Localising emergency response: COVID-19 and the future of humanitarian mobilities

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Abstract

With COVID-19 restrictions hampering the mobility of humanitarian workers and emergency aid, Cyclone Harold and Super-cyclone Amphan have shown the importance of local coordination and training in order to build sustainable community resilience to natural disasters.

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As countries responded to the COVID-19 pandemic by closing their borders and halting flows of people and goods, ruptures to the standard practices of provision and delivery of emergency humanitarian aid created unprecedented challenges. Natural disasters and non-COVID-related crises continued to wreak havoc around the world, including category-5 Cyclone Harold, which struck multiple countries in the Pacific Islands in April 2020,[2] and Super-cyclone Amphan, which hit India and Bangladesh in June 2020.[3] Each displaced hundreds of thousands of people. Yet due to pandemic-related closures and restrictions, humanitarian agencies could not mobilise global emergency responses in their traditional forms. Humanitarian corridors – the avenues of prioritised mobility that typically form during crises as channels for goods and assistance – did not open as usual. Humanitarian waivers/exemptions to entry were, in many cases, stalled or blocked completely.[4]

As the examples of Cyclone Harold and Super-cyclone Amphan show, the new degree of shock restrictiveness raises novel questions and challenges,[5] but also, presents new opportunities to rethink how organisations can and should respond to crises.

In Vanuatu, where Cyclone Harold displaced 160,000 people (of a population of 300,000) in April 2020,[6] foreign humanitarian workers were sidelined, to keep the number of recorded coronavirus cases steady – at 0.[7] In a striking reminder of how mobility – humanitarian or otherwise – is heavily mediated by state priorities, policies, and infrastructures, entries were banned entirely, without making exemptions for emergency responders. Typical rapid-response methods, such as airdrops of goods and humanitarian air services for evacuations or staff transports to hard-to-reach locations, were grounded, and goods shipped in were subjected to 72-hour quarantine periods.[8] Aid workers based on the 83 islands comprising Vanuatu found themselves overwhelmed and without international support. Further, barriers were placed even between islands within the country. This left many goods and responders stranded in the capital city, while much of the damage happened on outer islands. As Jacqueline De Gaillande, Secretary General of the Vanuatu Red Cross Society, explained, "We had a lot of Red Cross volunteers well trained and on the ground, but there was

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[2] McGarry, Dan. 2020. 'It's all gone': Cyclone Harold cuts a deadly path through Vanuatu. *The Guardian.* 9 April 2020. Available online at: https://www.theguardian.com/world/2020/apr/10/its-all-gone-cyclone-harold-cuts-a-deadly-path-through-vanuatu. Last accessed 22 January 2021.

[3] Agence France Press. 2020. Super-cyclone Amphan kills up to 20 in India and Bangladesh. *The Guardian.* 21 May 2020. Available online at: https://www.theguardian.com/world/2020/may/21/super-cyclone-amphan-deaths-india--bangladesh Last accessed 22 January 2021.

[4] Office of the United Nations High Commissioner Human Rights. 2020. UN Experts: *Sanctions proving deadly during COVID pandemic, humanitarian exemptions not working.* 7 August 2020. Available online at: https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=26155&LangID=E. Last accessed 22 January 2021.

[5] International Organization for Migration. 2020. *COVID Mobility Impact Reports*. Available online at: https://migration.iom.int/mobility-impact-reports. Last accessed 22 January 2021.

[6] International Organization for Migration. 2020. *IOM Supports Vanuatu Response to Dual Challenge of Category 5 Cyclone, COVID-19*. 28 April 2020. Available online at: https://www.iom.int/news/iom-supports-vanuatu-response-dual-challenge-category-5-cyclone-covid-19. Last accessed 22 January 2021.

[7] See: International Federation of Red Cross and Red Crescent Societies. 2021. Final report. Vanuatu: Tropical Cyclone Harold. Available online at: https://reliefweb.int/sites/reliefweb.int/files/resources/MDRVU008dfr.pdf. Last accessed 8 March 2021; and Regencia, Ted. 2020. Coronavirus lockdown hobbles Vanuatu cyclone recovery effort. *Al Jazeera.* 13 March 2020. Available online at: https://www.aljazeera.com/news/2020/5/13/coronavirus-lockdown-hobbles-vanuatu-cyclone-recovery-effort. Last accessed 8 March 2021.

