstruction Teams (PRTs) and the ability or even desirability of humanitarian action that is independent of political processes.

As NGOs think about GHD, they should consider three aspects. First, NGOs are donors as well as partners. How might NGOs apply GHD within their own organizations and networks? Second, donors can learn from NGO experiences. The donor community welcomes input that NGOs may have on improving coordination, coherence, and implementation. Third, GHD is a partnership and a collective effort. Improvements in donor behavior and in harmonization of practice undertaken in the context of GHD could benefit the NGOs community as implementing partners of not just USAID/OFDA or the USG but of other major donor governments. Good Humanitarian Donorship is really about building on the basics so that our future performance will be better, and working together it will be.

Questions and Answers

Q: What do more evaluations mean? These tend to be anecdotes. We are not hearing any independent perspective. Also, where does GHD stand on PRTs?

A: As a community, donors do not evaluate themselves. Ideally, we need to do it in real time. This will manifest itself through the pilots. In DRC, we are developing a baseline of donor assistance, with a review scheduled for 2005. We need to determine if this will have an impact on the beneficiaries. Even in Ottawa, donors said one part of doing more evaluations is doing more *joint* evaluations. This was written down as something to take forward, but it was not specified as to how we will do this. Donors have agreed to determine indicators and measures for success as well as a firmer time line. As far as the PRTs go, it depends on whether a participant has had a team in the field. Some donors with teams in the field thought PRT was positive. Others, not all with teams in the field, thought that in principle it was a bad idea. This falls under part two, ensuring that military assets be used according to humanitarian law.

Q: Relating this to Hugo Slim’s presentation, there is an indication that most donors are driven by political motivations. If some donors do not make decisions according to needs, what do they base it on?

A: Many times assistance is based on assumptions: if X occurs, then Y will be the need. In addition, donors fund established partners with which they are familiar, who may not be doing projects that are the most critical. Is humanitarian assistance independent? No, it depends on the political side for the budget.

Q: Donors have different forms that NGOs need to fill out. Has there been a discussion on harmonizing? Sometimes, numerous teams come out one after the other asking the same questions.

A: Harmonization of reporting and managerial issues is a critical area. At present, we are looking at what reporting donors require from programs they fund. To date, we have not looked at proposals although that would be a good next step. As far as numerous teams going out and conducting studies, we recognize that those may impede NGOs from getting the job done. The beauty of GHD is that it gives us a platform to discuss these issues. I would also add the need to harmonize initiatives.

Q: Only a few donors have drafted domestic action plans. Have many donors had in-depth meetings with their staff to get their ideas for motivating change, and what competencies are required within staff to achieve the goals?

A: We are at an initial stage, but that is definitely where change will have to happen. If it is not from within, we will not get it right, and we will never have the buy-in to implement it. I do not know to what degree other donors have done that. However, as donors implement plans, they post them on [ReliefWeb](#) not only for the larger community but also for those within their governments.

USAID Audits

Joseph Farinella, USAID/Office of the Inspector General

Mr. Farinella discussed what NGOs should do to prepare for USAID audits, especially in emergencies overseas. He stressed that when managing programs in crises, for example in Iraq and Afghanistan, NGOs have to demonstrate to USAID that taxpayer funds are being used as intended and with no problems. Regardless of the situation and/or degree of difficulty, certain requirements cannot be waived. NGOs must keep in mind that in difficult situations, they have to be more careful because the level of scrutiny of these programs is higher than in the past.

Mr. Farinella stated that NGOs need to establish a system of internal controls that can fulfill three requirements: 1) The money is spent on items that are allowable under the terms signed with USAID. 2) All expenditures are reasonable, meaning that the expense would fit any manager’s common sense regarding normal purchase prices. 3) Whatever is spent is allocable to the project or agreement and that monies do not overlap between projects.

When an audit is conducted, the examiner looks at what money was spent and how expenditures are tied to what is allowable, allocable, and reasonable. The auditor will look at the justification for all the expenditures. If present, then the organization will not have any problems.

Organizations need to present support and justification for all purchases. One might say that it is impossible to put these systems into place when working in a place like Iraq or Afghanistan, but this is wrong. Auditors are paying even more attention to these situations, including Congress and USAID/OIG. NGOs need not establish complicated systems, as this might prevent NGOs from doing their day-to-day work; however, NGOs must have justifications when asked by the auditors. This process can be tied to what the NGO is doing without being a burden or hindrance. It is simple to know what is unallowable by looking at the terms of the agreement and sticking to the provisions of the grant or contract. If the organization follows the provisions of the agreement and only purchases what is allowed for equipment, services, supplies, technical assistance, etc., the organization will not have any problems.

Questions and Answers

Q: What are common mistakes that NGOs should avoid?

A: A classic example is paying for entertainment or alcoholic beverages. The issue of reasonableness is another common area for mistakes. If the purchase price for a vehicle is two or three times the average price, then those expenditures are not considered reasonable.

Q: What does OIG think about the price instability that commonly occurs during a disaster, sometimes called price gouging? For example, before an event and after an event, the reasonable price for plywood is \$2/sheet, but during the emergency, the price rose to \$6/sheet and maybe our organization paid an extra \$2/sheet to have the materials delivered to the site to save time. What should an organization do to defend these purchases?

A: Price instability during a disaster is a fact of life and is the cost of doing business. If the organization documents the expenditures and fully discloses the circumstances at the time of the purchase, then there is no problem. With a justification like the one you have explained, an auditor will allow the purchases. Moreover, even if the auditor does not accept the justification, it is not the final word. The USAID grants and contracts officer makes a final decision on whether to allow the purchase, based on the auditor's determination and the documentation your organization has provided.

Q: What role does OIG have in upholding certifications and regulations, specifically regarding the antiterrorism certification?

A: These are covered under the performance audits that we do with our own staff or through firms contracted to do financial audits for USAID. If there is a specific question regarding the destination of funds, then it will be investigated as part of the audit. Examples include ongoing audits in West Bank/Gaza regarding funding to the Palestinian

Authority. We also build in these types of steps to our internal audits of USAID Missions. Additional information on USAID/OIG can be found at www.usaid.gov/oig.

SUMMARY OF PLENARY PANEL SESSION

Facilitator: Anita Menghetti, Humanitarian Advisor, USAID/DCHA/PPC
Presenters: Christine Knudsen, Chair, Interaction Working Group on Protection
Robert Painter, U.N. Office for the Security Coordinator
(UNSECOORD)
Stephanie Sobol, Emergency Disaster Relief Coordinator (EDRC),
USAID/OFDA

- **Anita Menghetti, Humanitarian Advisor, USAID/DCHA/PPC**

It is great to hear the USAID Administrator talk about human rights and protection. As the Administrator mentioned, the discussion is focused on operational concerns of providing humanitarian assistance while using human rights thinking—not putting people on trial. Dr. Hugo Slim mentioned that American humanitarians are known for doing more than the minimum. Maintaining and mainstreaming the humanitarian voice in the USG is not a new problem. NGOs remind the humanitarian arm of the USG to check its policies and to ensure that humanitarian work is not compromised. Over the years, the tenor of discussions and the knowledge base at this conference have grown tremendously.

- **Christine Knudsen, Chair, Interaction Working Group on Protection**

It was gratifying to hear the USAID Administrator's comments on how to "operationalize" protection. Protection is not a new concept, but now the international community is addressing it and trying to meet new challenges. Ten years ago, protection was considered "someone else's job." However, the framework of war has changed and the effect of war on vulnerable populations has changed. Protection is a collective responsibility. In World War I, 90 percent of casualties were military. Now, 90 percent of casualties in war are women and children. Integrating the protection needs of women and children must be an essential part of programs. In Bosnia, 50,000 women were raped. In Liberia, 40 percent were raped. In Darfur, rape is used as a terror tactic.

Within the context of war and a threatening environment, the minimalist assistance package (i.e. food and water) is not sufficient. The creation of a USAID IDP policy is a good first step. The international community must remember that under international law, protection is the responsibility of states. However, when states are unable or unwilling to protect their populations, the international community needs to step in. Although international humanitarian law provides clear mandates for the ICRC and UNHCR and these mandates are important, protection is a collective activity. Given the scope of current protection problems, populations are not benefiting from the international mechanisms. In addition, while 13 million refugees are supported by the mandated agencies, 20 million IDPs do not benefit from this system. Protection in conflicts is about more than just preventing harm. It is also about promoting well being. It is important to develop principles for relief work

Within the framework of “operationalizing” protection, humanitarians need to examine physical protection (violence, murder, torture, gender-based violence), exploitation, coercion or displacement through involuntary return, and the deprivation of services. Protection and relief support each other, but they are not the same thing.

There are four ways USAID/OFDA can incorporate protection: 1) Encourage multisectoral programs that encourage consultations with women about their preferences for latrines, water, and other services. 2) Improve data collection with data disaggregated by age and gender since unlike data for under-five populations, it is in short supply. 3) Encourage capacity building of staff and security personnel to prevent sexual exploitation, identify abuse, and take steps. 4) Improve coordination of humanitarian activities since the presence of international staff increases the protection of vulnerable populations. Regular field visits are needed and agencies must designate protection monitors. During the last two years, USAID has come a long way on promoting protection. The USAID Administrator has given a clear mandate and has stated the need to “operationalize” protection. It is critical that USAID’s IDP policy paper is implemented. It is a positive step that protection officers are now included on Disaster Assistance Response Teams (DARTs). In addition, it is good that protection is incorporated into USAID/OFDA Annual Program Statements (APS) since this will change the quality of work USAID/OFDA funds.

There remains a tension among NGOs of how to provide assistance within the war on terror. However, NGOs need to find creative ways to continue the dialogue and maintain operational protection responsibilities. All actors on the ground, not just USAID/DCHA/OTI must take responsibility for protection on the ground and the application of protection guidelines in the field needs to be universal. Donors must be consistent when prioritizing protection activities, coordinate with other actors, and continue the protection dialogue. Ms. Knudsen stated that she is the co-chair of the InterAction working group on protection and that InterAction has prepared a paper on integrating protection into humanitarian response that is available on the InterAction website.

Question and Answer

Q: I just returned from a real-time evaluation in Chad that incorporated protection. It is fashionable to talk about the whole international community doing protection, but that takes significant resources. In Darfur, U.N. mandates for protection are unclear and it is not efficient for NGOs to do protection without understanding the U.N. role.

A: Darfur is a chaotic situation. Protection and access are the top issues facing the humanitarian community. There is a lack of clarity on the mandated agencies and the generalized agencies and there is a lack of coordination around rape. There has been an increased effort to increase monitoring and reporting of protection, but violence needs to be prevented. The first step to preventing violence is to talk to women about their preferences for enhancing protection. Protection should be integrated into all programs.

- **Robert Painter, UNSECOORD**

The August 2003 bomb attack at the U.N. headquarters in Baghdad changed the landscape of U.N. security. However, UNSECOORD's budget remains frozen at pre-Baghdad attack levels. There is currently a debate in the U.N. General Assembly 5th committee on the future of security within the U.N. There are people who would like to eliminate UNSECOORD or combine it with the Peacekeeping Department (DPKO). A recent International Council of Volunteer Agencies (ICVA) article presented a heated argument against the existence of UNSECOORD.

An OCHA report entitled "Maintaining a U.N. Humanitarian Presence in Periods of High Insecurity: Learning From Others" is an affirmation of UNSECOORD's existence since it calls for maintaining a U.N. presence in situations of high insecurity. The report links programs with security, promotes NGO and UNSECOORD collaboration, and encourages the role of personal security awareness. In the report, OCHA states that NGOs are better at managing security risks than the U.N. However, it is difficult for the U.N. to accept high levels of NGO staff deaths as an indication of successful security management. Even though the U.N. is as engaged in the field as NGOs, the NGO community has lost more staff than has the U.N. in recent years. The OCHA report recommends that the U.N. employ area security coordinators (ASCs), but this is already U.N. policy. In Darfur, for example, there is an area security coordinator in each of the Darfur state capitals. UNSECOORD advises these coordinators, but they have the responsibility for security decisions. While OCHA did not recognize Operation Lifeline Sudan (OLS) as such, UNSECOORD believes that this operation is a best practice and should be used as a model in the future.

Within the U.N. security system there is a short chain of command from the U.N. Secretary General down to the country level representative, down to the ASC. At each level, UNSECOORD provides advice, but final security decisions rest with the ASCs who are civilians. One common misperception is that UNSECOORD calls for an evacuation. Ideally, security personnel in the field make all security decisions. The UNSG is the only person who can authorize an evacuation. There have only been two instances of the UNSG deciding to evacuate a country in spite of the opinion of a designated official—Iraq and Afghanistan. The decision to return also rests with the UNSG when the level of risk is deemed to have returned to manageable levels. However, it is hard to make this determination without representatives on the ground.

With the exception of integrated missions, like Sudan, all U.N. humanitarian coordinators are now designated security managers. The humanitarian coordinators aim to avoid a phase five evacuation at all cost. To manage security while avoiding an evacuation, they may reduce operations, establish safe havens, or temporarily withdraw staff. In the past, UNSECOORD has been blamed for choosing to evacuate a country; however, it is the prerogative of the humanitarian coordinator to relinquish security decisions to the UNSG.

Another misperception is that in order to benefit from the U.N. security system, NGOs must agree to an MOU with UNSECOORD. Many organizations such as the World

Bank and IOM have signed an MOU with UNSECOORD to be part of the U.N. security management system and receive the same benefits as U.N. agencies. NGOs can receive the same benefits of this system, but few NGOs have agreed since they do not want to be constrained by U.N. security guidelines. However, the U.N. will provide evacuation free of charge to NGOs when needed, and many NGOs have benefited from this without the MOU. Some NGOs participate in the Interagency Standing Committee (IASC) security task force that resulted in the first release of the annual security manual on Feb 13, 2001. The designated U.N. security official determines the extent of collaboration with NGOs and many have taken steps to promote collaboration.

For national NGO staff, the situation is complicated since the host government bears responsibility for their safety. If the host government is belligerent, then national NGO staff members are subject to additional pressures and the case can be made to include them in country evacuations. However, in general, national staff members have better security information and can manage security better than international staff. The U.N. is legally obligated to provide all staff members the same benefits; however, it cannot usurp the government's role of providing security to its citizens. Therefore, instead of evacuating local staff members, the U.N. may help them by providing salary advances or establishing safe houses. It is not the job of the U.N. to take the responsibility of moving national staff to another country.

Questions and Answers

Q: U.N. security risk management policy is good, but the implementation of the policy is problematic. Many U.N. officials do not have experience in a crisis and many security officials do not have program experience. Does the system work in practice?

A: Yes, some coordinators will have failures during a crisis, but others are doing well, including the SRSGs in Sudan and Cote d'Ivoire.

Comment: In response to your statement that U.N. work is similar to NGOs I disagree since everyone knows that NGOs are at the front lines and there are many more NGO workers than U.N. workers. It is not the case that since more NGO workers died than U.N. workers that NGOs are not upholding security standards. Understanding the reality of the situation will help everyone to improve security.

Q: Please describe the UNGA reaction to UNSG recommendations to strengthen the U.N. security management system.

A: This refers to unifying UNSECOORD, DPKO, and other U.N. safety and security officers under one structure. The recommendation went straight to the UNGA 5th committee but a conclusion has not yet been reached. UNSECOORD plans to increase staff in the field and in headquarters, but the UNGA is divided. UNSECOORD hopes that the UNSG will intervene to break any impasse.

Q: Has there been an impact on the ground of U.N. Security Council Resolution 1325 regarding the composition of peacekeeping missions and the involvement of women on the ground, particularly in Liberia?

A: The impact of the resolution is being felt more in the policy stages than in the field.

- **Stephanie Sobol, Emergency Disaster Relief Coordinator, USAID/OFDA**

The new model of the integrated mission means the U.N. peacekeeping mission, including humanitarian operations, falls under one management structure—under the SRSG and DPKO. In the traditional model, the humanitarian coordinator operates separately from the peacekeeping force. Why is the U.N. using the new model of one direct management line? There was criticism of the U.N.'s management in failing states, so U.N. resources were combined. In Sierra Leone, there is a minimalist model since the Deputy SRSG is also the humanitarian coordinator and is supported by an OCHA office that is staffed separately. In Liberia, there is a maximalist approach since all strategic operation falls under the Deputy SRSG, including all humanitarian coordination. Since July 1, 2004, there has been no OCHA presence in Liberia, as DPKO is managing and staffing humanitarian assistance through the humanitarian coordination section of UNMIL. OCHA staff that had worked in Liberia were folded into the UNMIL humanitarian section; however, as of December 1, OCHA will liquidate its staff and those people may move to DPKO. The integrated mission model has not been well-received by the humanitarian community.

The definition of the term “humanitarian space” implies the ability to deliver humanitarian assistance through neutrality, impartiality, and independence from other actors. In addition, it implies delivering assistance based solely on need, not on any other agenda. How do humanitarians maintain these core principles and find a humanitarian space within a peacekeeping mission? There are two opposing views of the track record of the integrated mission. The U.N. assumes that if you harness all resources into one overall goal of peace and security that this will improve the likelihood of success. NGOs assume that, as the international community moves towards integrated missions, there will be problems delivering humanitarian assistance. However, more information is needed about the benefit or the negative consequences of integrated missions. Oxfam/GB is examining this issue in Cote D'Ivoire. In addition, beneficiaries may not care who is providing them with assistance as long as they are receiving assistance. The caveat is that not all assistance-providers may adhere to the same humanitarian standards, so it may be difficult to maintain the integrity of the humanitarian space. Regardless of these questions, integrated peacekeeping missions are here to stay.

Question and Answer

Q: You stated there is a tension between the goals of humanitarian assistance and peace building. However, in Liberia no one can come up with examples of how the integrated missions are hurting humanitarian operations. I reject the existence of an inherent tension, and if there is a tension in Liberia, NGOs need to come up with examples of when there were negative consequences. How do you respond?

A: There is an apparent tension and people on the ground say that the humanitarian realm and the DPKO realm are notably different. However, you are right that no negative consequences have been observed, so it remains unclear if the two realms can coexist.

USAID/OFDA REGIONAL TEAM DISCUSSIONS

1. Asia and the Pacific/Latin America and the Caribbean (Asia/LAC)

Presenter: Rob Thayer, Regional Coordinator, USAID/OFDA

Mr. Thayer began the session with a quick introduction of the briefing participants. He then presented an overview of disaster vulnerabilities faced by the Asia/LAC regions. In Asia/LAC, there is a prevalence of natural disasters and fewer of the big complex emergencies involving large IDP populations, with exceptions such as Indonesia and Colombia.

