# POLICY IMPLEMENTATION IN UNSTABLE STATES

# SUCCESS AND FAILURE OF HUMANITARIAN AID POLICIES IN HAITI

MARTINE TRIJNTJE BETTE WIJNSTRA – S1743511

4TH OF JULY, 2018

BACHELOR THESIS

EUROPEAN PUBLIC ADMINISTRATION

UNIVERSITY OF TWENTE, ENSCHEDE

ABSTRACT

This study focusses on the successes and failures of policy implementation in unstable states. It is interested in the factors that hamper or stimulate policy success. In order to get a deeper understanding of the effects of fail and success factors on a policy, a focus is put on one single factor: 'the level of state instability'. With the use of this factor and the theories from Buss (2015) and Lisner (2016), the following research question is formulated: **'How does the level of state instability in Haiti contribute to the implementation of the humanitarian aid policies of the four biggest aid organizations?'** State instability has consequences that reach to different fields of intervention and different types of goals of aid organizations. With the use of a case study, this research tends to find out what consequences the state instability of Haiti in 2010 had on the cooperation between the aid organizations and the government, the lack of funding and resources, the ability to tackle unexpected changes and the legitimacy of the policy, and how this again influences the goal achievement of the policies. The units of analysis are the four biggest humanitarian aid organizations: IFRC, Oxfam International, CARE and the World Food Programme (Bhat, 2016).

# TABLE OF CONTENT

The earthquake hit Haiti January 12, 2010 at 4:53 PM with a magnitude of 7.0, and was soon followed by two aftershocks of magnitudes 5.9 and 5.5 (Pallardy, 2010). According the Government of Haiti, the earthquake resulted in approximately 230.000 deaths and over 2 million internally displaced persons (IDPs) living in temporary settlements, 600.000 IDPs living with host families, and over 3 million affected in total (Tulane University, 2011). The map below shows the epicentre of the shock (Pallardy, 2010).
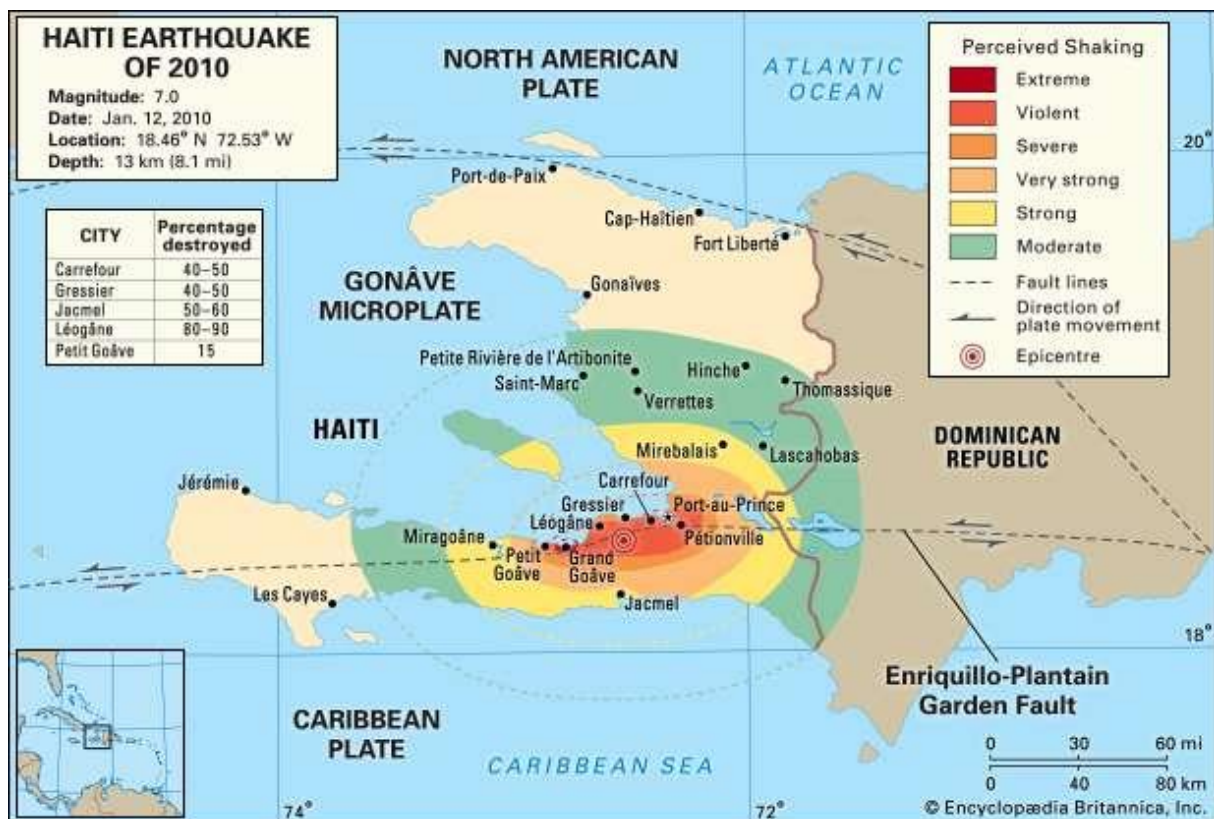
## 1. INTRODUCTION

The humanitarian aid industry has grown to the 5$^{th}$ biggest economy in the world worth annually 160 billion dollars. More than 10.000 humanitarian aid organizations are active around the world (Polman, 2013). With this amount of help and money, one could imagine that a humanitarian crisis can be solved. Unfortunately many humanitarian aid policies do not achieve their goals. People are living under barbaric circumstances in crisis areas, therefore it is important that policies are well implemented. Humanitarian aid is crucial to build up a country after a disaster. Besides saving lives by providing water, food and medicines, it can help to build up an entire economy (Vaux, 2006).

There are several reasons why aid policies often do not succeed. The aim of the policy can be over ambitious, the design of the policy can be incorrect, or the wrong instruments have been selected, (McConnel, 2015), implementation can fail or disrupted by unexpected changes. A lack of money, a lack of support, principle-agent issues, oversight failures and a lack of sufficient coordination between the different actors involved can jeopardize goal achievement (Howlett, 2009).

Nevertheless, in Haiti policy failures were made. An earthquake hit Haiti in 2010, leaving 200.000-300.000 casualties. The first six months after the earthquake hit Haiti in 2010, the humanitarian organizations together accomplished a lot. Five to seven billion dollars were gathered by governments and people and 10.000 aid organizations vested themselves in Haiti to build up the country (TEDx Talks, 2013). '1,2 million people had access to safe drinking water, 1,5 million people received emergency shelter materials, to 2.1 million household nonfood item kits were distributed, 11,000 latrines were installed; 90% of displaced people in Port-au-Prince had access to adjacent health clinics; 195,000 children benefited from temporary learning spaces; 550,000 children and pregnant or lactating women received supplementary feeding; one million people benefited from cash for work programmes; 5,900 people relocated from imminently dangerous locations; 142,000 people received agricultural inputs for spring planting; 2,047 separated children received psychosocial support and 337 were reunited with their families' (OECD, 2011:2).

Besides the achievements, many goals from the aid organizations were not met. An evaluation report published three years after the earthquake shows that only 5% of the people who lost their houses received a new one (TEDx, Talks, 2013). According to UNICEF, after a year 550.000 people were still living in camps, more than half of the population was surviving on less than a dollar, and the administrative structures could not meet the basic needs of those affected by the earthquake (Relief Web, 2011). A serious problem that hampered the implementation of aid programmes was the cholera outbreak. The outbreak was caused by aid workers from Nepal who brought the cholera virus with them that spread through the water system, killing almost 8000 people and infecting half a million people (TEDx Talks, 2013). The cholera outbreak hampered the recovery efforts, due to a tense security situation (American Red Cross, 2012). The food prices spiked on the account of the

destruction of ports and transport network, leaving families in debt to buy food (OECD, 2011).

How it is possible that with the goodwill of all the people who donated money and with the amount of aid organizations available to end this crisis, these problems could arise? According to Buss (2015) an important factor that hampers policy implementation is the level of state instability of Haiti. According to Buss 'The government of Haiti has not been able to provide even the most basic services- education, justice, welfare and security- to its citizens' (Buss, 2015:35). 'Donors can go far to improve aid effectiveness, but Haiti will languish until its leaders and people find common ground and compromise in managing their country' (Buss, 2015:1).

This study aims to find out if the positive relationship between the level of state instability and the level of policy failure that Buss (2015) is suggesting, existed in Haiti for the policies of the humanitarian aid organizations. Therefore the following research question is asked: '**How does the level of state instability in Haiti contribute to the implementation of the humanitarian aid policies of the four biggest aid organizations?'** Extensive literature study has been conducted on the failures and successes of policies. Researchers like Vaux (2006), McConnel (2010, 2015), Howlett (2009) and Polman (2013) investigated which factors lead to the success and failures of policies. Some of them in the field of the humanitarian aid sector. Their theories are presented the theoretical framework chapter. By analyzing the evaluation reports from the four biggest aid organizations operating in Haiti in 2010, this study will explore the effects of the level of state instability on the level of goal achievement of the aid policies. When informed about the different effects, this paper will be of societal relevance, because of the increased information available about possible difficulties aid organizations will encounter when implementing their policies in unstable states. Next to this, this paper will add to the understanding of our knowledge on implementation of policy under extreme circumstances.

## 2. THEORETICAL FRAMEWORK

This chapter will focus on the reasons why policies do not reach their objectives, a topic on which extensive literature has been written. It starts with an explanation of what is meant with 'policy failure'. It follows with five general reasons why policies sometimes do not reach their objectives. After this, the 'unstable state' is being discussed, together with the negative consequences the instability of a country has on its society. Once this has been cleared out, the effects of instability on policy implementation are discussed. This chapter concludes with hypotheses on the influences the negative consequences have on the policy implementation of the aid organizations in the case of Haiti in 2010.

## 2.1 A 'FAILED' POLICY

An easy way of conceptualizing 'failure' is: when a policy did not achieve its intended goals. But what is meant with these goals? And who decides when these goals are (not) met? As Bovens and 't Hart (1996) stated it 'failure is a judgement about events that in contingent on who is judging it, the measure they use, the information bias, and the time period they asses' (McConnel, 2015:225). The issue of 'failure for whom?' in humanitarian aid policies is about 'what is the target group of the policy?' The following issue that needs attention is the grey area between success and failure. Failure nor success are rarely 'all or nothing' (McConnell, 2015). Policies often have multiple goals to achieve, which makes success and failure difficult to define. Making it more difficult, 'policies that failed in the short term might may yield success in the long term' (McConnel, 2015:229).  Many researchers claim to have the right definition of policy failure. Since the conditions for every policy are different, it might not even be possible to have a true  overarching definition. Since this study is about the extent to which the aid organizations achieve their goals, the definition in this case is a rather simple one: a policy fails when it did not achieve its intended goals.

One problem that occurs with this definition is the extent to which organizations specify their goals. It is rather simple to consider strategic or operational goals that are for instance about building or distributing as a failure or success when they are specified. An organization can suggest that a policy is successful when they managed to build the amount of houses that they aimed to build (McConnel, 2010). Not all goals are stated in this clarity, and goals can fail in different degrees. Some goals are stated in a vague way. An aid organization can, for instance state that 'we aim to tackle food insecurity and improve the living conditions for the most vulnerable'. But when is the food insecurity tackled? Who are the most vulnerable? And when are their living conditions improved?  Taking into account these arguments and theories, the definition of policy failure made by McConnel (2015:221) is used for this research: 'a policy fails, even it is successful in some minimal respects, if it does not

fundamentally achieve the goals the proponents set out to achieve, and opposition is great and/or support is virtually non-existent'.

There are a number of reasons in general why policies are likely to fail. The first reason is that the aim of the policy is not realistic. It is simply impossible to reach the goals in the given time frame, because they are over-ambitious. The second reason is that the design of the policy is incorrect. For example, a government is unable to use the instruments that are needed, or has chosen the wrong instruments to implement a policy (McConnell, 2015). The third reason is that the theory on which the policy is based is incorrect, resulting in a wrong perception on what causes the problem, or what the probable effects are of the policy alternatives (Howlett, Ramesh, Wu, 2015). The fourth reason why policies can fail concerns unexpected changes in the field. Examples of these changes can be an attack on a refugee camp or hospital, or the bombing of roads. These attacks can hinder the policy implementation in a way that it forces the organization to change the objectives of the policy. The fifth reason why policies can fail concerns the implementation of the policy in which 'the aims of the decision-makers have failed to be properly or accurately translated into practise' (Howlett, 2009:160).

## 2.2 FAIL FACTORS IN THE IMPLEMENTATION PROCESS

There are many factors which might explain policy failure in the implementation process. According to Howlett (2009:161) causes of implementation failures are 'a lack of funding, legitimacy issue, principle-agent problems and oversight failures'. A lack of funding hampers the organization to distribute the needed amount of food and medicines into the crisis areas (UN News, 2018). On the longer-term, the organizations might not be able to round up their project properly, leaving an area with unfinished business.

The legitimacy issue is about the support an organization has to implement a policy. Policy might fail 'if support is virtually non-existent' (McConnel, 2015:121). The support has to come from different stakeholders involved, for example from the target group the organization is trying to help. When the people in need of assistance have different perceptions of political issues then the organization has, it may result in a refusal of the target group to cooperate with the organization and withhold information that might be important for security (Vaux, 2006). To give an extreme example of an issue that occurred from the principle-agent relationship, is the decision-makers working for Oxfam Novib who were unable to control their senior Oxfam officials who had cavorted with prostitutes after the 2010 earthquake in Haiti (Fletcher, 2018). This problematic principle-agent relationship is closely related to the issue of oversight failures. Oversight failures can as well be found in the unregulated and unexamined NGO industry. An example of this is Mohammed el-Halaby, who is the manager of operations in Gaza of the NGO World Vision and could funnel 60% of the World

Vision Gaza budget to terrorist groups (NGOmonitor, 2018).

Next to the reasons given by Howlett (2009) there are other reasons which may hamper policy implementation. A lack of sufficient coordination between different actors is another reason for policy to fail. According to the OECD (2015) humanitarian aid organizations should work closely together with governments of developing countries. Developing countries must develop themselves, and in order to achieve this, 'donors and developing countries must establish genuine partnerships, in which they are jointly and mutually responsible for developing results' (OECD, 2015:4). When this coordination lacks, the goal to bring development to a country, will take much more effort to achieve. According to Polman (2013), it is necessary for the different aid organizations who work on the same type of goals, to work together and coordinate their work. If each individual aid organization follows its own plan, it can result in chaos and might worsen or prolong a crisis (Polman, 2013). Next to the cooperation with the government or with other aid organizations, the humanitarian organizations should work together with local communities and organizations (Mosselmans, 2016). Mosselmans (2016) argues that the local organizations speak the language and have knowledge about local conditions, markets and habits making it more efficient when implementing local aid policies. 'To be truly effective in the future, disaster response is going to have to be much more inclusive of local capabilities' (Mosselmans, 2016:6).

## 2.3 STATE INSTABILITY

While the other reasons mentioned before are important for reaching the objectives of a policy, this study focusses on one specific fail factor: state instability. State instability has different consequences, reaching to different dimensions in society. This part starts an explanation about the general effects state instability has on the functioning of a society. It follows with the effects state instability could have on the implementation process of an aid policy, by putting a special focus on some of the fail factors discussed in the first part of this chapter.

### 2.3.1 THE EFFECTS OF STATE INSTABILITY ON THE SOCIETY

Buss (2015) did extensive research on state instability and the negative effects it caused for its country and external actors. Instability can lead to violence, the breakdown of institutions, displacement, humanitarian crisis and other emergencies. In the case of Haiti in 2010, Buss argues that the, 'perpetual instability infects and eats away every aspect of governance in Haiti; there is endemic corruption; poor distribution of wealth; social injustice and a lack of leadership to break the chains to bind the dysfunctional society' (Buss, 2015:1).

Lisner (2016) did research on the effects of unstable states on the society and agrees with Buss

(2015). Unstable states cannot fulfil the demands of a statehood, which are 'ensuring peace and stability', 'the rule of law' and 'good governance' (Lisner, 2016:2). The consequences of this failure are rarely isolated and are causing disruptions for international organizations. The unstable countries generate refugee flows, that become a major disruption for the international community. Unstable states fail to prevent external spill over effects like 'insurgent movements, organized crime and drug-trafficking networks, piracy, pandemic disease and ecological disasters', making it possibly more difficult to successfully implement policies (Lisner, 2016:10). The non-governmental organization Fund For Peace (2016:12) agrees with Lisner (2016) and argues that unstable states 'can have serious percussions not for only that state and its people, but also for its neighbours and other states halfway the globe'

Next to problems that occur externally, the instability is as well causing major problems for the internal structure and stability of a country. When unstable states cannot provide the demands of a statehood, the capacity to respond to national disasters is low (OECD, 2011). The political response is weak and the governmental bodies cannot response in a fast adequate way (OECD, 2011). According to the Fund For Peace (2016:12), 'pressures on a population, such as disease and natural disasters make it difficult for the government to protect its citizens or demonstrate a lack of capacity or will'. This can result in food scarcity, malnutrition, water scarcity, decease and mortality. This can be problematic when urgent changes are needed. Once a natural disaster hit an unstable country, the constraints of the public services can pose a security threat. This include pressures related to Internally Displaced People camps (IDP), the refugee camps and the capacity of the country to absorb this. Unstable states have far reaching consequences affecting all dimensions of a country (Fund for Peace, 2016).

