# Out of scope: irregular migrants and people affected by urban violence

hile people may be left behind *during* humanitarian responses, others are left behind because they fall *outside* humanitarian scope. Certain types of crisis give rise to humanitarian need but rarely make it onto the agenda of the mainstream international sector or responders. What then, for people who are – consciously or unconsciously – left 'out of scope'? Humanitarian principles, particularly humanity and impartiality, dictate that human suffering must be addressed wherever it is found, according to need alone. The principle of impartiality demands prioritizing the people most in need. But is the scope of humanitarian action prioritized and configured correctly?

While there is no single definition of humanitarian action, it is generally considered to have some boundaries – to be a time-limited endeavour, undertaken by a limited number of responders (IHSA, 2018), with a narrow, principled focus on saving lives and alleviating extreme suffering. It is largely 'event-driven', responding to large-scale emergencies: events which pose a threat or risk to a large number of people and which are beyond the capacity or willingness of authorities and responders in the affected area.' Such major crises often trigger response by national and international actors –understood as the international humanitarian sector. The idea of one humanitarian sector is rooted in UN General Assembly Resolution 46/182 and its subsequent resolutions. This established a coordination framework for the network of international humanitarian responders – including the Inter-Agency Standing Committee (IASC) – guided by the commitment to the guiding principles, humanitarian principles and international law (UNGA, 1991).

There is however, increasing recognition that the international humanitarian sector is only one part of a much wider 'ecosystem' of humanitarian response by a diverse range of actors – including local and national responders and sectors beyond civil society. While some reject the notion of a humanitarian sector (Borton, 2009), others define it as "the network of interconnected institutional and operational entities through which humanitarian assistance is provided when local and national resources are insufficient to meet the

I. Although there is no one agreed definition of a crisis or emergency, most tend to relate to this definition. WHO defines a crisis as "an event or series of events representing a critical threat to the health, safety, security or wellbeing of a community, usually over a wide area. Armed conflicts, epidemics, famine, natural disasters, environmental emergencies and other major harmful events may involve or lead to a humanitarian crisis" (2007).

needs of a population in crisis" (ALNAP, 2015b). Yet the objectives, scope and architecture of humanitarian action continue to be hotly debated, contested and dynamic (Bennett, 2016). Protracted crises, the humanitarian-development nexus, and the localization agenda are all reshaping the scope and boundaries of humanitarianism.

This chapter focuses primarily on people left behind because they are experiencing crises considered beyond the remit of the international humanitarian sector as understood by the UN General Assembly Resolution. While many of these people benefit from local and national assistance, this is often without the surge in international assistance that may occur when these resources are insufficient. In an era that increasingly recognizes a wider humanitarian ecosystem, is there an opportunity for its collective and diverse capacities to be more effectively applied to these types of crises? And when, where and how should the 'traditional' international sector evolve to respond?

There are many people experiencing crises who require such a rethink. These people might fall out of scope for many reasons: because they are dispersed rather than in a defined 'crisis-affected area', or because national authorities may not have requested assistance. They might be perceived as solely a domestic concern – even when local and national responders do not provide sufficient assistance or protection due to capacity constraints or because politics mean that the people are excluded or marginalized. When there is no single major conflict or disaster event, chronic needs might be seen as development concerns, and life-saving assistance and protection may be limited. The existence or scale of suffering might also not be recognized by an international sector that is predicated on pre-determined mandates, missions and models. Limits to aid funding can further compound disengagement.

Groups that might be considered out of scope may include people without citizenship or legal residency, such as stateless people or migrants with an irregular status, whose rights are denied or not fully recognized. Indigenous or minority groups, slum dwellers and people suffering urban violence might also - for reasons of geographic, legal and/or social exclusion - be denied rights and access to basic services, security and social protection but, despite being in need, may not receive humanitarian attention.

This chapter focuses on irregular migrants and people suffering extreme urban violence: two groups of people identified through an IFRC National Society consultation process as falling out of scope of traditional humanitarian action. At the heart of both cases are people who have limited protection from their own or other governments, and are experiencing suffering arguably at the scale and severity of a humanitarian crisis. The chapter explores the threats and needs these people face, and the ways they fall out of scope of humanitarian response, while highlighting good practice and posing critical challenges.

### Irregular migrants 6.1

Managing migration is, in the words of the UN Secretary-General, "one of the most urgent and profound tests of international cooperation" of today (UNGA, 2017). The political implications of migration have pushed it centre stage on the policy agenda. Under the New York Declaration for Refugees and Migrants, adopted in 2016 by the UN General Assembly, states agreed to the development of two non-binding agreements on refugees and migrants. The final draft of the Global Compact for Safe, Orderly and Regular Migration - the first intergovernmental agreement prepared under the aegis of the UN relating to all dimensions of international migration – was agreed in July 2018.<sup>2</sup>

As the following section shows, irregular migrants face increasing threats to their rights and well-being. In light of increased mobility and its attendant risks for people in an irregular status, should the humanitarian implications of irregular migration be considered in scope for humanitarian action?

#### 6.1.1 Who are irregular migrants?

There is no universally accepted definition of irregular migration. The International Organization for Migration (IOM) defines it as "movement that takes place outside the regulatory norms of the sending, transit and receiving country". According to IOM, a migrant may be in an irregular situation due to: entering a country irregularly, such as with false documents or without crossing at an official border crossing point; residing in a country irregularly, for instance, in violation of the terms of an entry visa or following rejection of an asylum claim; or being employed in the country irregularly. A person may have been granted residence rights, but not permission to take up paid employment in the country (IOM, 2016).

Migration is driven by a range of political, economic, security and social factors including economic, security and welfare inequalities, poor governance and environmental factors, as well as other incentives and motivations. It therefore defies easy categorization between voluntary and involuntary, and refugee and 'economic' migrant. Asylum seekers and refugees may resort to people smugglers, and may enter a country irregularly due to limited safe and legal channels to seek asylum. People may be recognized as refugees by the UN High Commissioner for Refugees (UNHCR), but if the country in question does not recognize them or is not a signatory to the 1951 Refugee Convention, they may be treated as irregular migrants. Migrant flows are increasingly a mix of refugees, asylum seekers and other migrants, massed in groups and led by smugglers, giving rise to what is increasingly termed 'mixed migration' (Horwood and Reitano 2016). Asylum seekers and refugees do not lose their legal entitlements as a result of being part of a 'mixed flow'.

#### Known migrant fatalities and missing migrants, 2017 Fia. 6.1

3.119 Mediterranean \*\*\*\*\* **Å**Å \*\*\*\*\* 553 Sub-Saharan Africa ф 412 US-Mexico Border 袮 袮 \*\*\*\*\*\* 214 Middle East ф ት: ትለት ትለት ትለት ትለት ትለት ትለት ትለት ትለት \*\*\* 168 Caribbean \*\*\* 96 Europe \*\*\*\*\* 84 Central America

👫 = 3 people



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There is no reliable, commonly accepted global estimate for irregular migrants as numbers are too difficult to discern due to both the changes in status as well as the clandestine nature of movement, although most migration is regular (IOM, 2018b).

