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Civilian-Military Humanitarian Response Workshop

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Working Group Summary Report



October 2016 Civilian-Military Humanitarian Response Workshop – Summary Report

On October 26-27, 2016, over seventy participants – including humanitarian practitioners, academicians, and military leaders – gathered in Newport, Rhode Island to explore current and future challenges in civilian-military humanitarian responses, including natural disasters, complex emergencies, and routine security cooperation activities.

This was the first in a planned series of civilian-military humanitarian-focused events, designed to help the international humanitarian community and international militaries collaboratively develop robust research, professional education, training, and development agendas. Each of these entities plays a vital role in helping to improve civilian-military coordination and engagement during humanitarian responses.

The inaugural workshop aimed to improve civilian-military humanitarian responses by meeting the following four objectives:

1. Enhancing the response capacity of UN OCHA, USAID OFDA, humanitarian NGOs, Red Cross and Red Crescent Movement, international militaries, and other key organizations through supporting a Community of Practice in civilian-military issues and promoting information sharing that can inform policies and processes during humanitarian crises.
2. Expanding and strengthening a network of practitioners, academicians, and leaders who routinely work civilian-military engagement in the humanitarian space.
3. Highlighting key opportunities for professional education, training, and development for key decision makers to identify the best practices associated with overcoming cultural, policy, technical, and legal challenges for coordination and information sharing.
4. Developing a comprehensive research agenda focused on civilian-military coordination considering international approaches to effecting solutions.


Attendees enjoyed stimulating keynote and panel discussions from leading thought and action leaders who explored the current and future state of civilian-military coordination. High profile speakers included: Mr. Stephen O'Brien, Under Secretary General and Emergency Relief Coordinator, UN OCHA; Dr. Jennifer Leaning, Harvard School of Public Health; Major General Paul Kennedy, U.S. Marine Corps; Ms. Jocelyn Kelly, Harvard Humanitarian Initiative; Dr. Melissa Finley, Sandia Labs; and Dr. Mary Raum, U.S. Naval War College.

Participants had exceptionally lively and constructive discussions over the course of the two days, with over half of the workshop time devoted to small group breakout sessions. The following five working groups explored key areas of interest in the humanitarian space:

- Global Health Engagements, Ethics & Gender Issues, and Security Cooperation Activities
- Information Communications Technologies
- Naval Integration into Humanitarian Response
- Pandemics
- Urbanization and Climate Change

Each working group developed the following synthesis and summary papers to continue to stimulate thinking, encourage an ongoing exchange of ideas, and ultimately help drive research, education, simulation, and other innovative efforts that can improve civilian-military coordination and engagement in the future.

We would like to thank everyone who took part in this workshop, for their willingness to explore these important issues, and for their passion and commitment to help those people who find themselves in harm's way. Our sincere hope is that this event was the beginning of a continuous and vibrant larger discussion that can help to advance trust and confidence with key actors in the humanitarian ecosystem, so we can all work more effectively together to help vulnerable people around the world.



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Global Health Engagements, Ethics & Gender Issues, and Security Cooperation Activities Working Group

While civilian-military coordination during humanitarian relief may be conceptually simple (i.e., providing a secure environment in which humanitarian relief can be delivered effectively without interference), the concept has a number of challenging dimensions. To address some of these issues, this working group addressed the dimensions associated with security cooperation, health, ethics issues, and gender.

Humanitarian assistance and disaster relief (HA/DR) often requires coordination between military and civilian actors. The coordination of all actors across the humanitarian space requires a clear understanding of the breadth of operating platforms, missions, objectives, roles, and expected outcomes. Furthermore, a clear understanding of the rewards and opportunities of each actor can provide all responding organizations with a context of participation and better define expectations. The roles of the military during humanitarian relief are clearly defined in any number of operating manuals (e.g., Security Assistance Management Manual¹). The transitional period during which the military hands off operations to Nongovernmental Organizations (NGOs) and to the local community requires complex coordination among the clusters of actors. What are the key components of sustainable cooperation and coordination? What strategies can be implemented to better align the goals of all actors during the relief operation?

The expected outcomes of humanitarian relief include restoration of local capacities and community resilience. Both outcomes are dependent on meeting basic human needs, such as food, water, and shelter to sustain human health. Restoration of community capacity requires an understanding of the capabilities of the actors that constitute the humanitarian clusters (e.g., Water, Sanitation and Hygiene; Shelter; Food Security; Nutrition; and Health). Moreover, planning and strategy development within and between clusters is essential. What contingency planning could be implemented to ensure deliberate, strategic and effective deployment of cluster assets and the coordination of effort between clusters?

During disaster relief, vulnerable populations; women, children, and the aged, pose significant relief challenges. To meet these challenges, local cultural competency is needed. How might cultural competency be leveraged to broadly build community resilience and meet the needs of all members of the community including the most vulnerable?

This working group recommends pursuing the following four research questions/actions to address meeting the challenges above:

¹ Defense Security Cooperation Agency. C12 – Humanitarian Assistance and Mine Action Programs. *Security Assistance Management Manual*.

1. Perform a gap/SWOT (Strengths, Weaknesses, Opportunities, and Threats) analysis to develop a clear understanding of the roles of all actors (civilian and military) during humanitarian assistance/disaster relief with a focus on decision making, operating platforms, mission, operating objectives, opportunities, roles, rewards, and expected outcomes.
2. What are the key parameters (i.e., strategies and metrics) to effect a successful military transition and afford sustainable cooperation and engagement at the strategic, operational, and tactical levels?
3. What are the differences in lessons learned from steady-state versus contingency operations during security cooperation activities?
4. How do the risks change for vulnerable populations in steady-state versus contingency operations and activities, and what are the impacts on vulnerable populations?

Before concluding the workshop, working group members collectively committed to the following four actions:

- To maintain the dialogue;
- To frame the questions above into testable hypotheses;
- To identify data bases and resources to assist in answering these questions; and
- To meet again to discuss, deliberate, and collaborate on civilian-military coordination during humanitarian responses.

Day 1 began with working group leads providing an overview of the agenda and framework for the next two days. They offered a definition for security cooperation activities, which is a U.S. Department of Defense (DoD) term that describes tools and military activities used to engage partner cooperation (usually of the non-kinetic variety of military operations). Examples include using military engineers to build something, conducting a symposium on rule of law, sending doctors or nurses to partner nations to engage in healthcare activities and training, conducting expert exchanges, to name a few.

The group subsequently explored possible priority areas that could help guide discussions:

- Engage resources from the Land Grant institutions for HADR;
- Provide assistance to ensure transition to self-sufficiency and meet basic human needs;
- Re-establish agriculture in areas impacted by humanitarian emergencies;
- How do we know the efforts made by responding organizations were successful?
- What were the impacts on the affected nation and people?