As mentioned before by Buss (2015:1) instability 'infects and literally eats away every aspect of governance'. According to the Fund For Peace (2016:13), the 'provision of health, education, and sanitation services, among others, are the key role of the state'. These include pressures and measures related to education provision, water and sanitation, infrastructure, quality healthcare, internet access, energy reliability and roads. An unstable state is mostly not able to provide these basic human needs, affecting the most vulnerable people of a society. The lack of provision to basic human needs can easily lead to uneven economic development (Fund for Peace, 2016).

The social economic inequalities between different layers of societies concerning income and the lack of ability of the state to provide the citizens with economic opportunities can possibly lead to an economic deficit, government debt, unemployment, decreasing purchasing power and GPD per capita. Once the gap between rich and poor is too big, it can result in discrimination, the feeling of powerlessness and ethnic violence. In many unstable states, the security apparatus do not have a monopoly on the use of legitimate force, 'which can result in an internal conflict, small arms proliferation, riots and protests, and political prisoners' (Fund For Peace, 2016:13).

To mention at last, corruption and the lack of representative government directly undermine

the social contract. This results in corruption within governmental bodies, a low level of political participation and democracy, protests and demonstrations and power struggles. The lack of governmental effectiveness and a highly centralized government can directly lead to a deadlock between national and local leaders (Fund For Peace, 2016). While there are many other far reaching consequences that the instability of a government can have on the internal and external stability of its country, it is important to mention that all these factors are interrelated and should be tackled from its core: the government.

2.3.2. EFFECTS OF INSTABILITY ON POLICY IMPLEMENTATION

This part will explain the effects of state instability on a more specific field: policy implementation of aid organizations. The far-reaching effects of state instability do as well affect the ability of aid organizations to implement their policies in the unstable states. As mentioned before by Buss (2015:1) 'perpetual instability infects and eats away every aspect of governance in Haiti; there is endemic corruption; poor distribution of wealth; social injustice and a lack of leadership to break the chains to bind the dysfunctional society'. These factors supposedly negatively affect the implementation of aid policies. He argues that state instability is the overriding cause of aid failure (Buss, 2015). The proof that Buss has for its claim is that 'after spending more than $17 billion in aid since the 1950's, there has been little progress in improving the lives of the average Haitian' (Buss, 2015:14).

In order to implement a policy, aid organizations rely to a certain extent on the facilities and cooperation of a government. The arguments made in this part refer back to the fail-factors and the effects of state instability. Policies can fail due to a lack of sufficient coordination between the actors involved. As mentioned in the previous part, the instability of a country negatively affects the coordination between an aid organization and a government, because the instability leads to a slow decision-making process and a lack of national capacity to respond to urgent needs. If the unstable government is not able to fulfil its promises and its purposes as a government, the cooperation, on which these expectations are build, will fail.

This rationale links closely with the second fail factor: unexpected changes in the field. If an unstable government does not have the capacity to respond to a disease of a natural disaster, the aid organizations have to take over the tasks of the government and set up the emergency response themselves. This change forces the aid organizations to change their objectives and the needed instruments, they might not be able to produce leading to a failure of the objective.

The third fail-factor is a lack of funding or resources. If an unstable country is corrupt, not all the money will end up at the right place, leading to a lack of funding and a possible failure of the objective. The African Union estimated that corruption costs the continent in 2002 $150 billion. They also argue that the African governments rely on foreign aid, without fighting corruption (Hanson,

2009).

The fourth fail-factor concerns oversight failures. Oversight failures can also be caused by a corrupt government. If the money flows to the wrong parts, an aid government cannot monitor the money stream, leading to a failure of the objective.

This lack of control over the situation closely related to the fifth fail factor: the issue of the principle-agent relationship. If the aid organizations cooperate with an unstable government, it is fulfilling the task of the principle. The government is fulfilling the task of the agent. The principle has to trust the agent to fulfil its task upon the conditions the aid organization wants it to be implemented. The first issue that appears is the uncertainty the aid organization has about the preferences of the government. The conditions might not be favourable for the government, wherefore the principle cannot fully trust the agent to execute its task. The second issue that appears is that unstable governments are uncapable in fulfilling their governmental tasks, leading to a failure of the execution and the principle-agent relationship.

The sixth fail-factor is a lack of legitimacy. As mentioned in the previous part, an aid policy needs to have support in order to be legitimate and successful. The instability of a country can negatively affect the support of a policy, because of the different views an unstable country has towards the provision of needs for its citizens than the aid organizations have. As mentioned in the previous part, unstable countries lack the ability to provide its citizens with basic human needs, economic opportunities and socio-economic rights. This lack of support could result in a lack of cooperation towards aid organizations, resulting in a failure of the policy.

## 2.4 MODEL AND EXPECTATIONS

This study is focussed on policy implementation in unstable states, wherefore it is of interest to look at the extent to which the state instability of Haiti hampers the policy implementation of humanitarian aid organizations. As explained with the use of the theories from Buss (2015), Lisner (2016) and the OECD (2011) the instability of a country has far reaching consequences. The model on the next page shows the relationship between the different types of instruments used and the level of goal achievement of aid organizations. The level of state instability supposedly has a negative influence on the implementation processes of the aid organizations, which in turn negatively affects goal achievement of these aid organizations.
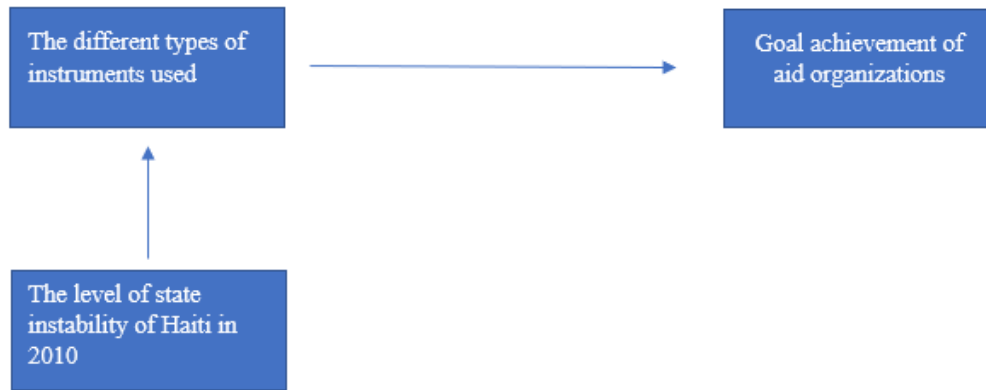
The literature has discussed different types of instruments that are crucial in achieving the objectives of the aid organizations. Four of these instruments are chosen to be further studied in this research: the cooperation between the aid organizations and the government of Haiti, the lack of funding and resources, the ability to tackle unexpected changes and the lack of legitimacy. Following the rationale behind the effects of the state instability on these instruments, the following four expectations are derived:

*SQ 1: The level of state instability in Haiti in 2010 negatively affected the cooperation between the aid organizations and the government of Haiti.*

*SQ 2: The level of state instability in Haiti in 2010 increased the lack of funding and resources of the aid organizations.*

*SQ 3: The level of state instability in Haiti in 2010 made it more difficult for the aid organizations to tackle the unexpected changes in the field.*

*SQ 4: The level of state instability in Haiti in 2010 increased the lack of legitimacy of the aid policies, resulting in a failure of the policy.*

## 3. METHODOLOGY

### 3.1 RESEARCH DESIGN

The research question posed in this research is an descriptive question and can be answered with the use of a qualitative data analysis. The research design used is therefore descriptive and is a case study. This type of study provides the ability to 'address the complexity and contextual conditions' of one single case (Yin, 2013:322). This is needed to conduct in-depth research on the specific effects of the state instability of Haiti on the implementation processes. The case of Haiti takes place in a highly complex setting with multiple actors involved and a lack of efficient decision-making capacity from the government. Data will be observed from just before the earthquake of 2010 till 5 years after the earthquake, in order to get an broad overview of the different effects the instability had on the short- and longer-term implementation of the policies. This study is therefore characterized as a longitudinal study. Longitudinal studies observe the same subjects over of time, sometimes lasting many years (IWH, 2015).  The advantage of this study is that it enables the research to develop patterns which are useful in determining causal relationships. Next to this, a longitudinal study provides high accuracy when observing changes. The interrupted-time series would not have been a fit for this study, because it focusses on one moment of time before, and after a situation, wherefore not providing enough information to answer the question accurately. A cross-sectional study would increase the validity of this study via the comparison between different cases, but is not feasible due to the limited time frame.

This study will make use of secondary data via desk research. Two types of secondary data will be used to increase the validity of the desk research, namely internal and external secondary data. Internal secondary data comes from the aid organizations themselves and external secondary data comes from independent organizations who evaluated the implementation processes of the organizations. Conducting interviews on the people who were affected by the policies from the aid organizations would give this study greater validity, but is not possible due to the available time and resources.

### 3.2 UNITS OF ANALYSES

In order to find out whether the argument of Buss (2015) is also applicable for the case of Haiti in 2010, and to find out whether the fail-factors presented in the hypotheses are also relevant for the case of Haiti in 2010, an in-depth research is conducted on four aid organizations. The units of analysis in this research are the policies of four humanitarian aid organizations, namely the IFRC (International Federation of Red Cross and Red Crescent Societies), Oxfam International, World Food Programme and CARE (Cooperative for Assistance and Relief Everywhere). In order to find out how the state

instability influenced policy failure, it is necessary to study multiple different aid organizations. This will increase the reliability of the outcome and will give a broader overview of the effects of instability on different types of goals and intervention methods used by the different aid organizations. These four specific aid organizations are chosen, because they are the four biggest humanitarian aid organizations, wherefore there is a higher chance of finding enough data and critical independent evaluation reports (Bhat, 2016).

## 3.3. OPERATIONALIZATION

### 3.3.1. CONCEPTUALIZATION

Before the concepts can be operationalized, it is of importance to define the main concept of this study 'state instability'. A definition of state instability according to the OECD (2018) is 'the combination of exposure to risk and insufficient coping capacity of the state, to manage, absorb or mitigate those risks. State instability can lead to negative outcomes including violence, the breakdown of institutions, displacement, humanitarian crisis and other emergencies' (States of Fragility Report, 2016:22). But this definition does not imply the definition of the 'level of state instability'. The World Bank developed Worldwide Governance Indicators which estimate the level of state stability for over 200 countries. 'The World Bank Governance Indicators report six aggregate governance indicators over the period of 1996-2014, covering i) Voice and Accountability, ii) Political Stability and Absence of Violence/Terrorism, iii) Government effectiveness, iv) Regulatory Quality, v) Rule of Law and vi) Control of Corruption' (World Bank, 2015:1). With the use of these indicators it can be estimated to what extent a state is stable. Their range goes from -2,5 (weak governance) to 2,5 (strong governance).

Taking into account the case of the Haitian government in 2010, fewer than 15% of the governments are performing less well than Haiti when it comes to state stability. 'Government effectiveness, rule of law and corruption scores place Haiti at the very bottom of the worst governed tier of countries' (Buss, 2015:16). The World Bank Governance Indicators of 2010 show that 'Voice and Accountability' scored -0,7, 'Political stability and Absence of Violence /Terrorism' scored -0,9, 'Government effectiveness scored -1,7', 'Regulatory quality' scored -1 in 2010, 'Rule of law' scored -1,4 and 'Control of Corruption' scored -1,2 (World Bank, 2018). Appendix B shows the graph with these results from the World Bank Governance Indicators.

The World Bank Governance indicators are criticized for its accuracy in comparing governance over time and across countries. Next to this, they are based on perceptions, not on actual data and the concepts are correlated, leading to a possibly wrong perception of the real situation of a country (Apaza, 2009). These facts need to be taken into consideration when reading the outcomes of the indicators.

Next to the World Bank, there is another important indicator, namely the Fragile State Index.

The Fragile State Index measures the fragility of a country with the use of four indicators: cohesion, economic, political and social as shown below (Fund For Peace, 2018). While fragility is not the same as instability, the indicators it entails overlap to a great extent with the World Bank Governance Indicators and with the definition of the level of state instability. Next to this, the Fragile State Index defines an accurate reality of the inadequacies of the Haitian government. The twelve conflict risk indicators from the Fragile State Index are used to measure the condition of a state at any given moment. 'The indicators provide a snapshot in time that can be measured against other snapshots in a time series to determine whether conditions are improving or worsening' (Fund For Peace, 2018:2).



| COHESION INDICATORS | ECONOMIC INDICATORS | POLITICAL INDICATORS | SOCIAL AND CROSS-CUTTING INDICATORS |
| --- | --- | --- | --- |
| C1: Security Apparatus | E1: Economic Decline | P1: State Legitimacy | S1: Demographic Pressures |
| C2: Factionalized Elites | E2: Uneven Economic Development | P2: Public Services | S2: Refugees and IDPs |
| C3: Group Grievance | E3: Human Flight and Brain Drain | P3: Human Rights and Rule of Law | X1: External Intervention |

These indicators can rank from 0 to 10. 0 is stable and 10 is extremely fragile. All the twelve indicators are given a score and these scores are summed up to a maximum of 120 and a minimum of 0. The results for Haiti from 2009 to 2013 for all twelve indicators can be found on the next page. What is noticeable is that Haiti's rank in the State Fragility Index before the earthquake was already high. In 2009, Haiti ranked 12th out of 178 with a total of 101.8 points.

| | | | C1 SA | C2 FE | C3 GG | E1 EC | E2 UD | E3 HF | P1 SL | P2 PS | P3 HR | S1 DP | S2 RD | X1 EX |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Haiti | 2009 | 12th | 101.8 | 8.4 | 8.3 | 7.3 | 8.9 | 8.2 | 8.6 | 9.2 | 9.5 | 8.5 | 9.3 | 5.8 | 9.8 |
| | 2010 | 11th | 101.6 | 8.2 | 8.4 | 7.3 | 9.2 | 8.3 | 8.6 | 9.3 | 9.5 | 8.3 | 9.3 | 5.6 | 9.6 |
| | 2011 | 5th | 108.0 | 8.4 | 8.8 | 7.3 | 9.2 | 8.8 | 8.9 | 9.4 | 10.0 | 8.0 | 10.0 | 9.2 | 10.0 |
| | 2012 | 7th | 104.9 | 8.2 | 9.0 | 7.0 | 9.5 | 8.6 | 8.8 | 9.3 | 9.3 | 7.7 | 9.5 | 8.1 | 9.7 |
| | 2013 | 8th | 105.8 | 7.9 | 9.0 | 7.0 | 9.7 | 9.1 | 9.1 | 8.8 | 9.6 | 7.6 | 9.6 | 8.6 | 9.9 |

In 2010, Haiti ranked 11th in the most fragile countries out of 178 countries measured. The year after the earthquake, this rank worsened to the 5th place (Fund For Peace, 2018). A graph which specifies the results of these twelve indicators over the last decade can be found in Appendix B (Fund for Peace, 2018).

3.3.2 Measuring the concepts

This paragraph discusses the operationalization of the concepts used in the four expectations. Because of the descriptive research approach, the four concepts are not the independent, nor dependent variables of the research question. Below the four concepts are given, together with their explanation.

| Factors | Explanation |
| --- | --- |
| A lack of sufficient cooperation | There is a lack of sufficient cooperation when due to the cooperation, the goals of the policy are not met or are being hampered. |
| A lack of funding and resources | There is a lack of funding and resources when due to this lack, the goals of the policy are not met or are being hampered. |
| Inability to tackle unexpected changes | An aid organization is unable to tackle an unexpected change when it leads to the failure of the policy, or when it hampers the policy implementation. |
| Lack of legitimacy | The aid organization lacks legitimacy when the actors involved do not support the policy. |

With the use of a desk research, this study aims to find if these four concepts are present in the implementation process of the policies of the four aid organizations. Next to these concepts, the research will have a deeper look into other possible fail-factors, that will come up while doing the research, in order to give a broad and inclusive answer to the question in what ways the level of state instability the implementation process hampered.

3.4 Data collection and handling

In order to find out what difficulties the aid organizations encountered while trying to achieve their objectives, a desk research will be conducted on the (in)dependent evaluation reports of the aid policies. The four humanitarian aid organizations all made extensive evaluation reports, ranging from 1 to 5 years after the earthquake. Almost of them have in common that according to their reports, the policies succeeded. Aid agencies may recognise their failings, but are unwilling to address them because of the competition between aid organizations and the donor money (Anthony, 2010).