#### The risks of the journey Box 6.1

Between 2014 and 2017, more than 25,000 migrants were reported as having died or gone missing in countries of transit and destination, along migratory routes across the world (IOM, 2017a). Much of the data and research focuses on journeys to Europe, but as Box 6.2 shows, there is increasing evidence that these risks are common across all migratory routes, including in Africa (RMMS, 2017), migration to the Middle East (IOM, 2018b), from South and Central America into the US (Crisis Group 2016) and within and across Asia (IOM, 2017a). Dangers facing migrants, which are often overlapping and deadly, can include:

- Drowning at sea, due to overcrowded or unseaworthy craft or dangerous weather. This risk is increasing: although fewer migrants crossed the Mediterranean in 2017 than previous years, a higher percentage of people crossing that year (1.8%, over 3,000 people) are recorded to have died or gone missing (IOM, 2017).
- Exposure in the desert: according to UNHCR interviews with people who had travelled through Libya en route to Europe "more people die in the desert, on the way than in the sea" (UNHCR, 2017d).
- Harsh environmental conditions combined with a lack of basic services: data shows that 60% of the casualties of migrants from the Horn of Africa were caused by the harsh living conditions experienced on the journey, including lack of access to healthcare, lack of food or water, inadequate shelter and exposure to harsh weather (RMMS, 2017).
- Killed by traffickers and criminal gangs: for example in the town of Beni Walid in Libya in 2018 some 15 people were killed in one night and another 25 wounded when traffickers shot at them trying to escape (MSF, 2018).

The real number of people who have died is unknown, as people move, and thus die, invisibly. Most deaths are not registered, especially when they occur in poorer and remote regions (ICRC, 2017a).

Risk of death is just part of the picture. Interviews conducted by the Danish Refugee Council's Regional Mixed Migration Secretariat between 2014 and 2017 revealed that 79% of migrants interviewed from the Horn of Africa had either directly witnessed or experienced one or multiple abuses, ranging from physical and sexual violence to kidnapping, torture and death (RMMS, 2017).

Migration risks are affected by gender. Women and children are reported to be more likely to be left behind during journeys (Malakooti, 2015), although older people and persons with disabilities are likely to be even more at risk. Women are often at higher risk of drowning than men during sea crossings as they frequently travel in cabins (IOM, 2016). Over 30% of women and 17% of men crossing Mexico had been subjected to sexual violence (MSF, 2017), while nearly half of the women interviewed on the Central Mediterranean had suffered sexual violence (UNICEF, 2017a).

Many risks experienced by irregular migrants are magnified for children, who face greater risk of sickness, injury and violence, as well as trafficking and exploitation (IOM, 2018b). Between 2015 and 2016 at least 300,000 unaccompanied and separated children were reported to have moved across borders, a rise of almost 500% compared with children documented in 2010–2011 (UNICEF, 2017b).

### Box 6.2 Does more information about risks influence migrants' decision-making?

Migrants rely most on information from close social networks before and throughout their journeys and may be aware of the potential risks involved in migrating irregularly. Migrants often employ different psychological strategies to manage the potential risks including avoidance, discrediting information and harm minimization (IOM, 2018b). Chillingly, women in the Horn of Africa are reported to request contraception before their journeys (RMMS, 2017).

Experience from the IFRC highlights that information on migratory routes is most effective when it is minimal, easy to absorb, available in different languages and uses a range of distribution mechanisms, for example from radio and social media to low-tech methods and peer-to-peer sharing (IFRC, 2016a). Research has shown that despite its proliferation, messaging aimed at deterring migration, such as describing the risks of migrating using particular routes, has limited impact on people's decision to migrate (Hagen Zanker and Mallett, 2016).

#### Missing migrants

People go missing for various reasons including death, detention or trafficking, while in other cases migrants may cease contact with families to safeguard against detection or due to concerns about the risk of intimidation, retaliation against or extortion of family members (ICRC, 2017a). The non-governmental organiyation (NGO) Mesoamerican Migrant Movement estimates that over 70,000 migrants from Guatemala, Honduras, El Salvador and Nicaragua have gone missing crossing Mexico between 2006 and 2016 (Sanchez Soler, 2016).

While the issue of migrants' deaths at sea is well documented, there is little attention to the issues of people who go missing or disappear along journeys, or on arrival in countries of transit or destination. One notable exception was the discovery of a network of close to 20 detention camps with mass graves along the border between Thailand and Malaysia, which led to high profile court cases, however the identity of the dead remains unknown (Radio Free Asia, 2017).

The lack of information on the whereabouts and fate of many missing migrants results in continued uncertainty, grief and numerous administrative, legal and economic challenges for families left behind. This issue of migrants who go missing and the impact this has on their families receives little attention, despite its rising scale (ICRC, 2017a).

# Box 6.3 ICRC and the Senegal Red Cross: support to missing migrants and their families

Working with National Societies, ICRC has decades of experience of working with people missing in conflict, which it is now applying to missing migrants. The search and identification of missing migrants is hampered by a lack of prioritization, resources, forensics capacities as well as centralized, standardized, transnational information collection and management mechanisms. In the Mediterranean, only around 35% of recorded migrant deaths are identified, this is much less in poorer or more remote areas (IOM, 2017a).

The Senegalese Red Cross Society and ICRC began a project to support the families of missing migrants. By 2017, 200 relatives were supported with mental health and psychosocial activities, commemorative events, literacy classes and vocational training. Micro-credit support for income-generating activities was also provided. A strong component involves linking families to governmental support, and educating authorities on the humanitarian needs of migrants and their families (ICRC, 2017a). This work with the families of missing migrants complements long-standing work by the Movement on Restoring Family Links which aims to locate missing people, including migrants, and put them in contact with their relatives.

### Trafficked migrants

Around three-quarters of almost 5,000 migrants interviewed in 2017 indicated they were subjected to abuses that may amount to trafficking along the North African and Central Mediterranean route. These include being forced to perform work or activities against their will; doing work without getting the expected payment; being offered arranged marriages; and being held against their will (IOM, 2018a). The links between migration, particularly irregular migration, and human trafficking have been known for some time. The UN Office on Drugs and Crime highlighted in 2016 that 60% of trafficking worldwide detected between 2012 and 2014 related to non-nationals (UNODC, n.d.). The risks occur at all stages of migration, including departure, en route, on arrival and even on return. Despite this, the people affected receive little humanitarian attention.