The following issues were explored through free-flowing discussion, with a focus on civilian-military implications on vulnerable people:

- Reproductive health;
- Nutrition;
- Effectiveness of health care systems;

- Cultural competencies;
- Preplanned community responses;
- NGO-military relationships;
- Transitional period (how to reestablish functions to meet basic human needs: water, sanitation, food, and shelter)
- Security cooperation activities: Society-NGO-military handoffs;
- Civilian-military planning prior to response;
 - Challenges:
 - Why don't we have better long-term thinking in fluid situations during a disaster?
 - Funding is not steady and long-term funding is very challenging to secure
 - Resources are hard to plan for
- Institution building – and building resilient communities – we must engage, understand, and empower;
- Militaries need to understand the following:
 - Their respective spaces of influence;
 - The opportunity costs and benefits of engaging;
 - That they operate by mandate of their government, and this can impact the humanitarian principles of NGOs;
 - Respect the spaces of other actors

The group then shifted discussions to explore how to better allocate resources and improve coordination from a civilian-military perspective. Key issues that were examined included the following:

- Frameworks and methods for coordinating (e.g. Civil-Military Operations Centers);
- How to deal with opt-in option;
- Planning should be deliberate;
- Global Health Engagement: leveraging space for national security;
 - Efforts to build capacity, mitigate threats, conduct HA/DR, and force health protection
- Military - Expanding the notion of national security;
 - Context - what about post conflict redevelopment?
 - People must trust the competence of the military
- The biggest hurdles for militaries-- different goals in military global health engagement and civilian health engagement

One key question that emerged was the following: Are there mathematical models of vulnerable communities? Areas? People?

- If so, could these models could help build resilient communities responsibly, and potentially help the humanitarian response community better develop a broad range of capabilities?

The group next identified five key gender issues, as follows:

- Vulnerable populations (must be able to define this; gender is not limiting term);
- Culturally dependent on who is responding and cultural-political dynamics during HA/DR;
- Access to resources;
- Influence without authority? Provide opportunities in business and families;
- The biggest challenge is to provide a wide net to meet the greatest need, while respecting the individual

The following key ethical issues were examined:

- Impartiality and equity;
- Respect for humanitarian law;
- Mismatches of international law with military global health engagements vs. civilian health engagements;
- U.S. loss of the moral high ground with torture in Guantanamo;
- Differences between torture and information collection;
- Human rights are not negotiable (i.e., versus cultural piece, warlords using young boys as sex surrogates – how was this acceptable as part of Afghan culture while a U.S. ally);
- Exploitation of children

The group subsequently explored the following issues with respect to the function of animals in a society:

- Significant role in resilience and source of food;
- Animals are collateral;
- Animals provide economic development and opportunity to live in civil society;
- Therefore, animal health becomes a very significant issue during response

To conclude day one, the group discussed the application of a wide range of humanitarian principles during civilian-military coordination, including the following:

- Who makes decisions about what is right? How do they make them?
- How do you manage the decision space?
- The big dilemma: What is the practical side of working with/on the “dark side” – militaries?
- To what extent is civilian-military coordination negotiable and where are the red lines?

Summary from Day 1:

- Need to synthesize discussions from today to develop a research agenda
- Thoroughly explored different means of engagement
- Widespread agreement that everyone needs better cultural understanding
- The system requires transitional thinking beyond relief with a greater focus on long-term recovery
- Organizational planning must improve
 - There are currently structural challenges

- We need to understand differences between military global health engagements and civilian health engagements
- Appreciate and respect impacts on principles for humanitarian organizations

Day 2: This portion of the workshop discussion focused primarily on developing the following research questions to advance civilian-military coordination, where appropriate, in humanitarian response:

Issues for Further Research:

1. Steady state engagements - What organization(s)/activities can convene and oversee activities and efforts associated with HA/DR?
2. How do the risks change for vulnerable populations in steady state engagements versus contingency operations? Specifically, what are the impacts on vulnerable populations? Need special focus on the following:
 - Displacement effect;
 - Unintended consequences;
 - Civil engagement and cultural understanding;
 - Comprehensive cooperation/collective planning (unity of effort);
 - Level of engagement;
 - Role of military female engagement teams
3. Does a shared understanding of organizational goals, processes, and objectives yield successful transition to military global health engagement and civilian health engagement sustainable activities?
4. What are the differences in lessons learned from steady state versus contingency operations during security cooperation activities?
5. What are the key parameters (strategies and metrics) to foster a successful military (strategic, operational, tactical) transition level of engagement to sustainable cooperation?
6. Would a better understanding of NGO capabilities in terms of mission, function and tasks enhance long-term mission success for both the militaries that respond and the affected nation?

The group also highlighted a need for a gap/SWOT analysis to be conducted to better understand each of the actor's goals and how they make decisions. This analysis should include an examination of the following:

- Operating platforms
- Missions
- Objectives
- Opportunities
- Roles
- Rewards
- Expected outcomes

Information Communication Technology Working Group

The Information Communication Technology (ICT) working group ran for two sessions over both days of the workshop, bringing together practitioners, academics, and military participants with very diverse backgrounds and experiences using ICTs in humanitarian response.

Day 1 began with the working group leads providing a brief overview of key terms and concepts to ensure common language, introducing the working group objectives, and getting feedback from participants about suggested changes to the agenda or format. The team then explored challenges and opportunities in the use of ICTs by civilian and military organizations during humanitarian response. Notably, the main topics addressed on day 1 were not necessarily with issues related with software nor hardware – but rather surrounded organizational, cultural, process, and policy issues across the humanitarian space.

In summary, the principal challenges in the ICT field are related to definitions, knowledge, and consensus on:

- 1) Sector governance (policy, doctrine, procedures, and standards definitions);
- 2) Lack of theory or knowledge of the information requirements that each organization needs to plan, execute, and assess humanitarian operations successfully; and
- 3) Community knowledge about the inventory of available ICT assets and capabilities, with an appreciation that this is a dynamic and rapidly evolving area in the humanitarian space.

Challenges

- **Lack of Standards**: The first aspect that emerged during initial discussions was governance. The lack of agreement on, and an establishment of, standards – from a doctrinal, ethical, process-related, and organizational perspective – severely impacts the ability to protect information, affects its operational functionality, and reduces all responding organizations' capability to make well-informed decisions with the best available information.

Also, the lack of policies for the development of support platforms for decision-making has generated the conditions for an inorganic growth of systems, and resulted in confusion over their potential use and inefficiency in effectively employing and integrating these scarce resources into information gathering and sharing efforts. It can

be extremely difficult to establish strict norms in a world that operates based on the support of volunteers from state and non-state actors. Getting past these obstacles to better define agreed upon structures may allow the effective development of new initiatives that can better implement standards within the humanitarian ICT space.

- Information Sharing: Sharing normally is defined as a voluntary act that allows one entity to give another entity access to some proprietary element(s) of information. There are a multitude of organizational and physical barriers that impact this critical functional element within the humanitarian space. First in the Civ-Mil arena, are tensions that exist from potential military impacts on the humanitarian principles. Concerns over a military compromising a humanitarian organization's neutrality and operational independence are not new; however, they can be exacerbated through the use of ICTs to share information between disparate organizations, especially in conflict settings.

At the organizational level, a perceived lack of standards and trust in third parties can generate confusion and suspicion and can lead to a lack of coordination. There are several issues that impact an organization's confidence in the information that is shared with it:

- 1) The feasibility of sharing proprietary know-how / technologies;
 - 2) A general lack of trust in the quality of work done by other entities; and
 - 3) Organizational and human biases and assumptions, and differing / competing objectives within the various agencies who routinely respond to humanitarian crises.
- Lack of Collaboration: Collaboration, defined as the act of working with someone else to produce or create something that may be mutually beneficial to both entities, is often limited by:
 - 1) Mission scope and resource constraints;
 - 2) Trust in another entity's intentions, missions, and/or objectives; and
 - 3) Competition over resources.