Therefore, aid organizations rarely criticise themselves, they rather call it 'lessons learned' or 'challenges for the future'. To avoid this bias, independent research is used to get a broader view of the relationship. The organizations that are key to the critique on the implementation processes of the aid organizations are journalists and research offices. Researchers have written many articles about the effectiveness of aid policies, also in Haiti.

## 3.5 DATA HANDLING

The relevant information will be retrieved from all the dependent and independent evaluation reports. The general constraints which the Haitian government caused for the implementation processes are put in the context chapter. After this, the individual organizations are taken under analysis. At first a distinction is being made between the different goals the organizations tried to achieve. Secondly, the different intervention methods are discussed which the aid organizations used to implement their policy. Thirdly, the actors involved are being discussed and lastly, the specific obstacles the government caused for the aid organizations are given. Once the detailed description about the aid organizations is finished, the analysis will look if the four fail-factors discussed in the expectations are present in this case study. With the use of all the information retrieved from the description and the analysis, an answer can be formulated to the research question.

## 4. CONTEXT

Before the aid organizations are evaluated, it is necessary to provide context surrounding the topic of state instability of Haiti in the year of 2010. In this chapter, the effects of the earthquake on the government together with the governmental response are being discussed. Next to this, the general obstacles for the aid organizations to implement their policies which are caused by the instability are specified.

At January 12, 2010 an earthquake hit the Haitian Capital city Port-au-Prince with a magnitude of 7.0, and was soon followed by two aftershocks of magnitudes 5.9 and 5.5 (Pallardy, 2010). The earthquake had a devastating impact on the already vulnerable island, leaving more than 200.000 people dead and more than a million homeless (Oxfam Novib, 2011). A third of the population is estimated to be food insecure (WFP, n.d.).

Before the earthquake, Haiti suffered from 'extreme poverty, gross inequality, chronic political instability and weak corrupt state institutions' (Oxfam Novib, 2011:2). It was the poorest country in the Western Hampshire and had the most unequal distribution of income. 72% of the people lived with less than $2 a day. 80% of the people did not have a formal job and 86% of the people lived in slums. Nevertheless, just before the earthquake the country enjoyed modest economic growth and greater political stability (Oxfam Novib 2011). 'The  World Bank's Worldwide Governance Indicator's for 1996-2014 showed Haiti among the worst-governed countries, with fewer than 15% of governments performing less well than Haiti. Government effectiveness, rule of law and corruption scores place Haiti at the very bottom of the worst governed tier of countries' (Buss, 2015:16). 'Haiti fared poorly in state identity, basic public administration, free and fair elections, effective power to govern, separation of power, independent judiciary, performance of democratic institutions, commitment to democratic institutions, political parties interest groups and social capital' (Buss, 2015:16).

The instability of the Haitian government had devastating consequences for the country's ability to rebuild itself after the earthquake hit the country. Haiti had many underlying vulnerabilities. The political actors' response was weak and the national response capacity was low. 'The very actors that would normally be expected to lead and manage the response were themselves victims of the earthquake. Many governmental buildings were destroyed and many civil servants died or had to take care of their own families. The National Disaster Risk Management system, the emergency operation centre, the Direction de la Protection Civile, the fire station, the schools, hospitals, seaport, the main airport and roads were mainly damaged or destroyed' (OECD, 2011:2). 20 to 25 million cubic meters were buried with rubble, making it difficult to rebuild the country (EPYPSA, 2011). The destroyed infrastructure hampered the distribution of food coming in from the airport and harbour to the affected areas. The capacity of the Haitian government to repair infrastructure is low (BBC, 2010).

## 4.1 OBSTACLES CAUSED BY THE HAITIAN GOVERNMENT

Besides the destroyed governmental buildings, the instability of the Haitian government caused many other obstacles for aid organizations when implementing their policy. The Interim Haiti Recovery Commission (IHRC) was established in April 2010 by the Haitian government and has 'been tasked with improving coordination, building state capacity and bringing donors and governments together to lead the reconstruction process effectively' (Oxfam Novib, 2011:2). The IHRC has failed to fulfil this function. The IHRC is not properly involving Haitian ministries, local governments and Haitian people in the process of policy implementation (Oxfam Novib, 2011). Cooperation between the international community and government was poorly-coordinated and poorly-integrated. It was not sustained or extended to lower tiers of Haitian national or local government (OECD, 2011) There are often contradictory policies and interests that plague the IHRC (Oxfam Novib, 2011). The United Nations felt the necessity to set up MINUSTAH: The United Nations Mission for the Stabilization in Haiti. It set up an 'Emergency Joint Operation Centre at the Port-au-Prince airport to coordinate incoming teams and humanitarian aid' (WFP, 2010:1). In total, MINUSTAH has around 3.000 troops in and around Port-au-Prince (WFP, 2010).

Beside the failures of MINUSTAH, another main issue remains unsolved by the Haitian government: the land-tenure and property issues. This issue remains a central issue even five years after the earthquake (LandLinks, 2015). Before aid organizations can start to build new houses, the Haitian court needs to decide who owns what piece of land. It takes the Haitian law courts an average of five years to resolve a case, making the legal protection from the government close to zero (Moloney, 2010). 'Land has historically been a hugely contentious issue in Haiti and weak regulation combined with a lack of capacity and enforcement mean that issues of property rights and tenure present a confusing picture for shelter agencies' (IFRC, 2015:6). The aid organizations need land to build emergency camps, houses, hospitals, water facilities on for the affected people. Not only for aid organizations this issue caused a burden. 'Land rights are also stifling local enterprises, as many Haitian business leaders are struggling to get bank loans because they are unable to prove their own lands' (Moloney, 2010:23).

Next to the land and tenure issues, 20 to 25 million cubic meters of rubble cover Haiti. Removing the tons of rubble that is left by the earthquake is one of the biggest stumbling blocks to rebuild Haiti. Only five percent of the rubble has been cleared after one year, leaving the residents to clear it themselves (Kahn, 2011). Rubble removal is needed to build camps, temporary shelters and to repair and build houses. Next to this it is needed for the transportation of aid by road. With the lack of space in the dense urban Port-au-Prince the coordination of rubble removal in crucial to build up the city (BCC, 2010). The aid organizations have tasked themselves with the removal of rubble, but a coordinating overall strategy from the government, who is responsible for the infrastructure and public spaces, is lacking.

The government also failed to address and tackle basic human needs before and after the earthquake. 'The lack of clean sanitation facilities was a critical problem in the devastated city, and was compounded by government and institutional failure to address public hygiene issues' (Oxfam Novib, 2010:9). Next to this, the government did not repair the roads nor did it construct a sewerage and waste system for Port-au-Prince. The government has also not been able to provide the needed amount of fuel shortly after the earthquake, leading to delays in reconstruction and emergency efforts (Oxfam Novib, 2010).

Providing basic human needs in a developing country should be the first priority of a government. Corruption can devastate projects which try to provide these needs. The level of corruption 'among public officials remained unchanged after the earthquake' (Zéphyr, Córdova, Salgado, Seligson, 2011:19). According to research done by USAID (2011), 53.6% of the population reported having to pay a bribe to a public official in 2010. After the earthquake, the perception of corruption among public officials rose, reflecting the concern of Haitians that 'the money allocated to the reconstruction after the disaster could end-up in the pockets of the corrupt officials and not reach disaster victims who most need it' (Zéphyr, Córdova, Salgado, Seligson, 2011:95).

According to Lamothe, prime-minister of Haiti from 2012 till 2014, the government cannot be blamed for everything that went wrong during the implementation processes of the policies from the aid organizations. Lamothe questions the effectiveness of foreign aid in Haiti. He argues that: 'It has been very damaging for Haiti'(Moloney, 2016:6). It is creating a situation where there is no transfer of knowledge and no jobs are created. The largest foreign donor: the United States is bypassing local companies (Moloney, 2016). Oxfam Novib argues that 60% of the people now living in camps cannot afford to go back to rented accommodation, or repair or construct new houses, because there are no sufficient jobs that allow them to pay the rent. Aid agencies were not able to move beyond the cash-for-work schemes towards longer-term jobs (Oxfam Novib, 2011). While it is important to mention that the aid organizations did not invest enough in job creation, the government of Haiti can also be blamed for this burden.

The government of Haiti have centralized economic and political power in the capital city, mostly in the hands of a very few. This while the majority of Haitian people are living in rural areas and depend on their agriculture for a living. 'The voices of poor Haitians are seldom heard in the policy-making process that directly affects their lives' (Oxfam Novib, 2011:3). The wealth and jobs are concentrated in the capital city, marginalizing the urban areas. The lack of investment in the rural economy has forced 75.000 people to move to the capital (BBC, 2010). Local mayors and councils are not given the power and recourses that help them to rebuild their communities and to stop this movement from going to the city (Oxfam Novib, 2011). The rapid expansion caused the city of Port-au-Prince to be overcrowded (BBC, 2010). The inadequate infrastructure and the proliferation of slums containing scores of poorly-build homes resulted in the major destruction of almost 300.000 houses after the earthquake (Disaster Emergency Committee, n.d.). The decentralization policy can be

blamed for the dense urban planning.

While many governmental ministries are considered unsuccessful, the DINEPA (Direction Nationale d'Eau Potable et d'Assainissement) 'has strong and competent leadership and a measure of independence from powerful vested interest that is lacking in many other ministries. This is partly due to the high level of financial and technical assistance that DINEPA has received from donors and international aid agencies' (Oxfam Novib, 2011:10). The National Food Security Coordination network, which is part of the Ministry of Agriculture and the Communal Health unit, which is part of the Ministry of Health, have also been praised by international NGO's and by the UN (Oxfam Novib, 2011).

## 5. DESCRIPTION OF AID POLICIES

This part describes the four biggest aid organizations operating in Haiti in 2010: the IFRC, Oxfam Novib International, the World Food Programme and CARE. Each part start with a description of the different goals and the achievements made, follows with a description about the different intervention methods and actors involved and finishes with the obstacles caused by the Haitian government.

### 5.1 INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES

### 5.1.1 GOALS AND ACHIEVEMENTS

The IFRC differentiated in its goals between pillars. These pillars touch upon the following areas: relief care, shelter, health, water, sanitation and livelihoods.

#### 5.1.1.1 RELIEF CARE AND SHELTER

Concerning relief care and shelter, the first operational goal was to provide basic non-food items and emergency shelter to 80.000 beneficiary families (IFRC, 2010). The 'operations update' published by the IFRC in 2010 shows that the target of 80.000 has been met (IFRC, 2010). EPYPSA, an independent evaluation organization, (2011:4) argues that 'the first emergency shelter response was relevant and effective; providing emergency shelter support to 1.5 M people in four months was a great achievement'. Nevertheless, the IFRC could not control the final outcome of the shelter solutions, because the IFRC just distributed the tarpaulins and did not accurately measure a follow-up for emergency shelter needs. Neither was there a comprehensive strategy that integrated emergency shelter reinforcement or replacement (EPYPSA, 2011).

From 2012 on, the IFRC  wanted to move from emergency to transitional sheltering that would meet the needs to 7500 households (IFRC, 2010). This goal has not been met. Emergency shelters were only replaced after an emergency, for instance heavy rainfall, damaged the shelters. The link between the emergency and transitional shelter was weak, because less than half of the transitional solutions were given to the displaced people in IDP camps, which did not help to reduce the size of the camps (EPYPSA, 2011).

The IFRC also set up the 'Integrated neighborhood approach', in which the IFRC wanted to initiate relocation programs that support people to leave behind their camps and return to their neighborhoods.  Part of this program was the Shelter Sector Response Plan. This plan aims at providing permanent sheltering solutions. The IFRC (2015:34) argues that the aim of the Shelter Sector Response Plan has not been met, since the IFRC was only able to focus 'on the provision of physical transitional shelters without considering other transitional solutions'. The emergency shelter

response lacked an appropriate follow-up response and the response has been taken without any strategic shelter planning from the UN nor the government (Rees-Gildea, 2012). The lack of coordination between the humanitarian community and the local and national counterparts within the Haitian government resulted in weak implementation of the policy (Tulane University, 2011). Due to the issues concerning land-rights, it was hard to find large pieces of lands to build camps on, wherefore only two large relocation-sites were established after half a year (IFRC, 2010).

EPYPSA criticises the IFRC for not integrating a house-repair approach in their programme. The IFRC narrowed down to the direct delivery of T-shelters, providing less support to other transitional solutions. The agencies' capacity to provide enough T-shelters proved to be insufficient. The fast delivery could not be achieved and the IFRC had difficulties meeting the agreed upon standards, leading to an 200% increase of the shelter costs. Support from both the local authorities and the affected population weakened. It took the IFRC more than five months after this failure to step aside from the T-shelter strategy and to engage in building repairing (EPYPSA, 2011).

## 5.1.1.2 HEALTH AND HYGIENE

Concerning 'health' the IFRC wanted to provide medical health, surgical care and physiotherapeutic treatment to 500.000 people and wanted to provide basic health care to 150.000 people through the deployment of field hospitals and basic health care clinics in the earthquake effected areas (IFRC, 2010). These goals have been met. Over 100.000 people have been treated by the IFRC health care facilities at four fixed sites and 41 mobile sites covering a population of approximately 700.000 people. '1000 to 2000 patients are seen daily by basic health care units and integrated mobile health clinics' (IFRC, 2010:2).

Besides the direct health care, the IFRC wanted to educate people about the prevention of health issues, via a community-based approach. The cholera prevention will form a key-component of hygiene promotion activities (IFRC, 2013). The IFRC aims at helping 'communities prevent and manage a range of common illnesses and diseases while also providing institutional support to the national authorities, to help ensure people can access the medical care they need' (IFRC, 2013:21). Regarding the hygiene promotion activities, IFRC reached in total 2.636.356 people. Local volunteers were trained to spread health information in their own communities. The IFRC noticed that the changing of traditional health behaviour takes time. 'While community-based health support is helping to create the foundations of a stronger, healthier society, the full impact of these activities may be visible only in the years to come' (IFRC, 2013).

In order to ensure that the national health system is better equipped to respond to the country's health needs, the IFRC programs focussed on institutional support via the rebuilding of hospitals and health centres, by providing financial support to health workers' salaries, by training health care

professionals  and by increasing internship opportunities by working closely with national nursing schools (IFRC, 2013).

*5.1.1.3 WATER AND SANITATION*

For both the goals regarding water, sanitation and hygiene, IFRC participated in the 'WATSAN' project. Their short-term goal is to provide safe water available to 200.000 people in camps and surrounding neighborhoods in Port-au-Prince over a 19-month period (IFRC, 2010). These goals have been met in the short aftermath of the crisis. IFRC managed to distribute 110.000 m3 of water with an estimation of 308.000 beneficiaries with the WATSAN project. WATSAN has been in close cooperation with DINEPA, which is considered as a successful and efficient governmental body (IFRC, 2010). Nevertheless, the fuel shortage caused a short period of time with a shortage of safe drinking water.

Concerning 'sanitarian' the IFRC wanted to 'provide disposal infrastructure with washing facilities, including the installation of pit latrines, raised tank latrines and the provision of sludge removal services for up to 280.000 people' (IFRC, 2010:7).  These goals have been met as well, the WATSAN project build 107 water points and 1,336 latrines in the first half year. While this is a great achievement, the IFRC faced difficulties due to the land tenure issues in finding land to build the water facilities on (IFRC, 2010).

After the emergency phase is over and more people return to their local neighborhoods, the IFRC wants to transition water and sanitation support to help address the lack of services in communities (IFRC, 2013). To help DINEPA strengthen its services, IFRC wanted to invest in financial, material and technical support (IFRC, 2013). The IFRC managed to set up and train 333 local water and sanitation committees in the first three years after the earthquake. To help DINEPA strengthen its services, the IFRC invested in financial, material and technical support. 'The IFRC  also provided water pipes and tools to help fix and extend water network. Over 40 water kiosks have been repaired with the support of the IFRC, improving access to water and creating job opportunities in local communities' (IFRC, 2013:19). This does not mean that the tasks regarding safe water management have been transitioned DINEPA, it strengthened the capacities of communities in maintaining their own water facilities.

*5.1.1.4. LIVELIHOODS*

The goals concerning increasing livelihoods partly overlap with the goals regarding shelter, but mainly focus on the repairing and building of houses, the removal of rubble and the economic opportunities (IFRC, 2010). As mentioned in the achievements of the shelter part, these goals have partly been met.

ProRepublica criticises the IFRC on its strategy, because the IFRC claimed to provide homes to more than 130.000 people, but only build 6 permanent houses (Elliot, Sullivan, 2015). The removal of rubble is critical to support the IFRC programmes, 'such as transitional shelter, disaster risk education, health and sanitation, as well as other recovery activities' (IFRC, 2010:5). When not removed, the rubble hampers accessibility to neighbourhoods. EPYPSA (2011) argues that IFRC did not meet its objectives in rubble removal, due to the lack of coordination between organizations and the lack of necessary resource mobilization.