The systematic and ruthless mass exploitation of migrants was impossible to ignore when Libya's 'slave markets' were broadcast globally on CNN in late 2017 (CNN, 2017). This confirmed earlier reports by humanitarian and human rights organizations on the large-scale kidnapping of migrants for ransom and extortion of their families, forced labour and sexual enslavement and the multiple 'slave markets' where migrants were traded openly for these purposes (IOM 2017b). Migrants have become another 'commodity' to be exploited and numerous detention centres holding thousands of migrants – some intercepted at sea

- are sites of sustained violence, extortion and slavery (Micallef, 2017). This is by no means unique to Libya. As early as 2014, Human Rights Watch highlighted the sale of migrants in Yemen to traffickers who transport them to 'torture camps' where they face abuse and extortion (Human Rights Watch, 2014).

Box 6.4 Trafficking: The hazardous journey from Ethiopia through Yemen to the Kingdom of Saudi Arabia

For decades, migrants from Africa have passed through Yemen, often walking hundreds of kilometres to seek work in Saudi Arabia. More than 117,000 crossed in 2016 alone, and almost 100,000 were recorded in 2017, despite the conflict raging in Yemen and the resulting humanitarian crisis. Reports suggest that a multi-million-dollar trafficking and extortion racket has developed in Yemen based mainly on Ethiopian migrants. One government official indicated that trafficking and smuggling made up 80% of the economy in the border town of Haradh in 2014.

However, despite the scale of abuse and resulting need, humanitarian assistance has been relatively limited (Human Rights Watch, 2014 RMMS, 2017, IOM DTM, 2018). Among the few dedicated resources for migrants are migration response centres operated by Somali and Yemeni governments and their partners, which provide food, non-food items, medical assistance, shelter and psychosocial support. Yet only a minority of migrants access these services, highlighting the challenges in accessing and securing the trust of people moving irregularly.

### Detained migrants

Immigration detention is increasingly used as a means of deterring the arrival of irregular migrants or restricting them before deportation. The US alone detains an average of 34,000 migrants daily. This is not a new practice: Hong Kong detained many migrants during the 1980s and 1990s, and Australia's notorious use of off-shore detention only decreased following widespread public and media concern. Criminalizing migration is considered by many as disproportionate, and many international bodies recommend that breaches of migration law be considered an administrative matter, with detention only used as a last resort and limited in time (IOM, no date, hereafter n.d.).

The humanitarian implications of immigration detention are extreme. Even short-term detention can have lasting adverse effects on people's well-being and mental health. In many cases this is compounded by fear, overcrowding, unsanitary conditions and lack of access to adequate food and healthcare. Migrants may be detained with criminals, and children with unrelated adults – increasing the risk of physical and sexual violence. Detention of migrants is largely unmonitored, lacks oversight and regulation, and falls into a legal vacuum. Most migrants have few safeguards or remedies for arbitrary or extended detention, or any abuse suffered while in detention (IOM n.d. a). Children who have been detained exhibit increased mental health and post-traumatic stress symptoms, physical health and behavioural problems, and development delays (ICRC, 2017b). In 2016 alone, ICRC visited places of immigration detention housing nearly 2,500 children across 15 countries (ICRC, 2017b).

### Returned and forgotten migrants

The return of irregular migrants, including asylum seekers whose claims have been rejected, is rising sharply (Collyer, 2012; IOM, n.d. b). It is viewed as necessary to migration management, helping to ensure the integrity of asylum and migration systems and to assuage public opinion, as well as acting as a deterrent to future arrivals (Koser, 2005). Return migration is a broad area and includes forced returns, assisted voluntary returns and (unassisted) voluntary returns – although lines between voluntary and forced return are often blurred, as migrants' choices are often limited.

Concerns are rising that migrants increasingly risk being returned to contexts where their safety cannot be assured, in contravention of the principle of *non-refoulement*. For instance, annual rates of return from the US and Mexico to Northern Triangle of Central America countries increased by 82% in the five years between 2011 and 2016 (Crisis Group, 2016). There are major concerns about the protection of returnees and whether expulsions amount to breaches of international law (Crisis Group, 2016).

Returning migrants often enter a 'revolving door' of migration as debt, family commitments and the stigma and shame associated with failed migration compound the original factors driving migration, making re-migration or internal displacement the most likely outcome (Schuster and Majidi, 2014). This is a risk also with voluntary returns: the lack of information and preparedness on the part of both returnees and their families; diminished familial and social support, coupled with the impact of economic stress put at risk voluntary returns unless reintegration is handled differently (Majidi, forthcoming). Reintegration is an area of significant weakness for humanitarian action. The politics of repatriation rather than the needs of returnees often predominate; reintegration support is most often incomplete; and frequently there is inadequate attention to preparedness, land rights and urbanization (Harild et al, 2015). These issues are likely to be worse for irregular migrants and although some humanitarian organizations are scaling up, the focus tends to be on their immediate physical needs.

Box 6.5 A revolving door of migration and deportation: Ethiopian migrants deported from Saudi Arabia

Ethiopians have traditionally migrated to Saudi Arabia for a range of reasons, often in pursuit of better economic opportunities. A five-year ban imposed by Ethiopia on labour emigration following mass, and often brutal, expulsions of some 170,000 Ethiopians from Saudi Arabia in 2013 and 2014 did little to stem the flow.

In March 2017, the Government of Saudi Arabia announced another round of deportations, including of an estimated 500,000 undocumented Ethiopian migrants. As of mid-March 2018, 108,306 returnees were registered by IOM in Addis Ababa. Many of the deported migrants were arrested and detained in Saudi Arabia before being deported with reportedly significant physical and psychological abuse. Women in particular experienced sexual and gender-based violence. Very few of the returnees arrived with money or possessions, some even arrived shoeless. Many carried children, including babies. The Ethiopian Red Cross Society, with support of the ICRC and the Danish Red Cross, has been delivering humanitarian services to the returning migrants at the first point of arrival at the airport on a 24-hour basis. This includes providing emergency medical support by referring over 1,371 people to hospital by ambulance for further treatment, as well as non-food packages. Since the operation began in June 2017, the society has provided a successful free phone calls service for more than 34,000 returning migrants – around 700 per week – to restore or maintain their family links.

There are significant challenges associated with assisting such large numbers of highly vulnerable people in an airport. This includes handling carefully people affected by trauma and in need of professional psychiatric assistance in the first instance, but also by supporting their reintegration into communities, where they may face stigma. More generally, there are difficulties ensuring that emergency assistance is coordinated well with transport back to communities and the reintegration support people receive there. There is a major gap in working with communities to reduce stigma and to understand the vulnerabilities associated with migration.

### A humanitarian crisis?

This section has shown that irregular migrants – who lack state protection and in many cases are deliberately denied their basic rights and assistance – face violence, abuse and exploitation in transit and on arrival. Despite this, the often-deliberate invisibility of irregular migrants, lack of reliable data on their numbers and vulnerabilities, and their dispersal across routes and countries means the scale of need associated with irregular migration relative to other humanitarian crises is difficult to discern. Taken together there is a strong case that the scale of their suffering is at crisis proportions. However, as the next section illustrates, irregular migrants are often left outside of state protection and support, and many of their needs remain left behind by the traditional humanitarian sector.