- Lack of Data Literacy¹ and Legibility²: The causality of these two gaps may be a consequence of the general lack of standards within the ICT domain. Please see footnote for further clarification.
- Lack of Absorptive Capacity: The current humanitarian system shows symptoms of a lack of ability to identify, assimilate, transform, and apply valuable external knowledge from the ICT domain – this situation can generate duplication and tremendous inefficiencies. There is arguably a very slow pace to the current humanitarian system adopting standards, practices, and external capabilities in the ICT domain.
- “Task to Tool” Match: Taking into consideration that the humanitarian system is an arrangement of loosely aligned systems, full knowledge of the existence and capabilities of other initiatives (inventory) is critical to improving system-wide information sharing and understanding. Currently, it is very difficult for an organization to align tasks and tools in a manner that can enable better decision-making and help guide future innovations in the ICT domain for different actors.
- Resource Competition: Faced with a well-understood lack of governance in the ICT humanitarian sector, there is an inherent competition for economic resources between some participating organizations. This competition is not necessarily selfish in nature, but primarily due to a passion for helping others and focused on the instinct of organizational survival, so an entity can continue to be relevant and best positioned to provide relief and aid for those in need. This situation generates a kind of open market structure that can create conditions resulting in the duplication of efforts across the humanitarian space – greatly reducing the effectiveness of complex responses and creating confusing streams of data that are difficult to analyze and understand.
- Culture: Organizations and individuals resist new technologies for many reasons. This resistance is sometimes rooted in reservations about the different power arrangements that the adoption of new ICTs can bring about. Cultural differences in trust and

¹ “Data literacy includes the ability to read, work with, analyze and argue with data. **Reading** data involves understanding what data is, and what aspects of the world it represents. **Working with** data involves creating, acquiring, cleaning, and managing it. **Analyzing** data involves filtering, sorting, aggregating, comparing, and performing other such analytic operations on it. **Arguing with** data involves using data to support a larger narrative intended to communicate some message to a particular audience”. In: R. Bhargava, C. D’Ignazio, “Designing Tools and Activities for Data Literacy Learners,” available at: http://rahul.connectionlab.org/collateral/Data_Literacy_Workshop_Paper.pdf

² “Data legibility is a criterion of data quality that refers to appropriate representation of data such that it improves the readability and understanding of data. This can be applied to all forms of data – written text, standard coding, standard images, and biosignals, etc.” In: W. Kirch, “Encyclopedia of Public Health,” p.207, New York: Springer, 2008.

perception can create personal and organizational behaviors that impact their actions and willingness to share information. Again, within the Civ-Mil space, cultural issues are further amplified by possible impacts on humanitarian principles.

Opportunities

There are several opportunities that were explored in discussions; however, the working group decided to focus on what is considered most relevant regarding potential impact and ability to tackle the greatest challenge in the sector: Triage theory development.

Using lessons learned from the emergency medicine field, there was widespread consensus that it would be worthwhile to develop processes and procedures that can help humanitarian responders better determine the actions needed to help prioritize ICT use and information sharing.

The methodological development of research that allows defining the Decisions Points (DPs)³ that an organization must develop and act on during operations in the humanitarian space should be further explored. This includes examining the information necessary to aid in decision-making and the type of data that each set of information requires – ultimately helping define the requirements for and shape the development of future support systems.

The purpose of gathering information during a crisis is to support sound decision-making processes and build consensus across different organizations. To better define the information requirements needed in the humanitarian space, we must significantly improve our understanding of the various decision-making processes that are supported by ICTs.

A map of these DPs by cluster and phase/stage of a response can help to create an “information needs tree,” which subsequently can be configured based on the required information for each decision, and the data that is required to set up each piece of information. If all the data requirements can be determined, it “may” be possible to define and configure one gateway system⁴ that can manage many different types of data and bring together all the potential communities that cooperate in these efforts.

The further development of this theory related to humanitarian ICT decision process can help enable the development of policies aimed at consolidating, developing, and eliminating duplicate or unnecessary support systems, making them more useful and robust.

³ Decision Points were defined by the working group as “a point in space and time when an organization anticipates making a key decision concerning a specific action that must be taken to create conditions and make progress towards objectives”.

⁴ There was widespread agreement that while a “one system” solution may not be practical – this may be more due to cultural and organizational constraints, vice technical issues.

On **Day 2**, the working group reconvened in full to develop research questions that can help improve Civ-Mil coordination and engagement from an ICT perspective.

Issues for Further Research:

The working group defined two principal questions that they agreed can have the greatest impact on the effectiveness of the humanitarian system by improving and advancing the use of ICTs.

Question 1: What decisions are made, by which key actors, at the various stages of relief to effectively provide humanitarian assistance?

The steps required to research and validate this question involve meta-analysis, and the use of a variety of qualitative and quantitative techniques (e.g. case study review, surveys, and interviews with relevant actors about prioritized information and decision requirements). These can be further validated by simulation or exercise (table top or computer simulation).

The results of this research question are the creation of an information needs map and a deeper understanding of shared DPs. The development of this framework will serve as the basis to begin the second research question.

Once DPs are identified and information needs associated with the common actions of one or more sectors, the focus can shift to identifying existing data gaps, in order to configure the required information related with each DP. In this context, the second research question is defined as follows:

Question 2: What asset and capability data gaps exist in the shared inventory across the humanitarian space?

The steps required to research and validate this question involve meta-analysis, and the use of a variety of qualitative and quantitative techniques (e.g. comprehensive cluster assessment, case studies, and interviews).

The results of this research question are related to the identification of shared needs and capabilities for different contexts across the humanitarian ecosystem.

Naval Integration into Humanitarian Response Working Group

The purpose of this working group was to explore the opportunities and challenges for integrating naval capabilities into humanitarian response operations. There were two streams of inquiry that were explored by subgroups on both days of discussion:

- Operational (examining opportunities to improve operational coordination of), and;
- Measurement and evaluation (identifying the material, reputational, and transaction costs of using military capabilities for humanitarian response).

Both subgroups combined for a joint discussion on day 2 of the workshop. A gap analysis from these discussions informed a research agenda and skill development opportunities to improve Civil-Mil coordination and engagement in the future.

Findings

Operational challenges to coordination (permissive environments):

The challenges raised within the working group covered the spectrum of humanitarian response, from natural disasters to complex emergencies. The group operated under the assumption that factors within the permissive disaster response environment carry over to the less-permissive complex emergency as well.

1. Humanitarian assistance/disaster relief (HA/DR) is **not a primary task of the U.S. Navy**. As a subset of forward presence and power projection, the Navy and geographic combatant commands provide minimal attention and resourcing to pursue training, education, planning, and exercises to gain experience in this area. The Navy also lacks dedicated units for humanitarian response.
2. At the operational and tactical level, there is a mutual **lack of knowledge** among US Defense Department actors, the US Agency for International Development 's Office of US Foreign Disaster Assistance (USAID OFDA), various UN agencies and the myriad Non-governmental Organizations (NGOs) of one another's roles and processes in HA/DR. The DOD faces obstacles in understanding the relationship between USAID OFDA, the United Nations, and the international nongovernmental organizations.
3. **Cultural differences between organizations** affect coordination, communication, and perceptions of mission accomplishment. The DOD largely does not understand that most HA/DR is conducted without DOD and has a short term/mission accomplishment mentality. Also commonly misunderstood is the DOD supporting relationship with USAID

OFDA. As a result of the lack of involvement in majority of HA/DR events and short term vision, the DOD is additionally further removed from understanding the long term political and economic implications of the humanitarian-to-development transition.