[8] European Civil Protection And Humanitarian Aid Operations. 2020. Humanitarian Air Services Factsheet. Available online at: https://ec.europa.eu/echo/what/humanitarian-aid/humanitarian-air-services_en. Last accessed 31 July 2020. See also: International Organization for Migration. 2020.

nothing to distribute because it was all here at Porta Villa."[9] Restrictions immobilised both goods and people, causing chaos throughout the supply chain.

As one of the first major natural disasters of the COVID-19 era, the Cyclone Harold response reveals a few significant insights about the state of humanitarian mobilities during the pandemic, about their potential futures, and about how we conceptualise mobility overall. First, the broad restrictions on movements of humans and goods emphasise the importance of contextualising mobility within a range of outside mediating forces, rather than as occurring independently or in a vacuum. Often the forces and constructs mediating mobility – at borders, points of entry, airports, and elsewhere – act behind the scenes, visible yet unnoticed, but responses to the COVID-19 pandemic have brought them to the forefront. In a very short amount of time, a flurry of emergency orders were signed, airports were shut down, some planes were turned around while others were grounded, border barriers were closed off, and access, in this case to Vanuatu, became impossible through regular channels. Each of these things – laws, emergency orders, airport runways, planes, checkpoints, border guards – are mediators of movement, part of the wider assemblage that works to move people and things from one point to another.

Second, the global shutdown made extremely clear how enormously delocalised traditional response plans are, and what potential issues are buried in the foundations of that design. In particular, it highlighted one key, underlying assumption in emergency responses: that access to the site of a response will be granted, or even accelerated, for people and goods mobilised from all over the world. The mechanisms to mobilise are in place, but without permissions, the machine cannot spin. That key assumption, as well as the lack of localised contingency plans in the event that the international supply chain is obstructed, are perhaps the primary reasons why the immobilising processes were so incredibly dramatic and disruptive in the case of Cyclone Harold.

The response to Cyclone Harold underscores the importance of looking beyond anthropocentric lenses when considering humanitarian mobilities, and mobilities in general. Human mobility is only one piece of an assemblage of heavily mediated movements, which also necessarily includes those of goods, skills, and ideas, among others – including the mobility of the virus itself, the cause of restrictions on people and goods in the first place. One piece cannot be understood without the others: opening up the lens to see all of them as interconnected and mutually inseparable allows for a contextualised understanding of the challenges facing humanitarians and policy-makers when dealing with simultaneous but very different crises, particularly when one of the crises necessitates a freeze on mobility.

The rapid shifts seen in the mediation and halting of emergency responses have disrupted what is already a particular form of shock mobility, defined by Biao Xiang as 'sudden human movements in response to acute disruptions'.[10] As Xiang points out, shock mobility, like short-term mobilities more generally, is often overlooked in migration studies, as most research focuses on larger-scale and slower movements. The exact reason for this is unclear, though perhaps one could be that slow movements are seen as more permanent given they are part of the 'norm', rather than 'disruptions'

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[9] Cornish, Lisa. 2020. First came the coronavirus. And then the cyclone hit. *Devex*. 21 May 2020. Available online at: https://www.devex.com/news/first-came-the-coronavirus-and-then-the-cyclone-hit-97261. Last accessed 22 February 2021.

[10] Xiang, Biao. 2020. Shock Mobility: Convulsions in human migration are having large impacts (Part I). *COMPAS Coronavirus and Mobility Forum*. 18 June 2020. Available online at: https://www.compas.ox.ac.uk/2020/shock-mobility-convulsions-in-human-migration-are-having-large-impacts-part-i/. Last accessed 22 January 2021.

to a 'norm'. Nevertheless, shock mobilities are critically important and demand more research, particularly because of their long-term implications. As Naomi Klein writes, once shocks end, the 'return to normalcy' is always actually a *new normal*, reconfigured by responses to the shock.[11] Here, we actually see three layers of shocks, and so perhaps we will see three 'new normals'. Just as natural disasters – short-lived shocks – have long-lasting repercussions, and humanitarian responses to those disasters – short-term shock mobilities – have their own repercussions, the current temporary disruptions of humanitarian mobilities due to COVID-19 may have their own long-lasting effects in emergency response designs, to the point of potentially altering all future responses. Despite the massive challenges posed, this also leaves space for opportunities for improvement – perhaps, for example, through lessening the shock of humanitarian interventions in the first place.

