

From vulnerability to resilience: improving humanitarian response

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Lessons from responses to the Syrian displacement crisis can inform broader discussions on how to build responses that better address vulnerability, support resilience and include displaced women, children and young people in all their diversity.

Recent international frameworks all reference the importance of strengthening resilience, both at the global level and the individual. Resilience efforts should target not only regions, countries and systems but also individuals and groups, including women, girls and minority groups. Stakeholders engaged in the World Humanitarian Summit process widely endorsed a ‘new way of working’ that both addresses need and reduces risk and vulnerability. These efforts all reflect the 2030 Agenda for Sustainable Development pledge to leave no one behind.

The regional response to the Syrian humanitarian crisis has both challenged and advanced how the humanitarian community understands this ‘new way of working’ and its implications for humanitarian practice. In light of reductions in funding and the transition into a protracted displacement situation, humanitarian programming in the Syrian context now increasingly targets assistance toward those considered the most vulnerable and to integrating resilience-based approaches. The formation of a Sub-Regional Response Facility in 2013 (mandated to work with humanitarian, development and government stakeholders on the sustainability of responses) and subsequent regional and national Refugee and Resilience Response Plans (3RPs) marked an important shift, strengthening alignment between humanitarian and development planning and priorities, enhancing the role of host governments, and bringing new partners to work with refugee populations.¹ These plans include explicit commitments to target ‘the most vulnerable’ for resilience building.²

Vulnerability and need have typically driven the design and implementation of humanitarian programmes. Specific groups

are defined as vulnerable, and criteria are established to target and prioritise the ‘most vulnerable’, with little attention paid to their skills and capacities. Vulnerability and resilience, however, can be seen as a continuum. At the vulnerability end of the spectrum, assessments and interventions address immediate material- or protection-related needs; at the resilience end, they look at positive coping strategies or capacities. Vulnerability and resilience factors can change over time and according to opportunities or interventions, and are affected by contexts. Hence, resilience-based approaches should support individuals, households and communities to move along this spectrum by strengthening their assets and skills and their capacity to cope with, adapt to and recover from the stresses and shocks they experience.

Vulnerability-based approach: gaps and promising practices

United Nations (UN) agencies, host governments and non-governmental organisations (NGOs) responding to the Syrian displacement crisis have worked together to establish more nuanced vulnerability criteria for the purposes of targeting assistance, particularly within cash-based interventions. However, assessments and analyses often fail to efficiently and effectively identify and prioritise households with individuals who have compounding vulnerabilities, such as new disabilities which can require additional health care, and adolescent girls who may be increasingly assuming care-giving roles. This idea of compounding vulnerability is also relevant to households with women, children and young people, where vulnerability

to wider protection concerns such as abuse, exploitation or violence may be exacerbated by economic vulnerability.

For example, the Multipurpose Cash Assistance Programme in Lebanon, implemented by six international NGOs who comprise the Lebanon Cash Consortium, determines beneficiary households by calculating their per capita monthly expenditure in relation to a range of variables. One such variable, the 'disability-adjusted dependency ratio', considers all persons with disabilities as 'dependent' and categorises them as affecting a household's vulnerability to the same degree, regardless of their gender, age, needs, skills and capacities. A 2015 impact evaluation of the programme highlighted examples of female-headed households and households with children with disabilities who were not prioritised for assistance because vulnerability assessments failed to fully recognise care-giving responsibilities, lack of income generation opportunities and even added medical costs.³ More recently, the Vulnerability Assessment Framework in Jordan was updated to include additional guidance and functional questions relating to disability.⁴ Valuable lessons on how to reflect intersecting vulnerabilities in such assessments may well emerge after further roll-out and analysis of the Framework.