The IFRC also wants to relieve the immediate financial pressures people faced via cash-for-work opportunities and cash-grants. Next to the financial support, the IFRC wants to train small and medium enterprises by offering a variety of courses (IFRC, 2013). By the end of 2012, 88.733 people benefitted from the cash-for-work programs. Another 76.178 families have been provided a critical injection of cash through cash-grants. In order to create jobs, the IFRC provided small enterprises with a variety of courses including 'plumbing, masonry, carpentry, tailoring, cooking, cosmetics and beauty' (IFRC, 2013:16).

### 5.1.2 THE IMPLEMENTATION PROCESS

The IFRC mainly focused on emergency and mid-term shelter (IFRC, 2010). To improve shelter, the IFRC allocated $173 million to this sector from 2010 till 2015 and allocated $66 million to emergency relief (American Red Cross, 2015). To reach their goals in the sector of relief care and shelter, the IFRC became part of the Shelter Cluster and set up a project called 'Shelter Sector Response Plan (SSRP) (EPYPSA, 2011). This project 'was to go beyond simply the provision of just the accommodation and to provide the displaced population with information campaigns about construction techniques, cash vouchers, material distributions and rubble clearance' (IFRC, 2015:34). When the emergency phase finished, the IFRC moved towards the Integrated Neighborhood approach in which it aimed at supporting people to move back to their neighborhood by providing housing solutions and construction support (IFRC, 2014). Critics argue that the IFRC operated without the involvement of the Haitian citizens when reconstructing houses and providing shelter relief. It did not take into consideration the Haitian authorities' previous housing strategies and post-disaster ideas when implementing the IFRC's SSRP and has set up the SSRP with a 'constraint to local participation in strategical decisions', especially at the municipal level (EPYPSA, 2011:29).

To provide clean water and sanitarian, the IFRC has worked closely together with Haiti's national water authority, the DINEPA and set up the project called WATSAN. Their strategy was to provide clean drinking water and access to sanitation services for the Haitian citizens, 'with the goal to successfully transfer institutional capacity from the IFRC to the public authorities' (IFRC, 2010:3).

The IFRC allocated $47 million to the sector of water and sanitation. On the longer term, the IFRC wanted to make sure that communities can manage and maintain their own water and hygiene facilities. In order to reach this objective, the IFRC set up and train local water and sanitation committees. This is especially important in the urban areas, 'where families often dispose of human waste in ravines, leading to considerable health risks' (IFRC, 2013:19). In order to strengthen the services of DINEPA, the IFRC will invest in financial, material and technical support (IFRC, 2012).

In order to respond to the severity of health threats, the IFRC health programmes 'focussed on helping communities prevent and manage a range of common illness and diseases while also providing institutional support to the national authorities' (IFRC, 2013:21). The IFRC allocated $73 million dollar to the health sector from 2010 till 2015 and another $25 to cholera prevention (American Red Cross, 2015). While most of the interventions in the health programme were focussed on the long-term development, the IFRC focussed in its short-term on cholera prevention by encouraging safe hygiene via the monitoring of safe water drinking and distributions of soap and hygiene kits (IFRC, 2013). The IFRC will empower local volunteers via its community-based approach in order to spread health information in their own communities (IFRC, 2013).

As part of the 'integrated neighbourhood approach', the IFRC has worked with local residents to improve access to water and sanitation by building and repairing water points. Next to this, teams are helping communities to build links with local communities (IFRC, 2013). To increase the livelihoods of the Haitian citizens, transitional shelters need to be build, damaged houses need to be repaired and rubble needs to be removed (IFRC, 2010). This project started as 'a way of helping to relieve some of the immediate financial pressured people faced' (IFRC, 2013:14). Through the cash-for-work programme, people removed rubble from the streets (IFRC, 2011).

5.1.3 ACTORS INVOLVED

In the plan of action, the IFRC states that 'cooperation among the Red Cross Red Crescent actors has been essential to the Haitian Red Cross' (IFRC, 2010:2). As mentioned in the previous part, the IFRC worked closely together with Haiti's national water authority: the DINEPA. The DINEPA is considered as an successful governmental ministry as mentioned in the context of this chapter (Oxfam Novib, 2011). DINEPA and IFRC worked together to provide safe drinking water on the short term. On the longer term, the IFRC wants to strengthen DINEPA's services in order to reside water supply and sanitation systems in the hands of DINEPA in the future  (IFRC, 2012).

In order to fulfil the goals concerning health, the IFRC has been working closely together with Haiti's ministry of Health which is considered as a successful governmental ministry (IFRC, 2010).

The Shelter Sector Response plan has been set up with the help of the Shelter Cluster. The Shelter Cluster is led by the IFRC following national disasters and cooperates with many other organizations, for example the government, the United Nations, local Red Cross Red Crescents and NGO's, for example CARE (IFRC, n.d). As mentioned before, the IFRC did not involve local actors and did not take into consideration the Haitian authorities previous housing strategies and post-disaster ideas (EPYPSA, 2011)

### 5.1.4. OBSTACLES CAUSED BY THE INSTABILITY OF THE HAITIAN GOVERNMENT

In order to move from emergency shelter to transitional shelter and to repair and build houses, the IFRC needed ground to build on. In the 'context' chapter the land-tenure and property issues has been touched upon. The IFRC (2015:6) argues that the main regulatory barriers for shelter assistance in Haiti were the 'issues surrounding housing, land and property rights'. The IFRC had to abandon many potential shelter sites because of the lack of effective dispute resolution mechanisms (IFRC, 2015).

The unplanned neighbourhoods, unregulated and poorly built structures which dominate the Port-au-Prince landscape, made it very difficult for the IFRC to establish homes (IFRC, 2015). The land tenure issues are as well a huge burden for the implementation of safe water and sanitation projects in neighbourhoods. 'With limited land available for construction , finding locations which include access to water and which have space to build toilets and showers, have proved challenging' (IFRC, 2013:17). The issues surrounding the speed of rubble removal are also hampering the amount of land available for construction (IFRC, 2013).

The government of Haiti has also been tasked with the provision of fuel. The shortage of fuel in the emergency phase resulted in slowdowns and stoppages in transport which had serious repercussions on the IFRC's water delivery in Port-au-Prince. The water support was essential to the health and well-being of people in the camps. Next to the shortage of clean drinking water, the country's electricity supply for hospitals, schools and business which operate out of generated-power equipment were in danger (IFRC, 2010). This shortage of fuel also affected the fast delivery of T-shelters leading to an 200% increase of shelter costs. Support from both the local authorities and the affected population weakened (EPYPSA, 2011).

Regarding health and the promotion of hygiene, the IFRC finds it hard to change the behaviour of people (IFRC, 2013). The change of behaviour takes a lot of time, since the government has not invested enough in hygiene and health care, making it more difficult for a foreign aid organization to convince people changing their behaviour. Next to this, the outbreak of cholera led to high unexpected costs. The IFRC argues that cholera is a controllable and curable illness, but 'the lack of public

awareness about the prevention and treatment of the disease and limited access to safe water and sanitation facilities' made the virus result in an epidemic (IFRC, 2015:14). The lack of investment of the government in prevention and treatment activities made it more difficult for the IFRC to tackle this unexpected change.

## 5.2. OXFAM NOVIB INTERNATIONAL

### 5.2.1. GOALS AND ACHIEVEMENTS

Oxfam Novib International focused in its operational goals on water, sanitization, hygiene, food security and livelihoods (Oxfam Novib, 2010). Rather than giving specific numbers on what Oxfam Novib wants to achieve, they formulate broader goals.

#### 5.2.2.1 WATER, SANITATION AND HYGIENE

Regarding water, sanitation and hygiene Oxfam Novib wanted to ensure that people have access to clean, safe drinking water in sufficient supply. They want to provide sanitation structures and facilities to help prevent and eliminate potential sources of waterborne diseases and want to train people to become promoters of public health and hygiene (Oxfam Novib, 2010).

Since Oxfam Novib International did not give specific numbers of what they wanted to achieve, making it difficult to estimate whether the objectives have been achieved. Therefore, this part sums up the achievements Oxfam Novib made in the first year after the earthquake. In the first year after the earthquake Oxfam Novib has 'provided clean drinking water and sanitation facilities to approximately 400.000 displaced people in Port-au-Prince and in neighbouring areas' (Oxfam Novib, 2010:10). Each month Oxfam Novib has provided over 300 million litres of clean water to the camps and areas where they worked. Next to this, they have built 2500 latrines, 1032 bathing shelters which the camp residents and local people maintain (Oxfam Novib, 2010). Issues surrounding portable toilets accrued in the IDP camps, due to a shortage of de-sludging tankers and a chronic traffic congestion. This issue cannot be fully blamed to the organizational structure of Oxfam Novib. The reason why these problems occurred were due to the lack of piped water and disposal mechanisms. These two infrastructural manners are the task of the government to provide (Cocking, Bastable, 2010).

In the 10th month after the earthquake, Oxfam Novib wanted to shift towards rehabilitation and water distribution systems outside camps, but this objective has not been achieved because of the cholera outbreak during that time. Oxfam Novib decided to postpone the exit of the water trucking and funded chlorination at source of all water destined for Port-au-Prince (Turnbull, 2011). 700.000 people received cholera prevention activities, which included the provision of clean water, oral rehydration salts, sanitation services and hygiene education (Oxfam Novib, 2010). According to an independent evaluation report, 'Cholera prevention messaging was introduced in good time, thanks to the continued presence and numbers of well-trained promotors and their networks, boosted by training on key issues from cholera experts brought in from Oxfam's global pool' (Turnbull, 2010:29).

*5.2.2.2 FOOD SECURITY AND LIVELIHOODS*

Regarding the food security, Oxfam Novib wanted to 'favor local production and reinforce links between producers and consumers' (Oxfam Novib, 2010:13). As a priority, they aimed to provide support to small businesses and those owned by women to help them get back on their feet' (Oxfam Novib, 2010). In the first year after the earthquake 41.819 households benefitted from the livelihood and security programs. 'By the end of 2010, 249 street food sellers had each committed to cooking and feeding 80 of the most vulnerable people in their own community for two months. In total, 19.920 people received food over a two-month period', whereby stimulating local production (Oxfam Novib, 2010:14).

In order to increase livelihoods, Oxfam Novib directly provided people with money. '2936 families have received grants of $175 to help respond to basic needs and replace lost assets. 87% of these families managed to start or re-start small businesses with the combination of food and cash-support' (Oxfam Novib, 2010:14). Turnbull (2011:5) argues that the 'coverage, speed and accuracy of the cash-for-work programmes were made possible through collaboration with community-based organizations with local knowledge'. The projects which tried to achieve emergency food security and livelihood objectives could have had a greater effect 'if the grants had been larger, to enable recipients to cover basic needs and start-up and income-generating activity' (Turnbull, 2011:5). 'The grants were of insufficient value to meet the basic needs in health, education and many other areas' (Turnbull. 2011:39). A shortage of money is thus one of the reasons why Oxfam Novib could not achieve as much as needed. Next to this, the basic needs grants and livelihood recovery grants were overcoming significant delays, due to the slow recovery of the destroyed financial institutions. These delays negatively affected the support the people had for the cash-for-work activities and grants from Oxfam Novib (Turnbull, 2011).

Next to the direct provision of money and food, Oxfam Novib aimed at economic development and job creation. The key aspect of this approach was to help small businesses flourish in the city and on the countryside (Oxfam Novib, 2010). In order to fulfill this goal, Oxfam Novib 'recapitalized 210 stores through a mixture of grants and loans that aim to reinstate essential economic community' (Oxfam Novib, 2010:14). Oxfam Novib developed a program to recapitalize 1441 tradesmen, 'such as plumbers, carpenters and masons to help respond to reconstruction needs through cash and vouchers for tools' (Oxfam Novib, 2010:14).

In order to rebuild communities, Oxfam Novib also focussed on the provision of shelter. In the first year after the earthquake, Oxfam Novib distributed 12.850 tarpaulins, over 1000 tents, 34000 family and household kits containing the basic necessities, and 47000 mosquitos nets (Oxfam Novib, 2010). 'Distribution of shelter materials was slower to scale up than other components, due to Oxfam's relatively slow staff capacity in this area' (Turnbull, 2011:5). Shelter materials reached 27.000 people, instead of its 45.000 people target. Oxfam Novib encountered logistical issues with

packaging and distributing plastic sheeting (Turnbull, 2011).

Once the emergency phase finished, Oxfam Novib focused on the transition of people leaving the IDP camps to more permanent neighborhoods (Oxfam Novib, 2014). Before people can move to permanent neighborhoods, Oxfam Novib aimed at rubble clearance and waste management with local governmental institution for waste management, the Municipal Solid Waste Authority (SMCRS) (Oxfam Novib, 2012).

The goal of 2010 regarding the rebuilding of communities is formulated in the following way '... to bring a logistical and humanitarian perspective to rebuild parts of the city' (Oxfam Novib, 2010:16). Unfortunately, Oxfam Novib has not been able to move to the reconstruction phase of houses. It has initiated the pilot project to rebuild the neighbourhood of Carrefour Feuilles in Port-au-Prince. Five years after the earthquake, the progress that Oxfam Novib has made in this neighbourhood is limited, by 'collaborating with 249 women and men to construct three large community urban gardens and formed one farmer cooperative, providing community members with increased access to nutritious, locally produces food' (Oxfam Novib, 2014:3). Oxfam Novib did not achieve to rebuild parts of the city from a logistical perspective, besides the construction of the three community gardens. According to Turnbull (2011:37) 'Oxfam did not achieve its intended outcomes of safe reconstruction as it only provided technical assistance'. 'The trained engineers only replicated their training to sic local technical staff, instead of the intended 200. Furthermore, the planned identification of beneficiaries for financial support and/or distribution of construction materials for repairs, was never initiated due to insufficient managerial supervision and/or a lack of prioritization of the shelter component beyond the delivery of plastic sheeting' (Turnbull, 2011:27).

5.2.2. THE IMPLEMENTATION PROCESS

Oxfam Novib International's main focus was put on areas of technical program expertise, such as water, sanitation and hygiene. The short-term response of Oxfam Novib was to provide clean drinking water, distribute hygiene kits, build latrines and bathing shelters to displaced people in Port-au-Prince and in neighbouring areas (Oxfam Novib, 2010). In order to execute these objectives, Oxfam Novib became part of the WASH-cluster (Oxfam Novib, 2010). The Solid Waste Management (SWM) component of the WASH-cluster was set up in the second week after the earthquake in the largest camp of Haiti to find sustainable ways of waste removal (Turnbull, 2011). Together with DINEPA they 'find ways to deliver safe drinking water in more sustainable ways through drilling boreholes, installing water pumps and repairing piper water networks' (Oxfam Novib, 2010:11). Besides the distribution and building projects, Oxfam Novib wants to educate people about health. Therefore, Oxfam Novib wants to recruit community members and train them to work as mobilizers in the camps to reinforce messages about good health and clean sanitation facilities (Oxfam Novib, 2010).

Besides its main focus, Oxfam Novib also focussed on food security and the rebuilding of livelihoods. In the second week after the earthquake hit Haiti, the Emergency Food Security and livelihoods (EFSL) component was set up (Turnbull, 2011). To increase food security, Oxfam Novib wanted to support local street food sellers to cook and feed the most vulnerable people. They also tried to support the market, by setting up a project that supports local grocery stores who had lost their supply of basic food. Besides the extensive projects, Oxfam Novib International made use of the cash-for-work and cash-grants programs to increase livelihoods. 'Basic Needs Grants' were distributed to response to the basic needs and to re-install businesses. Cash-for-work projects were set up to create jobs to clean up the environment and to make shelter materials (Oxfam Novib, 2010).

In order to rebuild communities, Oxfam Novib started with the emergency shelter component in the second week after the earthquake (Turnbull, 2011). To move to the transitional phase of repairing and building new houses, a pilot project has been initiated in cooperation with UN HABITAT and the Emergency Architects foundation to reconstruct the neighbourhood 'Carrefour Feuilles' in Port-au-Prince (Oxfam Novib, 2010).

5.2.3 ACTORS INVOLVED

The scope of Oxfam Novib, as it is stated in their Progress Report of 2010, focusses on the local participation of the Haitians. The staff of Oxfam Novib has grown from 100 to 800 members since the earthquake, from which 80% are Haitian people. Oxfam Novib has involved camp residents in decision-making and to seek feedback from them about our work (Oxfam Novib International, 2010).

Concerning the provision of clean water, sanitation and hygiene Oxfam Novib worked together with DINEPA, the Municipal Solid Waste Authority, the SMCRS and started collaborating with the WASH-cluster from the first week on (Turnbull, 2011). Oxfam Novib tried to imprice the policies and technical capacities of the Municipal Solid Waste Authority (SMCRS). After a sufficient period of time, Oxfam Novib wants to transfer the responsibilities surrounding waste management back to the SMCRS. Oxfam Novib also closely collaborated with UNICEF, and was allowed access to stocks of UNICEF's water equipment in the first week after the earthquake, covering the shortage of Oxfam Novib (Turnbull, 2011). Oxfam also collaborated with another NGO, the World Health Organization, to was awareness and prevent the spreading of cholera (Oxfam Novib, 2011). Both collaborations with the NGO's have succeeded.