### 6.1.2 How are irregular migrants left outside the scope of state protection and support?

Irregular migrants are increasingly denied their rights

Despite the vast majority of rights being guaranteed to migrants and citizens alike, the lack of recognition of many migrants' rights has major consequences for their safety, wellbeing and dignity. States have broad power under international law to control migration if their actions are based in law and consistent with human rights.<sup>3</sup> But in practice, there is often a tension between migration management and migrants' rights. Many states have expedited a range of different measures aimed at stopping or reducing flows and preventing entry of migrants (Oxfam et al, 2017). These include 'externationalization', such as the deals struck by destination countries and regions with countries of origin and transit.

Governments are permitted to impose restrictions on anyone who enters their territory and to determine admission, residence, expulsion and naturalization policies.

These, as well as border controls and 'pushback' and 'pullback' efforts, not only prevent migrants from entering or leaving territory but have implications for the human rights of migrants along migratory trails (UN Human Rights Council, 2018). Detention and deportation are also used increasingly as migration control measures.

Irregular migrants are frequently denied access to essential services

The violence and abuse faced by many irregular migrants is compounded by limited access to services in countries of transit and arrival, as this is often contingent on citizenship or legal residency. The starkest example is the curtailment of access to healthcare, where all but emergency care is often off limits. This flies in the face of commitments to health as a basic human right but is often justified on the grounds of welfare entitlements being restricted to nationals or residents in a country. It is also despite increasing evidence that restrictions on primary healthcare are costlier for states and do not affect migration levels (Ingleby and Petrova-Benedict, 2016).

In the US, up to 70% of the estimated 11 million undocumented migrants do not have health insurance, meaning they only have access to emergency care -a major problem for an increasingly aging undocumented migrant population (Wiltz, 2018). Irregular migrants in the EU are entitled to around 35% of the health services available to nationals, mostly relating to emergency care (Ingleby and Petrova-Benedict, 2016). Although some countries waive restrictions for antenatal care and treatment infectious diseases, these measures are ineffective without access to primary healthcare that would provide continued care or detect these diseases (ibid). In many contexts, all but life-saving assistance requires upfront payment of often-unaffordable fees (Aldridge et al, 2017).

Directly linking immigration control to access to services is increasing. Healthcare providers in five EU countries are legally required to report undocumented migrants to immigration authorities. Confidentiality is only assured in ten countries. In the UK, this is part of a range of measures where landlords and banks are also required to carry out immigration checks. Such environments deter migrants from seeking healthcare and result in alternative strategies such as self-medication, contacting doctors in social networks and borrowing health insurance and identity cards (Vito el al, 2015). In the UK, research has indicated that a third of irregular migrants avoid timely healthcare and a quarter of pregnant migrants without status had not accessed antenatal care at 18 weeks (Bulman, 2017).

#### 6.1.3 How are irregular migrants left outside the scope of humanitarian action?

Action is often only according to 'event-driven' need

The lack of a specific event or crisis to catalyse engagement of traditional humanitarian responders means that the vulnerabilities irregular migrants face along migratory trails and in countries of transit and destination were historically out of scope. This is compounded by political interest being largely weighted towards migration control rather than the vulnerabilities of migrants, and because media and public attention tend to focus on the negative security, sociocultural and economic dimensions of migration (IOM, 2018b). Sudden

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crisis events rather than slowly emerging crises, political interest and media attention, along with humanitarian agency presence, are some of the main factors driving engagement in particular crises.

That humanitarians need a specific event or crisis to trigger engagement is illustrated by their support of the relatively high numbers of refugees and migrants who arrived in Europe in 2015 and early 2016, but the limitations of that response also show the degree to which migrants are out of scope. The arrivals "blindsided" humanitarian actors and the response was judged "a failure in many respects" due to the high levels of unmet protection and basic needs (DeLargy, 2016). When it became clear that states were unwilling or unable to address the needs of refugees and migrants, the efforts of humanitarian responders were constrained and delayed largely because the issue was perceived as out of scope. Relevant factors included lack of operational agreements between humanitarian actors and European states, no pre-existing presence in affected countries, limited funding for European operations and, in the context of increased public hostility, little opportunity to mobilize resources (DeLargy, 2016). Although the humanitarian situation for many refugees and migrants in Europe in 2018 remains a major concern (UNICEF, 2018), the issue now relates to the sufficiency of the response, rather than whether the needs of migrants in this context are a humanitarian issue.

The vulnerabilities of migrants and refugees in Europe may have been initially out of scope of the formal international humanitarian sector, but it was not out of scope of humanitarian response more broadly. Gaps in response prompted significant humanitarian action on the part of civil society and volunteers, both individual and groups. A provisional inventory compiled in 2016 noted at least 218 volunteer groups actively responding to the needs of refugees and migrants in Europe, of which at least 180 were established during 2015 or early 2016 (Borton, 2016). National Red Cross and Red Crescent Societies reportedly also "performed heroically in some countries and communities", but were completely absent in others (DeLargy, 2016).

Irregular migrants are often not seen as suffering a crisis and 'out of sight' during crises

> Migrants are not considered a population of concern during humanitarian crises and are often 'out of sight' despite disasters and conflict impacting heavily on them (Martin, 2016). Migrants, even those residing legally, are often left out of preparedness and response efforts and face obstacles in accessing information and assistance, due to language barriers, lack of local networks and marginalization (Gaudagno et al, 2017). Recognizing this spurred the development of the Migrants in Countries in Crisis initiative (MICIC, n.d.). In 2016 the non-binding and voluntary Guidelines to Protect Migrants in Countries Experiencing Conflict or Natural Disaster (MICIC, 2016) were agreed. The guidelines provide recommendations on irregular migrants but in practice irregular migrants are often overlooked, despite often being at even greater risk due to pre-existing higher levels of poverty, reduced mobility and opportunities to evacuate, and reduced access to assistance (Gaudagno et al, 2017). Most disaster-management approaches, even in areas with high numbers of migrants, fail to integrate migrants into standard operating procedures, guidelines and responses. As Box 6.6 illustrates, in many instances migrants themselves, migrant support groups and national actors play a much stronger role than international actors.

### Box 6.6 Migrant social networks' important role in protection during the 2006 Lebanon conflict

During the 2006 war in Lebanon, migrant domestic workers with irregular status faced specific risks and limited access to services. Some workers were unable to escape due to being locked in houses while their sponsors had fled. Irregular migrants wishing to leave Lebanon faced fines as a result of their immigration status. Migrant domestic worker networks played a significant role in reducing some of these risks, including establishing a hotline for workers trapped in houses. Support from civil society actors, such as Caritas Lebanon - which had pre-existing links with this community before the conflict - and IOM, helped ensure irregular workers were assisted with shelter, support and evacuations by embassies (Hendow et al, 2017).