4. Based on the urgency of need, there is a **naval mindset to “send what's available**, not necessarily what's needed.” Although there is a requirements process with OSD/USAID OFDA, the maritime reality of which ships are deployed in the area determines which assets respond.
5. Expectation that **DOD will respond to HA/DR more often in the future**.
6. **Negative perceptions were** cited around the **use of hospital ships** (too expensive, too slow to respond, and may not match the requirements needed), high turnover among both military and NGO personnel resulting in the need for continual training.

Operational challenges to coordination (non-permissive environments):

1. **De-confliction** is difficult because participation by NGOs in the system is voluntary.
2. **Timeliness** of military action challenged by inability to locate NGOs in the field.
3. Increased **risk to humanitarians** results in general wariness toward civ-mil coordination.
4. **Lack of awareness** and implications of the humanitarian principles.
5. **Limited training** for NGOs on civ-mil engagement
6. Great **diversity** among NGOs which have different levels of training, polices, and resources
7. **Varied set of missions and objectives** among NGOs (not all NGOs work together)
8. **Increased number of NGOs** means they may not be included in coordination efforts or are represented by the UN OCHA voice
9. **Strategic communications** become more important to appropriately convey humanitarian intentions (no more “humanitarian air strikes”).
10. **Information sharing** becomes much more challenging during hostile military operations. A greater dichotomy emerges between the tension of sharing of information versus sharing of intelligence.

Other Common Challenges and Observations:

1. Many military exercises have little-to-no NGO/IGO involvement, and few NGO exercises include the military.
2. Coordinating with the affected nation is difficult where pre-existing relationships do not exist

Assessment and Evaluation:

It is generally accepted that the only way to improve humanitarian civil military coordination is to effectively evaluate the process and its impact. One need the group identified is the creation of an assessment framework for evaluating civil-military engagement that is informed by evidence. One key criterion for determining if military assets will be used by humanitarian agencies in an HA/DR mission is whether these assets can be optimized in a manner that

enhances the overall success of the response. One challenge to designing an assessment framework is the diversity of operational contexts, national agendas, and types of disasters.

The group identified a variety of ad-hoc metrics for evaluating civil-military engagement including assessments by the media, donors, and formal independent assessments by consulting agencies, academia, etc. These assessments have utilized various metrics including lives saved, performance measures, and donations. However, there is no single framework for conducting assessments, and no empirical evidence to establish which set of metrics is best for assessing both process and impact. The group considered two sets of metrics for evaluation, one set focused on impact or strategic outcomes and the other focused on process or the tactical/operational objectives of the response.

Among the **strategic level considerations** include whether civ-mil engagement is consistent with the host nation's interests, if there is a way to evaluate the cost of civ-mil collaboration or the cost of non-collaboration. Also important here are the perceptions of the disaster-affected community. For the international humanitarian community there are a number of factors that are considered in the strategic assessment of whether/how to engage with military. These include whether military bring a unique capacity that cannot be met by humanitarian aid agencies and whether coordination with the military increases risks for humanitarian aid workers.

Among the operational level metrics to be considered are the speed of the response, the speed and accuracy of needs or damage assessments, the appropriateness of assets or relief provided, the impact on the local economy, and the impact on governance, and the security environment.

New Trends:

Participants were asked to reflect on new trends they see that will have an impact on future HA/DR responses and civil-military coordination in these missions. The perspectives shared include an increase in levels of HA/DR preparedness within the military (Geographic Combatant Commander Theater Security Cooperation / Planning; Capability building / Disaster Risk Reduction; More HA/DR exercises; increased mil-mil engagement). Host nations are expected to be increasingly resistant to international aid, and more likely to rely on regional support mechanisms. The number and types of aid agencies are likely to continue to proliferate. In complex emergencies participants felt there would be increased denial of access to affected populations and that humanitarian aid workers would continue to be targeted.

Training Opportunities and Issues for Further Research:

Participants expressed a desire for an increase in available **training opportunities** focused on preparing them to operate in an HA/DR mission and to be capable of working effectively on civil-military engagement. The following were cited as areas where **greater knowledge and skills are required** and the sorts of courses participants would like to see more of:

1. Knowledge training, cultural training, language training, leadership training
2. Self-knowledge, self-assessment
3. More JHOC, HART, UNCMCoord, Senior War College courses
4. Development interface with humanitarian organizations and military
5. Information management training
6. Understanding how to incorporate local community in planning/response
7. Knowledge of national response system training
8. Assessment, planning training
9. More simulations where both military and humanitarians participate (and other actor, e.g. Coast Guard)

In addition to training and skills development, participants were asked to identify **research questions** they felt were relevant to increasing knowledge of the impact and effectiveness of humanitarian civil-military engagement. These questions, ranked in no particular order include:

1. What is the optimal military force to employ in HA/DR operations?
2. What kinds of assistance can affected nations expect from foreign militaries?
3. How can information best be shared for both optimal capacity and effective HA providers?
4. Where will the United States never respond?
5. What do other countries expect of the U.S. military for disaster response?
6. Are there examples of inter-agency strategic cooperation?
7. How do we develop trust in relationships?
8. To what extent should U.S. military train, educate, design, and capacitate readiness for foreign humanitarian assistance?
9. What is the impact of military involvement in response to attacks on humanitarian aid workers or on overall levels of violence?
10. What is the most efficient command and control mechanism for HA/DR operations?
11. What can the U.S. military do to ensure that its personnel understand their role in HA/DR and to ensure that this training is done?
12. How can best practices on successful USAID/DOD response be shared within U.S. military?
13. How do we share best practices among humanitarian agencies on optimal HA/DR?
14. Would the creation of a sub-specialty in HA/DR within the military lead to improved HA/DR outcomes?
15. Can we model the likelihood that a nation will participate in an HA/DR event?
16. Which forward geographic combatant commands should be trained and to which set of standards?
17. Can the military build trust with NGOs in a manner that avoids the NGOs compromising on humanitarian principles?

Pandemic Working Group

The Pandemic Working Group ran for two sessions over both days of the workshop, breaking into small thematic sub-groups on our first day's session, and reconvening as a full group during our second session for synthesis and preparation of feedback to the conference.

Day 1 began with the working group leads providing a brief overview of key terms and concepts to ensure common language, introducing the working group objectives and sub-group themes; and getting a quick read from participants about any suggested changes to agenda or format.