Concerning emergency food security and livelihoods Oxfam Novib worked together with many local street food sellers and local businesses. In order to rebuild communities, Oxfam Novib worked together with the United Nations department HABITAT and with the Emergency Architects foundation in order to reconstruct neighbourhoods. Next to this, Oxfam Novib worked together with

the municipal entity 'Le Service Métropolotain de Collecte des Résidus' (SMCRS) and with the non-profit organization Disaster Waste Recovery (DWR) to remove rubble (Oxfam Novib, 2011).


5.2.4. OBSTACLES CAUSED BY THE INSTABILITY OF THE HAITIAN GOVERNMENT

One of the biggest challenges Oxfam Novib dealt with when rebuilding communities in Haiti was the amount of rubble covering land. The rate at which the rubble was removed is very slow. After a year only a fraction of the destroyed buildings have been torn down and sites cleared. 'Beneath the rubble, major infrastructural work is required by the government to repair roads and to construct a sewage and wage system appropriate for the size of the city' (Oxfam Novib, 2010:16). The second biggest challenge Oxfam Novib faced concerning the rebuilding of communities is the issues surrounding land ownership (Oxfam Novib, 2010). According to Oxfam Novib, the Haitian authorities 'should settle legal issues that are hampering the repair of houses and the removal of rubble' (Oxfam Novib, 2011:2).

The lack of running water and disposal mechanisms made it difficult for Oxfam Novib to provide sanitarian facilities in the IDP camps. This resulted in high costs for aid organizations. According to Oxfam Novib, the Haitian government 'should focus on labour-intensive, public infrastructure projects, such as water provision and road building' (Oxfam Novib, 2011:2).

The municipal entity, the SMRCS responsible for waste management, proved to be ineffective when Oxfam Novib and the DWR handed over the responsibility of household waste management and rubble clearance. 'Over 130.000 people in the camps where Oxfam Novib operated were supported through cash-for-work schemes, campaigns about safe waste disposal and large clean-up campaigns' (Turnbull, 2011:35). The SMRCS proved to be efficient in the short-term after Oxfam Novib handed over the responsibility, but waste began to accumulate in and around the camps after a short period of time (Turnbull, 2011).

Regarding the provision of grants, the earthquake destroyed several banks and financial institutions. Basic needs grants and livelihood recovery grants were overcoming significant delays and therefore were distributed too late to prevent negative coping strategies. The government of Haiti did not develop an alternative banking system, nor did it provide a different buildings where they could offer financial related services in time (Turnbull, 2011).

Regarding the investments in providing jobs, Oxfam Novib regrets the Haitian authorities for centralizing the political and economic power in the city of Port-au-Prince. Oxfam Novib is investing next to the provision of water, sanitation and hygiene a lot in increasing livelihoods by providing cash-

for-work programmes and more sustainable jobs. The rural areas are marginalized, because of the central focus of the Haitian government in generating employment opportunities. This leaves the urban areas with a lack of good infrastructure, employment and the provision of water to people and businesses, hampering Oxfam Novib when trying to generate employment opportunities (Oxfam Novib, 2011).

## 5.3 THE WORLD FOOD PROGRAMME

### 5.3.1. GOALS AND ACHIEVEMENTS

Unlike the other aid organizations, the World Food Programme focused in its operational goals mainly on one goal: immediate food security (WFP, 2013). In order to respond to food and nutrition insecurity, the WFP want to work in three areas of intervention: '1: emergency preparedness and rapid response capacity building, 2: implementation of interventions to reduce food and nutritional insecurity and 3: national capacity building though institutional partnerships, aimed at facilitating a transfer of intervention capacities to the Haitian government' (WFP, 2013:49).

#### 5.3.1.1 EMERGENCY FOOD DISTRIBUTION

The short-term goal of the WFP to 'provide emergency food distribution' falls under the first area of intervention 'emergency preparedness and rapid response capacity building'. In the first six months the WFP wants to reach 2 million people in the most affected areas, with special attention to children, pregnant and lactating women, and other nutritionally vulnerable groups (WFP, 2010). 'Wherever possible targeted and food-for-work (FFW) activities will replace general food distributions (DFD) as soon as possible. These activities will initially support efforts to clean and rehabilitate streets, schools and other public spaces damages by the earthquake' (WFP, 2010:6). The planned breakdown of beneficiaries in shown in the table presented below.

| TABLE 1. BENEFICIARY BREAKDOWN BY ACTIVITY | |
|---|---:|
| **Activity** | **Beneficiaries** |
| General Food Distribution (GFD)* | 2,000,000 |
| Food for Work (FFW)* | 500,000 |
| Initial rapid distribution | 2,000,000 |
| Targeted food distributions | 500,000 |
| **TOTAL** | **2,000,000** |

\* The total number of beneficiaries does not correspond to the sum of individual activities due to avoid double counting between GFD and FFW

It is difficult to argue whether the WFP achieved its goals, since the only concrete goal that has been set is to 'reach 2 million people in the most affected area in the first six months after the earthquake'. Therefore this part sums up the achievements made by the WFP. In order to achieve the first goal, the WFP made use of their four emergency food stocks around the country, which were not damaged by the earthquake (WFP, 2013). Under the direction of the Ministry of Health, the WFP organized the 'distribution of food for all pregnant and lactating women, and all children from 6 to 59 months to

prevent malnutrition among the most vulnerable groups living in IDP camps' (WFP, 2013:15). The WFP faced logistical challenges during the massive distribution operation, because of the highly urbanized and almost completely destroyed settings it had to operate in. The lack of sufficient infrastructure forced the WFP to think about other transportation possibilities. The WFP used helicopters to reach rural areas under the direction of the Ministry of Health (WFP, 2013). While helicopters can carry less than trucks, the WFP managed to provide nutrition to many people in IDP camps.

The emergency food distribution ended in April 2010, upon request of the Ministry of Agriculture. Till that time, more than 4 million Haitians in Port-au-Prince and other affected areas have received food assistance (WFP, 2013). A food crisis has been avoided in the direct aftermath of the earthquake. 'The nutritional programmes granted to vulnerable populations helped prevent  a deterioration of the nutritional situation 6 months after the earthquake' (WFP, 2013:17). Therefore, the first six months after the earthquake are considered as a success for the WFP, besides the logistical challenges it faced.


### 5.3.1.2 EMERGENCY PREPAREDNESS

Next to the emergency food distribution, the first area of intervention 'emergency preparedness and rapid response capacity building' entails the pre-positioning of food stocks in the most vulnerable areas. The WFP aimed at renewing the food stocks to help mitigate the impact of future disasters in cooperation with the national Directorate for Civil Protection (DPC). The World Food Programme managed to preposition emergency food stocks before the hurricane season which start in June and lasts till November (WFP, 2013).


### 5.3.1.3 REDUCE FOOD AND NUTRITIONAL INSECURITY

The interventions regarding the reducing of food and nutritional insecurity took place from 2011, when the overall  agricultural production was generally quite good.  In order to implement the interventions, the WFP wants to support the Ministry of Health in strengthening malnutrition support services by the prevention of chronic malnutrition and micronutrient deficiencies. The WFP accomplished the management of moderate acute malnutrition through the Supplementary Feeding Programme in 247 health centres spread over 115 communes across the country. The WFP also succeeded in the development of a national protocol for the management of moderate acute and severe malnutrition in collaboration with UNICEF to support the Ministry of Health (WFP, 2013). As can be seen in the diagram presented on the next page, the food insecurity decreased to a total of 17% of the

population in 2011.



**Prevalence of Food Insecurity based on the Consumption Score - 2001-2012**
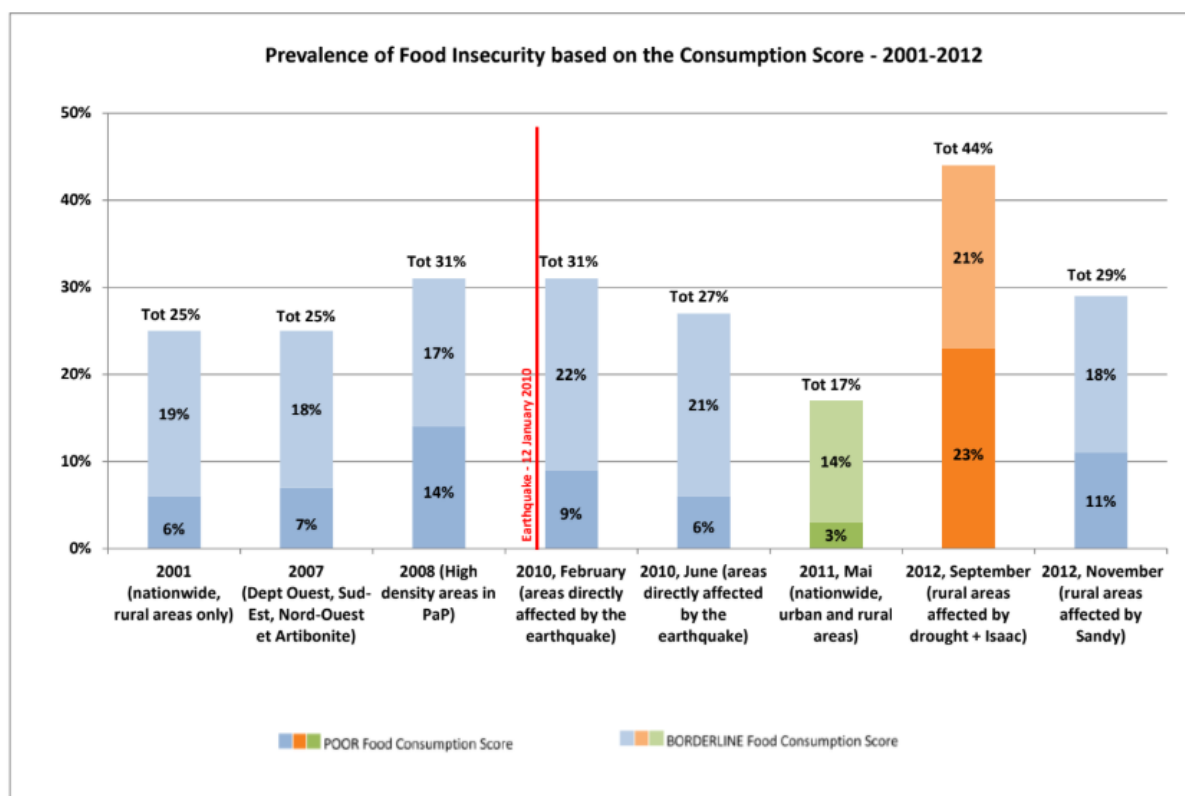
Nevertheless, in September 2011, food and cash for work interventions had to stop, because of the budget reductions from $422 million in 2010 to $36 in 2011 (and $37 in 2012). 'Budget reductions in 2011 have reduced the ability of WFP to ensure a smooth transition towards medium term intervention mechanisms' (WFP, 2013:43). The beneficiary households from the WFP confirmed that the closure of humanitarian intervention projects presented a real shock to their food insecurity. People who were living in food insecurity raised from 17% in 2011 to 44% in 2012 (WFP, 2013). While the major increase in food insecurity can be partly blamed to aid organizations who restricted their activities, the government also took its part. The WFP executed many governmental tasks in the aftermath of the earthquake, leading to a decrease of food insecurity to 17%. The government was not able to take over these tasks when the help from the WFP and other aid organizations decreased, even though the WFP developed protocols for the management of moderate acute and severe malnutrition and other emergency food issues (WFP, 2013). The help could not prevent the food crisis which started in the end of 2012.

The WFP wanted to set up a school feeding program, following the request for support made by the Government of Haiti to the WFP (WFP, 2013). The WFP aimed at supporting the Government's National Schools Meals Programme by encouraging parents to send their kids back to school to ensure that the children at least receive one hot meal per day (WFP, n.d.). From 2010 to 2011, the WFP

managed to support the National School Feeding Program (PNCS) of the Ministry of Education, which resulted in a doubling of numbers of students receiving a meal each day to 1.1 million (WFP, 2011).

### 5.3.1.4 NATIONAL CAPACITY BUILDING

The third field of intervention aims at longer-term goals and are 'national capacity building though institutional partnerships, aimed at facilitating  a transfer of intervention capacities to the Haitian government' (WFP, 2013:49). This goal has has not been achieved yet. The WFP is cooperating to a high extent with the national government to increase the national capacity, and has been successful in this aspect. One example of this is the National Agriculture Investment Plan, in which the government is investing $722 million in order to strengthen and improve the agricultural public services and institutional support (World Bank, 2011).  Nevertheless it is important to mention that many aid organizations, including the WFP are still present in Haiti to execute governmental tasks (WFP, n.d.). The WFP did not yet manage to transfer the intervention capacities to the Haitian government.

### 5.3.2. THE IMPLEMENTATION PROCESS

In the immediate aftermath of the earthquake, the WFP started with the distribution of emergency food. In order to gather the essential emergency food, the WFP had to overcome some logistical challenges. The WFP gathered together with the United Nations Humanitarian Response Depot food from El Salvador and relief supplied from a depot in Panama (Margesson, Taft-Morales, 2010). The WPF has another logistical center in the Dominican Republic that functioned as a humanitarian bridge which carried large quantities of supplies by air, see and land to Haiti (WFP, 2010). The WFP was relatively well prepared for the earthquake, since it prepositioned emergency food stocks in four logistic bases across the country (WFP, 2013). Next to these logistical bases, the WFP office in Port-au-Prince was still standing and the sub-offices in Cap Haitian and Gonaives were in a good condition, making it easier to coordinate the projects from the beginning (WFP, 2010).

In order to distribute the gathered emergency food, the WFP set up the relief and recovery operation called 'Food Assistance for Vulnerable Groups exposed to the Recurrent Shocks'. (WFP, 2010:4) In the first days after the earthquake, the WFP distributed high energy biscuits and ready-to-eat meals. The WFP wants to set up a network of collective kitchens (approximately 200) that 'would provide cooked meals for an average of 500 persons in the most affected areas in Port-au-Prince and other urban areas'(WFP, 2010:9). Under the Ministry of Health, the WFP wants to reach rural areas to provide food to all pregnant and lactating women in IDP camps. Different options and routes have to

be used to ensure the delivery of food to the affected people, due to the massive destruction of infrastructure (WFP, 2010). When the phase of emergency food distribution is over, the WFP wants to replace the general food distribution with food-for-work activities.

Regarding the second goal 'to implement interventions to reduce food and nutritional insecurity', the WFP wants to support the Ministry of Health in managing their malnutrition support services. The WFP is planning to set up the Supplementary Feeding Programme (PSN). Next to this, it will develop a national protocol for the management of moderate acute and severe malnutrition in collaboration with UNICEF and the WFP will set up a school feeding program in collaborating with the Ministry of Health and Agriculture (WFP, 2013)

### 5.3.3 ACTORS INVOLVED

Since the World Food Programme is part of the United Nations, it collaborated to a high extent with governments of various countries. What is notable about the case of Haiti in 2010, is that the projects the WFP initiated were always upon request from a Haitian Ministry. The WFP supported national policies and took into consideration the governments' running programs (WFP, 2013). In the first days after the earthquake, the Ministry of Health directed the WFP to distribute fortified food to the most vulnerable groups in IDP camps (WFP, 2013). The general food distributions are organized in coordination with the committees of The Direction of Civil Protection (DPC), local authorities, MINUSTAH and international/local NGO's (WFP, 2010). Once the Ministry of Health asked to WFP to stop with the distribution of food, the WFP immediately did.

  The WFP also collaborated with the Ministry of Agriculture, Natural Resources and Rural Development (MARNDR) (WFP, 2013). In collaboration with the Ministry of Agriculture, the WFP tried to increase the quantity of food purchased locally and used in the school meals program. In collaboration with the Haitian Ministry of Health, Oxfam Novib tried to avoid a nutritional crisis. 'Because of Haiti's vulnerability to natural disasters WFP worked closely together with the Haitian Directorate of Civil Protection to ensure the country is ready to respond to emergencies' (World Food Programme, n.d.:18)

### 5.3.4. OBSTACLES CAUSED BY THE INSTABILITY OF THE HAITIAN GOVERNMENT

In order for the WFP to reach rural areas, provide emergency relief and set up food security projects, infrastructure is needed. 'National food production only covers 43% of Haiti's food requirements. The remained is covered by commercial imports (52%) and food aid (5%)' (WFP, 2010:3). As mentioned in the context chapter, the earthquake heavily damaged the airport and harbour. 'Roads and bridges need to be repaired in order to move food aid around the country and reach victims in need of help'

(WFP, 2010:2). While the airport is open, the routes connecting the landing area to the cities are damaged, as are the roads from coastal ports (WFP, 2010). The government is not putting enough effort and energy in repairing infrastructure, slowing down the process of aid relief. While before the earthquake, 35.000 to 40.000 tons of rice were imported every month, only 2.495 tons of rice were imported one month after the earthquake (WFP, 2013).