Irregular migrants lack an international convention and institutional engagement

The fact that humanitarians often need an event to catalyse engagement is not the only reason why migrants are often considered out of scope. Policy and institutional limitations also play a major role. The phenomenon of 'mixed migration' has long been recognized in the refugee field. UNHCR first engaged in the 1990s, but it was in a difficult "balancing act" which involved the need to underline the distinctive status of refugees while recognizing the increased complexity of migration in a context where stakeholders increasingly saw mixed flows as part of a single, often unwanted, phenomenon (Crisp, 2008). Mixed migration was viewed through a refugee lens where the rights and needs of migrants who were not refugees were downplayed as part of an effort to safeguard refugee rights, and the focus was largely on measures in countries of arrival or destination (Van Hear, 2011).

This 'balancing act' continues to have implications for irregular and other migrants. While irregular migrants are protected by human rights law generally, they lack the protection and force of a specific international convention – such as the 1951 Refugee Convention that recognizes the rights of refugees and asylum seekers – and a dedicated UN agency to engage state responsibilities.<sup>4</sup> The IOM is viewed as increasingly adopting a rights-based framework to migration, which means it is shifting from a role that has been criticized as largely implementing the migration management policies of governments, to one that increasingly recognizes the suffering of migrants (IRIN, 2017). IOM has also become a 'related organization' of the UN as part of a move the UN Secretary-General hopes will see it integrated into the UN as a specialist migration agency (UNGA, 2017). However, it remains stymied in power and influence without a dedicated legal framework, as well as its relatively limited independence and flexibility compared with some other UN organizations funded through core financial contributions as well as voluntary funding. Other organizations - including international NGOs, the International Red Cross Red Crescent Movement and other UN agencies are also expanding their engagement.

There is also increasing policy recognition of the need to address "migrants in vulnerable situations", including in the New York Declaration and the Global Compact for Migration. Work by IOM (2017b), UNHCR (2017e) and Office of the UN High Commissioner for Human Rights (OHCHR) has identified the personal and situational conditions that give rise to vulnerability among migrants, and OHCHR has issued draft principles and practical guidance on the protection of the human rights of migrants in vulnerable situations to inform the Global Compact on Migrants (OHCHR, 2018). A set of state-endorsed principles on the vulnerabilities migrants face may provide avenues for greater recognition of and protection of migrants in vulnerable situations. However, despite the recent policy and institutional shifts in support of irregular migrants there remains a long way to go before the rights and needs of irregular migrants are comprehensively recognized and addressed.

### Humanitarian dilemmas both limit and increase humanitarian action

The high political stakes, vast sums of funding aimed at migration management, and tensions between humanitarian action and state strategies for migration management, raise significant dilemmas for humanitarian responders, as well as barriers to action. In some contexts, humanitarian activities have been actively criminalized, restricted or discouraged as they intersect with state strategies for migration management. One example is the efforts to criminalize humanitarian search and rescue operations in the Mediterranean Sea (see EU, 2016). Charges of human smuggling were brought against volunteer lifeguards in Greece (Aljazeera, 2016), while media and political accusations have been levelled against NGOs involved in search and rescue missions as 'colluding with smugglers'.

Efforts to criminalize and delegitimize humanitarian activities can not only reduce life-saying assistance, but also validate stronger deterrence measures, including support to the Libyan coast guard to deter migrants from leaving Libya (Nando, 2017). There are significant dilemmas associated with humanitarian action in situations or processes designed to control migration where there is major humanitarian need, but a risk that getting involved could be perceived as legitimizing or perpetuating the migration control measures. These include humanitarian support in places of detention when prospects for improving protection are limited (MSF, 2017), and humanitarian monitoring during forced return or deportation processes (IFRC). Save the Children and others faced difficult decisions when providing services in Australia's offshore detention facilities on Nauru where asylum seekers faced significant human rights abuses. While there are credible reports that Save the Children's work enhanced the welfare of children detained there, this was undertaken in the face of tremendous media, political and public backlash (Ronalds, 2016).

On a larger scale, perhaps, is the use of funding from donors whose overall strategy is to reduce migration. European governments spent at least 17 billion euros outside Europe between 2014 and 2016 in an effort to stem migration (Borton, 2016). The EU Emergency Trust Fund for Africa, which aims to address the root drivers of migration, is worth over 3.4 billion euros. While the increased funding has galvanized the engagement of some humanitarian responders in countries of origin and along migratory trails, others such as Médecins Sans Frontières (MSF) rejected funding from the EU and its member states for any humanitarian operations globally due to concerns about being associated with migration management.

The International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families, which entered into force on 1 July 2003, focuses on the rights of regular migrant workers, but stresses that the fundamental human rights of irregular migrants must be respected. See OCHA (1990).

#### Capacity and complexity

Protection activities are a focus of many humanitarian responders. Much work is aimed at strengthening the legal and policy environment for migrants, for instance through advocating to end the detention of minors for immigration purposes and strengthening mechanisms for support to unaccompanied migrants, people who have been trafficked and other vulnerable migrants. More direct protection activities are also undertaken such as legal support, family tracing activities and psychosocial interventions. As are life-saving activities such as emergency evacuations from life-threatening situations such as detention centres in Libya (UNHCR, 2018b) by IOM and UNHCR.

Humanitarians consulted for this research highlighted a range of constraints around the scale, sufficiency and impact of protection activities for irregular migrants. These concerns include limited influence, the impact of promoting greater respect for rights in a general climate of strong political and public support for robust deterrence measures, and the inadequate reach and scale of protection activities in situations where violence is the norm and there are few avenues for protection. For instance, concerns were raised that even when there is evidence of widespread trafficking, only a minority of cases can be supported due to limited capacity of humanitarian responders, few referral mechanisms and limited national capacities. The response is often repatriation, which often does not resolve the issue. Finally, there are concerns that even when support is made available, there are few opportunities for individualized protection measures or case management approaches even in situations involving highly vulnerable migrants.

Many barriers prevent migrants from seeking assistance and humanitarian agencies from recognizing and responding to them. Although there are many long-term undocumented migrants in many contexts, people on the move are by definition mobile, often travelling in remote, rural areas, and on routes that shift regularly. The rapid movement means there is limited opportunity for assessment, support and referral, and migrants will often forego all but the most urgent assistance. The shifting nature of the movement makes planning, forecasting and staffing of interventions challenging. The irregular, extra-territorial and clandestine nature of irregular migration means that many migrants face many of the barriers outlined so far in this report. These include fear of detection, language, information and administrative barriers, cultural and gender barriers and at times perceived or actual discrimination on the part of front-line staff.