Natural disasters have been a major focus of USAID/OFDA's work in Asia, which extends from Pakistan and India eastward. The current situation in Asia is characterized by increased vulnerability to natural disasters as well as increased commitment by Asian governments to undertake preparedness activities. Vulnerability to natural disasters has dramatically increased over the last two decades due to population pressures, habitation of marginal lands, urbanization, and uncontrolled industrialization. Annual losses due to disasters in Asia now exceed development inflows. Considerable capacity exists in the region and most Asian countries can now manage disasters up to moderate severity with no external assistance. There are several conflicts with regional or global implications, displacement of civilians, or influenced by terrorist groups (e.g. Nepal, southern Philippines, Indonesia, Kashmir, North Korea).

In both Asia and LAC, USAID/OFDA operations are largely field-driven, guided by recommendations from OFDA Regional Advisors. USAID/OFDA works to promote national and local capacity whenever possible. Overall, USAID/OFDA allocates approximately 90% of funds toward response and 10% toward mitigation. In Asia/LAC, that ratio is more balanced.

In order for preparedness activities to succeed as an investment, they must be carried out in an atmosphere that will sustain them. Target countries or regional institutions must demonstrate commitment and indicators of success (e.g., Millennium Challenge concept). As USAID/OFDA's resources are limited, only carefully targeted high impact preparedness initiatives can be undertaken. More frequently, USAID/OFDA has been using open and competitive solicitations like the APS to select implementing partners for preparedness activities. On the other hand, USAID/OFDA will respond to disasters anywhere in the region, wherever there are critical needs, based on standard USAID/OFDA disaster response criteria.

The LAC region remains extremely vulnerable to natural disasters including hurricanes, floods and landslides, drought, earthquakes, and volcanic eruptions. A trend toward greater political stability exists, but the potential for civil conflict remains high in several countries including Haiti and Venezuela. National capacity to prepare for, assess, and respond to disasters is relatively high and growing (especially in South America).

Questions and Answers

Q: Why is the Asia sub-regional office in Katmandu, Nepal?

A: There was a lot of discussion regarding the location of the office, and the other obvious choice would have been India. Nepal was selected, however, due to the large number of vulnerabilities there, there was also a concern that while in India, USAID/OFDA regional advisors sometimes become consumed with work on India-specific issues, and might have less flexibility to address the rest of South Asia.

Q: Can you talk about food security in Honduras?

A: For food assistance, USAID/OFDA generally defers to colleagues in USAID's Office of Food for Peace. I recently traveled to Guatemala where USAID/OFDA considered assistance for drought but ultimately did not provide resources. USAID/OFDA would respond in Honduras if there is a need for resources there which cannot be met by FFP or the USAID Mission.

Q: Can you give an outline of the types of capacity training offered in Haiti?

A: Haiti is a difficult country in which to conduct risk management training program (RMTP) courses. The RMTP was developed to conduct direct training and then moved on to train-the-trainer-type training and now has evolved to provide more technical assistance and promote regional collaboration on disaster management issues. Haiti, though, has not been a part of the program due to political and social turmoil and the lack of disaster response organizations there. USAID/OFDA is starting from scratch in Haiti with regard to disaster and risk management training. USAID/OFDA has been speaking with the U.S. Geological Survey (USGS) and the National Oceanic and Atmospheric Administration (NOAA) to explore ideas for community-based early warning systems for flooding in Haiti.

Comment from Richard Olsen, Florida International University: The RMTP in the Caribbean had a couple of false starts, and it is still a few notches below the level of the program in the rest of Latin America. USAID/OFDA aims to reach people at the professional, technical level rather than at the senior managerial level because trained personnel at intermediate levels are less likely to be removed from office because of political changes. In addition, with regard to political stability in the LAC region in the next 5 to 10 years, some polls show that there has been an erosion of public support for democratic regimes, falling below the 50 percent mark for the first time. In some areas, the public opinion has indicated a preference to return to authoritarian rule if that meant problems would be resolved and standards of living improved.

Q: In the Philippines, can you say more about the Mindanao Emergency Response Network (MERN)? Will USAID/OFDA only fund organizations in the network?

A: The network was created in an attempt to improve the readiness of local organizations to assist victims of conflict. In the Philippines, USAID/OFDA used a competitive APS solicitation to select an implementing partner. The idea was that USAID/OFDA cannot engage directly with all the organizations working with IDPs in Mindanao and cannot send OFDA personnel every time a major displacement occurs.

However, many community-based organizations know the area and the people and can deliver assistance quickly and effectively. In the Philippines, USAID/OFDA is partnered with Save the Children, which then serves as an intermediary on the ground and facilitates actions with smaller local organizations.

Q: Can you outline a strategy for Bangladesh?

A: USAID/OFDA works very closely with the USAID Mission in Dhaka, which is very experienced in disaster management. USAID/OFDA has a support role in Bangladesh but still responds almost every year to disaster declarations for flooding. OFDA also supports disaster preparedness activities in Bangladesh.

Q: My organization has a strong national network in the Philippines, and yet we have never heard of the Save the Children emergency network. How do you make sure that USAID/OFDA implementing partners are reaching out fully to all possible partners in the field?

A: Our impression is that SCF has done good outreach and has an extensive network in the area where they are working. It might be possible that your organization and Save the Children are working in different areas.

Q: Is the warehouse in Guam closed?

A: The warehouse in Guam is closed, but may still contain residual stockpiles. Other USAID/OFDA warehouses are located in Dubai, Pisa, and Miami.

2. East and Central Africa (ECA) Team

**Presenters: Ian MacNairn, Regional Coordinator, USAID/OFDA
Tim McRae, Disaster Operations Specialist, USAID/OFDA
Pia Wanek, Disaster Operations Specialist, USAID/OFDA
Dave Lillie, Disaster Operations Specialist, USAID/OFDA
John Marks, Sudan Task Force, USAID/OFDA
Keith Disselkoen, Deputy Manager for Coordination, Darfur RMT**

The presenters gave a brief overview of the ECA Team portfolio that comprises countries in East and Central Africa, including Sudan, Chad, Ethiopia, Eritrea, Djibouti, Kenya, Somalia, Tanzania, Burundi, Rwanda, Uganda, the Central African Republic (CAR), and the Democratic Republic of Congo (DRC).

East and Central Africa consists of countries that are among the poorest in the world and are constantly vulnerable to disasters. The region suffers from protracted large-scale conflict, widespread population displacements, recurring droughts, and, to a lesser extent, floods. Pastoralists are among those most vulnerable to climatic shocks as their livelihoods are increasingly threatened by population growth, environmental degradation, and few options for alternative income sources. In recent years, USAID/OFDA has repeatedly responded to the emergency needs of pastoralists in addition to the long-term, war-affected populations.

There are currently some signs for some optimism in ECA. There is potential for peace or at least minimized conflict in Somalia, DRC, Burundi, Uganda, and Sudan. However, the very fragile transition processes in these countries needs to be fully supported by the international community and other stakeholders. Food insecurity continues in Ethiopia and Eritrea, and there is a drought in Kenya that is also potentially threatening Tanzania. In FY 2005, USAID/OFDA will concentrate on several priority countries, including but not limited to Darfur, Southern Sudan, Ethiopia, DRC, Burundi, and Uganda.

Team Personnel – Washington

- Regional Coordinator—Ian MacNairn
- Disaster Operation Specialists—Kasey Channell (Horn), Dave Lillie (Sudan), Tim McRae (DRC), Pia Wanek (Uganda, Rwanda, Burundi)
- Information Officers—Ngoc Clark, Colin Thomas-Jenson, Shannon Rogers, Marian Spivey-Estrada
- Expanded Team—Caroline Abla (Nutrition), Nancy Egbert (Health), Marion Pratt (Social Science and Gender), Laura Powers and Julie March (Food Security)

Team Personnel – Field

- East and Central Africa Office (ECARO), Kenya
 - Principal Regional Advisor—Jack Myer
 - Regional Information Officer—Sonya Laurence Green
 - Sudan Field Officer—John Kimbrough
- Ethiopia
 - Emergency Disaster Response Coordinator—Heather Evans
- Sudan
 - Senior Humanitarian Advisor—Kate Farnsworth
 - Program Officers—Jacquelyn Poole-Galdas, Jim Conway
- DRC
 - Program Officers—Jay Nash, Victor Bushamuka
- Burundi
 - Emergency Disaster Response Coordinator—Denise Gordon

Darfur

In FY 2004, USAID/OFDA provided more than \$71.6 million to support health, nutrition, food, water and sanitation, security, emergency relief commodities, shelter, logistics, and coordination in Darfur. In FY 2005, with the security situation being fluid, USAID/OFDA is focusing on IDP protection, particularly inside of the camps. Most of the information that USAID/OFDA has received is that protection has been breaking down recently. Some militias have taken refuge inside of the camps, and the GOS is developing a strategy to rid the camps of the militias.

USAID/OFDA seeks to minimize mortality, particularly for women and children. Although USAID/OFDA has allocated most of its current budget, more money should be made available soon. USAID/OFDA wants NGOs to look at creative ways to reduce mortality, particularly in women and children, and to assist livelihoods, particularly

something that can be done in the camps but in which the skills could be transferable to the villages of origin.

USAID/OFDA has allocated most of the current budget but should soon receive additional funding. USAID/OFDA is looking for proposals to fund. Please submit a 4 to 5 page concept paper to USAID/OFDA representatives on the DART in Sudan.

Questions and Answers

Q: We sent a concept paper six to seven weeks ago at the field level, and we have received no response. Where should we send our concept paper? Who is looking at them? When you say you have allocated most of the current budget, what does that mean? What funding is available at this point?

A: The concept paper should go to the DART in the field. Considerable authority has been delegated to the DART. It makes no sense for the RMT to look at concept papers before the DART vets them. If proposals have not been addressed, you can send an email to headquarters (rmtdarfur_pgo@ofda.net). The RMT will then talk to the DART to see where the concept paper is in the process.

Q: One of the responses to concept papers that we have received is that USAID/OFDA does not have any money or that USAID/OFDA does not have a budget. We heard this two weeks ago.

A: If concept papers were submitted at the end of the fiscal year, then no money would have been available. Recently USAID/OFDA received new funds, although the total amount is not yet known.

Q: My understanding with the supplemental was that it was for at least \$55 million for both FY 04 and FY 05. It also seemed that some money might be available that was not part of the regular FY 05 funding.

A: Some actions were approved to be fully funded and will gradually receive this money. Thus, although only a portion of the money appears to have been spent, it has been fully committed.

Q: Joanna Crandall talked about protection and firewood in Darfur. Could you explain USAID/OFDA's priorities for protection activities in Darfur?

A: These are pertinent issues and good examples. USAID/OFDA does not want to restrict the creativity of proposals coming in. NGOs should not feel constrained by things you want to present.

Q: What is the time frame and process for proposals?

A: Submit a concept paper at the field level. NGOs with ideas that the DART is interested in will then be asked to submit a proposal to the DART and the RMT. The time frame of the project is up to 12 months depending on the objectives.

The intention is to continue to have the DART in Darfur for the next 12 to 18 months. Over the next few weeks, we will get a core of technical people capable of assessing the

technical merit of proposals. After Christmas, the DART will step up, with more people in field, as well as more in water and sanitation, health, nutrition, and possibly food security. Until now, it has been difficult to look at innovative ideas because we have been focused on emergency relief commodities, food, health, and security. Now we are seeking to look at the longer term.

Q: There appears to be a lack of agreement on cooperative agreements. Four different program officers have all had varying interpretations of CAs. Has this been resolved?

A: The grants working group is looking at this issue and will soon send out clear guidance on CAs and IPs.

Sudan

In FY 2005, USAID/OFDA plans to integrate an IDP focus into all programming. Priority program sectors include: health and nutrition, water and sanitation, livelihoods, food security and agriculture, animal services, and emergency relief commodities. Key geographical areas include transition zones, garrison towns, and northeastern Sudan.

Questions and Answers

Q: The Sudan APS does not mention protection. Is this not a priority or do you not want it as a stand-alone?

A: There is a section on protection in the revised guidelines. We encourage protective programming to be incorporated in all of the sectors. We are not looking for a stand-alone protection program. If a stand-alone proposal comes in, we may share it with USAID/OTI who may be more able to fund.

Q: What can you tell us about the ‘fragile state strategy’?

A: The strategy is in the draft stage. We do not know yet what it will mean for those managing programs. The purpose of the strategy is to simplify funding by program area. As you know, funding is complicated due to numerous offices and earmarks. At the same time, the strategy’s overall view is to try to look at USAID’s work within cluster programs in three areas. First, countries with reasonable economies will be assisted through the millennium challenge fund. Middle level countries at the transformational level will receive development assistance to graduate them out. Collapsed, crisis, or fragile states—the third category—will receive humanitarian assistance. It was initially thought that Sudan and Ethiopia would be model countries where this planning would be done. However, Sudan is an anomaly. It is a country in crisis but receives a high level of development funding. This is not appropriate for a country like Sudan with Darfur and the older civil war in the south. The ‘failed state strategy’ was introduced during the USAID planning retreat in Ethiopia a few weeks ago in an internal white paper called ‘Aid in the 21st Century.’ The fundamental problem in these countries is governance, and many problems in these countries are related to that core issue.

Ethiopia

There are currently an estimated 6 to 8 million vulnerable persons that require food assistance in Ethiopia. Up to 15 million may require assistance if the main rains fail this

year. The following issues are of particular concern: resettlement, GFDRE taxation and trade policies regarding cross-border livestock, land, poor market linkages, insufficient infrastructure, and government capacity. In FY 2005, USAID/OFDA will focus on the regions of Southern Nations, Somali, Oromiya, and Gambella. USAID/OFDA will focus on the sectors of water and sanitation, rapid response in health and nutrition, and food security and livelihoods interventions. USAID/OFDA is particularly interested in recovery initiatives to respond to the cyclical nature of drought emergencies.

DRC

USAID/OFDA assistance to the DRC is primarily focused on food security and health. Food security initiatives include seeds and tools, seed multiplication, food-for-work, cash-for-work, and infrastructure rehabilitation to facilitate market access and support livelihoods. Health initiatives include primary health care, vaccinations, water and sanitation, TFC/SFP, and nutrition.

Although USAID/OFDA has traditionally devoted more assistance to health, it has recently shifted focus to food security, as reflected in the efforts to rehabilitate infrastructure to facilitate market development. USAID/OFDA is working to transition health projects to the USAID Mission for longer-term funding. USAID/OFDA likely will start with a few test cases, perhaps with dual funding. This will allow longer-term programming in DRC and allow USAID/OFDA to shift funds to other activities. USAID/OFDA programming in the DRC is still focused on the east, but USAID/OFDA will fund in other areas if needs are demonstrated. In FY 2004, USAID/OFDA had \$22 million in funding. FY 2005 may be the same, but it might be less due to funding constraints.

Burundi

The transition is still ongoing, and the political processes for the next six months will be crucial. USAID/OFDA is particularly concerned about the reinstatement of returning populations, malaria and limited health care access, food insecurity and malnutrition, insufficient water and sanitation coverage, and the affects of cassava mosaic disease in the north.

In the past, USAID/OFDA has released APSs to develop a more comprehensive approach for all sectors, but the APS this year, which represents a part of the overall portfolio, focuses on food security and nutrition linkages. USAID/OFDA has been funding programs for more than a decade in Burundi and is now looking at more developmental relief proposals. In particular, USAID/OFDA is looking for proposals that can maintain flexibility during the transition process. USAID/OFDA seeks to support both displaced populations and vulnerable groups throughout the country.

Uganda

The current peace process is tentative, but USAID/OFDA will look for transitional activities in the event the conflict ends. IDP support is a priority, given the more than 1.5 million currently displaced. In FY 2005, USAID/OFDA plans to focus on water and sanitation, health, nutrition, and emergency relief items. USAID/OFDA also works with

USAID/Uganda to plan for possible post-conflict reintegration, agriculture, and public health initiatives.

Questions and Answers

Q: Are you looking for creative and innovative programs in Uganda. What is the submission process?

A: Yes. Initial contacts with ideas and concept papers should go to Jack Myer at the USAID/OFDA Regional Office in Nairobi and Walter Welz at the USAID Mission in Uganda. Full proposals should be sent to Pia Wanek in Washington.

Q: Has any type of transition program been developed?

A: USAID is working on a reintegration and resettlement program should the peace process succeed. USAID/OFDA would link reintegration and resettlement programs with current initiatives in food security, agriculture, and health. USAID/OFDA realizes that needs will likely increase with peace. USAID/OFDA is actively looking for any innovative programs for northern Uganda and commends NGOs currently working there despite the limited access.

Q: What are your funding levels for FY 2005?

A: USAID/OFDA provided \$9 million in FY 2004, up from \$4 million in FY 2003. There are no specific figures for FY 2005, but ideally, USAID/OFDA funding will remain at a higher level.

Other

Are there any questions on USAID/OFDA activities in Kenya, Somalia, Eritrea, or Djibouti?

Questions and Answers

Q: If rains fail in Kenya are there plans for additional resources?

A: Potentially yes. After a needs assessments in December and January, USAID/OFDA will balance priorities throughout the region. USAID/OFDA will look at concept papers now, so please submit them as soon as possible.

Q: Given the political changes in Somalia are you looking for new ideas?

A: We will continue to work with our current partners. There has also been renewed interest from the State Department, but plans are still being developed. A more concrete answer should be available in next month. We would like to engage with the Government of Somalia and assist as much as possible.

Conclusion

Richard Olson reported an incredible statistic. USAID/OFDA's budget has more than tripled in recent years. ECA is disproportionately responsible for this. There are serious problems to address. We hope that some of these problems can be minimized with NGO-USAID/OFDA cooperation.

3. Europe, the Middle East and Central Asia (EMCA)

**Presenters: Alex Mahoney, Acting Regional Coordinator, USAID/OFDA
Rob Andrew, Regional Advisor, USAID/OFDA
Christine Gottschalk, Disaster Operations Specialist, USAID/OFDA**

In FY 2004, USAID/OFDA provided more than \$52 million to EMCA countries, primarily for the Iraq crisis. In recent years, the EMCA region has dealt with large complex humanitarian emergencies. Two years ago, Central Asia was the largest recipient of EMCA assistance, and prior to that, the Balkans.

In Iraq, from FY 2003 to the present, USAID/OFDA has provided more than \$115 million in humanitarian assistance for coordination, health, nutrition, logistics, shelter, emergency relief supplies, support to IDPs, water and sanitation, and capacity-building activities countrywide. As the USAID reconstruction program continues to expand in Iraq, USAID/OFDA is moving away from a broad assistance program and is focusing its efforts on assistance provided to IDPs.

In Afghanistan, USAID/OFDA provided more than \$9.8 million in FY 2004 to support winter programs, transitional shelter assistance, and assisted returns. USAID/OFDA also provided \$50,000 in response to the drought in Afghanistan.