Even before the earthquake, the acute malnutrition among children from 6-59 months grew from 4.3 % to 6.2 %. In 2006 '22% of the new-born babies were underweight, 50% of the pregnant women and 66% of the children under 5 were affected by anaemia, 72% of children aged 6-12 in rural areas suffered from iodine deficiency and 32% of school-age children were infected by intestinal parasites' (WFP, 2013:57). These health threats made it more difficult for the WFP to improve health conditions after the earthquake, where medicines and nutrition were more severe.

As mentioned in the introduction of this chapter, the end of 2011 and 2012 was a shock for the agricultural sector, because of the cutback of humanitarian projects, rising food prices, price instability and poor national harvests results. Action is needed to increase the food production, reduce the dependency on imported food and boost local incomes. Farmers need to have access to banks and credit systems to access money, tools, seeds and basic agricultural technologies (WFP, 2013). The centralized policy of the government is marginalizing the urban areas, therefore the farmers. There is no priority of the government to boost local incomes and to create farmers' banks. The government provides limited access to inputs and agricultural materials and does not invest in 'agricultural research and technical training' (World Bank, 2011:2). Next to this, the 'deficiency of agricultural and rural infrastructure, including irrigation and drainage infrastructure' hampers the WFP in reaching their goals to 'implement interventions to reduce food and nutritional insecurity' (World Bank, 2011:2).

According to Haiti Grassroots Watch (2013), there are structural reasons why 1,5 million Haitians faced food insecurity in 2013. The causes of hunger are interrelated and are linked to larger economic issues in the country and in the world. These structural reasons are hampering the WFP to fight malnutrition and acute food insecurity. The first cause of structural poverty is the lack of access to basic social services, for instance education, which further stresses poor households. This leads to poverty and little buying power. The second reason is the Haitian land tenure system and the lack of correct land-management. A great deal of the farmland is owned by the state or by a large landowners. Farmers rent it as sharecroppers. Studies show that share-cropped farmers are less likely to protect its soil from deforestation and other practices that weaken the soil and the environment, leading to bad harvests and failure of the crops (Haiti Liberté, 2013). Besides this, the population increased rapidly, while the agricultural output declined. This resulted into a shortage of food. The decline is agricultural

output can be blamed to the land tenure system, leading to a lack of space to harvest crops on.  This is also due to an overall lack of government investment in agriculture. In de decade before the earthquake, the Ministry of Agriculture only received  4% of the budget, while agriculture and rural development accounted for only 2,5% of official development assistance (Haiti Liberté, 2013). These structural reasons make it more difficult for the WFP to fight food insecurity.

## 5.4 Cooperative for Assistance and Relief Everywhere (CARE)

### 5.4.1 Goals and achievements

CARE's goals can be categorized in the following areas: WASH (water, sanitation and hygiene); shelter; sexual and reproductive health; and food security, livelihoods and economic development (CARE, 2013).

#### 5.4.1.1 Water, sanitation and hygiene

Regarding WASH, CARE wants to increase access to safe water, sanitation and hygiene. This has been a central objective of both CARE's emergency response and the long-term recovery strategy in Haiti (CARE, 2013). In the emergency phase CARE wanted to ensure access to safe water in IDP-camps via the distribution of water and the building of latrines, hand washing stations and showers. In order to ensure hygiene, CARE will distribute hygiene kits in the IDP camps (CARE, 2012). No further specific number has been attached to this objective. Nevertheless, till 2012 CARE ensured access to safe and clean water in 23 camps and build 1027 latrines, 89 hand-washing stations and 342 showers in the first year after the earthquake (CARE, 2012).

The operational goals surrounding the safe provision of water transitioned to address more permanent needs for services in established communities, led by communities and local leaders. In this phase, CARE wants to 'establish management structures and train community members in the maintenance of water and sanitation facilities' (CARE, 2013:4). While no specific numbers are given about what has been achieved, CARE managed to 'work with local residents and authorities to rehabilitate or build durable community-managed water points' (CARE, 2015:10). CARE also cooperated with DINEPA in order to ensure that any infrastructure followed government standards and that the facilities CARE provided can be maintained in the future (CARE, 2015). CARE also strengthened the capacities of DINEPA by training the technicians to support and rehabilitate the protected 228 water points.

With the outbreak of cholera, CARE wanted to extend its activities to other departments by improving access to water through Aquatab distributions, water trucking and chlorination of well water (CARE, 2013). Next to this, CARE wants to promote good hygiene practices, via hygiene promotion sessions (CARE, 2013). In order to achieve this, CARE increased its water and sanitation facilities in the affected areas. One way of doing this was to distribute purifying Aquatabs. This led to high unexpected costs. CARE worked 'to strengthen the ability of local organizations to plan and provide front-line response and trained health staff to properly manage, diagnose and refer cholera cases' (CARE, 2015:11). The poor infrastructure made it possible for the cholera disease to spread quickly, leading to more work for aid organizations. CARE has trained local staff who conducted over

70.000 sessions of cholera prevention and hygiene promotion (CARE, 2015). Next to education about cholera prevention, CARE set up 65 children's and mothers' clubs to promote hygiene (CARE, 2012).

### 5.4.1.2 SHELTER

CARE wanted to distribute emergency shelters and repair kits (CARE, 2012). No specific amount of shelters has been attached to this goal. Immediately after the earthquake, CARE distributed 2.550 hurricane resistant transitional shelters and provided 500 families in rural areas with house repair kits (CARE 2014). CARE managed to distribute 14.902 tarps, 20.641 mattresses and 44.826 blankets in the first year after the earthquake (CARE, 2010). Next to this, CARE built 913 transitional shelters before the end of 2010 (CARE 2010).

2 years after the earthquake, CARE aimed at supporting the return of earthquake survivors to the neighborhood of origin with the use of the 'Neighborhoods of return – Neighborhoods Improvement' project. This project aims to create pull factors to people living in camps, in order to encourage them to return to their communities (CARE, 2012). In 2012, CARE started to empower camp residents in finding housing alternatives. CARE gave homeowners financial and technical assistance if they agreed to host a family living in a camp for 12-24 months. CARE succeeded in this objective to empower local residents in the repairing and building of houses, because the homeowners managed the project themselves. They purchased the materials locally and hired local workers with the money provided by CARE, contributing to the neighborhoods economy. While CARE trained the workers, they also inspected the materials and supervised the work (CARE, 2014). In the first five years CARE provided job training to 175 people, from which 88 were women (CARE, 2015).

### 5.4.1.3 HEALTH

In order to increase sexual and reproductive health CARE wanted to counter gender-based-violence and reduce illness and loss of life among female survivors. Their strategic objective was to distribute 'clean delivery kits, newborn kits, bed sheets, condoms and other necessary sexual and reproductive health items' (CARE, 2012:5). CARE distributed in the first year 1.904 clean delivery or newborn kits, 96.000 condoms, 20.641 mattresses and 44.826 blankets (CARE, 2010).

On the longer term, CARE wants to implement the 'Lifesaving Interventions for Women and Girls in Haiti' project. This project using a community-based approach through the partnerships with local health facilities (CARE, 2012). The objectives of this project include the 'training of community health workers and traditional birth attendants (midwives) on birth preparedness and planning; to raise awareness about sexual and reproductive health; and by improving dialogue and promote greater social equality between women and men' (CARE, 2012:5). From the beginning of this project, CARE worked together with communities around the camps, 'creating solidarity links between camp

residents and the rest of the population' (CARE, 2015:19). In order to promote safe sex and responsible sexual behavior, 172 health workers and traditional birth attendants received training on birth preparedness and planning (CARE, 2015). 'Over a period of three years, CARE created 178 community clubs and solidarity groups compromised of women and men (CARE, 2015:19). Next to these community clubs, CARE tried to improve dialogue and promote greater social equality between women and men via the construction of five community centers (CARE, 2015).

### 5.4.1.4 FOOD SECURITY, LIVELIHOODS AND ECONOMIC DEVELOPMENT

The last objective of CARE is about food security, livelihoods and economic development. Again, 'women and girls' are the main target group of this area of intervention. CARE argues that these three areas are all intertwined and can therefore be tackled at the same time. CARE wants to distribute emergency food after the earthquake, but puts the focus on creating food security on the longer term. Via economic development CARE wants to create a money stream that allows residents to buy food and increase their livelihoods. In order to increase economic development, CARE wants to set up the 'Village Savings and Loans Association Program'(VSLA). The aim of this project is to develop via a community-based approach a self-help initiative that 'organizes village women to build capacity, knowledge and financial capital' (CARE, 2012:1). This project addressed 'the lack of economic opportunities via a combination of business skill development and small grants for establishing income-generating activities (CARE, 2015:19). CARE initiated this project, but left the allocation of money to the residents who take part in this project. In the end of 2012, $147.481 savings were mobilized. The average savings per member was $35,-(CARE, 2012). Next to this financial tool, CARE reached 12.491 people with its cash-for-work program in 2010(CARE, 2010).

### 5.4.2 THE IMPLEMENTATION PROCESS

CARE believes that it is not sufficient to fix the symptoms of poverty. CARE 'strives to address the underlying causes, in particular the unequal power relations between men and women and the ability for women to fully participate in the development of their household, community and country' (CARE, 2015:5). This striving might be difficult to achieve in times of crisis, but is even more important, since sexual violence and exploitation are worse in the aftermath of a crisis (CARE, 2010).

'Supporting people with sheltering solutions is one of CARE's core activities during emergency response' (CARE, 2015:5). Therefore, CARE distributed emergency shelters and non-food relief items to displaced families (CARE, 2015). In order to achieve the operational goals surrounding sheltering, CARE set up the project 'Neighborhoods of return – Neighborhood improvement'. With this project,

CARE tries to 'build a base for reconstruction and recovery based on social links and local capacity that allow the neighborhoods to organize and make their own development decisions' (CARE, 2011:3). But before the camp residents are able to move home, new houses need to be build. Because of the rubble and land tenure issues, the repairing can take a long time. Therefore CARE stimulates camp residents in finding housing alternatives, as explained in the goals. CARE aims to include the municipality throughout the process, improve links between residents and authorities and want to build capacity of the government to provide services (CARE, 2010). Next to this, CARE wants to empower community groups to take the lead on decision-making and to implement neighborhood development plans. In order for the local residents to rebuild houses, CARE provides job training to teams of local construction workers, homeowners and neighborhood residents (CARE, 2010). What is noticeable about this type of intervention is that CARE is not directly taking the lead in building new houses, but is more of a negotiator and mediator between the camp residents and other layers of society. While CARE is providing financial and technical assistance in the repairing and building of houses, it lets the governmental institutions, local companies and residents execute the work.

To provide safe water, sanitation and hygiene CARE's WASH interventions supported displaced populations living in camps by building latrines, showers, hand washing stations and by distributing hygiene kits (CARE, 2015). In order to tackle the spreading of cholera, CARE wants to work together with DINEPA and want to strengthen and create water management committees. After a year, CARE wants to build more durable community-managed water points by constructing water sources at the local level (CARE, 2013, 2015). In order to provide good hygiene practices and to prevent the spreading of cholera, CARE wants to work with community members to improve the understanding (CARE, 2013).

In order to boost sexual and reproductive health, CARE worked with the populations in camps to prevent gender-based violence. CARE also closely cooperated with the Ministry of Women Affairs to promote and protect women's rights (CARE, 2015). In the camps CARE distributed clean delivery kits, newborn kits, mattresses, blankets and condoms. In January 2010, CARE set up the project called 'Lifesaving Interventions for Women and Girls in Haiti'. This project aims to use a community-based approach by establishing partnerships with local health facilities and by developing and working with community organizations (CARE, 2013).

CARE also wants to empower women via economic development. With the use of the Village Savings and Loans Association (VSLA) program, CARE tends to build financial capital for women. 'VSLA is a member-based financial mechanism where individuals from a group with each contributing savings in the form of shares. The group then lends these shares to members at a fixed rate and period' (CARE, 2012:1). This self-owned financial tool can be used to finance individual livelihood and

development initiatives (CARE, 2012). Besides this extensive longer-term project, CARE directly provided Haitian citizens with food vouchers and cash-for-work money in order to stimulate economic development (CARE, 2015).

### 5.4.3 ACTORS INVOLVED

In order to maintain the facilities CARE build to provide safe drinking water and to make sure that infrastructure standards are met, CARE worked together with DINEPA (CARE, 2015). Next to this formal cooperation, CARE trained DINEPA'S technicians in the protection and rehabilitation of water points. Once the water points have been build, CARE worked with local residents and authorities to locally manage the water points. To promote hygiene and prevent cholera from spreading, CARE cooperated with local organizations and health staff to properly manage, diagnose and refer cholera cases (CARE, 2015). This again shows that CARE had the task of supervisor and mediator, while the local residents and authorities had the task of executer.

CARE worked closely with the Ministry of Women Affairs (MCFDF) 'to promote and protect women's rights' (CARE, 2015:20). From 2010 till 2015, 'CARE has worked with the MCFDF in several sectors including gender based violence prevention, women's empowerment, equity in education, food and nutrition, and protection services for women and girls' (CARE, 2015:20). CARE also trained 172 local health workers and traditional birth attendants on birth preparedness and planning  (CARE, 2015)

Regarding the repairing and building of houses, it is important to notice that the aim of CARE was not to rebuild and repair houses themselves. CARE stimulated and empowered local residents to rebuild the houses themselves by giving money and tools directly  to the local residents. In this regard, CARE cooperated to a higher extent with the local residents (from which especially women) in permanent shelter projects than the other aid organizations did.

### 5.4.4 OBSTACLES CAUSED BY THE INSTABILITY OF THE HAITIAN GOVERNMENT

CARE struggled to provide the needed amount of clean water and sanitation. CARE (2015:10) argues that 'the chronic lack of water and sanitation facilities of water and sanitation infrastructure is a stumbling block for the health and wellbeing of Haitians'. The government of Haiti made vast improvements, but increased investments are needed in urban and rural areas to ensure all families have access to improved water and sanitation services. The fragile water and sanitation infrastructure that was present before the earthquake made it even more difficult for CARE to tackle the spreading of cholera. The disease quickly spread to all 10 administrative departments of Haiti (CARE, 2015). CARE had to increase its water and sanitation interventions, leading to higher and unexpected costs.

CARE also tried to increase sexual and reproductive health. Part of this was to decrease the incidents of sexual violence. Even before the earthquake, the incidents including rape, sexual exploitation and child trafficking was already disproportionally high. CARE blames the government for not investing enough in creating equal rights for women and men. Incidents of sexual violence were not prevented by the government in displacement camps. This task has been left to the aid organizations. CARE invested a lot in promoting greater social equality and dialogue in order to increase awareness about the topic of sexual violence (CARE, 2015).

As mentioned earlier, CARE tasked the local residents to rebuild their homes via technical training and donations in the form of money and tools. The land tenure issue was therefore less of an obstacle for CARE than for the other aid organizations. This is also due to the fact that CARE focussed to a greater extent on the actual rebuilding of neighbourhoods, instead of the building of whole new neighbourhoods, where the organization required new ground for (CARE, 2014). The problem that hampered the rebuilding of neighbourhoods was the amount of rubble on the streets.

## 6. Analyses of the aid policies

In this part, the outcomes of the expectations are given, via an analyses of the aid policies.

> *SQ 1: The level of state instability in Haiti in 2010 negatively affected the cooperation between the aid organizations and the government of Haiti.*

The WFP cooperated the most with the government of Haiti, wherefore one could argue that according to this expectation, their cooperation was the most affected by the instability of the government. What can be concluded from the evaluation reports written by the WFP is that the cooperation between the WFP and the government has been negatively affected by the instability. The WFP cooperated with the ministry of agriculture and health in order to decrease the percentage of people living food insecure. As mentioned in the findings chapter, the government was not able to fulfil their tasks surrounding food security when the WFP dealt with budget restrictions and with closures of humanitarian intervention projects in the end of 2011, and had to transfer some tasks back to the government. The WFP developed protocols for the management of moderate acute and severe malnutrition and other emergency food issues, but this could not prevent the dramatic increase of people living in food insecurity in 2012. Besides this clear critique, the WFP has rarely mentioned any problems with the cooperation between the government and them.

Critical independent reports about the IFRC argued that due to a lack of sufficient coordination between the IFRC and the government of Haiti and the weak national and local ownership, the objectives surrounding (permanent) shelter failed. While the government is being blamed for the lack of cooperation, the IFRC can also be blamed for excluding other parties in their decision-making process.

The level of state instability negatively affected the cooperation with Oxfam Novib, due to the incapability of the governmental institution for waste management: the Municipal Solid Waste Authority to fulfil their tasks which were agreed upon by both parties. The waste management authority proved to be unsuccessful when Oxfam Novib transferred their tasks back to the SMCRS, resulting in a failure of the cooperation and the objectives surrounding waste management and rubble removal.