As Box 6.7 illustrates, some organizations have responded by establishing mobile facilities along routes, transport centres and in areas where migrants congregate. These are often focused on medical assistance, basic needs and psychological support, though many organizations report concerns about the reach and coverage of their activities. Local and national individuals and institutions – including community groups, religious institutions and other civil society actors - often play important roles due to their flexible approaches, presence along routes and wide geographical scope.

Learning from MSF's work to treat migrants in Box 6.7 Mexico fleeing, and facing, violence

> For years, Mexican civil society organizations, with the support of a few international NGOs, including MSF, have run an extended network of over 100 albergues (hostels)

along the migration route through Mexico. Many people on the move are refugees but are unlikely to apply for refugee status. Between 2012 and the end of December 2016, MSF teams carried out 28,020 medical consultations and 5,573 mental health consultations. Another 46,491 people attended psychosocial activities. A quarter of the medical consultations related to physical injuries and trauma. More than half of people attended to by MSF in Mexico had symptoms associated with depression and 12% had post-traumatic stress - close to rates in populations directly affected by conflict (15.4%).

MSF undertakes strategies to support this highly mobile population, partnering with and providing capacity to national organizations. Key learning has involved:

- adapting the location of services based on migrant flows, including setting up mobile clinics near railways and train stations
- integrating services into trusted community service providers where migrants congregate
- including social workers into MSF teams along with a doctor and psychologist to facilitate medical, psychosocial or protection referrals into the Mexican system
- ensuring strong partnerships with local and national organizations, including collaboration with faith-based NGOs and state institutions (Bosch Bonacasa and Estrada Cocina, 2017).

Organizations use a range of approaches to facilitate migrants' access to services and to work with the available services to make them more accessible to migrants. Many organizations, such as the Maldivian Red Crescent (see Box 6.8), hire volunteers and staff from migrant communities to access communities and reduce language and cultural barriers. Specialist migrant services are provided by some organizations that link into state services. IOM in Nairobi runs a migrant-friendly health centre in the Somali-dominated Eastleigh district, where no identity checks are needed. Services are provided free of charge to both migrant and host communities supported by migrant community outreach workers, translators, healthcare providers trained in migrant health, and strong partnerships with community and religious leaders as well as the Kenyan Ministry of Health (IOM Kenya, n.d.). Others, such as Médecins Du Monde in Canada and numerous other contexts, also support migrants in navigating foreign, and sometimes hostile, bureaucracies, sensitizing health practitioners on their rights and advocating for policy change.

Box 6.8 Maldivian Red Crescent's outreach to irregular migrants by migrants

There are an estimated 25,000 irregular migrants in the Maldives, where migrant workers make up around a quarter of the workforce. Access to health services is almost impossible for migrants without documentation.

A national alert was sounded in 2017 due to an outbreak of the H1N1 influenza virus. With a volunteer base including people from Bangladesh, India, Nepal and Sri Lanka

communities, Maldivian Red Crescent targeted both documented and undocumented migrant communities. It developed a communications package that included flyers, posters and videos in nine different languages which were relayed through community outreach activities and door-to-door campaigns to ensure the most vulnerable migrants were informed and able to access basic healthcare. Key to the success of the programme - which reached at least 4,500 migrants - was the Maldivian Red Crescent's strong trust and relationship with its communities, the diversity of volunteers who were drawn from different backgrounds and the use of social media networks and migrant centres and cafes.

### People affected by urban violence 6.2

#### What is the scope and scale of the problem? 6.2.1

The world is urbanizing dramatically and urbanization is accelerating most rapidly in less developed contexts. By 2050, 70% of the world's population will live in urban areas. Rapid and unplanned urbanization is a major development concern and humanitarian responders are increasingly engaged but focus primarily on addressing conflict and disasters occurring within cities. Urban violence that does not reach the threshold of an armed conflict is viewed as an outcome or feature of humanitarian crises, rather than as a significant driver of humanitarian concerns in and of itself (Savage and Muggah, 2012). This is despite the humanitarian impact of organized violence. Contrary to expectations, armed conflict is not the leading cause of violent death globally (OECD, 2016): five of the ten most violent countries in the world are non-conflict countries, and all of these are located in South America or the Caribbean (see Figure 6.2). The phenomenon of organized violence in urban settings remains marginal and out of scope for most humanitarians despite affecting many cities globally. As Figure 6.2 also highlights, a concentration of murder 'hotspots' occur in the Americas, where 47 out of 50 of the world's most violent cities were located in 2017.

Scale and severity of needs – the Northern Triangle of Central America Box 6.9

> Variously described as facing epidemic levels of violence (ACAPS, 2014), a "silent emergency" (ECHO, 2018) and a "forgotten crisis" (Cue and Raimundo, 2017), the three countries forming the so-called Northern Triangle of Central America - El Salvador, Guatemala and Honduras - are seen as at the epicentre of urban violence and suffering some of its most acute humanitarian consequences. After Syria, El Salvador had the highest rate of violent deaths in the world in 2017. All three countries have rates of violence well above WHO's epidemic levels (WHO, n.d.) and each is featured in the world's 50 most violent cities list. Over a third of people surveyed in each country indicating feeling unsafe due to crime, this figure rises to 46% in El Salvador.

World Disasters Report 2018

#### World's 50 most violent cities, 2017 Fia. 6.2

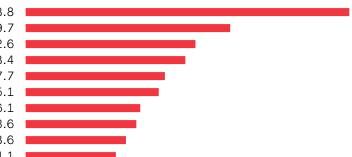


Homicide rate: most =  $\bigcirc$  111 least =  $\bigcirc$  34 📕 North America 📕 Central America 📕 Caribbean 📕 South America 📕 Sub-Saharan Africa

Note: Figure 6.2 does not include war-related deaths whereas Figure 6.3 does. Source: Proyecto de Opinión Pública de Americá Latina (LAPOP) (2014) and Seguridad, Justicia y Paz (2017)

#### Countries with the highest violent death rates, 2016 Fia. 6.3

Rank	Country	
1	Syria *	158.8
2	El Salvador	99.7
3	Venezuela	82.6
4	Saint Kitts and Nevis	78.4
5	Honduras	67.7
6	Afghanistan *	65.1
7	Jamaica	56.1
8	Iraq*	53.6
9	Libya *	48.6
10	Somalia *	44.1



Source: Small Arms Survey Database on Violent Deaths 2017 drawn from official and non-official data on violent death and homicide rates in 2016.

	Number of cities in 50 most violent	Feeling of lack of safety due to crime
	5	67%
	12	50%
	1	46%
1	17	43%
-	1	40%
h.,	2	34%
es	4	15%

### Violent death rate (per 100,000 people)

### \* Experiencing or emerging from conflict

Organized violence perpetrated by armed groups, gangs, organized criminals, drug traffickers and some members of the state underpin alarming rates of casualties, sexual violence, kidnapping, forced displacement and forced confinement. The collapse of law and order, shattering of social and health services and the implications of the reduced mobility resulting from the violence for access to basic services, markets, livelihoods and social networks are just some of the more indirect consequences (Lucchi, 2014). There are important gender and age dimensions too, with young men in particular at risk of murder, forced recruitment, forced displacement or confinement (IFRC, 2010b). There are also high rates of femicide, and women are subjected to sexual and gender-based violence too (HPN webinar, 2017).