USAID/OFDA responded to the December 26 earthquake in Bam, Iran, by deploying a Disaster Assistance Response Team (DART) consisting of 7 individuals from USAID, 11 from Fairfax County Urban Search and Rescue, and a 63 person International Medical/Surgical Response Team from FEMA. USAID/OFDA provided five airlifts of relief commodities and contributed more than \$8.4 million in grants, logistics, commodities, coordination, urban search and rescue, and medical assistance team support in Bam. USAID/OFDA supported World Vision, Action against Hunger (AAH) and Mercy Corps.

In addition, the EMCA portfolio includes mitigation activities and responses to natural disasters.

- Ongoing seismic hazard mitigation activities in the Central Asian Republics - \$300,000
- Turkey Seismic Hazard Mitigation Activities - \$169,650
- Tajikistan Floods August 2004 - \$50,000
- Georgia Floods July 2004 - \$50,000
- Portugal Fires July 2004 - \$64,000
- Greece Olympics Preparedness August 2004 - \$20,000
- Romania Floods September 2004 - \$50,000
- Russia Terrorism September 2004 - \$130,230

To date in FY 2005, USAID/OFDA has provided \$2 million for Iraq and \$107,000 in additional funding to Afghanistan toward a Government of Afghanistan fund managed by the U.N. Office for Project Services (UNOPS) to assist the hardest hit areas and conduct a drought assessment. Iraq will remain a top funding priority in 2005. USAID/OFDA will continue to focus on support to IDPs and respond to emergencies. Target populations will include long-term IDPs remaining in areas of displacement; IDPs returning to non-contentious areas; and IDPs displaced since the 2003 conflict. The deadline for the Iraq Annual Program Statement has passed, but USAID/OFDA may still consider proposals if funds are available. USAID/OFDA plans to provide up to \$5 million in response to the drought in Afghanistan during 2005. USAID/OFDA anticipates providing support in the areas of emergency water and sanitation and cash for work. During a recent assessment trip, humanitarian agencies reported that there are pockets of need throughout the country. Potable water is the top priority, along with cash-for-work programs. USAID/OFDA will also continue to respond to the drought in Afghanistan, promote mitigation activities in Central Asia and Turkey, and remain ready to respond as other emergencies arise.

Questions and Answers

Q: Will there be an APS for Afghanistan?

A: For Afghanistan, USAID/OFDA does not plan to release an annual program statement (APS), but is accepting unsolicited proposals.

Q: What is the status of the Iraq APS?

A: The deadline has passed, but the APS technically stays open for six months. Therefore, proposals received after the deadline may be considered if funds are available. The initial decisions on APS awards should be made in the next several weeks.

Q: Is there overlap with USAID/OFDA's programs and programs funded by the USAID Mission in Afghanistan?

A: The USAID Mission and USAID/OFDA coordinate to ensure that there is no duplication of program activities. It is usually the case that we operate in areas where there is not a lot of other activity. A former USAID/OFDA colleague works for the USAID Mission in Kabul, which enhances coordination.

Q: Is USAID/OFDA operational in the West Bank or Gaza?

A: USAID/OFDA could be operational in the event of a new short-term emergency. USAID/OFDA has responded previously in Jericho with emergency relief commodities and an assessment. However, in most cases the USAID Mission handles humanitarian assistance.

Q: The USAID Administrator stated yesterday that it is a priority to incorporate protection into programs. How will that affect current programs in Iraq and Afghanistan?

A: USAID is becoming more proactive on protection. It is now the case that USAID/OFDA and other humanitarian organizations must monitor protection. OFDA is looking for partners to incorporate protection of vulnerable populations into their

program designs cross-sectorally rather than as stand-alone “protection” objectives or proposals.

Q: Could NGOs submit a proposal with 10 percent of the budget designated for a protection monitor?

A: Generally, pure protection issues are funded through USAID/OTI. However, USAID is examining ways to transition from relief to development programs, and USAID/OFDA incorporates protection through cross-sectoral programming. For example, a water and sanitation program may have a protection focus and if that program needed a protection officer, USAID/OFDA would consider that expense. However, USAID/OFDA does not want pure protection proposals that are not cross-sectoral. In other countries, the office has begun to fund protection officers. .

Q: What is the USAID/OFDA perspective on USAID’s Alternative Livelihoods program in Afghanistan? The program has controversial elements and could have implications for humanitarian work. Is USAID/OFDA trying to avoid work in areas where DynCorp might be providing security?

A: From a USAID/OFDA perspective, we are programming for a small drought response. This is very small compared to the USAID reconstruction funds. We want to fund in areas where beneficiaries are not being reached and there is an urgent need. We will continue to prevent overlap with other USAID-funded activities. We cannot speak for the development of the USAID counter-narcotics response. There has been a great deal of concern about what makes sense and the possible negative effects, but as an agency, we want to remain engaged. NGOs should raise concerns with USAID/Washington and at the USAID Mission in Kabul to be sure that their important perspectives are considered in this process. As the USAID development community continues to respond, this is the first year that USAID/OFDA has stepped back from the longer-term issues.

Q: Has seasonal migration impacted displacement due to the drought?

A: During USAID/OFDA’s recent assessment, most interlocutors felt that estimates of 20,000 drought-related IDPs were too high. The number is believed to fall between the lowest estimate, 4,000, and the highest, 20,000. People have moved for better employment, and approximately 50 percent moved because of limited access to water. There is not a lot of information regarding movement into the poppy-producing areas. There is also movement that occurs seasonally. The current displacement is significantly lower than what was seen in the 2001 drought.

Q: How does USAID/OFDA determine the method of solicitation?

A: USAID/OFDA tries to use a competitive process when possible. For the Iraq APS, USAID/OFDA knew there would be two-year funding and the APS allowed for strategic programming. We also received applications from potential new partners through the APS.

4. Southern, West, and North Africa (SWAN)

**Presenters: Sureka Khandagle, Regional Coordinator, USAID/OFDA
Diane De Bernardo, Disaster Operations Specialist, USAID/OFDA
Stephanie Sobol, Emergency Disaster Response Coordinator,
USAID/OFDA**

The presenters gave a brief overview of the SWAN team portfolio, comprising countries in Southern, West, and North Africa, excluding Egypt, Libya, and Sudan.

Team Personnel – Washington

- Regional Coordinator—Sureka Khandagle
- Disaster Operation Specialists—Diane DeBernardo (West Africa), Chris Pratt (Southern Africa)
- Information Officers—Fiona Shanks, Alexandra Riboul

Team Personnel – Field

- Southern Africa Regional Office (SARO), Pretoria
 - Principal Regional Advisor—Harlan Hale
 - Regional Advisor—Amy Sink
- West Africa Regional Office (WARO)
 - Principal Regional Advisor—Regina Davis
 - Regional Advisor—John Scicchitano
- Liberia
 - Emergency Disaster Response Coordinator —Stephanie Sobol

In FY 2004, SWAN’s portfolio consisted of programs for complex emergencies in Angola, Cote d’Ivoire, Liberia, Sierra Leone, and Zimbabwe; locusts in West Africa; drought and food security programs in Lesotho, Madagascar, Mauritania, and Namibia; earthquake in Morocco; and floods and cyclones in Madagascar and Namibia.

In FY 2005, SWAN’s country priorities are in West Africa (Cote d’Ivoire, Liberia, and Sierra Leone); in the Sahel for the locust response (Burkina Faso, Mali, Mauritania, Niger, and Senegal); and in Southern Africa (Zimbabwe, with Lesotho and Malawi being closely monitored).

Liberia

In FY 2004, USAID/OFDA’s program in Liberia was large because of the supplemental. USAID/OFDA wanted to fund IDP return programs, but that was not possible due to the lack of a facilitated return process. USAID/OFDA instead responded to people needs in IDP camps and in their communities. The budget for FY 2005 is quite reduced and USAID/OFDA will focus on emergency and reintegration of IDPs. The key sector will be food security as the IDP return package from the U.N. World Food Program (WFP) and UNHCR will not include tools and seeds. USAID/OFDA will not focus on any specific geographical area in Liberia, but rather it will look more at needs.

USAID/OFDA, Africa Bureau, and USAID/Liberia will jointly host a health transition workshop, with participation from the Department of State's Bureau of Population, Refugees, and Migration (State/PRM) from December 7 to 9. The workshop will look at how to transition USAID/OFDA's emergency health, water and sanitation, and nutrition programs into longer-term development initiatives, while Africa Bureau and the USAID Mission will look at how to build upon USAID/OFDA funded emergency programs and incorporate some of the key elements into their development programs.

Sierra Leone

USAID/OFDA supported three programs in Sierra Leone in FY 2004, USAID/OFDA's last year of funding in the country. USAID/OFDA funded a lassa fever response and prevention program for the Mano River region, in coordination with WHO. This is a three-year program where USAID/OFDA's funds supported the initial year. An outbreak of lassa fever in April 2004 in Sierra Leone began to appear in Liberian refugees camps and raised concern that refugees returning to Liberia would bring the disease to the country. USAID/OFDA also funded an ACF nutrition program that ended in June 2004 and a World Vision health program ending in June 2005.

Cote d'Ivoire

USAID/OFDA is monitoring the situation in Cote d'Ivoire and will continue some programs as a contingency measure in order to maintain a presence there. Current USAID/OFDA programs include: IRC (water and sanitation and hygiene that will end this month), Save the Children/UK (health through March), UNICEF (emergency relief supplies), FAO (Coordination), and OCHA (IDP advisor). USAID/OFDA's WARO Principal Regional Advisor, Regina Davis, will travel to Cote d'Ivoire to conduct assessments and make recommendations.

Sahel/Locusts

USAID/OFDA has developed a three-phase approach in responding to locusts in the Sahel. The first phase of the strategy prioritized crop protection and swarm reduction and was achieved through an aerial spraying campaign. The second phase concerns food security through the provision of food aid, seeds, and tools. The third phase prioritizes capacity building by enhancing host-country and regional capacity to address locust invasions.

Zimbabwe

In Southern Africa, USAID/OFDA's primary focus will be Zimbabwe. An APS was issued last week. The APS focuses on two areas: livelihoods support and water and sanitation. The APS can be found at www.fedgrants.gov/Applicants/AID/postdate_1.html.

Questions and Answers

Q: Does USAID/OFDA have any contingency plans for Guinea? Does USAID/OFDA have any contingency plans for refugees going from Cote d'Ivoire to Liberia?

A: USAID/OFDA has been closely monitoring the situation in Guinea. OFDA's Principal Regional Advisor for west Africa, based in Dakar, recently traveled to Guinea to assess the political and humanitarian situation and is in regular contact with the USAID Mission and US Embassy in Conakry. In terms of programming, USAID/OFDA is not funding any programs in Guinea at this time. PRM is the designated lead on refugees. In November, USAID/OFDA's EDRC in Liberia, traveled to the Liberia/Cote d'Ivoire border to assess the situation of refugees crossing from Cote d'Ivoire. UNHCR had identified 10,000 refugees, and most appeared to be in relatively good condition. Most of the refugees were from villages near the border and had left when they saw troops coming toward their villages. OFDA's EDRC reported that some refugees were going back to their villages. At this time, there is significant movement back and forth at the border between both countries. Liberian communities appear capable of absorbing and supporting the current refugee caseload. The U.N. strategy in Liberia will therefore be to increase support to health and other services in these communities. However, host communities will be overwhelmed if an additional influx occurs. If the refugee caseload increases to 20,000 to 30,000, the U.N. will create camps.

Q: Is USAID/OFDA looking to work with NGOs on its response to locusts? Or will it continue to work exclusively through the FAO?

A: USAID/OFDA will likely look at working with NGOs. USAID/OFDA will look first at Mauritania because it has been the country most affected by the locust invasions. At this time, USAID/OFDA has not decided what programming will look like; it will be focused either on food security or on livestock. NGOs should initially contact USAID/OFDA's West Africa Regional Office and then contact Chris Pratt and Sureka Khandagle in Washington.

Q: Is Liberia one of those countries where USAID/OFDA is considering stand-alone protection proposals?

A: USAID/OFDA will not consider stand-alone protection programs, but will consider protection as part of larger approach in sectoral programs. As a rule, USAID/OFDA will not fund stand-alone protection programs, which would be funded by USAID/OTI. USAID/OFDA is looking at integrating more protection into other sectoral funding. For USAID/OFDA, Liberia was at the forefront of protection funding; USAID/OFDA funded an OCHA protection advisor and provided funding to Save the Children for child protection programs. USAID/OFDA has not received many proposals including protection for Liberia.

Q: Does USAID/OFDA anticipate other programs in Zimbabwe besides those funded through the APS?

A: Most of the programs for Zimbabwe will be funded through the APS. The only other programs to be funded in Zimbabwe will be through U.N. agencies.

Q: Is USAID/OFDA planning to release an APS after the December 2004 health transition meeting in Liberia,?

A: It depends on the outcome of the meeting.

Q: Is water and sanitation going to be part of the strategy in Liberia?

A: Water and sanitation will be part of the overall health strategy.

Comment: USAID/OFDA co-funded with ECHO a program on “Do No Harm” training for NGOs in Liberia. The six-month program, hosted by German Agro-Action, includes a series of trainings through the end of February and is divided into three parts: 1) a one-day awareness session for those interested in the concept of “Do No Harm”; 2) a two to three-day session for NGO staff who are interested in how to incorporate the tools; and 3) staff training by the program’s consultant at the NGO’s office on how to use the program and do evaluation and monitoring. This program has been very successful. Initially the funding partners thought that there would only be a core group of NGOs attending the training; however, more NGOs than expected have shown interest.

THEMATIC BREAK OUT SESSIONS

1. Vulnerable Populations

Facilitator: Marion Pratt, Social Science Advisor, USAID/OFDA
Presenters: Joanna Crandall, IDP/Protection Advisor, USAID/OFDA
Margaret Owen, Widows for Peace through Democracy
Mike Wessells, Senior Child Protection Specialist, Christian Children's Fund
Michelle Berg, International Rescue Committee
Charles Kelly, Benfield Hazard Research Centre

Marion Pratt facilitated the presentation by five scholars and practitioners in vulnerable populations. Ms. Pratt noted that although the humanitarian community has made great progress in assisting individuals whose vulnerabilities are physiologically determined—for example children under 5, pregnant or lactating women, and the elderly—it has only just begun to refine its knowledge and understanding of those whose vulnerability is socially defined—for example displaced populations, women-headed households, widows, child-headed households, and street children. USAID/OFDA has created a new working group within its Technical Assistance Group (TAG) that is devoted to such vulnerable populations and their protection. Each presenter briefly described particular populations at high risk, explained how to assist and protect them, and then fielded questions from the audience.

- **Joanna Crandall, IDP/Protection Advisor, USAID/OFDA**

USAID has developed several new protection initiatives. During the past two years, Protection Officers served for the first time on USAID DARTs in Iraq, Liberia, Haiti, and Sudan to ensure that protection concerns were properly analyzed and included in USAID assistance strategies. The Washington-based Darfur RMT now also has a Protection Officer. Two full-time positions have been created within DCHA: a DCHA Senior Advisor on IDPs and Protection and a USAID/OFDA Advisor on IDPs and Protection. USAID has also started a working group on protection issues to serve as an internal resource on protection issues. In addition, USAID/OFDA has revised grant guidelines in July 2004 to encourage implementing partners to integrate protection into the design, implementation, and evaluation of relief programs. Protective programming is also encouraged through Annual Program Statements and in country plans.

USAID officially adopted a new policy on internal displacement in September 2004 that for the first time cites protection as a key priority in USAID activities. USAID is currently in the process of introducing the new policy internally as well as externally. Because protection is an unfamiliar concept to some bureaus and overseas missions, USAID will mount a series of internal initiatives to raise awareness among USAID personnel. These include a new USAID training program on protection, the creation of a DCHA-PRM Virtual Protection Team, and the revision of USAID/OFDA's Field

Operations Guide (FOG) to include field guidance on protection. USAID and USAID/OFDA finally do protection.

- **Margaret Owen, Founder, Widows for Peace through Democracy**

Widowhood is difficult to get on the agenda. In history, there have never been so many widows and victims of war in the world. Ms. Owen established Empowering Widows in Development to get the international community and governments to look at the appalling human rights abuses that widows suffer in patriarchal societies. RAWA, the Afghan women's association, finally rang the bell about the terrible suffering of widows in conflict after the Soviets, the Taliban, and the U.S. invasion. Eventually a network was established after the Beijing conference. Recognizing the importance of widows is important not just during conflict but also in post-conflict situations, when their suffering can actually be worse.

The issue of widowhood is an important issue for the whole society, for justice, and for reconstruction. Widows are supporting not just their own children, but also orphans and the sick and traumatized. If they are seen at all, they are seen as victims. Ms. Owen wants all governments and NGOs to recognize that widows should not be seen exclusively as victims but also as key contributors to reconstruction.

There are no statistics about widows. There are statistics about the number of soldiers killed, the number of orphans, and the number of refugees or IDPs, but there are *never* any statistics about widowhood. If you try to find statistics, you will only find them in the over 60s category. However, in conflict, young women are made widows. In Nepal, many widows are under 30 and some are even under 20. It would be amazing to get these statistics. Imagine the impact if you could find information that said up to 65 percent of children are dependent on women who are widows without resources and may have no rights to own land or inherit anything. Governments would have to pay attention.

Instead, there are a lot of myths. *Widows will be looked after by their families.* Yet they are more often exploited. *Young widows will marry again.* Even in countries where peace has been achieved, widows are often victims of sexual abuse, as seen in Rwanda, Kosovo, and Bosnia. Governments are reluctant to assist widows and have other priorities. There will be no change in this situation unless widows become agents of change. Widows for Peace through Democracy seeks to support widows who seek to become agents of change. For example, AVEGA, the Association of Widows of the Genocide of April 1994 in Rwanda, lobbied for assistance to widows, including healthcare. Another Nepalese organization is lobbying for similar rights. This demonstrates that widowhood is a crucial area in which to achieve millennium development goals.

There are tools that we hope to use to promote the status of widows and to ensure that their voices are heard. At the March 2005 conference on the status of women, we will seek to discuss the roles of widows. The Beijing platform of action never mentions

widows except in the context of aging. Yet widows have a unique role in peacebuilding. Small initiatives can be taken when widows from either side of an ethnic divide hold hands, sharing the wish to be at peace, to look after their children, to repair their houses, and to grow food. This is crucial when women are generally excluded from the more formal peace negotiations. Major donors need to support women banding together.

Very often donors and government are reluctant to distinguish between women and instead categorize them as a ‘great bath of homogenous porridge.’ Men are soldiers and men are builders—they are distinguishable. In many countries, widows make up 50 percent of all women. We must listen to their voices and make special efforts to hear them. If we fail to hear widows, we are frustrating efforts to build peace and prevent future conflict. One of the first coping strategies of widows is to remove their children from school or to sell their daughters at a young age. Women and girls are exposed to trafficking. Young male children are exposed to crime and even terrorism. Poverty breeds conflict and undermines peace.