Following the introduction, participants took part in an initial conversation and identified key overarching issues related to humanitarian civ-mil coordination around pandemic response. Top-line observations from this discussion are included here:

- **The Oslo Guidelines do not sufficiently address pandemic response.** The United Nations Office for the Coordination of Humanitarian Affairs' (OCHA) drafting of the new Standards on Humanitarian Civil-Military Coordination, in turn, offer an ideal opportunity to reflect, identify, and contextualise issues distinct to humanitarian civil-military engagement in responding to emerging infectious disease threats.
- The group also observed that **pandemics may represent a particularly constructive arena for civil-military coordination**, given the clarity of shared incentives between both military and the international humanitarian community, and the fact that pandemic response efforts rely on a high degree of expert-to-expert engagement between uniformed and civilian medical communities with a natural pre-existing affinity for dialogue.
- Pandemic response **can be considered as a national security threat** as well as a humanitarian priority. However, one member raised a note of caution in framing pandemics in terms of national security, as doing so may invite counter-productive assertiveness by military authorities over their humanitarian counterparts. This led to a related caution of the **military's potential roles in quarantining populations**, which represents an extremely sensitive humanitarian civil-military coordination challenge.
- There is **insufficient clarity about the 'wholesale' versus 'retail' assets and capabilities military actors may bring to supporting humanitarian pandemic responses**. The group suggested the need to map these resources in one place – i.e. a 'menu' of options' – and also develop better understanding and opinions about the degree to which military actors should be engaging in affected communities in direct relief, as opposed to indirect relief and/or infrastructure support.
- Above all, the group stressed the **critical importance of context** in considering each individual emerging infectious disease response mission. There is a real danger of 'preparing for the last epidemic', particularly the West Africa Ebola response. Alternative contexts – for instance, a MERS epidemic in Yemen – will require

consideration of a wide range of different factors (i.e. environmental, logistical, community perceptions, etc.).

Following this initial discussion, working group members were divided into three separate sub-groups for the remainder of the session. Each sub-group was tasked with considering issues of preparedness and capacity building related to:

- **Surveillance and community engagement**
- **Lab testing, case management, and infection prevention/control**
- **Research and development**

Within their thematic area, sub-groups then identified **key challenges and emerging opportunities** for improving humanitarian civ-mil pandemic coordination. In some cases, it was clear what **key recommended actions** were needed; in other cases, the sub-groups identified the need for **new research and analysis** to fill gaps in current understanding.

On Day 2, the working group reconvened in full to select key points and recommendations from each sub-group to report back to the full workshop. To help make them more relevant to UN OCHA, the group loosely matched these suggestions to the five focus areas laid out in the UN OCHA Draft Humanitarian Civil-Military Coordination Standards that were introduced by Mike Marx on Day One of the workshop (i.e. *preparedness; deployment; employment; transition; monitoring, evaluation and learning*).

These points – including a summary of the key challenges, recommended actions, and proposed research priorities – are summarized briefly below:

I. Preparedness

At the preparedness stage, participants identified a broad overarching challenge – **the lack of formal interaction between humanitarian and military pandemic entities**. This coordination gap is particularly evident in under-developed linkages between both communities around the **sharing of unique military surveillance resources and assets**.

- Participants noted, for instance, that while the U.S. Department of Defense (DoD) possesses a wide range of global pandemic surveillance assets, there is a **widespread lack of awareness about the existence and availability of these resources** within the international humanitarian community and government aid actors such as U.S. Agency for International Development. The civilian pandemic response community could benefit from assets such as DoD's worldwide network of Naval Medical Research Center (NMRC) laboratories, and its Global Emerging Infections Surveillance and Response System (GEIS) maintained by the Armed Forces Health Surveillance Branch. During the Ebola response, many such unique DoD surveillance, detection mechanisms could have been better leveraged by the wider international humanitarian community. For instance, the NMRC laboratory in Ghana had been conducting malaria surveillance and studies in Liberia since 2010.

- Several military participants observed that other **decision-makers within the DoD itself may not always be aware of military medical resources**; an issue which can also be compounded by bureaucratic delays within military organizations during a response. (One participant offered as an example the experience of the multiple layers of approval and oversight in deploying the U.S. Navy Mobile Lab.)
- There are also **legal and bureaucratic hurdles**, such as the fact that DoD has technologies that may not be World Health Organization (WHO) or U.S. Food and Drug Administration (FDA) approved, even though the capability is present. The U.S. Navy, for example, has access to advanced technologies that may not be officially FDA approved but could be released at affected nation government requests.

Recommended Actions:

- To improve shared awareness of the resources and capabilities which militaries can provide the international humanitarian community in preparing for pandemics, this working group **encourages better standardized reporting** of both:
 - 1) **Military data regarding infectious disease**; and
 - 2) **Military health surveillance assets in all countries** (such as laboratory capacity). It was observed that the Head of GEIS is already having promising initial conversations with the U.S. Center for Disease Control (CDC) along these lines.
- Participants also noted that while there is reporting of *new* DoD systems, this same degree of reporting is still needed for *existing* systems. This reporting could be integrated into broader calls for global health coordination, such as the Global Health Security Agenda, so that the wider health community – militaries, the international humanitarian community, and ministries of health – are aware of the potential for collaboration.

Issues for Further Research:

- 1) How can non-military actors in the field – NGOs, partner host nation health systems – improve their understanding of the pandemic surveillance assets that DoD and other militaries possess?
- 2) What challenges/barriers have they encountered in the past in trying to learn more about their functions and availability, and how can they be overcome?

II. Deployment

At the deployment stage, the group identified the **lack of opportunities for informal communication between humanitarian responders and military as a critical challenge**. Participants emphasised the importance during deployment of being able to draw on strong, pre-established relationships and pre-existing civil-military communication channels. (A reason why this point could also fit into the ‘preparedness’ stage, above). More opportunities for face-to-face engagement and relationship-building are thus essential – both during, and, ideally, as far in advance as possible, of deployment.

At the same time, however, it was noted that the **humanitarian community's own formal and informal mechanisms for communication in pandemics can easily exclude military partners**. During an active emergency response, the international humanitarian community maintains not only its own formal coordination and communication structures run through the Cluster System, but also works through informal structures based on pre-existing professional networks. A significant amount of informal communication, for instance, takes place after Cluster meetings. When military actors can't be at a Cluster meeting, there needs to be another way of having these important but unstructured conversations.

High staff rotation among both humanitarians and military personnel also poses a challenge to civil-military coordination. There is often poor communication between both communities as to who is replacing who, and the difficulty of replacing personality-based relationships can hamper continuity in messaging and planning.

Recommended Actions:

- It was recognised that despite the many challenges inherent in humanitarian civil-military coordination, **pandemic response also represents an especially promising arena for proactive engagement**, due to the clear shared incentives and priorities of both the humanitarian and military communities, and because of scientific and medical professionals spanning both communities.
- At a practical level, the group suggested more action is needed to create **informal means of civil-military communications to complement formal mechanisms**. The Naval War College workshop itself was identified as a key example of the kind of mechanism that can directly facilitate better deployment coordination through investments in pre-deployment relationship-building and personal exposure between both communities – but there are a range of other formats to better assist this kind of informal relationship-building to take place.
- One idea, described further below, was to establish a **“listserve-based” network** open to humanitarian and military medical professionals interested in advancing coordination around emerging infectious diseases.
- During deployment, better communication can also be facilitated by greater involvement of **local government authorities** as liaisons between humanitarian and military health communities. Militaries tend to have strong direct communication with affected nation governments – for this reason, participants suggested that involving host governments as a ‘go-between’ for humanitarian civil-military communication during deployment can be very helpful. For example, medical NGO International Medical Corps (IMC) needed additional capacity for malaria testing; the U.S. Navy had the capability but not the mandate to support. When the affected nation government made the request on behalf of IMC, it was approved by NMRC. In complex humanitarian pandemic responses (i.e. Ebola outbreak in South Sudan, MERS outbreak in Yemen), communications may not occur through Cluster meetings but could be handled via national governments or UN OCHA serving as intermediaries.

- Greater attention should be given to **introducing new international humanitarian community staff to their military counterparts**, and vice versa. For instance, the head of an Ebola Treatment Unit (ETU) speaking to the head of a lab and introducing a replacement personally.