Many features of armed conflict are also evident, including widespread child recruitment, lack of access to life-saving medical care and basic education, and attacks on the medical mission (ACAPS, 2014). The effect on education is just one example: in El Salvador, 50% of educational facilities are located in areas racked by criminality or gang violence resulting in over 15,000 cases of school dropouts, and in Honduras, some 460 educational facilities were closed in 2017 due to extortion and threats (OCHA, 2017c).

### 6.2.2 Why is there an urban violence 'blind spot' in humanitarian action?

Most urban violence takes place in middle-income countries, not helping perceptions that this is not an issue for donors and humanitarian responders used to providing assistance in lower-income settings (HPN webinar, 2017). This is despite authorities effectively losing control in many of the affected neighbourhoods, where they are either unable or unwilling to provide security and basic services (Savage and Muggah, 2012). Yet affected states have been slow to acknowledge the issue and seek external support. Neither Guatemala nor El Salvador recognize internal displacement per se (Bassau, 2017), although Honduras, with UNHCR support, has become increasingly committed to preventing and addressing internal displacement.

In El Salvador, Guatemala and Honduras ('Northern Triangle of Central America' countries (see Box 6.9)), national actors play a significant role in addressing urban violence, often focusing on reducing risks for vulnerable youth, supporting community policing and upgrading slums, for example (OECD, 2011). People working directly on the humanitarian consequences of violence often do so at major risk and faith-based organizations that are often highly trusted by affected populations are key responders (HPN webinar, 2017). Development actors have engaged too but focus more on violence prevention, security sector and judicial reform, and economic development (Cue and Raimundo, 2017). The subject of urban violence is as yet largely unexplored by humanitarian actors despite commitments to bridge the humanitarian–development–peacebuilding nexus under the Grand Bargain and the 'New Way of Working' (OCHA 2017e), as well as significant opportunities for multi-mandate organizations to use a range of different measures to address this chronic issue.

### 6.2.3 Collective violence in urban settings is not perceived as a humanitarian concern

As with irregular migration, collective urban violence lacks a discernible event or trigger to catalyse the attention, interest and engagement of humanitarian agencies, their donors and publics. This is a major factor in being perceived as out of scope: even urban experts do not judge collective urban violence as a priority humanitarian issue (Savage and Muggah, 2012). Further, because relevant non-state actors (for example gangs and drug cartels) do not have international obligations – as people party to armed conflict have under international humanitarian law – authorities and others need to be fully informed of the strict humanitarian basis of any dialogue with these non-state actors, where such a dialogue is allowed under domestic law.

Furthermore, unlike in many traditional humanitarian settings, people affected by urban violence are not confined to one geographical location and are instead dispersed within and across cities, making it more difficult to discern and quantify needs. Complacency and culture among humanitarian actors also reportedly play a role. People consulted suggested that the dominance of French and English-speaking humanitarian agencies and staff mean that humanitarian issues in Spanish-speaking contexts attract less attention at the global level. Although some agencies are present, they tend to be oriented to longer-term development and so less likely to see the humanitarian implications.

ICRC's work to frame situations of collective violence below the threshold of an armed conflict, where violent acts committed by one or several large groups of people may have humanitarian consequences, as 'other situations of violence' has been particularly helpful. It has helped broaden recognition beyond ICRC that such contexts warrant greater humanitarian attention and potentially, response, to address their consequences (see Box 6.10).

# 6.2.4 Urban settings challenge traditional humanitarian response methods and approaches

A further constraint to providing a response to urban violence is the questioning of the relevance and feasibility of humanitarian action in such settings. Urban violence – and indeed responses to humanitarian crises in urban settings more broadly – poses a number of challenges to humanitarian responders including a need for a different approach to needs assessment and programme design. High population density means that high numbers of people may be affected and the diversity of urban populations require differentiated targeting approaches (Lucchi, 2013). The requirement to work across various cross-lines further complicates engagement, as areas may be under the authority of different groups, including criminal gangs, and some of these groups may be listed as terrorist under national legislation.

Donors and agencies committed to providing a humanitarian response to urban violence highlight the consistent internal advocacy needed to shore up relatively small amounts of funding. One major feature of the response by humanitarians thus far has been generating evidence to inform the advocacy undertaken in agencies and across the sector to encourage greater recognition of the issue (HPN webinar, 2017). Perhaps as a consequence, agencies such as ICRC and MSF, with significant amounts of independent funding, have been central to the response (see Box 6.7 and Box 6.10). More recently, UNHCR, World Food Programme, the Norwegian Refugee Council and others have also scaled up by providing a range of humanitarian and protection support.

Box 6.10 ICRC's response to the humanitarian consequences of urban violence<sup>5</sup>

Over the last decade, the ICRC, together with National Societies, has been increasingly trying to protect and assist people and communities affected by situations of violence that do not reach the threshold of an armed conflict and where international humanitarian law is not applicable.

Gaining acceptance of all relevant national and local stakeholders is vital to ensuring ICRC's access to areas affected. ICRC's neutral, independent and impartial approach, coupled with confidentiality, is crucial in this process of ensuring acceptance. This approach is also essential to building a dialogue with state and non-state armed actors, a dialogue which is aimed not only at reducing the impact of urban violence on the population, but also on the state's ability to provide basic public services and economic opportunities.

Partnerships are key to the enhanced sustainability and relevance of ICRC's responses. These have included partnerships with National Societies, but also with local and national authorities, such as health and education providers. Partnerships with grassroots organizations have also been a strong feature, helping to ensure innovative and durable responses, building on local expertise and reinforcing the resilience of the affected communities by involving them in identifying and mitigating their needs.

## 6.3 Into scope: conclusions and recommendations

Examining the factors that render human suffering out of scope of the international humanitarian sector raises important issues about how the sector adapts and responds to newly emerging forms of need – and what interests, ethics and events drive change. Humanitarianism is not static. Considered a socio-political construct, it is a continuous negotiation of notions of inhumanity and suffering, as well as fluid concepts of compassion and shared humanity (Gordon and Donini, 2016). The needs of irregular migrants and

ICRC's response is based on its Right to Humanitarian Initiative, which is recognized in the Statutes of the International Red Cross and Red Crescent Movement for situations of violence that do not reach the threshold of an armed conflict and where international humanitarian law is not applicable. See article 5, 2d of the Statutes of the International Red Cross and Red Crescent Movement. Work in this area has included certain countries of Latin America, including the Northern Triangle of Central America and the Caribbean but also contexts as diverse as parts of Lebanon, Nigeria, Northern Ireland and Pakistan.

people suffering urban violence are just two illustrative examples of populations or needs that are often considered out of scope but perhaps should not be. With its highly configured architecture and already over-stretched resources and capacities, to what degree should the current sector adapt and respond to these and other new forms of complex needs?