We need to support widows as agents of change. There remains much to be done in law reform. It is crucial that widows enjoy the human rights enshrined in human rights law from the 1948 charter to the Convention on the Rights of the Child.

- **Mike Wessells, Senior Child Protection Specialist, Christian Children’s Fund**

It is important to make people visible and to strip away the veneer of victimhood. With child-headed households, it is crucial to examine the source of vulnerability faced. It is equally important to talk about protection programming and practices to “operationalize” protection. The notions of childhood vary by culture. In many cultures, after age 14 and 15, children are no longer regarded as children. Nonetheless, we will use the U.N. definition of 18. There is enormous diversity among child-headed households—from conflict, natural disaster, HIV/AIDS, etc. There is also a great paucity of data on how many child-headed households exist or the number of children in them. After the Rwandan genocide they were estimated to be in the tens of thousands. In South Africa, and estimated three percent of households are now child-headed. There are 27.7 million double orphans in sub-Saharan African, and even if only half of these orphans live in child-headed households, that is cause for alarm.

How do child-headed households arise? Mr. Wessells offered some stories to illustrate the diversity. Robert is from northern Uganda. His father and mother died from HIV/AIDS. To cope, Robert’s family sold off much of their household productive assets. Robert was burdened with the responsibility of taking care of six siblings. He dropped out of school so that his siblings could attend. The family held meetings on a nightly basis to address family problems. They also met with other vulnerable families within the community. The children in his household are doing well. They are resilient.

Fatmata is from Sierra Leone and was abducted by the RUF rebel group at age 12. She lost both parents and was taken as sex slave. She became a mother, and both she and her baby are HIV/AIDS positive. Her family would not accept her baby because it was born

out of wedlock. Fatmata's story illustrates the unwillingness of extended families to help. Many are already households overburdened by poverty and conflict. Gender is also a huge issue. It is against most local inheritance customs for women to inherit land so girl-headed households are at greater risk. Lacking household assets, many leave school and are forced into early marriage to acquire dowries and feed mouths. Prostitution and widespread exposure to HIV/AIDS are other risks. Due to low household resources and bad infrastructure, healthcare is generally poor. Food insecurity and street life are other common consequences. Physical risks are profound, but emotional and social vulnerabilities are also great, although they vary by age and gender. Watching one's parents die is a painful process; the daily loss of their parents is also painful. Children have increased responsibilities, stigma, and isolation from communities. Often bush babies and HIV/AIDS worsen this stigma. The economic stresses are profound because there is little means for productive income. Children frequently experience care giving fatigue, as it is challenging for a 10-year old to accept the responsibilities and stresses of looking after siblings. Situations often leads to substance abuse and an overwhelmingly sense of powerlessness and helplessness.

Yet despite the problems experienced by child-headed households, they are capable of resilience. It is crucial that they are not labeled and are treated as people. Labels cause people to internalize problems when they are frequently able to overcome them.

Mr. Wessells described programming possibilities. Assistance to vulnerable children-headed household has to begin with an assessment. What are their living conditions, gender, age, and situation? There is a need to integrate the protection lens in multiple sectors of humanitarian programming. In shelter, one should work with local communities who can define most readily who are the most vulnerable. It is crucial to avoid excessive targeting of child-headed households. While well intentioned, targeting may do more damage than good by labeling people and privileging aid, thereby creating social divisions when unity is needed. Social programs that target child-headed households actually separate children from parents to get benefits. Child participation is important, as protection is not done to people but assists people in becoming agents of their own protection.

Finally, it is important to focus on protection and resilience. What are the assets and coping strategies within household and communities that can be built upon for programs? They need material support, community sensitization, skills training and economic support, psychosocial support, training in household management, community gardens, and cooperative childcare, enabling integration into school sports and HIV/AIDS prevention.

What are sustainable community-based programs? Ideally child-led child well-being committees will organize at the local level. These will help to identify the most vulnerable children and plan actions to reduce the vulnerability of all vulnerable groups to achieve comprehensive progress. Preventive steps should be taken, supplemented by advocacy and efforts to develop national plans and improve policy and legislation.

What do we know about what works? Our future depends on our willingness to collaborate to get better data to make the biggest difference for child-headed households.

- **Michelle Berg, International Rescue Committee**

Ms. Berg has been in El Fasher, North Darfur, since July 2004 and will return to Darfur in December. She spoke to what protection looks like on the ground, how it is playing out in Darfur, and the strengths and weaknesses. Some say protection is not working, but Ms. Berg disagrees. The humanitarian community is dealing with a horrendous conflict, and it cannot solve everything in a day. USAID/OFDA and USAID/OTI initiatives are working. As protection coordinator for IRC, she has been training staff on what protection means in different sectors on how to integrate it into their jobs. There are 50 community health promoters out every day in the camp. She meets with them and uses them to help address those issues. According to Ms. Berg, IRC has built family rooms at clinics so that all the children can go, and mothers do not have to leave them at home. IRC has also been asking women questions about what they will and will not use.

In North Darfur, IRC leads a highly effective protection working group, where different pieces of the puzzle are coming together. There is a monthly training where members talk about mainstreaming protection. In addition, there is training for different agencies on protection and many non-protection NGOs are now interested in doing protection in their programs. IRC provides child-friendly spaces to give children aged two to five something to do in the camp. This also gives mothers a break and a chance to congregate, and provides a good avenue for community health promoters to talk with mothers. Clubs have been developed for youth to do community service activities such as clean camps and help elderly; this keeps the youth engaged and out of the military.

Protection programming is multi-faceted. In the case of forced returns, protection programming can be a stand-alone issue for the protection working group. In this case, agencies are cooperating, training, and pushing the Government of Sudan to take responsibility. Sudan has signed the optional protocol on the convention and rights of the child. IRC hopes to have the GOS organize a seminar on this protocol. IRC seeks to work with the GOS, as the existing government, to discuss the guiding principles and their obligations. The protection group has also objected to the issue of 'safe areas' as it implies unsafe areas must exist alongside them.

The protection group has sought to champion the rights of rape victims. Women are required to report rape to the police before going to the clinic. Women are scared and do not want to report rape cases to the government. In one protection meeting, IRC discovered there was a riot at a food distribution and the police had whips. Now, IRC will train WFP in protection for food distributions. In response to cases of rape and sexual violence during trips to collect firewood, the protection group is working on initiatives to make fuel-efficient stoves, bring in firewood, and increase patrols in the area. The USAID agenda is working, and funding is turning into something useful. Protection is a growing field. More and more agencies are interested in protection and are viewing it as part of their role.

- **Charles Kelly, Benfield Hazard Research Centre**

From September 10 to October 2, 2004, CARE International Benfield Hazard Research Centre conducted a real team Rapid Environmental Assessment (REA) in Southern Darfur. The assessment was based on REA guidelines, included input from field staff and IDPs, and involved work in Khartoum, Nyala, and three camps.

Main findings of the Darfur Crisis REA

The Darfur crisis has strong environmental roots, exacerbated by government policies. IDPs depend on local natural resources (especially trees and grass—‘the forest’) to meet needs. The need for food, fuel, and household items are drivers in exploitation of ‘the forest.’ ‘The forest’ is dangerous, with females most often entering the danger zone. Finally, there were significant gaps in the management of camps. The camp management faced many challenges, most linked to environmental issues. One example is, having cut everything down, where can IDPs go? Often the camp may be in the wrong place to begin with, but camp management cannot move the camp due to GOS or security issues.

Programmatic recommendations of the REA

Make the environment a core crosscutting component of peace negotiations and relief and recovery activities. Integrate lessons and procedures from refugee situations in the Darfur response. Significantly increase food and emergency relief commodity assistance to reduce pressure to go to ‘the forest.’ Provide cash in lieu of food and emergency relief commodities in urban and peri-urban camps; this reduces food aid and cash weighs less than food. Address the fuel issue as a protection issue involving natural resources. Conduct environmental impact assessments and monitor environmental impacts. Provide problem-specific assistance to identify and address environmental impacts. Provide human resources to avoid or resolve problems linked to the environment.

Questions and Answers

Q: It is a good idea to describe what is working, but I disagree that protection as a whole is working if women are still raped on a regular basis while accessing their basic survival needs. In addition, women oftentimes cannot receive care to prevent unwanted pregnancy and HIV/AIDS and counseling. Overall, we’re failing.

A: Rape and sexual violence is a huge problem. What prevents women from receiving treatment is due to a GOS law. Yes, there needs to be more done, yet we also need to look at the environment. Rape is done with impunity because there is no functioning justice system. The GOS decree prevents a lot. I agree that NGOs need to do more.

Q: We should be doing more. We should bring in more firewood so they are not in danger of being raped.

A: No one has been willing to take it on. USAID/OFDA has not received one NGO proposal with this issue in it. Please note that we would welcome proposals on firewood alternatives and fuel sources.

Q: Where is the gap? What is the major gap?

A: It is a combination of factors. There are so many people and only so much so many NGOs can do. It has been a huge issue to get NGOs to look at the firewood issue. It is an issue that will require the human and logistical resources comparable WFP's efforts with food distributions and no one has come forward to do it. There is ongoing violence and impunity with no force in place to stop the parties. The protection program we have does work, but it is not meeting every need. We need more agencies.

IDPs are reliant on either their immediate environment or donors. OCHA has said it: we are far behind the curve in estimated needs. We are only meeting 50 percent. This is a tremendous demand on the population to survive. On one hand, we need to send more stuff to more people. However, this is only a temporary solution to the immediate problem. There has been no long term planning. The International Organization for Migration (IOM) has an agreement with the GOS on returns, but no one is planning for it. People are focusing on a very narrow agenda, and the situation will continue if we do not widen our agenda.

Q: How is USAID/OFDA prioritizing as a donor? Protection language is in the guidelines, but why are there not any points attributed for it?

A: Institutionalizing protection is very new. Due to the issue of the sovereignty of nations, USAID/OFDA was not involved before. However, as the number of IDPs has grown exponentially, we are now involved. Due to a lack of funding, we have been mainstreaming protection into all sectors. We are also developing protection training for our staff. USAID's IDP policy will be out very soon. We have no immediate answers. We are integrating protection in our Annual Program Statements. In some areas, protection is not the top issue, as it is in Darfur, Northern Uganda, and DRC. We must best address it with our limited budget. Protection at USAID/OFDA is evolving.

The DCHA protection working group is seeking to address protection. However, protection is not always mentioned. For example, in the Zimbabwe APS, protection was too political to be mentioned.

Q: Could protection working groups be responsible for developing a country strategy?

A: Protection working groups are personality driven and not the answer to everything. If there is interagency competition, protection working groups will not work well. They are a conduit to discuss issues. Sometimes they lack logistical capacity. They are a useful tool, but not the ultimate answer to everything.

2. Security

Facilitator: Steve Catlin, USAID/OFDA Military Liaison Unit

Presenters: Robert Painter, Humanitarian Security Advisor, UNSECOORD
Suzanne Etcheverry, Overseas Private Investment Corporation (OPIC)
Shawn Bardwell, Security Coordinator, InterAction

Joseph Donahue, Program Director, Information Management & Mine Action Programs (IMSMA)
Reto Haeni, IMSMA Program Manager, Swiss Federal Institute of Technology Zurich, Center for Security Studies

- **Robert Painter, Humanitarian Security Advisor, UNSECOORD**

UNSECOORD's key objective is to strengthen the link between programs and security management since program officers are also security managers. UNSECOORD wants to promote skills for all staff to learn personal security management and aims to provide the technical support necessary for important security decisions. There is a chain of command from the U.N. Secretary General (UNSG) down to the designated official on the ground; when security cannot be managed on the ground, the decision to evacuate goes up the chain to the UNSG. The U.N. system is the board of directors for UNSECOORD and U.N. security policy is shaped by interagency guidance, not imposed on the U.N. by UNSECOORD. The U.N. security management model has shifted from a situation-based model to a program-based model; security decisions are made based on the mitigating factors that make programs work, not solely on the general security environment.

In Darfur, Sudan, humanitarians are operating in remote, isolated areas where the roads are bad and the living conditions are tough. Fortunately, however, compared to what could have occurred, the humanitarian community has experienced almost no security incidents thus far, with the exception of a mine incident and a few detentions. This is a testimony to the NGO and U.N. security skills that have developed over the years. UNSECOORD is working with NGOs to use the Operation Lifeline Sudan (OLS) model as an example of a best practice that can be duplicated. In Darfur, UNSECOORD uses the "one plus seven" model of one deputy Special Representative for the U.N. Secretary General (SRSG), one security analyst, and six security officers. The security officers are deployed in teams of two to each of the Darfur state capitals. This system should be in place by the end of January 2005. Security collaboration with NGOs is important and remains high on UNSECOORD's agenda.

Questions and Answers

Q: The model for sharing security information is clear, but what is the goal of information sharing?

A: All actors are interdependent in any theater of operation. If an incident occurs, it affects all. The goal is therefore to avoid critical or even minor security incidents to ensure the smooth implementation of programs. UNSECOORD wants programs to reach beneficiaries. If the humanitarian community shares information and all actors have the same playing field that will aid in the delivery of programs.

Q: More and more donors are looking for security as a line item on NGO proposals. How many NGOs have in-house security training programs? (*One NGO in the audience indicated in the affirmative.*)

A: For the U.N., security training is mandatory for all staff. For legal reasons the U.N. is unable to provide NGOs a copy of the security packet, but they are encouraged to duplicate it. It is available through OCHA or InterAction. UNSECOORD has a personal awareness CD-ROM that includes all of the U.N. languages, with the Chinese version on the way. It takes about four hours to complete. Many people have said that they are alive today because of information gained from this training.

- **Suzanne Etcheverry, Overseas Private Investment Corporation (OPIC)**

OPIC is a USG agency with the mandate of providing political risk insurance for American companies that invest overseas. OPIC works with both private sector companies and NGOs. OPIC is authorized by Congress to provide insurance to NGOs and has recently insured Shelter for Life (SFL) in Afghanistan and the International Rescue Committee (IRC) in 19 countries. Political risk insurance protects against political violence and the expropriation of assets.

OPIC covers risks that NGOs face including incidents of terrorism, strife, nuclear or biological warfare. OPIC chooses which companies to underwrite based on an assessment of the risk for political violence. In Afghanistan, OPIC is insuring SFL assets including office equipment, vehicles, and other inventory. SFL operates in many areas within the country, so OPIC examines the level of risk in the different areas, looking for ethnic division and the chance for domestic power struggles, the rise of radical groups, and insurgent activities. OPIC has also provided insurance to companies in Iraq. OPIC always looks at levels of conflict in society, and notes clear indicators of civil strife, such as protests, that could escalate and hinder NGOs from getting to the office in a localized conflict. OPIC insures mobile assets, so the corporation assesses if the mobile assets might travel through dangerous places. For SFL, OPIC insured vehicles that were attacked traveling from Kabul to Khandahar. The driver was seized and beaten and the truck was stolen. OPIC reimbursed the cost of truck so SFL could buy a new truck and continue their programs.

OPIC's mandate is to ensure that programs are not interrupted. OPIC wants to reach out to the NGOs to let them know that the USG can assist and has a growing portfolio of NGOs. In addition, OPIC insures against the expropriation of assets in areas where the host government may be hostile to projects and might seize NGO assets. For this, OPIC examines political risk, socioeconomic indicators, and the likelihood of a government collapse. Some indicators of possible expropriation are external conflict, corruption, power assumed through patronage not through ability, religion, ethnic tension, and civil discord. Furthermore, OPIC checks if there is an impartial legal system and a strong civil code in the country. OPIC is interested in supporting NGOs and talking about eligibility for insurance.

- **Shawn Bardwell, Security Coordinator, InterAction**

InterAction has been involved with security for the last 6 to 7 years and has held several initiatives to raise security awareness within the membership. InterAction held a CEO

retreat to raise the profile of security as an issue for NGO leadership to get organizations to pay attention to threats and vulnerabilities that their employees face. Four years ago, InterAction released a report that examined threats faced by national staff. In addition, the organization prepared a document that outlines four steps to address national staff security concerns. Both documents can be found on the InterAction website. InterAction also worked with USAID/OFDA on security planning guidelines to incorporate into grant documentation to assist NGOs.

Two years ago, InterAction hired a Security Coordinator to act as a resource to the membership. The security coordinator's main job is to conduct security assessments—this year assessments were done in Liberia, Chad, and Sudan. The security coordinator acts as a center point for the distribution of materials, training, and incident reports. In addition, the coordinator shares documents among the membership and encourages information sharing among the NGOs. The coordinator also works with the Interagency Standing Committee (IASC) on the conduct of aid workers and security links—such as creating a set of options that the humanitarian community can look at and then share assets, radio networks, security information, etc. InterAction is developing a list of minimum security standards similar to the Sphere standards and InterAction is creating a guide to implement the standards in context. InterAction is also working on a paper on the global security environment based on humanitarian actors, focusing on InterAction membership. InterAction liaises with USAID/OFDA, UNSECOORD, and others to provide a clearinghouse of security information for the membership. InterAction also provides security documents to organizations just starting to work in insecure areas and encourages NGOs to draft security policy documents as part of general work plans.

Question and Answer

Q: There is greater awareness now of the need for personal security awareness, but are NGOs able to spend enough money for security?

A: Many NGOs think they will be less competitive in grant proposals if they include security expenses. However, this is a misperception since donors like USAID know that security is a cost of doing business. NGOs are accustomed to having programs come first and accepting risk is a part of business. However, NGOs can minimize the risk to their employees. There is a growing recognition that not only is there something NGOs can do about security, but also that they should take responsibility.

- **Joseph Donahue, Program Director, Information Management & Mine Action Programs (IMSMA)**

For the last six years, IMSMA has been developing the information management system for mine action in Geneva. IMSMA has done surveys, and has supported the U.N. Humanitarian Information Centers (HICs) in Iraq, Afghanistan, and Liberia. Most people check for information on required vaccinations before travel, but how many people check for mine action websites? There is a lot of public information available, including centralized lists of unexploded ordnance (UXO) contamination and mine sites.

The IMSMA team wants to bring the information tools that have been developed for mine action to the security community to improve security information management systems. The team was able to approve the IMSMA system in many countries and the staff members know which reports must be filed in each country and can move between different country programs easily. For Iraq, the team is focused on creating an Iraq Security Information System (ISIS) because of the frequency of security incidents and because the current information about security incidents is inadequate. The SAFE reports produced by USAID's Bud Collins were extremely useful. However, many of the available reports do not include geo-references, so the end user must complete additional GIS work. Smaller NGOs do not have the time or capacity for this. The team proposes that a security information system for Iraq be developed based on the IMSMA model. The security system would be free to NGOs and the U.N., and all users could add and update security information. The fundamental point is that people mostly trust only themselves to determine if their decision-making for operational choices is valid. Iraq is a stressful situation, and it is tempting to pull people out, yet the humanitarian community is still there. The goal of ISIS is to improve information support for NGO and U.N. agencies to enable them to make more informed security decisions.