CARE cooperated the least with the Haitian government. No issues surrounding the cooperation with the Haitian Ministry of Women and DENIPA were mentioned in the evaluation reports, wherefore it is not possible to argue whether the level of state instability negatively affected the cooperation.

Overall, the level of state instability negatively influenced the cooperation with the aid organization in different fields. While not all the aid organizations were burdened by this fail-factor, it still had an considerable impact in the goal achievement of the policies, making it a relevant fail-factor.

*SQ 2: The level of state instability in Haiti in 2010 increased the lack of funding and resources of the aid organizations.*

It has been made clear by all (in)dependent evaluation reports that first of all, the land tenure and property-issues have had an devastating effect on the availability of resources to build on, resulting in failures of objectives surrounding the provision of permanent shelter, water and washing facilities and food security.

The IFRC who put the main focus on the provision of shelter, got affected by this burden the most. They argue that due to the land and property-issues, there was not enough land available to build IDP camps, washing and water facilities and houses on, resulting in difficulties in achieving the objectives surrounding water, sanitation and hygiene and resulting in the failure of the objectives surrounding the provision of (permanent) shelter. The IFRC only managed to build 3 permanent houses, instead of the intended 130.000.

Oxfam Novib put their main focus on the provision of clean water, sanitation and hygiene and therefore, got less affected by this burden. Nevertheless, the lack of ground to build hampered the building of water facilities, but did not result in the failure of this objective. The land tenure issues resulted in the failure of the shelter objectives to rebuild the neighbourhood of Carrefour Feuilles.

The World Food Programme argued that the lack of funding from the government in infrastructure resulted in challenges to gather enough food and to distribute this food to rural areas. Next to the lack of funding, the land tenure issues hampered the WFP in finding enough ground to grow crops on, in order to reduce food and nutritional insecurity.

CARE struggled to provide the needed amount of clean water and sanitation, due to the chronic lack of water and sanitation facilities and infrastructure. The property-right issues have been less of a burden to CARE, because of the intervention methods they used in order to fulfil their goals surrounding shelter.

Overall, the lack of funding and resources caused by the instability of the government is the biggest

reason why many objectives from the aid organization have failed. This fail-factor has hampered the rehabilitation of sheltering in a way that after a year, 550.000 people were still living in IDP camps.

*SQ 3: The level of state instability in Haiti in 2010 made it more difficult for the aid organizations to tackle the unexpected changes in the field.*

The IFRC, Oxfam Novib and CARE all had problems in tackling the cholera outbreak. The three aid organizations blame the government for the lack of investments made in the prevention and treatment of cholera, together with the poor water infrastructure and a lack of clean running water, which resulted in the quick spreading of cholera and in the increased costs for the aid organizations.

While it is most likely that the WFP has also been hampered by the spreading of cholera, this is not mentioned in their evaluation reports. The unexpected change for the WFP was the food crisis of 2012. The WFP blames the government for marginalizing the urban areas with its centralized policies, resulting in the inability of the WFP to prevent the food crisis of 2012.

Overall, the level of instability negatively affected all aid organizations in their efforts to tackle unexpected changes, wherefore the fail-factor can be considered as present in this case.

*SQ 4: The level of state instability in Haiti in 2010 increased the lack of legitimacy of the aid policies, resulting in a failure of the policy.*

Not all aid organizations were according to the available literature affected by the lack of legitimacy. For the IFRC, the lack of fuel (which is the task of the government to provide) affected the fast delivery of shelters, resulting in a 200% increase of the costs and weakened support from the local authorities and the affected people.

Oxfam Novib blames the government for the slow recovery of the financial institutions. Because of the slow recovery, grants were overcoming significant delays. The delays negatively affected the support people had for cash-for-work and grant programs and resulted in negative coping strategies.

The other two organizations have not reported any problems with a lack of support, due to the instability of the Haitian government.

While the lack of legitimacy caused for some aid organizations a burden, this fail-factor is not convincing enough to be a factor that resulted in the failure of aid policies.

Below the summarized outcomes of the expectations are given.

| Aid organizations > Expectations ∨ | The IFRC | Oxfam Novib International | The World Food Program | CARE |
|---|---|---|---|---|
| SQ 1: The level of state instability in Haiti in 2010 negatively affected the cooperation between the aid organizations and the government of Haiti. | As critics argue, there has been a lack of sufficient coordination between the IFRC, other aid organizations and the government, together with a weak national and local ownership, which resulted in the failure of the objectives surrounding the provision of (permanent) shelter. | The cooperation with the local governmental institution for waste management: the Municipal Solid Waste Authority proved to be insufficient, resulting in the failure of the objectives regarding waste management and rubble removal. | Cooperation between the WFP and the government proved to be unsuccessful when the WFP dealt with budget restrictions and with closures of humanitarian intervention projects in the end of 2011. The government was not able to fulfil their tasks surrounding food security, resulting in a dramatic increase of food insecurity in 2012. | None. |
| SQ 2: The level of state instability in Haiti in 2010 increased the lack of funding and resources of the aid organizations. | Due to the land tenure and property-issues, there not enough land available to build IDP camps, washing and water facilities and houses on, resulting in difficulties in achieving the objectives surrounding water, sanitation and hygiene and resulting in the failure of the objectives | The lack of rubble removal and the property-issues slowed down the process of rebuilding communities, resulting in the failure to rebuild the neighbourhood of Carrefour Feuilles. | The lack of funding from the government in infrastructure resulted in challenges to gather enough food and to distribute this food to rural areas. Next to this, the land tenure issues hampered the WFP in the structural reducing of food and nutritional insecurity. | CARE struggled to provide the needed amount of clean water and sanitation, due to the chronic lack of water and sanitation facilities and infrastructure. |

| | | | | |
|---|---|---|---|---|
| | surrounding (permanent) shelter. | | | |
| SQ 3: The level of state instability in Haiti in 2010 made it more difficult for the aid organizations to tackle the unexpected changes in the field. | Due to the lack of investment made by the government in the prevention and treatment of cholera resulted in higher costs and greater effort of the IFRC to tackle cholera. | The lack of running water and disposal mechanisms made it difficult to provide clean sanitation facilities in the IDP camps and neighbourhoods, resulting in difficulties to tackle cholera. | The WFP experienced great difficulties in handling the unexpected change of the dramatic increase of food insecurity in 2012, due to the marginalization of the urban areas. | CARE blames the poor infrastructure provided by the government, and the lack of investments made in the provision of clean water to be the reason for the quick spreading of cholera. This outbreak resulted in high unexpected costs for CARE. |
| SQ 4: The level of state instability in Haiti in 2010 increased the lack of legitimacy of the aid policies, resulting in a failure of the policy. | The lack of fuel affected the fast delivery of shelters, resulting in a 200% increase of the costs and weakened support from the local authorities and the affected people. | Due to the slow recovery of the financial institutions, grants were overcoming significant delays. The delays negatively affected the support people had for cash-for-work and grant programs and resulted in negative coping strategies. | None. | None. |

## 7. CONCLUSION AND DISCUSSION

### 7.1 CONCLUSION

As shown in the context and analysis, the effects of the instability of the Government of Haiti on the implementation of the aid organizations' policies have been immense. This final chapter will give an answer to the research question: **'How does the level of state instability in Haiti contribute to the implementation of the humanitarian aid policies of the four biggest aid organizations?'**

As mentioned in the findings chapter, the level of instability of the government resulted in the lack of sufficient cooperation between the government and the aid organizations, the lack of funding and resources and the inability to deal with unexpected changes, which again negatively influenced the level of goal achievement of the aid policies. The fail-factor that hampered the policy implementation the most was the lack of available land, due to the land tenure and property-right issues. This resulted in a failure of the objectives of the IFRC and Oxfam Novib to provide (permanent) sheltering and hampered the efforts of CARE, IFRC and Oxfam Novib to build sanitation facilities and washing stations. For the WFP it hampered the efforts to provide ground for agriculture in order to decrease food insecurity, which was their main objective. The lack of sufficient cooperation also had a devastating impact on the WFP. Due to this fail-factor the WFP was not able to prevent the immense increase of people living in food insecurity in 2012. The lack of sufficient cooperation resulted for the IFRC in the failure of the objectives surrounding shelter and resulted for Oxfam Novib in the failure of the objectives surrounding waste management and rubble removal. The cholera epidemic was an unexpected change which has been difficult to tackle for CARE, the IFRC and Oxfam Novib due to the instability of the government. The three organizations blame the government for the lack of investments made in prevention and treatment of cholera, resulting in the quick spreading in the disease.

Next to the fail-factors mentioned in the expectations, there are other important fail-factors which contributed to the failure of the aid policies of the four biggest aid organizations. One broad fail-factor which has been mentioned many times by both the independent as the dependent evaluation reports has been 'the lack of investment'. A lack of investment in the urban areas, leading to marginalization, a lack of economic opportunities and increasing food insecurity. A lack of investment in hygiene, leading to difficulties in changing people's behavior when educating them about safe hygiene practices. A lack of investment in the health sector, leading to difficulties in healing people. A lack of investment in equality between men and women, leading gender-related violence and a lack of economic opportunities for women. A lack of investments in clean water and sanitation facilities,

leading to difficulties in providing these facilities in IDP camps. The lack of an effective democratic system, leaving the power in the hands of a very few. Lastly and maybe most importantly, the lack of investment in basic human needs, leading to poverty and the inability of the Haitian citizens to rebuild their country.

The theory from Buss (2015) has been proved to be true for this case study. The effects of the level of instability of the Haitian government on the failures of the policy objectives cannot be neglected.

## 7.2 DISCUSSION

Reflecting on the selection of information, it is important to take into account when reading the conclusion that there were no independent evaluation reports available from the WFP and CARE. Their dependent evaluation reports rarely criticized themselves nor the government in their actions, making it difficult to determine the reliability of their work. Next to this, it has been difficult to consider whether Oxfam Novib, CARE and the WFP achieved their objectives, because some of the goals were not specified and instead broadly formulated.

Reflecting on the type of research conducted, all the information available in this study has been retrieved from evaluation reports and critical media analyses via desk research. In order to increase the reliability of this work, it would have been helpful to conduct interviews on the people from the organizations and the communities who were affected by the work from the aid organizations. Due to the lack of time and resources, this was not possible for this study but further research on this topic is encouraged.

The research design of this study is a case study. 'Concerns in doing case study evaluations extend from issues of validity to issues of generalization' (Yin, 2013:325). The case of Haiti in 2010 with the specific level of instability of the government is an a-typical case. The specific constraints the government caused for the aid organizations are unlikely to take place at a different moment of time in a different country. In order to increase the validity of this study, more cases could be investigated. Nevertheless, this does not mean that the outcome of this study is not useful. This study contributed to the knowledge pool about policy implementation in unstable states. It has been made clear by this study that the general constraints unstable governments are causing for the implementation process cannot be neglected. Next to this, this evaluation report is useful for aid organizations who want to work in Haiti in the nearby future. When implementing aid policies in the future, organizations can learn from this study in a way that they are urged to do in-depth research on the shortcomings of the government, in order to find policy alternatives that rely to a greater extent on local communities and

to a lesser extent on governmental bodies. This can safe a lot of donor money and time. If the organization decides (or is forced) to cooperate to a high extent with the government, this study recommends them to closely monitor the decisions and actions made by the government, in order to make sure objectives are executing according to plan.

REFERENCES

Books:

Polman, L. (2013). *The crisis caravan*. New York: Henry Holt and Company.

Journals:

Beach, D., & Pedersen, R. B. (2013). *Process-tracing methods: foundations and guidelines*: University of Michigan Press.

Buss, T. (2015). Foreign Aid and the Failure of State Building in Haiti from 1957 to 2015. *Latin American Policy*, 6(2), pp.319-339.

Fotaki, M. (2010). Why do public policies fail so often? Exploring health policy-making as an imaginary and symbolic construction. *Organization*, 17(6), pp.703-720.

Howlett, M. (2009). Policy analytical capacity and evidence-based policy-making: Lessons from Canada. *Canadian Public Administration*, 52(2), pp.153-175.

Howlett, M., Ramesh, M. and Wu, X. (2015). Understanding the persistence of policy failures: The role of politics, governance and uncertainty. *Public Policy and Administration*, 30(3-4), pp.209-220.

McConnell, A. (2010). Policy Success, Policy Failure and Grey Areas In-Between. *Journal of Public Policy*, 30(03), pp.345-362.

McConnell, A. (2015). What is policy failure? A primer to help navigate the maze. *Public Policy and Administration*, 30(3-4), pp.221-242.

Newman, J. and Head, B. (2015). Categories of failure in climate change mitigation policy in Australia. *Public Policy and Administration*, 30(3-4), pp.342-358.

Vaux, T. (2006). Humanitarian trends and dilemmas. *Development in Practice*, 16(3-4), pp.240-254.

Yin, R. (2013). Validity and generalization in future case study evaluations. *Evaluation*, 19(3), pp.321-332.

Reports:

Action Against Hunger. (2015). *HAITI EARTHQUAKE: Progress Report, 2010-2015.*

American Red Cross. (2012, Jan). *Haiti Earthquake Response, Two-year update January 2012.*

CARE. (2010). *Haiti: CARE Earthquake Relief and Recovery: January Through November 2010.*

CARE. (2012, Dec). *Economic Development: CARE Haiti*

CARE. (2012, Dec). SHELTER: CARE Haiti: Neighbourhoods of return.

CARE. (2012, Dec). WASH: CARE Haiti: Water, Sanitation & Hygiene.

CARE.        (2014).        CARE        Five-year        Progress        Report.

CARE. (2015). *HAITI EARTHQUAKE: Progress Report: 2010-2015.*

EPYPSA. (2011, Dec). *An Evaluation of the Haiti Earthquake 2010 Meeting Shelter Needs: Issues, Achievements and Constraints.*

Impact. (2012). *Tips & Tools #18: Coding Qualitative Data*. Centre for evaluation and research.

IFRC. (2010). *Haiti earthquake operation: Summary of the plan of action*

IFRC. (2010, May 11). *Operations update. Haiti: Earthquake Six Months Progress Report.*

IFRC. (2013, Jan). *Haiti earthquake: Three-year progress report.*

IFRC. (2015). *Impact of the regulatory barriers to providing emergency and transitional shelter after disasters. Country case study: Haiti.*

IFRC. (2015, Jan). *Haiti earthquake: Five-year progress report*

IFRC. (n.d). *Coordinating shelter in Haiti IFRC and the Shelter Cluster*

Margesson, R., Taft-Morales, M. (2010, Jan. 2). *Haiti Earthquake: Crisis and Response.* Congressional Research Sevice. www.crs.gov

MercyCorps.org. (n.d.). *Guide to Cash-for-Work Programming*

OECD. (2011, June). *Evaluation insights, Haiti Earthquake response, Emerging Evaluation Lessons.*

OECD. (2015). *Reaching Our Development Goals: Why Does Aid Effectiveness Matter?*

Oxfam Novib International. (2010, July 7). *Aid to Haiti, 6 months on: a long way to go Emergency relief effective, but long-term challenges remain.* www.oxfam.org.

Oxfam Novib International. (2010). *Haiti Progress Report 2010.* www.oxfam.org

Oxfam Novib International. (2011, Jan, 6). *From relief to recovery: Supporting good governance in post-earthquake Haiti.* www.oxfam.org.

Oxfam Novib International. (2011). *Haiti Progress Report January-December 2011.* www.oxfam.org

Oxfam Novib International. (2012). *Haiti: The slow road to reconstruction: Two years after the earthquake.* www.oxfam.org

Oxfam Novib International. (2014). *Haiti Progress Report: 2014.* www.oxfam.org

Rees-Gildea, P. (2012). *LESSONS LEARNED & BEST PRACTICES The International Federation of Red Cross and Red Crescent Societies Shelter Programme in Haiti 2010-2012*

The Fund For Peace. (2016). *Fragile State Index Annual Report 2016.* www.fundforpeace.org

Turnale University. (2011, Jan. 24). *Haiti Humanitarian Aid Evaluation Structured Analysis Summary Report*

Turnbull, M. (2011, June 30). *Final Report: Haiti Earthquake Response. Evaluation Oxfam's GB's DEC-funded Programme.*

World Food Programme. (2010). *EMERGENCY OPERATION 200110 – HAITI: FOOD ASSISTANCE TO EARTHQUAKE AFFECTED POPULATIONS IN HAITI.*

World Food Programme. (2011, Nov). *Haiti: An Evaluation of WFP's Portfolio (2005-2010).* Office of Evaluations.

World Food Programme. (2013). *Haiti 2010-2013: working towards sustainable solutions*.

World Bank. (2011, April 27). *Project Information Document (PID) Concept Stage Report No: AB6084.*

World Bank. 2015. *Country data report for Haiti, 1996-2014 (English).* World Governance Indicators (WGI). Washington, D.C. : World Bank Group.

Articles:

CDI. (2015, April). *Applying Process Tracing in Five Steps.* Practise paper annex.