A particular characteristic of emergency responses as shock mobilities is that humanitarian workers mobilised from abroad do not integrate into the 'new normal' of the affected societies; instead, as the Cyclone Idai response showed a year before the pandemic,[12] and as many responses before have demonstrated as well, some of the largest problems in emergency responses arise when the 'outsiders' (humanitarians) leave.[13] This typically entails a large loss of resources, funding, media attention, and skills, lacking a transition from the humanitarian response to broader and longer-term development and resilience-building, as the 'missing middle' of the famous Humanitarian-Development Nexus falls through the cracks. Though each organisation has strategies and well-defined practices on when and how to exit, the withdrawal of international humanitarian organisations always entails some loss of technical skills, funding, and resources for the local community. Importantly, the extent of this impact depends significantly upon the integration of local stakeholders from the beginning[14] and on the amount of capacity-building done with members of the local community,[15] especially those left in particularly vulnerable positions, as those conditions will likely remain long after the spectacle of the crisis is over and the funding has dried up.[16] Increasingly localised coordination, then, though not a classic staple of historical humanitarian emergency responses, is a clear path towards longer-term resilience and sustainability. The pandemic and its entry restrictions may actually provide an opportunity for testing new methods of localising responses, which may under other circumstances have been considered too radical to trial in an emergency setting.

The Cyclone Harold response raised some important questions regarding the localisation of stored emergency goods and the mobilisation of international workers in the pandemic and post-pandemic eras. How can emergency relief goods best be localised to be immediately available to those in need?

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[11] Klein, Naomi. 2008. *The shock doctrine. The rise of disaster capitalism.* New York, US: Picador.

[12] United Nations Office for the Coordination of Humanitarian Affairs. 2020. *Mozambique: One year after Cyclone Idai, humanitarian assistance is still urgent*. Available online at: https://www.unocha.org/story/mozambique-one-year-after-cyclone-idai-humanitarian-assistance-still-urgent. Last accessed 22 January 2021.

[13] Pal, Nicole E., Lisa Eckewiler et al. 2019. Ethical considerations for closing humanitarian projects: a scoping review. *Journal of International Humanitarian Action* 4:17. Available online at: https://jhumanitarianaction.springeropen.com/articles/10.1186/s41018-019-0064-9. Last accessed 22 January 2021.

[14] International Federation of Red Cross and Red Crescent Societies. 2017. *Tool 16: Exit Strategy Guidance*. Available online: https://media.ifrc.org/ifrc/document/tool-16-exit-strategy-guidance/. Last accessed 22 January 2021.

[15] Doctors Without Borders. 2012. *Making and Exit: Advice on successful handover of MSF projects.* Available online at: http://evaluation.msf.org/evaluation-report/making-and-exit-advice-on-successful-handover-of-msf-projects. Last accessed 22 January 2021.

[16] Global Camp Coordination and Camp Management Cluster. 2014. *Camp closure guidelines*. Available online at: https://cccmcluster.org/resources/camp-closure-guidelines#:~:text=Camp%20closure%20is%20a%20process,be%20planned%20for%20in%20advance. Last accessed 22 January 2021.

To what extent can humanitarian responses be organised and conducted without long-distance movements of personnel? What advantages do more localised responses provide – particularly in terms of reducing gaps later on, when the emergency response ends? The history of responses is dynamic and contentious,[17] and the current crisis should once again shake up norms and practices. Indeed, the response to Super-cyclone Amphan two months later provided tentative answers to these pressing questions almost immediately.

In the days preceding the imminent arrival of Super-cyclone Amphan, humanitarian agencies, buffered by data gleaned from the Cyclone Harold response, changed their approach. They prepositioned more goods, with particular attention paid to hygiene items, and organised remote trainings in advance to help build the technical skillsets of local aid workers already on the ground – thus localising skills as well as goods, rather than waiting for technical assistance to be flown in from abroad. Over 70,000 Cyclone Preparedness Programme volunteers were trained,[18] and partners in local community organisations took on a larger role as the storm approached. In Cox's Bazar, home to more than one million refugees from Rakhine State, volunteers – many refugees themselves – assisted with preparedness and awareness. Millions evacuated before the arrival of the cyclone,[19] some going to emergency shelters despite the risk of contracting COVID-19 – the delicate balancing act of risk mitigation was left in the hands of individuals themselves. In the end, while the humanitarian presence and capacity in the region were significantly higher than in the areas damaged by Cyclone Harold, and though the governments raised fewer barriers to international aid, the steps taken to localise assistance and training proved effective, saving lives and minimising the damage of the Super-cyclone.[20] Further, local capacities enhanced by the pre-cyclone trainings will improve the resilience of communities for future crises, perhaps reducing the need for international assistance in the long-term. The second major crisis response of the pandemic era was largely a success.