Issues for Further Research:

- 1) Broadly speaking, research can explore how we eliminate or reduce bias and tension between military and humanitarian organizations around pandemic response, and how this might change from context to context?

III. Employment

During the employment stage, the group agreed that **the degree to which foreign militaries can, and should, be directly interfacing with affected communities requires greater conceptualization**. There are important and fundamental distinctions in approaches to community engagement between humanitarian and military actors. It was largely agreed that the DoD is limited in its capacity to take part in community engagement activities essential for pandemic response, as opposed to providing indirect assistance and/or infrastructure support. At the same, altering human behavior is key to pandemic response, and requires community engagement.

Lack of clarity about the degree to which military actors could – and indeed, should – do more in terms of community engagement, in turn, hampers humanitarian civil-military coordination. During the Ebola response, for instance, participants described the red line drawn by DoD in refusing to care for patients with Ebola – efforts were primarily restricted to building ETUs, providing training, and providing lab capacity. The Monrovia Medical Unit was set up in Liberia initially to only care for U.S. personnel. It was later expanded to care for local personnel, but was operated by U.S. Public Health Service (USPHS) to avoid military personnel providing direct care. This created complications when military would not even transport ill patients, or even specimens.

Recommended Actions:

- One key solution/step forward was to build better understanding, demarcation, and communication between the humanitarian and military communities regarding the **military's role as providers of 'wholesale' support** (i.e. indirect assistance/logistics and infrastructure), and the **international humanitarian community's provision of 'retail' functions** (i.e. direct treatment and care of communities). For instance, during the Ebola response in Liberia, the military ran the laboratory and provided power for the university, while IMC ran the ETU, sent samples to the laboratory, and housed its personnel at the university.

Issues for Further Research:

This was an area where there were more questions than answers, indicating several opportunities for further research. Key questions included:

- 1) Is DoD's traditional reluctance to interface directly with communities in pandemic response attributable to explicit written doctrine, or is it a result of culture and adherence to past practice?
- 2) *Should* DoD contribute enabling conditions for community engagement? What are the ethical implications of uniformed personnel providing treatment to local communities? Participants noted that there may be ethical benefits to not having clinicians in uniform, even in a disaster or pandemic setting, although this point is extremely context-specific from case to case.
- 3) *Could* DoD contribute enabling conditions for community engagement? If so, which aspects of the 'wholesale to retail' spectrum are military actors best positioned to be involved in? How should such contributions be prioritised - what are the no-brainers for DoD to deliver, what are trickier? What existing capabilities can be repurposed or new capabilities developed for such ends? Are there methods for ensuring that individuals get the same standard of care in pandemic emergencies as active duty military staff, and could these be realistically implemented?
- 4) What are the perceptions of local communities and local health care providers themselves towards military clinical care? How do these perspectives vary from context to context and change with scale of the epidemic?

IV. Transition

The group noted that **differing guidelines and standards of care exist between military and humanitarian actors**, which become important throughout the response and can **complicate integration and eventual transition to local Ministries of Health (MoH)**.

Militaries may, for instance, have higher standards for Individual Patient Care (IPC) than humanitarian NGOs, and both may have higher standards than the national MoH. Likewise, access to the supply chain for assets in a pandemic response such as personal protective equipment (PPE), IPC, fuel, cold chain, chlorine, water sanitation, food, medical equipment and drugs may differ significantly between military, humanitarians, and local MOH.

Issues for Further Research: The group identified this problem as an area in need of further research before actions could be recommended. In particular, what are the best ways for MoH to interface and work together with military actors and IHC, without feeling that they have substandard equipment and protocols?

V. Monitoring, Evaluation and Learning

At the Monitoring, Evaluation and Learning stage, participants recognised that there is a **tremendous potential for cross-learning and innovation diffusion between military and civilian pandemic response communities**. There is an opportunity for greater engagement around lessons-learning and exchange from military biomedical R&D space that may add capacity and value to civilian – and particularly humanitarian civilian – pandemic response. Indeed, many of these innovations have already diffused from military to medical civilian space (for example, the DoD Joint trauma system guidelines.)

At the same time, the **IHC lack awareness of many of these innovations**, which need to be identified and brought to their attention to demonstrate the potential for exchange. There are few forums and platforms for co-learning exchange between both communities.

Action:

- One solution is to **map points of innovation synergy** (see below, research) through research, as well as better identify existing opportunities for engagement or develop new ones.
- There are **already forums that could host the knowledge transfer from military medical space to humanitarian space**. More cross-attendance of military and humanitarian pandemic experts at these events can be encouraged. Promising existing forums mentioned include, for example, inviting more civilian pandemic practitioners to the Military Health System Research Symposium or military pandemic practitioners to the MSF Scientific Day. The suggestion was also made to create a conference explicitly designed to bring military and humanitarian medical communities together to address synergies in approaches and learnings on pandemic response.
- **Academia may be a good neutral space for bringing together military and humanitarian medical experts** to facilitate knowledge exchange/translation of military biomedical R&D relevant to pandemic response to humanitarian practice.
- Although **unclassified research** requires certain disclaimers before being shared with the civilian public health community, the group felt that this **would not be a particularly difficult hurdle in practice**. US Navy participants explained that, in terms of ethical review, the DoD provides its own Institutional Review Board (IRB); each command has independent IRBs (such as the NMRC), as does each individual Navy lab. Any study outside the US must have local government approval and administrative review from the Department of the Navy.

Issues for Further Research:

- A key research priority here is in identifying synergies in military medical research and innovation transferable to civilian medical practice - ideally far in advance of, and removed from, an operational response context. Readiness for infectious disease outbreaks requires ongoing investment by militaries in myriad areas – which open-source innovations that already exist in military R&D space which can be highlighted for humanitarians?
- This research could focus on mapping the military knowledge base around **basic biomedical research** into the etiology of key infectious diseases, their causative agents and the symptomatology, **clinical research** into safety and efficacy of potential new vaccines and drugs; and military **product innovations** with dual-use civilian applications, such as appropriate PPE, prophylaxis: point-of-care diagnostics, and novel therapeutic agents.

- Research can also explore which kind of mechanisms for civil-military engagement around innovation exchange and R&D burden sharing can be developed...i.e. for tasking humanitarian research and innovation needs and requests, design challenges, with this military R&D ecosystem.

Next Steps

The preceding points are summarised below:

OCHA Focus Area	Challenges/ Opportunities	Recommended Actions	Potential Research Priorities
Preparedness	-Lack of linkages between military and civilian world around surveillance (i.e. oversees NMRC laboratories, such as laboratory in Ghana)	-Standard reporting of assets regarding laboratory capacity in all countries so everyone is aware, both military and ministry of health -Standard reporting of data regarding infectious disease - Involvement of local government and local military as go between with humanitarian and military communities	- How can non-military actors in the field – NGOs, partner host nation health systems – improve their understanding of the pandemic surveillance assets the DoD possesses? What challenges/barriers have they encountered in the past in trying to learn more about their functions and availability, and how can they be overcome?
Deployment	-Lack of opportunities for informal communication between humanitarian responders and military - Lack of access to DOD technologies for pandemic response (new drugs, vaccines, diagnostics)	-Pandemics are ripe for collaboration because of scientific and medical professionals spanning both communities -Create more mechanisms for humanitarian and military actors to interact such as this conference, listserve, etc. -Involvement of local government and local military as go between with humanitarian and military communities	-How do we reduce bias between humanitarian and military organizations working together in crisis?
Employment	-Should the DoD be directly interfacing with communities?	-Wholesale vs retail approach – military provides support and humanitarian NGOs provide direct treatment and care of communities as they are mostly hiring local communities	-Which aspects of the wholesale vs retail spectrum are militaries best positioned to be involved in? - Is the US DoD’s traditional reluctance to interface directly with communities attributable to explicit written doctrine, or is it a result of past practice and culture? - Ethical issues related to direct military provision of medical care for pandemic-affected populations.