Lisner, M., Snow, S. (2016, May). Failed states and the effects of instability. *Rutgers, The State University of New Jersey*

Zéphyr, D., Córdova, A., Salgado, H., Seligson M. A. (2011). *Haiti in Distress: The Impact of the 2010 Earthquake on Citizen Lives and Perceptions.* USAID | Haiti: American Embassy.

Websites:

Action Against Hunger. (2010). *A Month after Earthquake, More than 100,000 People in Port-au-Prince Assisted by ACF | Action Against Hunger*. [online] Available at: https://www.actionagainsthunger.org/blog/month-after-earthquake-more-100000-people-port-au-prince-assisted-acf. [Accessed 19 Mar. 2018].

American Red Cross. (2015). *The Real Story of the 6 Homes in Haiti: Answering Your Questions*. [online] Available at: http://www.redcross.org/news/article/The-Real-Story-of-the-6-Homes-Answering-Questions-about-Haiti [Accessed 4 May 2018].

Anthony, A. (2010). *Does humanitarian aid prolong wars?*. [online] The Guardian. Available at: https://www.theguardian.com/society/2010/apr/25/humanitarian-aid-war-linda-polman [Accessed 29 May 2018].

BBC. (2010). *BBC News - The challenge of rebuilding Haiti*. [online] Available at: http://news.bbc.co.uk/2/hi/americas/8482237.stm [Accessed 15 May 2018].

Cocking, J., Bastable, A. (2010). *Water, sanitation and public health in post-earthquake Haiti: reflections on Oxfam's experience - ODI HPN*. [online] ODI HPN. Available at: https://odihpn.org/magazine/water-sanitation-and-public-health-in-post-earthquake-haiti-reflections-on-oxfam%C2%92s-experience/ [Accessed 11 May 2018].

Disasters Emergency Committee. (n.d.). *Haiti Earthquake Facts and Figures*. [online] Available at: https://www.dec.org.uk/articles/haiti-earthquake-facts-and-figures [Accessed 15 May 2018].

Elliott, J., Eisinger, J., Sulllivan, L. (2018). *The Red Cross' Secret Disaster — ProPublica*. [online] ProPublica. Available at: https://www.propublica.org/article/the-red-cross-secret-disaster. [Accessed 16 Mar. 2018].

Fletcher, M. (2018). *Who can she trust? Oxfam scandal comes as no surprise to some*. [online] Thetimes.co.uk. Available at: https://www.thetimes.co.uk/article/who-can-she-trust-thescandal-of-aid-workers-in-the-field-9n57cscv2. [Accessed 10 Mar. 2018].

Fund For Peace. (2018). *Country Dashboard | Fragile States Index*. [online] Available at: http://fundforpeace.org/fsi/country-data / [Accessed 31 May 2018].

Fund For Peace. (2018). *Indicators | Fragile States Index*. [online] Available at: http://fundforpeace.org/fsi/indicators/ [Accessed 31 May 2018].

Haiti liberté. (2013). *Why is Haiti Hungry?*. [online] Available at: http://www.haiti-liberte.com/archives/volume7-13/Why%20is%20Haiti%20Hungry.asp [Accessed 20 May 2018].

Hanson, S. (2009). *Corruption in Sub-Saharan Africa*. [online] Council on Foreign Relations. Available at: https://www.cfr.org/backgrounder/corruption-sub-saharan-africa [Accessed 20 Jun. 2018].

Harshaw, T. (2010). *Haiti and the Politics of Disaster*. [online] Opinionator. Available at: https://opinionator.blogs.nytimes.com/2010/01/13/haiti-and-the-politics-of-disaster/ [Accessed 26 Mar. 2018].

HuffPost. (2018). *Red Cross Built Exactly 6 Homes For Haiti With Nearly Half A Billion Dollars In Donations*. [online] Available at: https://www.huffingtonpost.com/2015/06/04/red-cross-haiti-report_n_7511080.html. [Accessed 16 Mar. 2018].

IFRC. (2010). *Haiti earthquake - Saving lives - IFRC*. [online] Available at: http://www.ifrc.org/en/news-and-media/photo-galleries/2010/haitiearthquake-januaryI-2010/ [Accessed 25 May 2018].

IFRC. (2010). *Haiti: focus on emergency and mid-term shelter - IFRC*. [online] Available at:

http://www.ifrc.org/en/news-and-media/news-stories/americas/haiti/haiti-focus-on-emergency-and-mid-term-shelter/ [Accessed 26 Apr. 2018].

IWH. (2015). *Cross-sectional vs. longitudinal studies | Institute for Work & Health*. [online] Available at: https://www.iwh.on.ca/what-researchers-mean-by/cross-sectional-vs-longitudinal-studies [Accessed 29 Jun. 2018].

Jackson, A. (2012). *Politics in Haiti | Haiti Earthquake 2010*. [online] Available at: http://haitiearthquake.web.unc.edu/politics-in-haiti/ [Accessed 26 Mar. 2018].

Kahn, C. (2018). *Haitians Take Rubble Removal Into Own Hands*. [online] Available at: https://www.npr.org/2011/01/12/132844805/haitians-take-rubble-removal-into-own-hands [Accessed 7 May 2018].

LandLinks. (2015). *Five Years After the Earthquake, Reflecting on Land Tenure Issues in Haiti | LandLinks*. [online] Available at: https://www.land-links.org/2015/02/five-years-after-the-earthquake-reflecting-on-land-tenure-issues-in-haiti/ [Accessed 5 May 2018].

Moloney, A. (2010, July 5). *Unclear land rights hinder Haiti's reconstruction*. [online] Available at: https://reliefweb.int/report/haiti/unclear-land-rights-hinder-haitis-reconstruction [Accessed 5 May 2018].

Moloney, A. (2016, Jan 20). *Haiti needs new approach to make aid effective, bring jobs, skills:...* [online] Available at: https://www.reuters.com/article/us-haiti-aid-idUSKCN0UY28U [Accessed 5 May 2018].

 Mosselmans, M. (2016). *Only a fraction of humanitarian aid goes through local organisations. Why? | Michael Mosselmans*. [online] The Guardian. Available at: https://www.theguardian.com/global-development/2016/feb/05/aid-directly-to-local-organisations-more-effective-more-timely [Accessed 30 May 2018].

NGOmonitor. (2018). *Terrorist Aid Hijacking and NGO Oversight Failure: Learning from the World Vision Case*. [online] Available at: https://www.ngo-monitor.org/press-releases/terrorist-aid-hijacking-and-ngo-oversight-failure-learning-from-the-world-vision-case/ [Accessed 10 Mar. 2018].

OECD.org. (2018). *States of Fragility Reports - OECD*. [online] Available at: http://www.oecd.org/dac/conflict-fragility-resilience/listofstateoffragilityreports.htm [Accessed 21 Mar. 2018].

Oxfam Novib International. (2010). *Oxfam's cash-for-work program in Haiti: Preparing shelter materials | Oxfam International*. [online] Available at:

https://www.oxfam.org/en/multimedia/video/2010-oxfams-cash-work-program-haiti-preparing-shelter-materials [Accessed 1 May 2018].

Pallardy, R. (2010). *Haiti earthquake of 2010 | Effects, Damage, Map, & Facts*. [online] Available at: https://www.britannica.com/event/Haiti-earthquake-of-2010 [Accessed 2 May 2018].

Petryni, M. (2018). *Difference Between Strategic & Operational Objectives*. [online] Available at: http://smallbusiness.chron.com/difference-between-strategic-operational-objectives-24572.html [Accessed 25 Apr. 2018].

Relief Web. (2011). *Action Against Hunger Assists 900,000 Haitians in 2011*. [online] Available at: https://reliefweb.int/report/haiti/action-against-hunger-assists-900000-haitians-2011 [Accessed 19 Mar. 2018].

TEDx Talks. (2018, Jan 9). *The Crisis Caravan: Linda Polman en TEDxCanarias 2012* [Video File]. Retrieved from https://www.youtube.com/watch?v=ifdODonGG9g&t=940s [Accessed 11 Mar. 2018].

The Borgen Project. (2016, Jan 24). *5 Top Humanitarian Aid Organizations | The Borgen Project*. [online] Available at: https://borgenproject.org/5-top-humanitarian-aid-organizations/ [Accessed 20 Mar. 2018].

UN News. (2018). *Lack of funding hampering humanitarian aid to war-affected Syrians – UN relief official*. [online] Available at: https://news.un.org/en/story/2015/01/489572-lack-funding-hampering-humanitarian-aid-war-affected-syrians-un-relief-official [Accessed 10 Mar. 2018].

World Bank. (2018). *Worldwide Governance Indicators | DataBank*. [online] Available at: http://databank.worldbank.org/data/reports.aspx?source=Worldwide-Governance-Indicators# [Accessed 29 Mar. 2018].

World Food Programme. (2015). *UN World Food Programme*. [online] Available at: http://www.wfp.org/stories/remembering-our-response-haitian-earthquake-food-crisis-avoided [Accessed 14 May 2018].

World Food Programme. (n.d.). *Haiti | WFP | United Nations World Food Programme - Fighting Hunger Worldwide*. [online] Available at: http://www.wfp.org/node/3478 [Accessed 14 May 2018].

World Food Programme. (n.d.). *Haiti | World Food Programme*. [online] Available at: http://www1.wfp.org/countries/haiti [Accessed 20 May 2018].
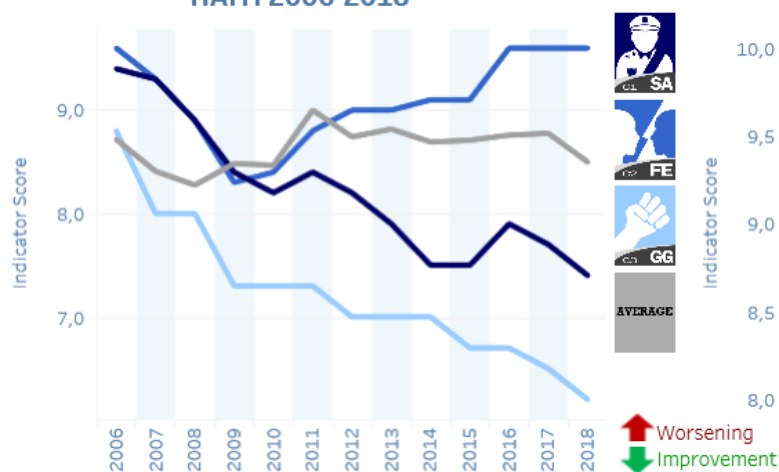
# APPENDICES

Appendix A:



Country : Haiti
Source: Worldwide Governance Indicators
Created on: 03/29/2018
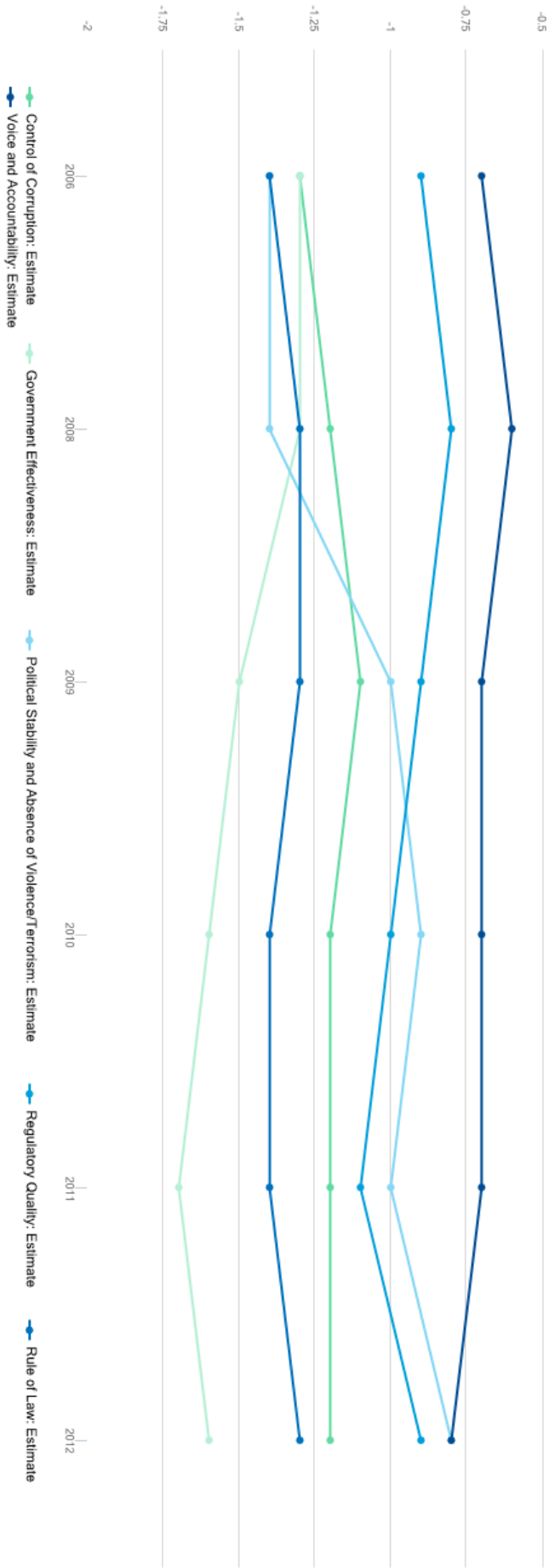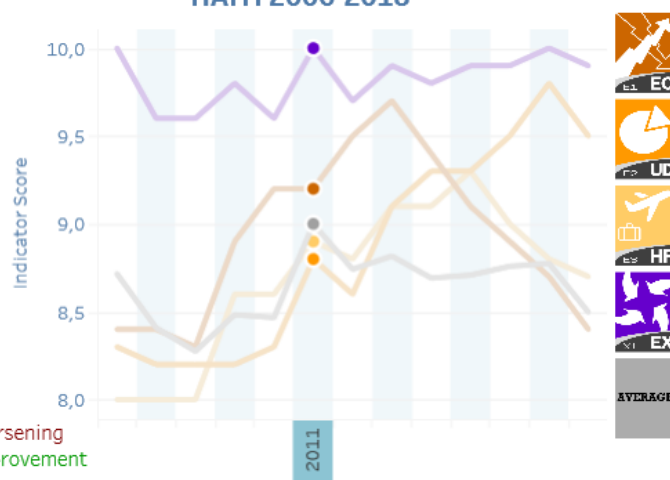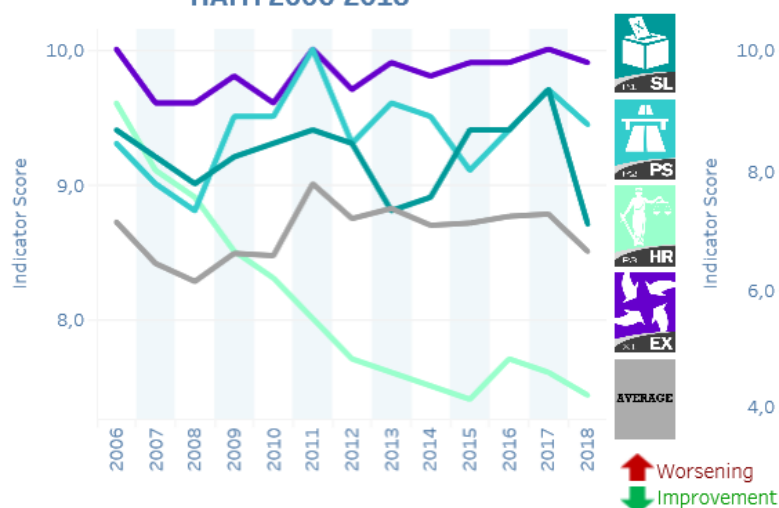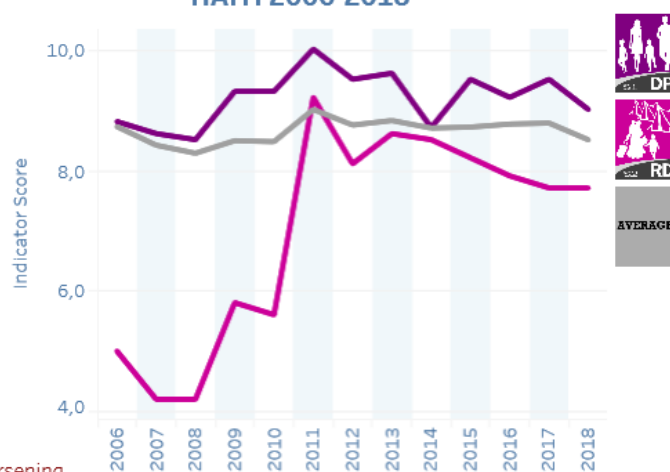
Appendix B:



COHESION INDICATOR TRENDS
HAITI 2006-2018

ECONOMIC INDICATOR TRENDS
HAITI 2006-2018

POLITICAL INDICATOR TRENDS
HAITI 2006-2018

SOCIAL INDICATOR TRENDS
HAITI 2006-2018

Copyright © 2018 The Fund for Peace

66