Local and national actors are undertaking some of the most effective action to address crises considered out of scope by the sector. People affected, their networks and wider communities are often the first line of response and defence, as is true in any humanitarian crisis. It is with national actors, including governments, that the main opportunity lies in mounting more effective, enduring responses. Costly, direct implementation by international actors in these long-term situations of vulnerability is unsustainable over the long term; however, it remains important in situations where capacities are overwhelmed, and where a neutral third party is beneficial.

The 'localization' agenda has galvanized greater recognition and engagement that the international humanitarian sector must transform to "reinforce, rather than replace, local and national capacities" (Grand Bargain, 2016). The issues of irregular migration and urban violence serve to illustrate that this agenda is just as relevant to ongoing situations of vulnerability as it is to humanitarian crises already seen as in 'scope' of humanitarian response. With this in mind, the following actions are recommended.

#### 6.3.1 Policy and coordination

- Developing normative and policy frameworks would help focus attention and engagement on the needs and vulnerabilities of people who currently fall out of scope of humanitarian action. The work to develop guidelines on migrants in vulnerable situations, and to conceive 'other situations of violence', demonstrate how such processes can foster wider ownership across humanitarian communities and can be used as a basis for advocating for greater action.
- Given the humanitarian sector's dependence on mandated lead agencies to trigger attention, engagement and action, consideration should be given as to whether there is a need for a lead agency to take a much stronger role in identifying unaddressed need and advocating for more systematic support to local and national responders. The cases of both irregular migrants and people affected by urban violence have illustrated how certain people and types of need fall outside the mould of traditional response (no specific event trigger or lead agency) and therefore fail to trigger the same kind of response afforded to other types of humanitarian crisis.
- In the case of irregular migration, where it is clear that the complexity, global nature and scale of vulnerabilities are reaching or have reached crisis levels, the rights-based role of IOM should be reinforced to ensure a multilateral response.

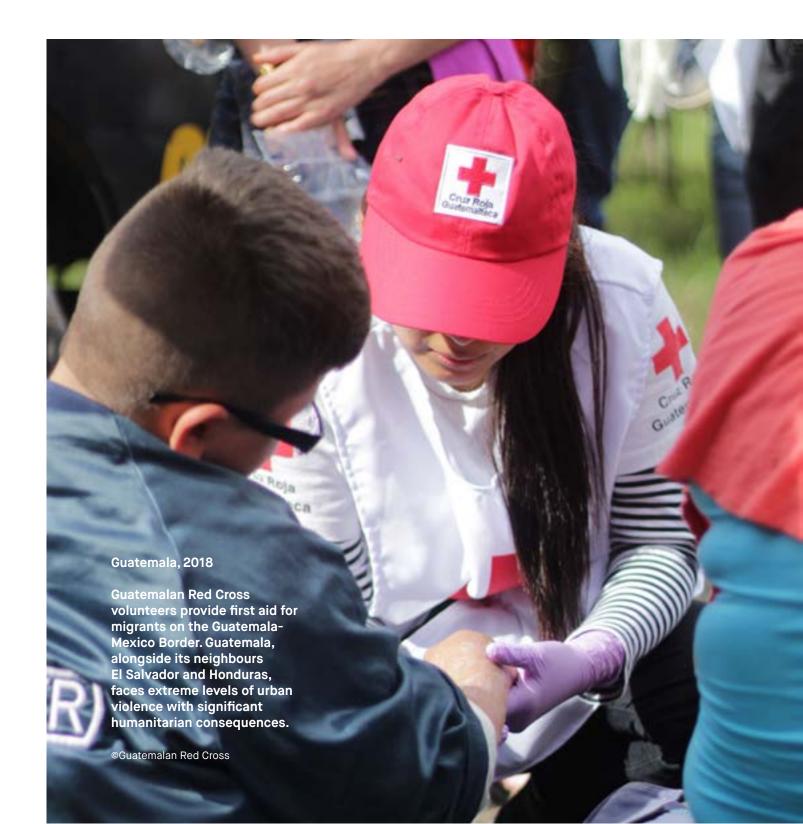
#### 6.3.2 Response

- \_ Where limited protection drives risk and vulnerability, working with and supporting governments to recalibrate security efforts towards protecting affected populations must be a major priority.
- Connecting with, strengthening and funding the capacity of faith groups, civil society organizations, national NGOs and National Societies is critical given their proximity and the relevance and trust placed in them by at-risk populations.
- Lessons on how to further develop grassroots and civil society networks and reinforce \_\_\_\_ local protection approaches should be captured, supported and shared.
- The role of protection-mandated or protection-oriented humanitarian agencies \_ experienced in conflict is particularly relevant in certain instances - but multimandate organizations need to play a much stronger role, triggering a more wide-scale international humanitarian response where necessary owing to the nature and scale of unmet need. In particular, international actors need to step up and better coordinate their advocacy so that the humanitarian consequences of issues such as irregular migration and urban violence are brought to the fore.

#### Data and information 6.3.3

- Investments in better data help underpin the evidence base, but should not come at the expense of political commitment to protection and action for out-of-scope populations. Many, including the UN Secretary-General, advocate that data is a force for good, which will help "get people the support they need, more quickly and more efficiently" (Meneghetti, 2018). In the case of people affected by urban violence, commentators highlight having to continually provide evidence of needs to prove the case for engagement (HPN webinar, 2017). In the case of irregular migration, investment in improved data is one area where there is collective agreement on the part of states through the Global Compact for Migration (2018), and a dedicated IOM Global Migration Data Analysis Centre.<sup>6</sup> There is a real risk that the drive for better data becomes an end in and of itself, deflecting political capital away from action. Improved data must be linked to commitments from states to enhance the protection and assistance for these populations.
- Judging when and where international action might be relevant requires the ability to assess and understand the relative scale of needs and capacities between crises so that difficult decisions about prioritization can be made when capacity to respond to needs is overstretched. While the need for independent, impartial needs assessment was identified by the High-Level Panel on Humanitarian Financing (2015) and committed to under the Grand Bargain (OCHA, 2016a), efforts are focused on assessment within crises, and between sectors (ACAPS, 2016a). Calibrating whether, and to what degree, the

humanitarian sector should focus on needs that are currently out of scope requires this to be expanded to assess levels



See for example, the IOM Global Migration Data Analysis Centre, opened in 2015: 6



### Laos, 2018

Ban Man or Man village in southeast Laos is one of 13 villages devastated by the floods. Still

People are starting to return home after the flash flooding in Laos, but they face a massive clean-up.

The states

deals

100

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