Civilian-Military Humanitarian Response Workshop

			-Community perceptions regarding military providing care, both local and foreign
Transition	-Differing standards of care between military and humanitarian actors and integration with local MOH?		- What are the best ways for MoH to interface and work together with military actors and IHC, without feeling that they have substandard equipment and protocols?
Monitoring + Evaluation	-Facilitating greater knowledge exchange from military medical into humanitarian space	- Systematic mapping of synergies between military and civilian medical R&D. - Creating forums for knowledge transfer from military medical space to humanitarian space. Military Health System Research Symposium. MSF Scientific Day. -Academia is a good neutral space for bringing together military and humanitarian actors	- Mapping points of synergy between the military medical R&D ecosystem and IHC – ex: biomedical research; clinical research; product innovations, etc. - What systems can be developed to channel military or other government technologies for use in foreign pandemics?

The group concluded by emphasizing that its two sessions, while productive, are too brief to fully consider the range of issues and potential solutions relevant for humanitarian civil-military coordination in the context of pandemic response. It was therefore proposed to develop a listserv-based ‘Civil-Military Emerging Infectious Disease Response Network’ (CMEIDRN), to further develop this discussion, and help facilitate deeper professional relationship-building between military and humanitarian medical experts. Participants agreed to remain in touch via a list-serve to further develop the scope and terms of reference for this network. Some key next steps include:

- Determining scope and activities – CMEIDRN is currently limited to the US Navy at the moment. Who else should be included? Is there opportunity and value in organising a workshop or other event in the future?
- Risk analysis to better consider and mitigate potential challenges in entertaining this consortia.
- Stakeholder analysis to determine how best to present the CMEIDRN concept to correct audiences in DoD, IHC, academia, and ministries of health.

Urbanization and Climate Change Working Group

From 26-27 October 2017, the Urbanization and Climate Change working group sub-divided into separate teams for much of the time devoted to breakout sessions. At the conclusion of each day, the two subgroups came back together to exchange ideas and gain feedback on the outputs of their discussions. It is important to note that both topics addressed in this working group presented long-term trends, with a wide range of implications on international humanitarian responses well into the future.

The changing nature of humanitarian response in cities has challenged the current humanitarian system including non-governmental organizations (NGOs) and United Nations (UN) agencies. Indeed, to address these shifts, the 2016 World Humanitarian Summit included a working group transformed into the Global Alliance for Urban Crises to help adapt the international humanitarian system toward the complexity of cities and the new modes of operation it will require. While the humanitarian system is learning to adapt to urbanization with new tools and processes, coordination among the civilian actors on the humanitarian side alone is ever more challenging with respect to three key attributes:

- 1) The increased number and diversity of actors in urban humanitarian response—from small local NGOs to community based organizations, to private companies, to local power brokers;
- 2) The trend towards more local decision-making and locally driven response by beneficiary communities and local governments exercising greater sovereignty, and;
- 3) The role that private markets and providers of goods and services play in recovery.

These characteristics are challenging coordination among humanitarian providers and providing new opportunities for humanitarian response.

Along with urbanization, climate change represents another significant challenge to vulnerable people around the world, and presents multiple implications for humanitarian response.

This working group explored key challenges and opportunities for civil-military coordination in this rapidly changing global environment. The following list summarizes key findings from discussions:

Challenges:

- Given the increasing speed at which the situation changes and response occurs in urban crises, the military's mode of operation (which requires liaison between UN Office for the Coordination of Humanitarian Affairs Humanitarian Civil-Military Coordination (UN-OCHA CMCoord), U.S. Agency for International Development Office of U.S. Foreign Disaster Assistance (USAID OFDA), and other coordinating civilian organizations – and then multiple layers of approval for

certain requests) presents a challenge. Such processes are already slow by civilian humanitarian NGO standards, which are routinely able to decide and commit to resource allocations within a cluster meeting. The current architecture for civil-military decision making remains less efficient and thus, even less ideal for the rapidly changing needs in urban crises.

- Not only are cities very different from one another, urban environments, especially rapidly growing ones, are extraordinarily heterogeneous with very different needs from one neighborhood to another. Accordingly, they represent microenvironments in terms of elements as basic as demographics, baseline infrastructure, and security. Climate change also impacts these cities and specific neighborhoods and systems in very different ways, based on underlying geography, natural environments and resilience efforts. Military response with pre-packaged kits and many foreign navies' forward-deployed assets are not as easily adaptable to such diverse environments. Military response, as currently coordinated and designed, is not as readily adaptable to the diversity of response environments that will present themselves in the future.
- The baseline humanitarian coordination model (i.e., the cluster system) is a very top-down model wherein the international humanitarian system comes into crises with resources and services to give to the population in need. Civil-military coordination is more easily envisioned and practiced in this model as two, top-down systems that can often coordinate effectively with one another. Urbanization is forcing a more bottom-up and locally driven humanitarian response. The current humanitarian architecture and tools are not well suited for this but they are changing to incorporate local communities and stakeholders. Civil-military coordination is challenged by this new, locally driven response in urban areas.
- *Climate change* as a term also connotes long-term changes and threats on a global scale while decision-makers, both elected and not, work and plan local actions on much shorter time frames (i.e., up to 5 years). Transforming and aligning military coordination for humanitarian crises that will increasingly be caused or magnified by climate change requires better understanding risks on shorter and more local scenarios.
- Urbanization has also meant increasing urban violence in many cities with violent death rates resembling, and even exceeding, some active conflict zones (e.g., internal or criminal violence, specifically in Latin American cities). Humanitarian crises in cities such as these and those with conflict represent significant challenges for militaries coordinating with humanitarians. Decisions about the role of militaries are political, with conflicting implications for the neutrality, operational independence and effectiveness of civilian humanitarian operations.
- Accepting climate change as a risk that should be responded to by militaries in

the realm of humanitarian efforts is challenged by the fact that many national governments do not want their militaries engaged in operations related to climate change, because it represents a scope of work that may be too burdensome if used as an entry and justification for operations.