Overall, responses to these two crises highlight the urgent need for response localisation for two major reasons. First, on a case-to-case basis, it is impossible to predict exactly for how long foreign humanitarian responders may be sidelined – even after the pandemic ends, some governments could ostensibly use health concerns as a rationale to continue blocking humanitarian access. Bureaucratic challenges to access are certainly not a new phenomenon and have long occurred for a range of strategic and political reasons.[21,22] Emergency protocols to halt movement into countries have been

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[17] Alexander, Jessica. 2020. COVID-19 changed the world. Can it change aid, too? *The New Humanitarian.* 16 July 2020. Available online at: https://www.thenewhumanitarian.org/special-report/2020/07/16/Rethinking-humanitarianism-will-coronavirus-change-aid. Last accessed 22 January 2021.

[18] Eli, Jenelle. 2021. Cyclone Amphan: In Bangladesh, Preparedness Paid Off. *American Red Cross.* 29 May 2021. Available online at: https://www.redcross.org/about-us/news-and-events/news/2020/cyclone-amphan-in-bangladesh-preparedness-paid-off.html. Last accessed 22 January 2021.

[19] BBC News. 2020. *Amphan: India and Bangladesh evacuate millions ahead of super cyclone.* 19 May 2020. Available online at: https://www.bbc.com/news/world-asia-india-52718826. Last accessed 22 January 2021.

[20] UN News. 2020. *Guterres commends India and Bangladesh for life-saving work in face of deadly cyclone.* 23 May 2020. Available online at: https://news.un.org/en/story/2020/05/1064832. Last accessed 22 January 2021.

[21] United Nations Office for the Coordination of Humanitarian Affairs. 2010. *OCHA on message: Humanitarian access.* Available online at: https://www.unocha.org/sites/unocha/files/dms/Documents/OOM_HumAccess_English.pdf. Last accessed 8 March 2021.

[22] Kurtzer, Jacob. 2019. Never more necessary: Overcoming humanitarian access challenges. *Center for Strategic & International Studies.* Available online at: https://www.csis.org/features/never-more-necessary-overcoming-humanitarian-access-challenges. Last accessed 8 March 2021.

invoked widely since the start of the pandemic,[23] including in countries where restrictions on migration were already in place. A combination of the two – in which emergency health protocols are invoked to block humanitarian entry, with ulterior motives in mind – is certainly not beyond the realm of possibility. The second main reason for response localisation also ties back to the pandemic but is broader in nature. As outlined above, the departure of emergency responders has long created problems and left capacity gaps in response areas that will still need outside assistance and mobilisation when another crisis strikes. These risks can be minimised by increasingly localising skills, knowledge, and resources, paving the room for preventative measures, rather than just reactive ones, and ensuring the fastest possible response rates when disasters do occur – as the responses to Cyclone Harold and Super-cyclone Amphan have shown.

As De Gaillande went on to explain about the Cyclone Harold response, even when overwhelmed, '[o]ur people on the ground are dedicated to supporting each other – they are resilient. They are empowered and are not waiting for people outside to help. We are doing it ourselves.'[24] Using the pandemic as a catalyst, international humanitarian agencies should pivot their emergency response designs to further assist local communities and organisations in developing long-term resiliency and response measures, reducing the overall need for recurrent massive long-distance shock mobilisations of international workers. Then perhaps the 'new normal' of post-pandemic responses will be stronger, quicker, and more sustainable than ever before.

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[23] See, for instance: UN Office of the High Commissioner for Human Rights. 2020. *Press briefing note on Migrant rescues in the Mediterranean.* 8 May 2020. Available online at: https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25875&LangID=E. Last accessed 8 March 2021; Reidy, Eric. 2020. The COVID-19 excuse? How migration policies are hardening around the globe. *The New Humanitarian.* 17 April 2020. Available online at: https://www.thenewhumanitarian.org/analysis/2020/04/17/coronavirus-global-migration-policies-exploited. Last accessed 8 March 2021; and Banulescu-Bogdan, Natalia, Meghan Benton and, Susan Fratzke. 2020. Coronavirus Is Spreading across Borders, But It Is Not a Migration Problem. *Migration Policy Institute*. Available online at: https://www.migrationpolicy.org/news/coronavirus-not-a-migration-problem. Last accessed 8 March 2021.

[24] Cornish, Lisa. 2020.