- **Reto Haeni, IMSMA Program Manager, Swiss Federal Institute of Technology Zurich, Center for Security Studies**

IMSMA can be used as a case study for an information management system. These resources enable better decision-making, and the project publishes information more efficiently on hazardous areas. By way of background, first, the IMSMA team wanted to develop standardization for mine action. Some people resisted this idea initially since they thought all mine action programs were unique and could not be standardized. In addition, some people thought that a more transparent system could penalize them since more information might reduce their budget. However, IMSMA is now the internationally recognized standard application for mine action and it is used in 36 countries worldwide. The IMSMA team was able to achieve this goal by identifying and standardizing business processes and eventually reaching a solution upon which everyone agreed. The team designed a prototype and all stakeholders had input throughout the process. The European Commission and the USG have approved the system. The model leaves room for specific country requirements, and the software is similar to Microsoft Office and user-friendly.

One central aspect of the common operational picture for ISIS is that it includes aggregating information, not just grid references. It will be located on a secure internet-based system and will be set up as a fact sheet with numerous maps. The system allows users to call up specific security information to assist with operational planning. ISIS replaces old reports as it provides more information with geo-coordinates that enable tactical planning on a daily basis. ISIS describes individual incidents and can track trends and aggregate information. ISIS can also assist with route planning. As ISIS is web-based, it can be used in any location. Without labor intensive searching, ISIS can automatically generate reports with lists of individual incidents for download to a PDA. Ideally, many organizations would participate, and every security officer would log

security incidents. Others can log more information about the same attack or update the report. Still others can confirm the information through a peer review process. ISIS will have an editor to remove duplicate incident reports.

Questions and Answers

Q: Where do you get information for ISIS?

A: The information comes from standard reports, the daily threat update from Coalition forces, and other reports from other organizations. When ISIS deploys, users will be trained to input information. The screens are easy to use, and include geo-coordinates.

Q: How will you control access to ISIS?

A: There are two ways to control access, and the users will help to shape the way ISIS is accessed. The technical part is easy as information can be encrypted. From previous experience working with the HICs, organizational discipline is more of a challenge.

Q: Where else will the ISIS model be used?

A: Iraq is the logical first step because the funding is there and secure donor funding means the NGOs do not have to be charged. For-profit companies may have to pay a small fee. The short list for other countries would include Sudan, DRC, and Afghanistan, if the funding exists. The first version of ISIS should be fielded in Iraq in February 2005.

Q: Will ISIS include areas outside of Baghdad?

A: The central cell is in Baghdad, but other areas can be included as well. Wherever users have access to the internet, they can add and receive reports. For example, if Mercy Corps is located in Al Kut they can report on security in that area. Since this type of system was implemented for mine action, it also can be done for security. The challenge is making sure incident reports are logged in a timely manner.

- **Steve Catlin, USAID/OFDA Military Liaison Unit**

USAID/OFDA's security training is currently under review. The office is looking at enhanced training venues for landmine awareness, counter-surveillance, and defensive driving. In the field, USAID personnel fall under the Chief of Mission authority; however, since USAID/OFDA operates outside of the U.S. Embassy compound, the office develops its own security contingencies for field work. Information sources and the ability to analyze threats and vulnerabilities change continuously. Even though the Disaster Assistance Response Team (DART) members have expertise in various sectors, each team member is responsible for safety and security. Security has taken on a prominent role with respect to the provision of humanitarian assistance. USAID/OFDA's mandate has not changed, but the office is changing how it conducts security.

3. Maintaining the Integrity of Humanitarian Space

Facilitator: Anita Menghetti, Humanitarian Advisor, USAID/DCHA/PPC
Presenters: Joel Charny, Vice President for Policy, Refugees International
Lisa Jones, Policy Development and Studies Branch, U.N. Office for
the Coordination of Humanitarian Affairs (OCHA)
Stephanie Sobol, Emergency Disaster Response Coordinator,
USAID/OFDA

Anita Menghetti facilitated the presentation by three scholars and practitioners in the new model of integrated missions and the integrity of humanitarian space. Ms. Menghetti introduced the topic by stating the central question for the session: if the integrated mission model is the way that humanitarian operations and peacekeeping missions will be organized within the U.N. system, then how can the model be improved? The session's participants ended the discussion with the following three points: 1) for integrated missions to work, there must be respect for mandates and competencies; 2) regardless of whether missions are integrated, the humanitarian community needs more of the right people in the Humanitarian Coordinator and the Deputy Special Representative to the U.N. Secretary General (DSRSG) positions to ensure that the humanitarian voice is heard; and 3) USAID will commit itself to drafting a list of qualified personnel for senior U.N. humanitarian mission positions.

- **Lisa Jones, Policy Development and Studies Branch, OCHA**

Ms. Jones presented the following points for discussion: 1) there are no integrated missions in the true sense of the model and 2) there is no common understanding of what constitutes an integrated mission. Ms. Jones noted that humanitarian agencies within the U.N. have attempted to put common principles of integrated missions on paper. This was difficult due to the different views within the community and DPKO. The U.N. agencies agreed that integration should be about coherence and integrated action. Integrated action requires joint planning based on a shared understanding prior to the establishment of the mission, and even before the U.N. Security Council mandate is established. The mission should be designed and mandated for an effective response. Mission should be mandated with a humanitarian context. The mission should respect humanitarian principles with humanity being the overriding concern. The humanitarian community must explain or demonstrate to the peacekeeping and military community that humanitarian principles have an operational link. Existing agreements must be respected and the mission should not disrupt well-established arrangements. It is advantageous for the mission to draw on the expertise of the humanitarian community. It is equally vital to include the humanitarian community in an exit strategy that plans for activities to continue after the end of the mission. The mission should acknowledge the business style of the NGO community.

A non-integrated mission had previously been the traditional model; the humanitarian coordinator and humanitarian coordination structure coexisted and operated outside of the command structure of the peacekeeping force. In the semi-integrated model, as in Sierra

Leone, the DSRS is also the humanitarian coordinator and is supported by the humanitarian coordination structure that is staffed separately by OCHA. In the fully integrated model, as in Liberia, all operations fall under the DSRS, including all humanitarian coordination.

The following are lessons learned from the mission in Liberia: the need to be better involved, the need to maintain a consistent approach, and the need for joint planning that includes all the U.N. agencies. One of the problems with integrated missions is that it is not always clear what the overall objectives are. What does the mission seek to achieve? Each U.N. agency within the integrated mission should have clear roles and responsibilities.

When seeking to maintain the integrity of the humanitarian space, the humanitarian community must be clear about which elements should be addressed. The humanitarian community should define who is negotiating and break down the different elements of the integrated mission, such as staff security, humanitarian principles, and access.

There are particular areas of the integrated mission model that demand more discussion. These include: protection; post-conflict transition, including provincial reconstruction teams (PRT) as in Afghanistan and quick impact projects; and regional coordination between missions, for example, in West Africa, there are no linkages at the military or political levels between the missions in Sierra Leone, Cote d'Ivoire, and Liberia.

Questions and Answers

Q: What did you mean by hybrid mission?

A: A hybrid mission is a non-blue helmet peacekeeping force, such as in Afghanistan and Iraq.

Q: What is ECHA?

A: ECHA is the Executive Committee of Humanitarian Action, which is comprised of the U.N. Development Program (UNDP), UNHCR, UNICEF, DPKO, and OCHA.

Q: If Liberia is not an integrated mission, what would be?

A: In a truly integrated mission, all aspects fall under one structure: planning, strategic thinking, resources, use of military assets, clear reporting lines, and clear organizational structure. For example, mission personnel should not be from DPKO or OCHA; but rather should be peacekeeping officer, humanitarian officer, etc.

- **Joel Charny, Vice President for Policy, Refugees International**

Mr. Charny noted that there is no inherent contradiction between an integrated approach and independent humanitarian action. An effective integrated strategy preserves and expands the space for humanitarian agencies to respond to the needs of vulnerable people. Integration is about unified international action in support of reconciliation and social inclusion. Integration of humanitarian action with wide-ranging political,

economic, and social action is necessary to allow societies to heal and prevent further conflict. Humanitarian action is, by definition, limited to meeting immediate emergency needs. Humanitarian action cannot break the cycle of repeated conflict, which leads to further vulnerability. An integrated response to the fundamental problems that create discord offers the possibility of creating stability and ending or minimizing the need for humanitarian response. It is artificial to try to wall off humanitarian action as needing to be protected from the evils of integration.

Mr. Charny emphasized that a return to “pure” humanitarianism is not possible. Neutral and independent humanitarian action is often impossible to achieve without the corresponding political, diplomatic, and, if necessary, military action.

The integrated model as implemented to date has been fraught with problems, particularly in the field. The challenge is to define precisely how in the real world humanitarian agencies can undertake remedial action while remaining neutral, impartial, and independent, particularly when operating within the framework of large-scale external interventions, with or without U.N. endorsement.

The humanitarian coordinator should cooperate closely with the Special Representative of the U.N. Secretary General (SRSG), but should report to the Under Secretary General for Humanitarian Affairs and the Emergency Relief Coordinator. The humanitarian coordinator requires a degree of operational independence in order to assess the needs and ensure an effective response to the humanitarian consequences of the overall peace-building process in the respective country or region. If humanitarian coordinators are to play this analytical and advocacy role effectively, they must have real experience with humanitarian response. Mr. Charny noted that too often in the U.N. system, resident coordinators, whose expertise is primarily in the area of long-term development, double as humanitarian coordinators. The humanitarian coordinator needs to provide the leadership at the country level in order to assure that assessment and response to the protection needs of the civilian population are at the heart of the U.N. system’s integrated approach.

Another essential aspect to the integrated approach is to focus more effort on working locally to build an effective response to protection and assistance needs, in partnership with networks of local government officials, local NGOs, community-based organizations, religious institutions, and informal groups of concerned citizens. A stronger institutional network at the local level enables the mission to perform its duties better. The mission in El Salvador was successful due to a strong network of local organizations.

Mr. Charny indicated that he was feeling pessimistic about the integral principle of humanitarian action: the proportionality of response to need. For example, the U.S. has so far devoted \$18 billion for the reconstruction of Iraq, an amount greater than its entire foreign aid budget. At the same time, NGOs are begging for nickels for the Democratic Republic of the Congo (DRC) and Sudan. Mr. Charny believes that this situation will not change, especially given that the war on terrorism is the most important issue. This

situation presents a dilemma for NGOs. The dependence on government funding, most of which is from the USG, has the potential to hinder the operational independence of the agencies. USG funding is driving the sectors in which NGOs are working, thus decreasing NGOs' leverage of where to work and how to respond to needs.

- **Stephanie Sobol, Emergency Disaster Response Coordinator, USAID/OFDA**

Ms. Sobol noted that the humanitarian community in Liberia does not feel that the humanitarian coordinator is looking out for humanitarian principles and raising their concerns to the U.N. mission. For example, the U.N. is currently developing an action plan for the facilitated return of IDPs to their areas of origin. NGOs and USAID/OFDA have brought up questions about the protection of returnees, who will be provided with a package of goods. NGOs and USAID/OFDA fear that the packages might make the returnees targets of theft and violence. NGOs wrote three letters to the U.N. mission, and the answer was that the U.N. would have human rights monitors, but no structure has been established. The feeling within the humanitarian community is that the U.N. humanitarian coordinator was not taking their concerns seriously and that it is more important to the U.N. mission that the transition government is seen in a positive light, rather than hold back the process. If the peacekeeping mission does not have a humanitarian coordinator that looks out for humanitarian principles, political objectives will override them.

Questions and Answers

Comment: In an integrated mission, the person in charge of humanitarian affairs should be someone who understands the situation and has expertise on humanitarian assistance. Donor countries should also put pressure on the U.N. to ensure that individuals with that expertise are selected.

Q: Can equity of mandates for the political, military, and humanitarian operations truly exist? Can true integration, not subjugation be possible? It seems that the political agenda always wins.

A: We should be careful of describing it as equity of mandates. It would be better to look at it in the overall context of what do we need to achieve and who is the right person to do it, rather than thinking of equality of mandates.

Comment: There is concern that institutional rivalry within the U.N. will hurt U.N. missions. The U.N. does not seem able to get away from the constant turf battles of agencies fighting for profile.

Q: Who is in charge in the humanitarian side? In Liberia, it was very difficult for the humanitarian community to bring up concerns about the U.N. mission's idea of paying former child combatants.

A: During an inter-agency meeting last week, the representative of Save the Children indicated that NGOs had not received an explanation for the U.N. mission's decision to pay former child combatants, despite concerns raised by the NGOs. The U.N. mission

did not see having a discussion with NGOs on this matter as important. The humanitarian agenda was not important in Liberia.

Comment: There has not been a truly integrated mission because truly integrated planning has not happened. It is extremely difficult to get humanitarian principles points across. How does the humanitarian community get heard?

Q: I do not agree that there has never been an integrated mission. For example, for the East Timor mission, the planning was done in New York and all the agencies arrived in East Timor around the same time.

A: East Timor began as a hybrid mission, with Australia in charge of the mission. It is the best example to date of an integrated mission.

Q: If the mission in Liberia was defective, what would be the alternative? What would have happened if there was not an integrated mission? Integration seems to provide an entry.

A: One of the positive possibilities of an integrated mission is that humanitarian agencies would have direct access to the humanitarian coordinator, rather than having to go through OCHA to raise issues with the humanitarian coordinator. In order for this structure to work, however, the mission must have a humanitarian coordinator who understands humanitarian principles and puts those priorities high in the agenda.

Q: Given the current situation of the integrated mission in Liberia, do you have any suggestions on how to deal with it?

A: It would be up to Jan Egeland to complain to the U.N. Secretary General.

Comment: The USG has brought up this situation up in the form of political demarches.

Q: How do you balance the political agenda with the personality of the SRSG?

A: USAID should have a “ready” list with potential candidates for senior U.N. humanitarian positions to be presented when vacancies exist.

Q: What is the effect and purpose of donors conferences?

A: Before the donors conference, the humanitarian community should work with member states to establish the mission. The humanitarian community should do the work before the U.N. Security Council mandate is established.

Comment: If the humanitarian community can find the humanitarian voice and expertise in the right positions, integrated missions can work. Much of what the humanitarian community wants is not at cross-purposes with the political or diplomatic agendas, it is just standard procedure. The humanitarian community has to have more of the right people in the U.N. Humanitarian coordinator and DSRSG positions to ensure that the humanitarian voice is heard.

4. New Approaches for Preventing and Mitigating the Effects of HIV/AIDS and Diarrhea

Presenters: Nancy Egbert, RN, MPH, Public Health Specialist, USAID/OFDA
Neal Brandes, Health Specialist, Division of Maternal and Child Health, USAID's Bureau of Global Health
Emmanuel d'Harcourt, International Rescue Committee (IRC)
Collen Mone, IRC

- **Nancy Egbert, RN, MPH, Public Health Specialist, USAID/OFDA
“Preventing and Mitigating the Effects on HIV/AIDS in Emergencies by Using a Multi-Sectoral Approach”**

Ms. Egbert discussed HIV/AIDS in humanitarian emergencies and USAID/OFDA's Multi-Sectoral Response. HIV/AIDS has ramifications in both complex emergencies and natural disasters. Emergencies tend to increase the risk of transmission. However, this has been shown not to be always true. In the case of Angola's civil war, HIV/AIDS prevalence did not increase because people were confined to areas. Since peace has come to Angola, the prevalence of HIV/AIDS has increased in the country. Rape, sexual violence, poverty, and mass displacement during emergencies also increase the prevalence of HIV/AIDS. Vulnerable groups in emergency settings include people already living with HIV/AIDS, women and children, mobile populations, and the rural poor.

Ms. Egbert provided an overview of the “Guidelines for HIV/AIDS Interventions in Emergency Settings” prepared by the U.N. Inter-Agency Standing Committee. The purpose of the HIV/AIDS guidelines is to enable governments to deliver the minimum required multi-sectoral response to HIV/AIDS during the early phase of an emergency. The rationale of the guidelines is that if HIV/AIDS is not addressed early on, the impact will expand far after the emergency. The Guidelines have not been tested, although there are plans to do so, and some aspects of HIV/AIDS are not addressed or are missing. Ms. Egbert noted that even if a country has low HIV/AIDS prevalence—defined by USAID, as below 5 percent—the response to HIV/AIDS should not receive low priority.

The Guidelines are set-up in a matrix that addresses three areas: 1) Emergency Preparedness, which includes developing a disaster preparedness plan, conducting NGO staff training on HIV/AIDS, developing needs assessment, and assessing local capacity; 2) Minimum Response, which outlines the minimum response for each sector; and 3) Comprehensive Response, which outlines the steps to undertake during the stabilized phase of the emergency.

The Guidelines matrix includes the following sectors: coordination, assessment and monitoring, protection, water and sanitation, food security and nutrition, shelter and site planning, health, education, behavior change communication and information education

communication, HIV/AIDS in the workplace. USAID/OFDA is supportive of the Guidelines in general, but has not yet decided if it will support or fund all the sectors, for example education and HIV/AIDS in the workplace. Some of the sectors that USAID/OFDA is already funding include water and sanitation, food security, and nutrition; other potential areas include shelter and site planning.

Ms. Egbert noted that the health sector should be the focal point of HIV/AIDS prevention activities. The minimum response for the health sector during an acute emergency must be expanded to ensure that HIV/AIDS is included. These activities should include mapping current services and practices; training health personnel; and assessing current practices in universal precautions such as the use of gloves, the correct disposal of needles, and the assurance of a safe blood supply for performing transfusions. The comprehensive response for the health sector during the stabilized phase should include palliative care and home-based care, treatment of opportunistic infections and tuberculosis control, safe blood transfusion services, management of sexually-transmitted infections, and voluntary counseling and testing. At this time, USAID/OFDA will not fund voluntary counseling and testing due to the difficulty in finding qualified persons to work in these centers and the need to maintain confidentiality.

USAID/OFDA's funding parameters are: 1) HIV activities must be part of a comprehensive approach to HIV and STI prevention; 2) stand-alone HIV/AIDS proposals or HIV/AIDS objectives will not be funded; 3) activities must include measurable indicators (NGOs should provide percentages instead of using numbers of people trained); 4) USAID/OFDA has a \$250,000 Memorandum of Understanding (MOU) with Global Health for ordering condoms and test kits. The MOU provides free condoms and test kits, but has not been used much by NGOs.