Opportunities:

- Given the challenges for military engagement in acute urban humanitarian response listed above, there may be fewer opportunities to improve civil-military coordination in the acute phase and an increasing role and opportunity in the pre-disaster phase. Leveraging the U.S. Navy's efforts with certain nations to perform some disaster risk reduction work in coastal cities and expanding these efforts could represent a promising opportunity. Various proactive efforts have been conducted in the past, and their value is well described in a report by former Chief of Naval Operations Admiral Gary Roughead (U.S. Navy, Retired) and his colleagues at the Center for Strategic and International Studies. This frame-shift leverages several advantages, as follows:
 - The relationships built prior to a crisis between decision-makers and local officials have been highlighted as advantageous and even critical in the response, and these can be built in pre-disaster efforts;
 - The focus on risk reduction also allows a better use of resources, as preparedness efforts are pound-for-pound and dollar-for-dollar more efficient than response by mitigating disaster consequences, rather than only dealing with their effects;
 - Performing these activities in predictably high-risk cities, where politically feasible and in line with national interests, opens an area of military and naval engagement in humanitarian efforts as part of a potentially-larger grand strategy;
 - High-risk cities and international navies have shared interests; moreover, they often have common risks around naval bases that may be impacted by the effects of climate change and sea level rise.
- Better, more frequent and more robust simulations and exercises with specific involvement of municipal authorities, local NGOs and stakeholders from specific cities along with UN and major aid agencies could help improve humanitarian response and coordination for future crises. When appropriate, including international militaries in these simulations and exercises may allow key relationships to form prior to disasters. Also, frameworks and processes for coordination can be explored in the safety of an academic environment.
- Various militaries are engaged in efforts to improve coordination between them (e.g., the U.S. Pacific Command's *Rim of the Pacific* (RIMPAC) exercise), and sometimes include key civilian actors from the humanitarian response community. From RIMPAC and other similar exercises and simulations, there is an excellent opportunity to take

best practices from civilian-civilian and military-military coordination tools and methods and learn from them to improve civil-military coordination.

- Taking global scenarios and long-term predictions of climate change down to likely scenarios, over shorter time frames and for specific regions and cities, can help develop tools that decision makers can use in urban planning, disaster preparedness and humanitarian response planning.
- Increased interaction between academics from civilian and military universities – specifically those engaged in humanitarian research and education fields – allows a unique opportunity to conduct research and writing that tackles some of the most pressing issues facing vulnerable people and communities in both urban environments and due to climate change. This working group should continue to network and grow to expand its membership and specifically strive to conduct research and writing in areas that include the research agenda below, as well as others that are developed over time.

Issues for Further Research:

The following research areas and questions for further study were developed during the second day of conference discussions on October 27, 2016. There was widespread agreement across all participants that this initial list can easily expand with more discussions in the future.

- Mapping the trends in rapid urbanization and climate change, along with other hazards, can help identify hot spots for risk and help prioritize intervention cities that are of mutual interest. This effort could identify where and what type of resources should be forward deployed by civilian and military organizations for expected scenarios. This effort may also assist governments in defining future naval force structure requirements, fleet organization, and possibly even influence ship designs.
- Modeling future regional scenarios with an understanding of the increased severity and frequency of climate-based disasters and their impacts on growing cities, could allow for a better understanding of the overall capabilities and capacities required in five-year planning scenarios.
- Local actors have played an increasingly pivotal role in urban humanitarian response as described in the above challenges. Where appropriate, domestic militaries should engage in network mapping with key stakeholders in various cities where a military may already be based or actively working, as the proactive engagement highlighted above can strategically build valuable relationships prior to a disaster.
- As urban response moves away from supplying goods and services, towards a trend of recovering the local markets and economies that define cities, NGOs have begun to understand supply changes and logistics while supplying cash to spur demand. The military's strength in logistics and wholesale supplies could be adapted to mapping

the larger (i.e., national/regional) forces in supply chains to identify key interventions for aiding in the recovery of pre-existing markets.

- With increasing urban violence and the risk for destabilization into violence after natural disasters, security becomes a principal factor in humanitarian response. In some circles, there has been advocacy for an increasing role for militaries to provide security to maintain peace, ensure humanitarian corridors, or uphold international norms. This call comes out of the need to intervene in such complex crises as Syria; however, its myriad impacts are not well studied to determine the appropriate scope and nature of military engagement for provision of security. The expected benefits are not well studied in terms of effectiveness and sustainability of militaries providing security in complex humanitarian crises. The negative externalities are even less understood. For example, research into the potential impacts on local power relations would be valuable as security is not apolitical. One side, whether a legitimate authority or not, may be advanced by foreign militaries providing security. Additionally, research could also investigate the impact on perceptions of NGOs and humanitarian actors that value neutrality or the act of information sharing. Previous examples of foreign militaries providing a security component during a humanitarian response will likely provide meaningful case studies for research.

- Studying instances when civil-military coordination in urban environments has been deemed effective and successful may help isolate best practices and models of success.

- Militaries, universities, humanitarian organizations, and local authorities have a shared interest in developing the appropriate tools for vulnerability assessments, situation assessments and monitoring and evaluation (M&E) tools that are underdeveloped for urban environments. Coordinating with UN OCHA's CMCoord Section may be a useful starting point to explore these areas and bring together relevant actors to coordinate engagements.

- Embedding researchers into military, civilian, and civil-military simulation/training exercises as well as actual humanitarian operations can assist with the development of appropriate research methods, tools and M&E frameworks, and can improve upon the retrospective evolutions currently undertaken to effect positive change in the future.

- At a very basic level, understanding the knowledge and perceptions among military personnel about their role in crisis response, the humanitarian system and specifically urban environments and climate change impacts could prove useful to better develop appropriate training materials. This can be done at various levels among key decision makers. For example, at the field level (boots on the ground), operational level (regional military staff headquarters) and strategic level (national military headquarters) – possibly coordinating through UN OCHA CMCoord Section for various militaries. Similarly, a study on the current perceptions of militaries among UN agencies, NGOs and municipal authorities could also prove valuable.



Civilian-Military Humanitarian Response Program

The U.S. Naval War College's Civilian-Military Humanitarian Response Program (HRP), led by the College of Operational & Strategic Leadership, was formally established in December 2015 after four years of collaborations with the Harvard Humanitarian Initiative (HHI) and other key universities and organizations. HRP's mission is to partner and network with leading universities and humanitarian organizations in order to advance civilian-military coordination during complex emergencies and natural disasters, and improve the U.S. Navy's effectiveness in conducting humanitarian assistance and disaster response operations through innovative education, research, and simulation activities.

Through extensive partnerships and collaborations with the humanitarian response community, the HRP aims to:

- ***Improve the coordination*** between nongovernmental organizations (NGOs), intergovernmental organizations (IGOs), and U.S. and international militaries during natural disasters and complex emergencies.
- ***Improve the U.S. Navy's effectiveness*** in conducting humanitarian assistance and disaster response operations.
- ***Foster educational opportunities*** for leaders and practitioners across the humanitarian response community.
- ***Advance the understanding*** of rapidly evolving frameworks and information communication technologies used in humanitarian responses and assist with innovation efforts in this area.

To achieve these objectives, the HRP engages in the following activities:

- ***Network and partner*** with leading universities and organizations in the humanitarian community.
- ***Conduct evidence-based research*** on civilian-military engagement and coordination during complex emergencies, natural disasters, and exercises.
- ***Develop and teach innovative educational programs*** for U.S. and international militaries, civilian universities, NGOs, and IGOs.
- ***Develop innovative training through humanitarian exercises and simulations*** for U.S. and international militaries, civilian universities, NGOs, and IGOs.
- ***Convene various forums*** to assist a network of international partners and key stakeholders to explore challenges and opportunities in civilian-military humanitarian coordination.

In 2017, HRP will accelerate and expand on its existing partnerships with Harvard, the United Nations Office for the Coordination of Humanitarian Affairs, and Brown University; and collaborations with MIT, MIT Lincoln Laboratory, the Center for Excellence in Disaster Management, and the Uniformed Services University of the Health Sciences; to other universities, NGOs, and IGOs who have expressed an interest in working together in the humanitarian space.

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