Targeted protection assessments of population groups, meanwhile, do better in identifying protection risks and apply some analysis of the intersections of age, gender and disability. For example, the inter-agency standard operating procedures for gender-based violence and child protection in Jordan demonstrate a more comprehensive integration of inclusion and participation of persons with disabilities, recognising gender and specific age groups.⁵

Resilience-based approach: gaps and promising practices

Multi-sector vulnerability assessments used in the Syrian displacement crisis response often fail to integrate positive coping or resiliency traits in analysing need. The Vulnerability Assessment Framework in Jordan recognises 'coping strategies' but only

as additional indicators of vulnerability, with a focus on extreme or unsustainable coping mechanisms (including begging, being in informal or dangerous employment, and depletion of resources, savings or assets).⁶ Positive coping strategies that support resilience, such as tapping into support networks, are generally not identified or not considered in these assessments.

Community-based protection efforts remain at the centre of the protection and humanitarian components of the 3RPs for 2017-18. Such approaches assess the resources, skills and experiences available in a community, and strengthen positive community-led solutions to protection concerns. Refugee and host communities, however, are diverse and the varying status and power of community members often exclude and marginalise certain individuals and groups. Humanitarian actors still rarely explore the self-protection capacities, positive coping strategies or the assets of women, children, people with disabilities and other groups perceived to be vulnerable. As a result, these populations are often relegated to the vulnerability end of the spectrum and seen as beneficiaries of aid rather than as partners for capacity development and resilience building.

At an individual level, using strengths- and assets-based approaches in programming can strengthen the resilience of women, children and young people, including those with disabilities. Adolescent and youth programmes in Iraq and Lebanon run by partner organisations, which have engaged girls and boys with disabilities, focus on building: personal assets through training in vocational skills, communication and literacy; social assets through strengthening social support networks, participation in sport, and mentorship; and physical assets through the establishment of safe spaces. Participants describe acquiring new skills and expanded protective peer networks of friends, facilitators and mentors.⁷

As a target group, girls and boys with disabilities are seen almost exclusively from a vulnerability-based perspective yet these pilot projects suggest that resilience traits such as skills, capacities and protection strategies

February 2018

www.fmreview.org/syria2018

can be identified on the same continuum that incorporates vulnerability. These traits not only mitigate risks but also support an individual to move along the spectrum towards a more positive, sustainable outcome.

Next steps

Humanitarian responses rarely identify and leverage the positive coping strategies and capacities of women, children and young people, and certainly fall short of engaging diverse individuals within these groups in resilience-based approaches. Humanitarian actors need further guidance to identify the factors that enable access, participation and empowerment, and on how those factors can be strengthened and supported through humanitarian programming. We can also draw on the resources and experience of the development sector, adapting and piloting operational guidance, documenting outcomes and sharing learning in humanitarian contexts, in turn realising the shared goal of leaving no one behind.

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1. See Gonzalez G (2016) 'New Aid Architecture and Resilience Building around the Syrian Crisis', *Forced Migration Review* issue 52 www.fmreview.org/solutions/gonzalez
2. UNDP (2016) *The State of Resilience Programming: The Syria Regional Refugee and Resilience Plan (3RP)* <http://bit.ly/UNDP-ResilienceProgramming-2016>
3. Save the Children and Lebanon Cash Consortium (2015) *Impact of Multipurpose Cash Assistance on Outcomes for Children in Lebanon* <http://data.unhcr.org/syrianrefugees/download.php?id=10526>
4. Vulnerability Assessment Framework, Jordan (2016) *Disability Universal Indicator to assist Identification* <http://bit.ly/VulnerabilityAssessmentFramework-Disability-2016>
5. SOP Task Force (2014) *Inter-Agency Emergency Standard Operating Procedures for Prevention of and Response to Gender-based Violence and Child Protection in Jordan*. www.data.unhcr.org/syrianrefugees/download.php?id=3143.
6. UNHCR (2015) *Vulnerability Assessment Framework: Baseline Survey* www.data.unhcr.org/syrianrefugees/download.php?id=8837
7. Women's Refugee Commission (2017) *Vulnerability- and resilience-based approaches in response to the Syrian crisis: Implications for women, children, and youth with disabilities* <http://bit.ly/WRC-vulnerability-resilience-2017>