Questions and Answers

Q: Must an NGO have an USAID/OFDA grant in order to use the MOU?

A: Yes, the MOU specifies all the requirements.

Q: USAID/OFDA does not fund voluntary counseling and testing centers, but test kits are used in these centers.

A: The test kits are only used to test the blood supply.

Q: You talk about the rural poor as being a vulnerable group, but what about urban poor?

A: The rural poor tend to have less access to services than the urban poor do. They tend also to be more vulnerable because natural disasters affect them disproportionately.

Q: What do the Guidelines say about infant feeding (i.e. exclusive breast-feeding)?

A: The Guidelines do not mention infant feeding or transmission from mother to child.

Q: How do these Guidelines fit with Sphere standards? The Guidelines tend to be general. Are there going to be any specifics?

A: These Guidelines go further than Sphere. In some cases, the Guidelines are general, but there will be specifics and improvements. USAID/OFDA expects NGOs will become involved in testing the Guidelines and developing model programs to implement them.

Comment: The Women’s Commission for Refugee Women and Children, on behalf of the Reproductive Health Response in Conflict Consortium, has developed a five-day training course on HIV/AIDS prevention and control to assist humanitarian workers to deepen their individual understanding of the complexities of HIV/AIDS and to equip participants with the knowledge and skills needed to improve HIV/AIDS program design and implementation in their communities.

- **Neal Brandes, Health Specialist, Division of Maternal and Child Health, USAID’s Bureau of Global Health**

Mr. Brandes presented an overview of new interventions in diarrhea management with the use of new oral rehydration salts (ORS) and zinc as well as provided a tool kit and technical assistance for diarrhea management. The use of two interventions—new ORS with lower levels of glucose and salt and zinc supplementation for 10 to 14 days—reduce the duration and severity of diarrhea, as well as have a two to three month preventive effect. Mr. Brandes presented the results of the use of zinc in a large community trial in Bangladesh and emphasized the role of zinc in facilitating diarrhea management and preventing diarrheal deaths. Vomiting has been the only reported adverse effect of zinc. Part of the success of these new interventions is that WHO has supported a pharmaceutical company to develop a dispersible tablet that costs under \$0.20 per treatment and is a stable over-the-counter treatment. Currently there is only one approved supplier of zinc tablets in France. The addition of zinc to WHO’s Essential Drug List is forthcoming. The USAID Zinc Waiver allows grantees to purchase zinc. Support for NGOs in these new interventions is available from the MOST project. The project will provide technical assistance for the development of work plans and business plans and will serve as a resource clearinghouse with guidelines, job aids, and monitoring and evaluation tools. In addition, the project will serve as a secretariat for knowledge management and information sharing. The MOST project asks that NGOs in return share their experiences.

Mr. Brandes introduced the presenters from IRC to share the organization’s field experience in the implementation of zinc.

- **Emmanuel d’Harcourt and Collen Mone, International Rescue Committee**

Mr. D’Harcourt and Ms. Mone presented data from IRC’s experience with zinc treatment in complex emergencies in order to guide the development of similar programs in the future. IRC presented baseline results from surveys conducted in the Democratic Republic of the Congo (DRC) and Chad. The results of surveys indicate that the rates of treatment—both good and bad—for diarrhea are higher in a camp (Chad) than in a population-based setting (DRC).

IRC conducted a zinc treatment pilot project that lasted three to six months at the Cibingu Health Center in South Kivu, DRC. IRC's intervention focused on providing zinc as part of a package that included nutritional advice, ORS, and referral for co-morbidity. Early data from the project indicates that there has been a phenomenal increase in diarrhea treatment in the Cibingu Health Center: cases increased from four to five per month over the past year to more than 75 cases during the last 2 weeks. Comments from the mothers whose children were treated include, "My child would not be alive without zinc." Mr. D'Harcourt and Ms. Cone noted that zinc is clearly answering the need in Cibingu. IRC has plans to implement this project in Chad and in Darfur, Sudan. The baseline survey in the Darfurian refugee camps in Chad has already been conducted, training is ongoing, 200,000 tablets have been delivered, and implementation should start soon. IRC's planned project in Darfur has been delayed due to the Government of Sudan's threat to close Otash camp, initially chosen for the project.

Mr. D'Harcourt and Ms. Cone discussed the advantages and disadvantages of community and facility treatments for diarrhea management. While community treatment has many benefits, facility treatment may be more appropriate in some emergencies due to more rapid implementation and higher access to facilities. IRC strongly recommends that NGOs add a community component in order to reach those cases of diarrhea that do not go to the health facility.

5. Community Therapeutic Care

Facilitator: Caroline Abla, Public Health Advisor, USAID/OFDA
Presenters: Steve Collins, Director, Valid International
Caroline Grobler-Tanner, Nutrition Advisor, Food and Nutrition
Technical Assistance (FANTA)/Academy for Educational
Development (AED)

Caroline Abla facilitated the presentation by two scholars and practitioners in community-based therapeutic care (CTC). Ms. Abla introduced the presentation by noting that CTC is a new approach to managing acute malnutrition in emergencies and was developed by Valid International. CTC has already been implemented in Malawi, South Sudan, Darfur, and Ethiopia. In March 2005, a CTC workshop will take place in Washington, D.C. to discuss progress made on the use of CTC in the field.

- **Steve Collins, Director, Valid International**

Mr. Collins presented CTC as a new paradigm for selective feeding in humanitarian emergencies that maximizes impact via coverage, access, and appropriate level of care. During his presentation, Mr. Collins explained CTC and how it works, presented results to date with 10,000 severely malnourished children, described the potential of CTC in building local capacity and allowing emergency programs to more easily transition into longer term programming, and presented the challenge in ensuring that CTC standards and quality are upheld.

CTC's most salient features include: its adaptation to the context where implemented; care for severe acute malnutrition (SAM) is in homes and not in hospitals; it works through local people rather than imported experts; and it considers social, economic, and cultural aspects of malnutrition as well as medical aspects. The hierarchy of emergency nutritional interventions ranges from general rations to supplementary feeding programs (SFPs) to therapeutic feeding programs (TFPs). General rations have a higher priority, increased coverage and population level impact, and better cost-to-benefit ratios. As the interventions move towards TFP at the end of the range, they have lower priority, require increasingly intensive individual treatment, and have poorer cost-to-benefit ratios. CTC falls between SFP and TFP within this hierarchy. Mr. Collins noted that emergency nutritional interventions provide an important opportunity to build for the future because the large amount of funding available helps to decrease future vulnerability.

CTC is a public health approach that seeks to maximize nutritional program impact through coverage, access, and timeliness of care. CTC builds local understanding and provides capacity to manage acute malnutrition. CTC is multi-sectoral; in order to be successful the CTC intervention must include food security and other sectoral interventions, such as water and sanitation. CTC contains four basic elements: 1) Social mobilization and participation; 2) SFP; 3) Outpatient Therapeutic Feeding (OTP); and 4) Stabilization Centers (SC) equivalent to WHO's TFP phase 1.

Mr. Collins emphasized that malnutrition gradually becomes severe and complicated, and thus it is crucial to have access and coverage in treating it. Populations close to feeding centers have less severe cases, suffer fewer complications, and are easier to treat. However, populations further away from the treatment centers do not have access, and therefore the cases of malnutrition are presented later; are more severe, complicated, and difficult to treat; and require intensive treatment. With CTC, cases of malnutrition are caught early as OTP distribution points are closer and more accessible to the populations.

Mr. Collins noted that Therapeutic Feeding Centers (TFCs) are labor intensive, requiring approximately 53 highly educated staff for 400 severe cases. In comparison, CTC requires approximately 13 to 17 highly educated staff for an equivalent amount of severe cases. In addition, the diet required for therapeutic feeding contains milk and imported inputs, while plummy nut used in CTC programs can be locally produced.

According to Mr. Collins, results from the first 100,000 moderate and 10,000 severe malnutrition cases treated in CTC programs supported by Valid International from 2000 to 2003 are extremely positive. Clinical outcomes exceeded Sphere standards, and rates of coverage were four times greater than achieved under center-based programs. In addition, with CTC, cost per beneficiary is reduced as the number of beneficiaries increases.

Mr. Collins noted that there is high potential to build local capacity, thereby allowing emergency programs to more easily transition into longer-term programming. The transition of CTC to longer-term programs can be achieved by 1) harnessing the

motivation and credibility of successful OTP treatments to create local demand, 2) integrating the production of Ready-to-Use-Therapeutic Food (RUTF) with local agriculture, and 3) using CTC to provide an entry point for initial interventions towards HIV-affected families. According to Mr. Collins, the key to stimulating demand is exposing people to the positive effects of CTC at both the individual and institutional level. Initial experience indicates that once local, district, and national health staff and community leaders have seen CTC, they are motivated by the success and want CTC in their villages and centers. This is a pre-requisite for successful expansion and for longer-term programming in a resource-poor environment.

Mr. Collins emphasized that action is now required to ensure that CTC standards and quality are upheld. For example, in Darfur, there is concern that some programs are being called CTCs but are not following CTC principles. Mr. Collins recommends the development of a core group of agencies with credible CTC expertise. In addition, training through courses in theory and practice and in-field mentoring are also needed. Mr. Collins also sees the potential for using CTC as a framework for cooperation and support between NGOs. Different agencies implement SFPs; the challenge therefore is how to make different agencies work together in CTC interventions. Mr. Collins hopes that CTC will soon be incorporated into national and WHO standards.

Questions and Answers

Q: Of those agencies present in the discussion that are not implementing CTC, why are they not implementing it?

A: The World Vision International representative indicated that the organization is focused on general food distributions and would need to train staff in CTC.

Q: Was Valid International able to glean information from the 2001 North Darfur program to apply in the 2004 response to the Darfur crisis?

A: It was a SC/UK program, and Valid does not have that information.

Q: From USAID/FFP's point of view, there is not an adequate commodity to contribute for RUTF. What are the possibilities of getting collaboration to put something out?

A: That is a double-edged sword. Putting RUTF ingredients in the commodity list would allow those commodities to be available quickly. However, the local agriculture and markets would be damaged if countries are flooded with large amounts of these commodities.

Q: How are families weaned off free food?

A: CTC programs in Malawi were integrated with local agriculture rehabilitation programs, such as seed and tools, from the beginning. The programs were integrated with other sectors, such as food security and public health, in order to help in the transition to longer-term development. This requires experienced professionals at the NGO level.

Q: In Darfur, protection is one of the critical components of the emergency response. Did Valid see CTC addressing or mitigating some of the protection issues?

A: Even though Mr. Collins did not focus on protection issues while he was in Darfur, he thinks that by engaging with the communities through CTC, NGOs are able to hear the voices of the communities and have additional knowledge of where the protection and vulnerabilities are. NGOs could therefore have a potential advantage through CTC in this regard.

Q: What has been reaction to CTC from other donors?

A: There has been a positive reaction from other donors. In Darfur, the U.K.'s Department for International Development (DFID) has funded CTC program costs in South Darfur. The European Community Humanitarian Aid Office (ECHO) has funded program costs in Malawi.

Comment: USAID/OFDA has been supportive of the CTC approach because Valid and Concern International have conducted research showing that CTC works. In addition, USAID/OFDA has looked at the CTC programs in Ethiopia. However, USAID/OFDA is aware that there are NGOs that have concerns about CTC and would like to work with these NGOs on those concerns.

6. Q and A with the USAID/OFDA Grants Working Group (GWG)

Facilitator: Sureka Khandagle, Regional Coordinator, USAID/OFDA

Presenters: Jay Bergman, Contracts/Grants Specialist, USAID/OFDA
Gilbert Collins, Evaluation and Planning Team (EPT), USAID/OFDA
Diane deBernardo, Disaster Operations Specialist, USAID/OFDA
Nancy Egbert, Public Health Advisor, USAID/OFDA
Christine Gottschalk, Disaster Operations Specialist, USAID/OFDA
Barbara Howald, Training Unit, USAID/OFDA

The GWG began the session with a review of some of the most important changes made to the [USAID/OFDA Guidelines for Proposals and Reporting](http://www.usaid.gov/our_work/humanitarian_assistance/disaster_assistance/resources/pdf/guideline_2004.pdf) (www.usaid.gov/our_work/humanitarian_assistance/disaster_assistance/resources/pdf/guideline_2004.pdf) in the recent revision completed in November 2004. The guidelines now include a definition of the concept of developmental relief. The guidelines also now include information on most vulnerable groups and protection as components of disaster programming.

In the section of the guidelines on the OFDA proposal review and grant award process, the required security plans should now be included in the technical proposal rather than the cost proposal, as well as the number of targeted beneficiaries and IDPs for each objective of the proposal.

Changes in the recommended proposal format include renaming the subheading to “needs assessment” under “program rationale” and defining the service area and target population. Depending on the sector, the proposal should include minimal technical information requirements. A major change is the inclusion of wasting and crude

mortality data for health and nutrition programs. USAID needs to know baseline data. This can be accomplished by adding one question to the organization's 30 x 30 survey forms. The program rational also now includes a sub-heading on security.

In the proposal framework, the GWG outlined the relationship between objectives and expected results. Potential grantees are encouraged to use the following terms: income generation, relief commodities, and risk management in place of livelihoods, non-food commodities, and risk reduction, respectively.

Under program description, the GWG explained that the number of beneficiaries as individuals and their locations should be included in the implementation plan. In addition, it was noted that USAID/OFDA considers evaluations on a case-by-case basis, sometimes incorporated into the grant, other times conducted by the regional team or by EPT.

With respect to guidelines for reporting, the GWG reviewed that program updates are brief, informal contacts that could be a phone call, an email, or a meeting. Program performance reports are concise narratives and may occur quarterly, semi-annually, or annually depending on the terms of the grant. Annual and/or final report should include statistical data and a complete discussion of the program.

In February 2004, a new terrorist certification replaced the original certification that was issued in 2002. The February 2004 version created controversy with some partners due to vague wording. Some NGOs were concerned about the broadness of the language and would not sign the new certification. On September 27, 2004, the certification was revised again and that version is included in the new USAID/OFDA grant guidelines. NGOs have appeared satisfied thus far with the new version. Grant provisions now replace other certifications such as the drug-free workplace and debarment/suspension.

Sample monitoring tools are included in the new grant guidelines as USAID/OFDA's attempt to ensure that certain questions are discussed when a performance plan is being developed. For example, who will collect data and who will analyze it? USAID/OFDA is always open to feedback about these tools.

In response to the large number of issues letters sent to partners, USAID/OFDA, with assistance from Georgetown University students, undertook an "Issues Letter Study" to improve USAID/OFDA's proposal review process. USAID/OFDA analyzed data from a large sample of proposals to identify trends. The results indicated that the program description was the most problematic section of the proposals received. Surprisingly, the level of NGO experience working with USAID/OFDA was not inversely proportional to the number of issues letters sent. More than 50 percent of the proposals from NGOs with significant USAID/OFDA experience still required issues letters.

NGO Experience with USAID/OFDA	# NGOs	# Proposals Reviewed	% of all proposals	# Issues Letters Sent	% Proposals requiring Issues Letters
No Experience	33	33	15%	15	45%
Limited Experience	22	65	30%	32	49%
Some Experience	8	49	23%	22	45%
Significant Experience	6	69	32%	36	52%
<i>Totals</i>	<i>69</i>	<i>216</i>	<i>100%</i>	<i>105</i>	<i>49%</i>

As a result of the issues letters study, USAID/OFDA is considering making further revisions to the proposal guidelines, conducting regional workshops, putting workshop packages online, and even providing online guidance with grants specialists during set times. OFDA would like to hear feedback from NGOs on the guidelines and practical training methods.

Questions and Answers

Q: For smaller agencies, it would be helpful to see examples of successful proposals, something we could use as models. Would that be possible?

A: In the past when USAID/OFDA provided samples, unfortunately duplicates of those samples would be the only type of proposal received. OFDA stopped posting samples in order to encourage creativity. In addition, providing samples raises question about sharing proprietary information.

Q: In examining the analysis of issues letters broken down by region, Africa has by far the most. Are the factors contributing to complex emergencies such as fluidity of the situation given special consideration? How can data collection be better addressed in Africa?

A: The fluid nature of complex emergencies can be incorporated into a successful proposal. We understand that it is hard to be precise, but do not leave data out altogether, even when the situation is changing data provides a basis for our reviews. Flexibility can be incorporated into the implementation plan, for example. When looking at Asia programming, which occurs generally at the field level, fewer issues letters are generated.

Q: Did the issues letter study do a breakdown of proposals submitted under an APS versus unsolicited proposals?

A: The issues letter study consisted of only unsolicited proposals; however, the TAG team notes that similar comments are sent back for APS and non-APS proposals,

primarily requests for more details on the program description and for not following the proposal guidelines. Perhaps the new guidelines have not made it to the field level, and perhaps a disconnect exists between some NGO headquarters and the field offices? In addition, in many proposals, there is an assumption that USAID/OFDA/Washington knows the context of the situation you are describing. OFDA's technical team reviews proposals from all over the world, and is not always abreast of the latest sectoral issues for each country. We know you get tired of explaining, but to assess the merits of planned interventions it helps to know the key issues in each sector, and what information is being used? Sometimes a health or nutrition survey is referenced but only mentioned in general terms. Remember the indicators should match the program description. Everything should flow from the needs assessment, down to the objectives and then to the activities and indicators. Indicators need to be measurable and meaningful. For example, "the number of people who will be trained" is measurable but not very meaningful? A better indicator might be the percentage people who passed the training course. The use of percentages necessitates a denominator.

Q: When trying to train field staff, my organization has difficulty explaining the difference in the terminology between expected result, objective, and intermediate result. How can I better explain the differences?

A: USAID has many different terms, depending on the office giving the grant. USAID/OFDA is trying to simplify the language. Think of objectives as broad, something like decreased mortality. Key activities, then, will help to achieve the objective and produce expected results, which might be a decrease in the number of cases of diarrhea. Too often indicators jump right to the objective.

7. Thinking Outside the Tent: New Directions and New Products for Shelter Sector Activities

Facilitator/ Presenter: Paul Thompson, Partner, Interworks
Presenters: Richard Hill, Director, Office of Emergency and Transition Programs, CHF International
Sky Wiseman, Emergency Public Health Consultant, USAID/OFDA

- Paul Thompson, Partner, Interworks

Mr. Thompson filled in as facilitator for USAID/OFDA Urban Planning and Urban Disaster Mitigation Specialist Chuck Setchell. In his introduction, Mr. Thompson stated that shelter assistance is a primary means of achieving the third phase of USAID/OFDA's mandate—alleviating the economic impact of disaster. Shelter and settlements are *multi-sectoral*, by engaging crosscutting issues such as gender, environment, and social relations; *contextual* and must be looked at with flexibility and sophistication; and *transitional*, meaning that shelter can serve as the bridge between disaster and recovery.

