Credit: Niklas Palmklint

Humanitarian assistance in crisis

Although global spending in response to humanitarian crises is growing, humanitarian assistance is under threat from political, economic and security sources. To protect the principles of humanitarian assistance, we must ensure that it remains neutral, impartial and independent, argues Johan von Schreeb.

Disasters and conflicts continue to take their human toll — millions in already vulnerable countries are affected and in need of external help. In these settings, humanitarian assistance saves lives, alleviates suffering and maintains human dignity. Global spending in response to humanitarian crises is constantly increasing and, in 2016, was estimated at over US\$27 billion (compared with US\$16 billion in 2012; <https://go.nature.com/2NvD3Sx>). However, despite financial willingness to help, the human impulse to assist disaster-affected populations is under significant threat.

Humanitarian assistance is derived from the humanitarian impulse — a non-negotiable instinct that propels us to help a fellow human in need, an unconscious reflex that defines us as humans. When this implicit moral act is provided in politically challenging contexts its direct lifesaving goal can conflict with other, more long-term-oriented goals that serve economic, political or security concerns. To ensure separation from such goals, humanitarian assistance is governed by certain principles that are rooted in international humanitarian law. To be labelled humanitarian assistance, it should serve humanity and be provided impartially to anyone in need by agencies that are neutral and independent from outside actors (<https://go.nature.com/2LvEwrk>). The four principles of impartiality, neutrality, independence and humanity-serving have been ratified in United Nations General Assembly resolutions and are an essential part of humanitarian standards and guidelines.

Yet, these principles are often not respected. On the contrary, the well-intended and altruistic goals of humanitarian assistance are regularly used to serve other purposes. The approach to 'win hearts and minds' by providing humanitarian relief is a well-known military strategy used in conflicts. Humanitarian organizations, such as the International Committee of the Red Cross and Médecins Sans Frontières/Doctors Without Borders (MSF), have highlighted the risks when mandates are confused. It can never be the goal of the military to be humanitarian as they cannot be impartial, neutral or independent. International

humanitarian law states the duty of militaries to care for those injured in conflict, but adhering to the law is a legal responsibility and not a humanitarian act! The blurring of mandates exposes humanitarian agencies to risks of being seen as a part of the conflict rather than as neutral. This may be one reason why MSF's hospitals in Yemen, Syria and Afghanistan have been bombed and destroyed (<http://notatarget.msf.org>). This frightening development introduces additional threats to already vulnerable populations.

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Moreover, new challenges include other actors with non-humanitarian mandates. In and around Mosul in 2016–2017, new 'humanitarian partners' were subcontracted by the World Health Organization (WHO) to provide care for soldiers and civilians injured in the conflict. These new humanitarian partners included commercial companies who worked alongside (rather than independently from) coalition military forces (<https://go.nature.com/2LAQJei>). There was no clear separation between the two. This violates the humanitarian principles of neutrality, impartiality and independence. To what extent such violation, in addition to a financial motivation, influences the outcomes of humanitarian assistance needs to be carefully studied.

The quality and accountability of humanitarian assistance has historically been subject to the principles governing it. These principles and the absence of self-serving incentives have been considered a guarantee that humanitarian assistance really serves the population. However, even if the moral motivation and non-negotiable principles of humanitarian assistance per definition are considered as 'good', they offer limited assurance for good results. One may claim that the underlying motives, rather than results, have justified its goal. However, in recent years it has been highlighted that good intentions

are not enough. The 'bad' experience and results of international health assistance following the 2010 Haiti earthquake led to the development of minimum standards for international emergency medical assistance in disasters (<https://go.nature.com/2Lb0qUQ>), which were endorsed by WHO in 2015. The process to improve results includes a WHO system to verify agencies that adhere to the standards. But while good results are essential, so is the motivation, mandate and motives of the agencies involved. To what extent WHO standards can be adapted to humanitarian assistance in the conflict setting and include non-humanitarian actors — such as commercial companies and militaries — is currently the subject of debate. Key challenges are to ensure a clear separation of what should be labelled humanitarian, and what should not, and how to measure results.

In the current political landscape, the selfless spirit and human motivation of humanitarian assistance could be interpreted as outdated and naïve. Personally, I have no problem in being labelled naïve as long as what I am doing serves a higher moral purpose and leads to good results. Nevertheless, one must not neglect the challenges constantly facing humanitarian assistance. We need to join forces to protect human dignity in contexts where it is systematically violated. This requires that we acknowledge the problems facing humanitarian assistance and ensure that they are constantly discussed and addressed. If not, this fundamental sign of humanity runs the risk of harming rather than helping those in need. □

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Competing interests

The author is a founding member of Médecins Sans Frontières Sweden and has been a member of and field volunteer for the agency since 1993. He has also worked for the WHO in Iraq and is co-author of the WHO standards referred to in the text.