Mr. Thompson emphasized several key connections between settlement programming and economic recovery after a disaster. Disasters not only destroy homes but also impact livelihoods because homes often also function as offices, the base of production for cottage industries, warehouses, etc. As a result, replacing and rebuilding shelters after a disaster can jumpstart an economic recovery. Another key intersection between settlements and economic recovery relates to remittances, which are cash flows sent by expatriates to their home countries. Expatriate communities currently send \$93 billion annually to their home countries, of which an estimated 50 percent is allocated toward housing and repairs. These flows increase after disasters and can be used to enhance hazard and conflict mitigation. The humanitarian community knows little about remittances, and USAID/OFDA plans to support research on the impact of remittances on shelter.

In addition, improved lighting and fuel-efficient stoves can significantly impact protection. Fuel-efficient stoves reduce the need to venture into unsafe areas to secure cooking fuel, reduce fire hazards, generate livelihoods, and create logistical savings. Improved lighting in public places enhances safety and protection, and can help repel vectors. Additionally, improving the technology of earthen structures in earthquake-prone areas, where 1.5 billion people reside, will also save lives and alleviate the economic impact of disasters. USAID/OFDA is working to develop guidelines to increase the seismic resistance of structures and is exploring the possibility of linking debt reduction and hazard reduction to promote hazard mitigation.

- **Richard Hill, Director, Office of Emergency and Transition Programs, CHF International**

Mr. Hill discussed the seismic hazard mitigation and livelihoods generation activities in the USAID/OFDA-funded Transition and Urban Support Project in Kabul, Afghanistan. The key challenge was to find hazard-reducing building materials that beneficiaries could afford. The typical material used was reinforced concrete, but this was unaffordable for the target population. Instead, the project used bamboo to reinforce mud walls and chicken wire in the mortar joints. This combination was designed to prevent the roof from collapsing inward, which is a major risk shelters face in an earthquake. Mr. Hill pointed out that, in cases where targeted beneficiaries did not have tenure to their place of residence, agreements were signed with landlords or certification of ownership was authorized by local community leaders

Mr. Hill outlined a second project that examined the economic importance of shelter assistance in post-disaster settings. The goal of this USAID/OFDA-funded project was to apply a more rigorous economic analysis to information and studies already available and to develop a tool for assessing the economic impact of shelter in the field. The study concluded that housing is the principal sector for reactivating domestic growth and that housing provides a platform for home-based enterprises (e.g., barbershop, jewelry manufacture, food preparation, and sale). Among poor populations, a significant percentage of people earn their incomes from home-based enterprises, and thus shelter is critical for the economy. In addition, shelter is capital and can be used as collateral, as

economist Hernando de Soto has pointed out. De Soto also demonstrated that the absence of land titling could prevent the use of shelter as collateral. Mr. Hill noted that the experience of the Afghanistan project proved that even a land title certificate from a community leader could provide semi-secure tenure.

Studies conducted in Sri Lanka, Colombia, and El Salvador revealed that shelter assistance after a disaster is crucial in increasing the incomes of beneficiaries, even for the programs serving the poorest and most vulnerable populations. The role of shelter as capital and as an overall platform for increasing income, with links to credit, training, agricultural support, and small business development, is underappreciated and merits further study.

- **Sky Wiseman, Emergency Public Health Consultant, USAID/OFDA**

Mr. Wiseman addressed the issue of emergency malaria vector control in settlements. In complex emergencies, malaria outbreaks often emerge due to migration and the overall vulnerability of populations. Morbidity and mortality is often high during complex emergencies. USAID/OFDA often funds malaria programs for complex emergencies or natural disasters when malaria is identified as a potential serious disease threat. Treatment of malaria cases using the newer anti-malarial drugs on the market (artemisinin combination therapy) is the most important tool currently available to combat malaria in emergencies. There are also two major prevention tools currently available: indoor residual spraying (IRS) and insecticide treated bed nets. IRS is very difficult to implement in emergencies due to the intensive planning, logistic, and personnel requirements, and the need to implement the intervention at the earliest stages of an outbreak. For these reasons, USAID/OFDA is unlikely to become involved in indoor residual spraying programs; however, USAID/OFDA support long-lasting insecticide-treated bed nets.

Insecticide treated plastic sheeting is a new and exciting tool that interfaces with shelter. The sheeting is impregnated with chemicals to kill mosquitoes and flies and functions as both shelter and as vector control, without requiring beneficiaries to change their behavior. Some issues with this new product are potential cost issues and concerns about shelf life. Potential human health and environmental issues are still being studied. Preliminary environmental tests show that only minimal traces of the chemicals used come off in rainwater. Preliminary results from studies in Sierra Leone, where the walls of entire shelters were lined with insecticide treated plastic sheeting, revealed a major reduction in malaria and vector density. The effects of the sheeting appeared to diminish after nine months, but this does not necessarily imply a lack of usefulness during emergencies. People dropping out of testing may also have impacted these preliminary results. In another camp where treated plastic sheeting was used only for ceilings of shelters, preliminary data again suggested that malaria and vector density were reduced, although the impact was not as significant as with the entire shelter being lined with the sheeting. In practice, it is not likely that entire shelters would be lined with sheeting, so the ceiling only data may be most representative of a typical disaster setting. Mr. Wiseman pointed out that the plastic sheeting potentially protects the entire community

from malaria due to the overall reduction in vector density and malaria prevalence in the community.

Mr. Wiseman concluded by outlining key water and sanitation practices, including drinking from a safe water supply, using chlorine, protecting wells, washing hands, and setting up clean latrines. The humanitarian community currently possesses all of the tools it needs for safe and effective water and sanitation practices, the key is to use these tools in a more efficient and effective manner. Studies have shown that hand washing with soap could potentially reduce diarrheal disease by as much as 50 percent. Mr. Wiseman noted that not many studies indicate a strong correlation flies and diarrheal diseases; however, transmission of disease organisms by flies is certainly theoretically possible. The evidence appears to be stronger for flies transmitting trachoma. The key concept is that a large fly population is indicative of overall poor sanitation. While flies may not represent the primary mode of transmission of diarrheal disease, they are definitely an indicator of environmental conditions that imply the existence of other more significant pathways of fecal-oral transmission such as person-to-person contact, and contamination of food and water from persons who are not using sound hygiene practices.

Mr. Thompson added that shelter assistance is a major means of implementing USAID/OFDA's mandate; that shelter and settlements are multi-sectoral, contextual, and transitional; and that new products hold the promise of improving the quality of water and sanitation.

Questions and Answers

Q: This was not mentioned, but widows in camps are a very vulnerable group after disasters because they cannot return to rebuild their shelters for a number of reasons.

A: Shelter is an integrated process that requires accounting for the needs of the population. The project in Afghanistan targeted widows, particularly on tenure issues, and we need to be cognizant of the special vulnerabilities of women. USAID/OFDA has a protection specialist, and this issue is integrated into our programs.

Q: With regard to vector control and shelter, environmental management as a method of controlling vectors was not mentioned. Aren't you treating the symptoms rather than the problems? For instance, using more pesticides is not a substitute for hand washing.

A: Environmental management such as draining vector-breeding sites is not typically effective in emergencies. The intervention that saves the most lives in an emergency is the use of appropriate anti-malarial drugs, typically artemisinin combination therapies. Addressing environmental issues related to the overall burden of malaria worldwide is beyond the scope of USAID/OFDA's work during a particular disaster response.

Q: With regard to the project in Afghanistan, was enough knowledge transmitted to local sources to continue the project after the NGOs had gone? Would those measures be affordable given people's economic resources?

A: We did not conduct an extensive education program. People take up methods because they work and are affordable, and certainly, it stands a better chance of being taken on than something people could not do on their own. Generally, interest in reducing hazards among people is highest right after a disaster. Most of the population could afford the seismic reduction measures but still might chose to spend money elsewhere and other economic decisions, such as securing higher income or even purchasing household decorations, might take priority.

8. Monitoring Minds Want to Know

Facilitator: Marcella Michaud, Evaluations and Planning Team, USAID/OFDA
Presenters: Jock Baker, CARE International Emergency Group
Rebecca Scheurer, Regional Advisor, USAID/OFDA
Anna Schowengerdt, Catholic Relief Services (CRS)
Dennis Warner, Catholic Relief Services (CRS)

- **Dennis Warner, Catholic Relief Services (CRS)**

Mr. Warner presented on Catholic Relief Services' experience in monitoring emergency programs. He explained that monitoring is conducted to analyze the delivery of project services, the use of project services, and the impact of use of project services. This is done in order to determine the appropriate response and level of effort of the program, to demonstrate accountability and stewardship of funds, and to know when to exit the emergency program.

Mr. Warner explained how organizations can make sure they are delivering what is needed and need to be accountable to donors, beneficiaries, and the general public.

The context of an emergency will affect the monitoring process. The rapid onset of a natural disaster emergency typically requires only the delivery of services. Complex emergencies, however, equal delivery of services plus utilization and possibly longer-term impact.

Some challenges to monitoring include ensuring the security of staff, handling movement of and access to populations, paying the extra costs associated with monitoring, and avoiding duplication of efforts among agencies. Best practices in emergency monitoring have shown that the use of a local partner that knows local situations and people will be most effective.

Depending on the sector, the purpose and the methodologies of monitoring will change. In the health and nutrition sector, the purpose is to study morbidity and mortality, using random population samples and clinic records, and possibly even Ministry of Health data. In water and sanitation, the purpose is the production of minimum quality and quantity of water and safe water practices. This can be analyzed by doing water quality testing, looking at site usage data, and conducting focus groups sessions and sanitary surveys. In

the food aid sector, the purpose of a project is to provide daily caloric requirements, which can be monitored by doing commodity tracking and end use checking. Whereas in the livelihoods sector, in order to monitor shock and vulnerability reductions, one must study household assets, agricultural production, and market surveys.

The ultimate goal is to make monitoring faster, easier, and more effective in emergencies. This can be achieved in part by standardizing indicators. Can this be done? Yes, in certain cases. The use of tools like Sphere, the Field Operations Guide (FOG), and FANTA guidelines can assist. Indicators should refer to essential objectives rather than context-specific objectives. For example, an indicator might be liters of water/person/day delivered, and not tanker/day delivered to project site, which depends on the context of the project. Furthermore, the context affects non-standardized indicators, since the indicator remains the same but the target differs. For example, an indicator might be 7.5 liters/day at the start of emergency in remote location, with the objective to reach 15 liters/day as soon as possible.

- **Anna Schowengerdt, Catholic Relief Services (CRS)**

Ms. Schowengerdt presented two case studies from CRS' experience with emergency monitoring. The first case study involved a CRS targeted feeding program in Liberia. The case study involved the following factors:

- Complex emergency
- Food-assisted agriculture, education, vulnerable groups
- Service delivery and service utilization indicators
- Separate monitoring and evaluation (M&E) department within CRS/Liberia. This was an experiment to divide M&E staff from programming personnel.
- High level of technical training of M&E staff who conducted continuous site visits.
- Training of 16 local monitors.

Multiple levels and methods of monitoring and reporting were maintained: stock balances, attendance records, spot checks, head counts, site specs, satisfactions surveys, extensive interviews, and yield checks.

System requirements included reliable access to population and sizable financial and material resources. Ms. Schowengerdt noted that CRS could not have done such extensive monitoring with a mobile population. She also noted that there was a stable staff pool and little staff turnover. Accountability improved as a result of the M&E. CRS/Liberia also worked hard to avoid creating a perception that M&E staff were "policing" program staff. This helped to retain a team approach.

The second case study involved the CRS/Burundi Seed Fair Program. The case study involved the following factors:

- Drought relief within a complex emergency
- Livelihood recovery and shock/vulnerability
- Restoring local market system

- Access to locally available, preferred crops and seed varieties
- Three levels of “one off” monitoring: seed availability, seed voucher exchange, beneficiary satisfaction and utilization

In this case, the program staff monitored program performance using simple interviewing and commodity measurement skills. Special consideration was given to quality of seed, mobility of population, and the gender context. It was a simpler monitoring approach. Results showed that the germination rates of local seeds were usually better, but that the mobility of the population was a problem. CRS tried to target women farmers and settlers.

- **Jock Baker, CARE International Emergency Group**

Mr. Baker explained that according to the U.N. definition, monitoring is the continuing function that gives an indication of progress, or lack thereof. Evaluation, on the other hand, is a time-bound exercise that is objective, independent, and external. Some organizations are attempting to do real-time evaluations, which are conducted at specific times during a crisis.

Needs and resources assessment must look at capacity and not list generic characteristics of a situation. Externalities can have a big impact on outcomes and change objectives. In addition, many actors may be involved, such as NGOs, the military, paramilitaries, etc.

The Sphere project is a start to a common language regarding indicators, but all agencies have different monitoring data forms and sets. OCHA has attempted to produce common monitoring forms. In Mr. Baker’s opinion, one of the most successful monitoring experiences occurred during the crisis in East Timor. U.S. forces collected information from OCHA and operational agencies, entered it into a database, and shared the reports at daily coordination meetings. This did not happen in Iraq because there was less buy-in from NGOs, but Mr. Baker recommended something similar might work in Darfur.

Mr. Baker stated that CARE, which is both a relief and development organization, aims to apply all programming standards to both sides of the agency. This is a challenge for staff members working in emergency settings, but they have negotiated an “approach with aspiration.” While it may be very rare to have anything close to Sphere standards in some emergencies, CARE is working hard with partners to build capacity and achieve those aims.

- **Rebecca Scheurer, Regional Advisor, USAID/OFDA**

Ms. Scheurer discussed that on the donor side, USAID/OFDA is very interested in how to improve M&E. She mentioned that there has been a lot of improvement, but there is so much more to do. M&E is a real priority to ensure good programming and to make the case for the work at the field level.

USAID/OFDA Emergency Disaster Relief Coordinators (EDRC) and Regional Advisors conduct regular site visits in contact with partners and the Disaster Operations Specialist does day-to-day desktop monitoring. In the past, USAID/OFDA conducted monitoring in an ad hoc manner, sometimes filing field trip reports, but there was no uniform system. We want to keep monitoring flexible, but certain questions need to be asked in order to assess impact and extent of reach of the programs. Donors do not want to police, but rather achieve what the programs aim to do.

Monitoring can affect program outcomes, if people are paying close attention, and correct the course if something is going in the wrong direction. Evaluation is more retrospective and offers lessons learned that can be applied to future programs. Constraints to M&E include time, access, and human/financial resources, even on the donor side. It is a team effort.

USAID/OFDA has devised an M&E training module and incorporated it into the grants course given to USAID/OFDA staff. It includes rudimentary tools to keep track of what programs are visited. In addition, the revised proposal guidelines now require that programs have monitoring plans. USAID/OFDA wants to know if NGOs have given M&E thought and consideration. In addition, informal program updates are important monitoring tools.

USAID/OFDA continues working on a monitoring booklet and wants to do more outreach and research. Samples tools are included in the annex of the grant guidelines. In the end, incorporating more stakeholder and beneficiary involvement will improve accuracy and ease of reporting.

Questions and Answers

Q: Do you see a benefit to doing joint monitoring by several donors?

A: Yes, it makes a lot of sense, since there are so many players. NGOs go collectively into appeals to bring in the money, so it makes sense that doing joint evaluations and building in a peer review process would be useful. USAID/OFDA strongly supports joint monitoring, which will help to bring about consensus on indicators that are needed and requested. We can answer the question, what are the “classical indicators”?

USAID/OFDA understands there may be some sensitivity to multi-donor evaluations but remains very interested in doing more.

Comment: Regarding indicators for health and nutrition, the SMART indicators look at household food economy models to explain why malnutrition increases or decreases and to explain why there is malnutrition. Go to the [SMART website](http://www.smartindicators.org/index.html) (www.smartindicators.org/index.html) to download to standardized tools for monitoring crude mortality and global acute malnutrition.

Q: Do NGO staff here think more training would be useful?

A: Yes, thumbs up from the crowd. Training on monitoring could go along with proposal/program design training. USAID/OFDA might be able to encourage other donors to participate.

Q: Regarding the sectors, do you have impact indicators? Do you track nutrition?

A: Our table depicts first level indicators because they are the easiest to determine. You are asking to us to go to the third level, which is much harder to do and requires a great deal of control and high-powered people to collect the data. Third level indicators are warranted for emergencies only in rare instances because the project and staff are not in the field long enough to assess impact. It may take months to see the impact.

Comment: A big challenge to monitoring impact is finding proxy indicators. We may know a lot about process or output reporting, but USAID/OFDA needs to find better ways to assess impact. This is the type of information that Congress wants. Maybe donors and NGOs can work together on this, identifying those indicators or proxies at a minimum.

Q: How do gender aspects come in? Monitoring the gender impact of conflict can be difficult because we don't know how much information is missing. It all depends on feedback.

A: The ability to disaggregate data on gender depends on the ability to target women. CRS seed fairs target women farmers, thus our feedback is mostly from women. Within the project design and the M& E, we should focus on women. We do consultations with beneficiaries and have separate focus groups for women. In self-selected focus groups, we make sure that women are included.

Comment: Participatory approaches for monitoring methods are important so that beneficiaries are actively involved in the process. Training local staff to collecting data is also important because they can access groups that international staff cannot.

SPEAKERS BIOGRAPHICAL DATA

Caroline Abla works with USAID/OFDA's Technical Assistance Group as a Public Health Advisor and the Health and Nutrition Coordinator for the health team. She assists the health team in providing OFDA with health and nutrition technical assistance in program planning, strategy development and implementation, and monitoring of health and nutrition mitigation and response activities. Ms. Abla provides support to OFDA teams on health and nutrition issues, conducts health and nutrition assessments, provides technical support and serves as the health and/or nutrition officer on OFDA's DARTs and Response Management Teams (RMTs), and serves as the point of contact within OFDA on Nutrition. She has been working in health and nutrition in emergencies for the past thirteen years and has worked for NGOs in the field.

Jock M. Baker is the Coordinator for Quality, Accountability & Standards for CARE's Emergency Group. After joining the organization in October 2001, he has been one of CARE International's senior global technical voices, assisting CARE in development of policies and guidelines, in addition to building capacity through training and dissemination of best practice. He has led a number of thematic reviews of organizational policy in addition to participating in assessments and evaluations of humanitarian actions around the world. His projects include a global study of CARE's work in conflict-affected settings, development and testing of "Rapid Environmental Assessment" guidelines for use during disaster response, and piloting a number of Real Time Evaluations of CARE's humanitarian and post-conflict operations. Mr. Baker also chairs InterAction's Transition, Conflict & Peace Working Group in Washington, D.C. in addition to facilitating CARE's own network of practitioners working on transition and conflict issues. Mr. Baker holds a Bachelor of Science in Biological Sciences from the University of Edinburgh and a Masters degree in Economics from the London School of Economics & Political Science.

Michelle Berg currently works for the International Rescue Committee (IRC) as the Protection Coordinator for North Darfur. Prior to working for the IRC, she worked in Washington, DC as a policy analyst for the U.S. Committee for Refugees (USCR) focusing on refugees, displacement, and asylum issues in Europe, North America, and South and Central Asia, and contributed to writing the annual World Refugee Survey. Ms. Berg has worked for the American Refugee Committee in Macedonia and Serbia, running legal and repatriation programs for Roma refugees. In addition, she has worked as legal advisor for human rights in the interim administrative authority in Kosovo, as a human rights specialist with the UN High Commissioner for Human Rights in Rwanda, as an election observer in Nigeria, Kosovo, Macedonia, and Bosnia-Herzegovina, and has taught English in Zimbabwe. Ms. Berg also worked for eight years as an asylum lawyer and family law practitioner, specializing in gender-based violence issues in Canada. She regularly provides training to the Canadian military about human rights issues. Ms. Berg is a national of Canada and the United States, and has a degree in law from Queen's University in Kingston, Ontario and attended the University of Manitoba.

Steve Catlin is currently serving in the Military Liaison Unit in OFDA and is responsible for the day-to-day planning and coordination of the MLU to include disaster response and engagement programs with all geographic and functional commands, the Joint Chiefs of Staff, Office of the Secretary of Defense, and affiliated military audiences in areas of mutual agency interest. Mr. Catlin is also responsible for the development of Chemical Biological Radiological Nuclear Explosive (CBRNE) disaster exercises, training, and planning to prepare OFDA for actual CBRNE consequence management operations as directed under Presidential Decision Directive (PDD) 39/62. He has worked with USAID/OFDA for over 10 years and previously worked for Save the Children, the International Rescue Committee as well House Congressional Appropriations Committee.

Joel R. Charny is Vice President for Policy of Refugees International. He is responsible for overseeing the policy and advocacy program of the organization. Mr. Charny joined Refugees International in July 2000 after working for four years in Cambodia as Deputy Program Manager with the CAREERE project of the United Nations Development Program. Prior to working for the UNDP in Cambodia, Mr. Charny was Overseas Director and Policy Director for Oxfam America. Mr. Charny is the author of *Obstacles to Recovery in Vietnam and Kampuchea: U.S Embargo of Humanitarian Aid*, published by Oxfam America in 1984. He is also the author of articles on humanitarian issues in volumes published by Kumerian Press and the Brookings Institution, as well as articles for *The New York Times*, *The Los Angeles Times*, *The Boston Globe*, *The Economist*, *Asiaweek*, *The Asian Wall Street Journal*, and *The Christian Science Monitor*. He has a Masters degree in international education from the Harvard Graduate School of Education.

Gilbert Collins is the Team Leader for the OFDA Evaluation and Planning Team (EPT). The EPT covers a range of issues within OFDA, including strategic planning, contingency planning, geographic information support, program monitoring, evaluation, and academic liaison. He has several years of development experience, including work in Latin America, Africa, Europe, and Asia. Gilbert has a bachelor's degree in Government from Harvard University and a master's degree in International Development from Princeton University.

Joanna Crandall is the OFDA IDP/protection specialist. Prior to joining OFDA, Joanna Crandall was a Human Rights Fellow at Columbia University School of Law where she completed an LLM degree focusing on human rights, post-conflict judicial reconstruction, and transitional justice issues. In addition, she has worked as the Head of the Rule of Law Unit with the OSCE Mission in Macedonia, as a legal systems monitor and human rights officer with the OSCE Mission in Kosovo, and as a human rights investigator with the United Nations Truth and Reconciliation Commission in Guatemala. Prior to her overseas experience, Ms. Crandall practiced immigration law in the Washington DC area.

Nancy Egbert, RN, MPH is a U.S. Public Health Service Officer, detailed from the Department of Health and Human Services and serves as the OFDA public health

specialist. She focuses particularly on diseases common in emergency settings, especially those with epidemic potential, including HIV/AIDS. She is particularly interested in finding ways to develop sustainable primary health care delivery systems in post-emergency countries.

James Fleming is the OFDA Division Director for Operations. He has over six years of experience at OFDA, working within all three divisions at Headquarters and on DARTs. Prior to coming to OFDA, Mr. Fleming spent four years at the International Organization for Migration working on Africa programs, and two years as a Peace Corps math and science education volunteer in Cameroon.

Rick Hill has been Director of Emergency and Transition Programs with CHF International since 2000. From 1990 – 2000 he served as Deputy Director, and then Director, of Intertect Relief and Reconstruction Corporation. Mr. Hill has extensive experience in the reintegration of conflict-affected populations in conjunction with economic and infrastructure reconstruction during and after disaster. He has a strong background in infrastructure reconstruction, and substantial expertise -- domestic and international -- in housing and designing and/or managing shelter specific programs. He has managed shelter programs in Sudan, El Salvador, Turkey, Uzbekistan, Croatia, Pakistan, Bangladesh, Albania, and Guatemala. He has also designed programs to address the needs of the displaced in Moldova, Colombia, Afghanistan, Liberia, Chechnya, Iraq, Sri Lanka, Somalia, Georgia, and Bosnia. He is the co-author, with Fred Cuny, of *Famine, Conflict, and Response* (Kumarian Press), and numerous monographs, articles, and reports on reconstruction and post-disaster issues.

Lisa Jones rejoined the Policy Development and Studies Branch of the United Nations Office for the Coordination of Humanitarian Affairs in July 2004, where she covers the question of integrated missions and other political and peacekeeping related issues. For the previous two years, she worked as a Political Officer in the Secretary-General's Good Offices Mission on Cyprus covering a range of political, military, humanitarian, development and economic issues associated with the negotiations for the reunification of the island. Earlier, Ms Jones spent six years working with UNHCR in Bosnia and Herzegovina and Rwanda and two years with the International Committee of the Red Cross in Croatia and Bosnia and Herzegovina, before joining OCHA in New York in 2001. Ms Jones is a qualified lawyer with 12 years experience in international humanitarian affairs and international humanitarian law. She has focused particularly on issues related to property and displacement in conflict and post-conflict situations.

Charles Kelly is the lead research for the Rapid Environmental Impact Assessment (REA) in Disasters project, and has been involved in the development and testing of the REA over the past four years. Kelly has over 23 years of field experience in humanitarian assistance programs dealing with droughts, famines, insect infestation, hurricanes, epidemics, floods, war and other emergencies in developing countries. Over this career, Kelly has performed senior and field management tasks in over 15 disaster response operations. Recent professional work has included assessing the environmental impacts during disaster operations, disaster management capacity building, and the assessment

and design of post-conflict relief and recovery programs. Mr. Kelly has worked in over 60 countries and has published over 45 articles on a variety of disaster management topics, including disaster management systems.

Sureka Khandagle serves as the Regional Coordinator for the Southern, West and North Africa team (SWAN) in the Disaster, Response, and Mitigation (DRM) Division of OFDA. In her capacity as Regional Coordinator, she oversees OFDA program responses in Liberia, the Sahel, Zimbabwe, Cote d'Ivoire and Sierra Leone. During her seven years at OFDA she has also served as the Program Officer for Southern, West and North Africa as well as Europe, Middle East and Central Asia Republics Team (EMCA) managing the portfolios for Kosovo, Montenegro, Albania and Afghanistan. She has served on a number of DARTs including those to Kosovo and Macedonia, Ethiopia and Sudan. She holds a Bachelor of Arts degree in Political Science from the University of Maryland and a Master of Arts degree in International Relations from Boston University.

Christine Knudsen is the Children and War Specialist in the Children in Crisis Unit at Save the Children. She has been supporting programs for refugee children in a number of countries in Southeast Asia, Europe, and Africa since joining Save the Children in 1999. Prior to Save the Children, her field postings included work with UNHCR in Chechnya and Catholic Relief Services in Burundi. Between field assignments, she also spent one year as a researcher with the War-torn Societies Project, exploring the interaction of national and international actors in post-conflict reconstruction. Ms. Knudsen holds a master's degree in international relations, with a concentration in conflict management, from SAIS-Johns Hopkins University.

Nance Kyloh currently serves as the USAID Representative in the Refugee and Migration Affairs section of the US Mission in Geneva, Switzerland. In this capacity, she participates actively in all of the sub working groups of the Good Humanitarian Donorship Initiative and co-chairs the Geneva sub-group for the country pilot study on the Democratic Republic of the Congo. Ms. Kyloh has previously worked for the US government at posts in Budapest, Panama City and Geneva. She studied Economics and Russian Studies at Scripps College in Claremont, California and International Economics at George Washington University.

David Lillie has worked as an OFDA Disaster Operations Specialist for 3.5 years, three of those working on the Asia/Pacific portfolio and the last six months on Sudan. Prior to his work with OFDA, David did emergency relief work in Rwanda and Zaire, elections work in the former Yugoslavia, and service with the Peace Corps in Morocco and in the U.S. He has an MPA from New York University.

Ian MacNairn is the OFDA Regional Coordinator for East and Central Africa (ECA). He has over 10 years of experience in international humanitarian assistance, including the last 2 years with OFDA and the AID/Washington Africa bureau. Prior to that, he has worked for Catholic Relief Services in Haiti, Southern Africa, the DRC, Rwanda and Baltimore, for the International Center for Insect Physiology and Ecology in western Kenya, and with the US Peace Corps as a science and agriculture teacher in Botswana.

He has also taught for 2 years at the St. Andrews School, Delaware. Mr. MacNairn holds an MA from Johns Hopkins University/SAIS in International Economics and Social Change/Development and a BS (Biomedical Sciences) and BA (History) from the University of Michigan.

Alex Mahoney is currently Acting Regional Coordinator for OFDA's EMCA team. Currently the bulk of the team's portfolio consists of Iraq and Afghanistan. Since joining OFDA in 1997, Alex has worked on a multitude of disaster responses as an Information Officer and Program Officer, including complex emergencies in Sierra Leone, Kosovo, Angola, East Timor, Eritrea, Afghanistan, and Iraq, as well as natural disasters in Central America, Mozambique, India, Pakistan, and Iran. Alex has a Masters in International Relations from George Washington University.

John L. Marks is the Sudan Coordinator for OFDA and is a member of the USAID Sudan Task Force. He has over twenty years of experience managing relief and development programs in Africa, with NGOs in the Horn and in Southern Africa, and with OFDA in Somalia and Sudan.

Michael Marx is the Disaster Response Team Leader in the Office of U.S. Foreign Disaster Assistance at the U.S. Agency for International Development. His responsibilities include managing and implementing OFDA's global humanitarian and disaster assistance response. He has served as the DART Leader in Iraq, Afghanistan, and other disasters. Prior to that, he was the Africa Team Leader in OFDA, as well as serving as the Regional Coordinator for SWAN.

Anita Menghetti assumed the position of Humanitarian Advisor in USAID's Donor Coordination Office, Bureau for Policy and Program Coordination in October of this year. Previously she was the NGO/IO/Donor Coordinator for OFDA where she was responsible for ensuring over-all consistency in OFDA's policy with regard to NGOs and provides liaison between OFDA and the UN and other IOs. She has also worked for the United Nations in positions that focused on coordination, with OCHA in Rwanda, Albania and New York, and with DPKO as the Humanitarian Planning Officer. From 1987 to 1994, Anita worked for several NGOs in refugee resettlement, policy, and programming for targeted populations. She holds an M.A. in Women's studies and Public Policy from George Washington University and a B.A. in Women's Studies and History from U.C. Berkeley

Peter Morris is currently the Team Leader for the Technical Assistance Group at OFDA. Mr. Morris has worked for the past 20 years in humanitarian assistance. He began in this field working with CARE intl.(1983-84) in Khao-I-Dang refugee camp on the Thai-Cambodian border. He then worked with the International League of Red Cross and Red Crescent in West Africa and in Geneva during the drought in 1985-1986. Subsequently, Mr. Morris has worked with ICMC in Washington, World Vision and the Red Cross in Cambodia; and as a consultant in with the United Nations in Zaire during the Rwanda Crisis. He has been with OFDA for the past nine years and participated on

various DARTs, Assessments, and Response Management Teams. He holds a M.S. in Nutrition, and a M.P.S. in International Development. He is married with three children.

Richard Olson, Ph.D. is a Professor of Political Science at Florida International University. Dr. Olson received his B.A. in Political Science from the University of California, Davis in 1967 (with 1965-1966 at the University of Madrid), his M.A. in Political Science from UCLA in 1968, and he held a Fulbright appointment in Bogotá, Colombia 1968-1969. He received his Ph.D. from the University of Oregon in 1974. Before serving in his current position, Dr. Olson held faculty positions at Arizona State University from 1982 through 1997, where he was also Director of International Programs (1985-1993), and at the University of Redlands from 1974 to 1982.

Margaret Owen is a British barrister and women's human rights lawyer who founded Empowering Widows in Development (EWD), the first international NGO representing widows' rights, following a workshop held at the Beijing Fourth World Women's Conference in 1995. She was formerly an Immigration and Refugee Lawyer, then headed the Law and unit at International Planned Parenthood, and later worked as a consultant with the Commonwealth Secretariat, World Health Organization, ILO, DFID and other international and regional agencies on Status of Women issues. She has taught courses on Law, Women, Development and Health at various universities in the UK and in the US. She is the author of *A World of Widows*, numerous articles and papers and issues and aspects of widowhood in developing countries.. She was consultant to the UN DAW for their issue on WIDOWHOOD in 2002. Following 9/11 she convened the new network Widows for Peace Through Democracy focusing on the needs, roles and challenges for widows in conflict and post-conflict scenarios. She is a consultant to the International Commission of Jurists, to the Kurdish Human Rights Project, and is a member of the UK Bar Human Rights Committee and the UK Women's National Commission.

Robert Painter is the Humanitarian Security Advisor to the Office of the United Nations Security Coordinator in New York and has served in this capacity since 2000. As such Mr. Painter has undertaken efforts to further collaboration with the NGO community and has successfully influenced the UN Policy in this regard. Prior to his assignment with UNSECOORD, MR. Painter served as a Senior Humanitarian Affairs Officer with the Office for the Coordination of Humanitarian Affairs for almost a decade as head of OCHA field Offices in Sudan, Sierra Leone, and the former Republic of Yugoslavia. Mr. Painter began his international service as a US Peace Corps Volunteer in Ghana, West Africa.

Laura E. Powers is the Agriculture and Food Security Technical Advisor at OFDA. She has over ten years of experience in soil ecology and agro-ecology, and has worked both in the US and internationally. She has been involved in numerous research projects in the field of soil ecology, and has taught international agriculture at the college level for several years. She is currently interested in the mitigation of both rural and urban agricultural disasters, using innovative approaches involving multiple sectors for an integrated hazard reduction strategy. She also handles livestock issues for OFDA.

Marion Pratt has been the Social Science Advisor for OFDA since 1996, focusing on vulnerable populations, ethnic relations, gender issues, and natural resource management in the context of natural and conflict-related disasters. She completed her M.A. and Ph.D. in Cultural Anthropology at Binghamton University, conducting research on the effects of the introduction of Nile perch into Lake Victoria on gender relations. She has taught at both high school and university levels. Marion began her work overseas as a Peace Corps Volunteer in freshwater fisheries in Niger and has since worked in Southeast Asia, the Balkans, and throughout Africa.

Rebecca Scheurer recently assumed a Regional Advisor field position with OFDA for South Asia based in Nepal. Ms. Scheurer joined OFDA in 2000, and has served namely as a monitoring specialist within the Evaluation and Planning Team. Her primary focus has been on developing OFDA's ability to monitor programs more effectively in order to understand program reach and impact and to enhance accountability. In this role Ms. Scheurer has conducted a number of field monitoring and evaluation missions, provided strategic M&E input for OFDA planning, worked with partners on field monitoring and reporting techniques, and designed a monitoring training module for OFDA staff. Prior to OFDA, Ms. Scheurer worked with Refugees International. She has lived and worked in Asia and Africa, starting as a volunteer in Madagascar in 1992, and holds an M.A. in International Development from George Washington University in Washington, D.C.

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Rob Thayer is Regional Coordinator for Asia, Latin America, and Caribbean at OFDA headquarters in Washington. He joined OFDA in June 1999 as a Disaster Operations Specialist for Asia, served as Regional Coordinator for Asia beginning April 2002, then assumed his current position in February of 2004. Prior to joining OFDA Rob served in Cambodia as a UN-funded Advisor to the Cambodian Red Cross (1991-1995) and as a consultant to The Asia Foundation in Phnom Penh (1996-1998). During the 1980s, Rob spent five years with the International Rescue Committee's refugee assistance programs on the Thai-Cambodian and Thai-Laotian borders (1983-1988). Rob has an M.A. in International Administration from the School for International Training (SIT) in Brattleboro, Vermont.

Paul Thompson began working in the field of disaster management/humanitarian assistance in 1976 when he undertook a yearlong fellowship with the Organization of American States investigating post-disaster housing reconstruction in Latin America. For the next 13 years, he worked with Fred Cuny's Intertect. In 1982 he co-founded the Disaster Management Center at the University of Wisconsin. Subsequently, his focus increasingly emphasized training humanitarian assistance agencies in disaster/emergency management as well as in post-conflict reconstruction. In 1990, he co-founded the consulting company of InterWorks LLC to support and train humanitarian assistance organizations. He has been a lead trainer at OFDA's Introduction to Assessment course for the past three years, and at the Field Team Management Course since 1997. He served as the shelter specialist on the OFDA DART in Kosovo for six weeks in 1999. Mr. Thompson has practiced architecture in Los Angeles, New York City, and Madison, Wisconsin. He served in the Peace Corps in Chile from 1969 to 1971. He received a B.A. from St. Olaf College and a Masters in Architecture from Yale University. In 1987,

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Fred Wiseman has more than 20 years of experience as an environmental engineer with the U.S. Public Health Service. He received his undergraduate degree in Ocean Engineering from the United States Naval Academy, Annapolis, Maryland and subsequently served as ship's navigator and legal officer onboard the frigate USS Meyerkord (FF-1058). He received his graduate degree in civil engineering from San Diego State University, where he also studied and conducted research in population biology and ecology. He has designed and constructed water and sanitation facilities on Indian Tribal Lands throughout the western United States as well as on the subcontinent of India. He responded to the World Trade Center Disaster in 2001. Since his arrival at OFDA in 2002 he has responded to natural disasters in the Czech Republic and Morocco, and complex emergencies in Angola, Indonesia, Ethiopia, Sierra Leone, and Liberia. As a member of OFDA's health team he is the lead person for diarrheal disease and malaria issues. He makes numerous presentations on water and sanitation at training courses.

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