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**Strengthening of the coordination of humanitarian
and disaster relief assistance of the United Nations,
including special economic assistance**

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**Special economic, humanitarian and
disaster relief assistance**

Strengthening of the coordination of emergency humanitarian assistance of the United Nations

Report of the Secretary-General

Summary

The present report was prepared pursuant to General Assembly resolution [46/182](#), in which the Assembly requested the Secretary-General to report annually to the Assembly and the Economic and Social Council on the coordination of emergency humanitarian assistance. The report is also submitted in response to Assembly resolution [74/118](#) and Council resolution [2019/14](#). The period covered by the report is from 1 January to 31 December 2019.

The report contains an outline of efforts to improve humanitarian coordination and response, information on humanitarian trends, challenges and measures taken and recommendations, including on respect for international humanitarian law, food insecurity, displacement, disasters and climate-related impacts, inclusion, advancing gender equality and preventing gender-based violence in humanitarian contexts. It also addresses measures on anticipatory approaches, early action and strengthening collaboration across the humanitarian, development and peace pillars, contributing towards leaving no one behind.

* [A/75/50](#).



I. Introduction

Overview of key trends

1. Humanitarian action in 2019 was carried out in response to rapidly growing humanitarian needs driven largely by conflict, disregard for international humanitarian law, and disasters, all of which were exacerbated by the climate crisis. By the end of 2019, 145.7 million people needed humanitarian assistance, a figure that exceeded original projections by some 20 million.¹

2. Deteriorating and protracted conflict situations, coupled with grave violations of international humanitarian and human rights law, exacerbated already dire humanitarian needs. Civilians were killed or maimed, civilian infrastructure was destroyed or damaged. Children and women were disproportionately affected. Restrictions on humanitarian access deprived people of food, water, health care, protection and other life-saving assistance. Humanitarian workers, both national and international, were killed, kidnapped, attacked, detained and threatened. Across conflicts and disasters, the effects on mental health and psychosocial well-being were profound.

3. Extreme weather events increased in frequency, intensity and variability, compounded by climate change. The climate crisis is fuelling displacement, increasing competition for scarce natural resources, increasing food and water insecurity, undermining livelihoods and increasing sea level, and it is an existential threat for many small island developing States.² The crisis also places women and girls at increased risk of gender-based violence. Exposure to multiple risks affects the most vulnerable disproportionately, erodes people's resilience and is particularly devastating where conflict and climatic events overlap. In sub-Saharan Africa alone, new internal displacement doubled in the last three years.³ The number of people in need of humanitarian assistance annually due to the climate crisis was expected to double by 2050 and costs were expected to balloon if urgent action was not taken.⁴

4. The number of people displaced from their homes rose to record levels. Over 70 million people were forcibly displaced by war, violence and persecution,⁵ including some 45.7 million internally displaced persons.⁶ Another 24.9 million people were newly displaced by natural disasters.⁷ In many cases, countries experienced both conflict and disaster-induced displacement, compounding people's vulnerabilities, with gendered impacts.

5. Food insecurity continued to rise, with 135 million people facing acute hunger globally due to conflict, climate and poor harvests caused by chronic drought and increasingly unpredictable weather patterns. The majority of them lived in 22 countries and territories affected by conflict and insecurity. Climate shocks and

¹ Office for the Coordination of Humanitarian Affairs, *Global Humanitarian Overview 2020* (Geneva, 2020).

² Intergovernmental Panel on Climate Change, *Global Warming of 1.5°C*.

³ Internal Displacement Monitoring Centre, *Global Report on Internal Displacement 2020* (forthcoming).

⁴ International Federation of Red Cross and Red Crescent Societies, *The Cost of Doing Nothing: The Humanitarian Price of Climate Change and How It Can Be Avoided*, (Geneva, 2019).

⁵ Office of the United Nations High Commissioner for Refugees (UNHCR), *Global Trends: Forced Displacement in 2018* (Geneva, 2019); UNHCR, "Mid-year Trends 2019" (Geneva, 2020).

⁶ Internal Displacement Monitoring Centre, *Global Report on Internal Displacement 2020*.

⁷ Ibid.

natural hazards accounted for 34 million people in crisis or worsened food security conditions.⁸

6. 2019 also saw rising disease outbreaks, including cholera, measles and Ebola, as protracted crises, displacement and climate change made them harder to control. The outbreak of novel coronavirus in the final days of 2019 posed serious consequences for the most vulnerable people in 2020. In some regions, outbreaks of pest infestations, such as the desert locust, increased food insecurity, damaged livelihoods and had wider humanitarian impacts on health, education and other essential services.

7. These trends, which are often interrelated, increased the vulnerability of people and communities and their humanitarian needs. The United Nations and its humanitarian partners, supported by a record \$17.4 billion in funding, assisted more than 61 million people in need in 22 countries in 2019. Despite the generosity of donors, the funding gap was over \$12 billion, or 41 per cent. Humanitarian operations coordinated by the United Nations, which provided food, shelter, clean water, protection, education, medical services and support for livelihoods, were delivered in situations ranging from conflicts in South Sudan, the Syrian Republic and Yemen to disasters in Mozambique and the Caribbean. In December 2019, the United Nations and humanitarian organizations launched their largest ever appeal for \$28.8 billion to assist 109 million people in need of humanitarian assistance in 2020.

8. Amid these challenges, the humanitarian system intensified efforts to continue to improve its effectiveness and its ability to innovate and act earlier in crises before needs grew. It also focused on improving inclusiveness, particularly with respect to gender, persons with disabilities, accountability to affected persons and forging stronger partnerships with local, national and regional organizations, the private sector and international financial institutions.

9. To change the trajectory, wider efforts are vital to ensure that the 1 in every 45 people in the world currently caught in humanitarian crises are not left behind in achieving the Sustainable Development Goals. Such efforts include supporting the Secretary-General's prevention agenda and the Decade of Action to achieve the 2030 Agenda. Leading into the seventy-fifth anniversary of the United Nations, the work of the United Nations and its humanitarian partners underscores the importance of multilateral cooperation and the fact that humanitarian principles are indispensable to serving people in need.

II. Overview of humanitarian emergencies in 2019

A. Complex emergencies

10. The United Nations and its partners responded to several complex emergencies in 2019, including those in which violations of international humanitarian law continued, humanitarian access was impeded and the protection of civilians remained a serious concern. Protection risks were profound, including risks of early marriage, sexual violence and other forms of gender-based violence.

11. The humanitarian operation in Yemen remained the largest in 2019, reaching over 12 million people. Nearly 10 million people, including 3.6 million internally displaced persons, depended on emergency food assistance to survive. Some 860,000 Yemenis faced a resurgent cholera outbreak.

⁸ Food Security Information Network, *Global Report on Food Crises 2020* (forthcoming).

12. In the Democratic Republic of the Congo, some 13 million people were in need of assistance, including 4 million acutely malnourished children under the age of 5. The number of internally displaced persons increased by nearly 1 million, to a total of 5 million. The Democratic Republic of the Congo faced the second largest Ebola outbreak on record, as well as a severe outbreak of measles.

13. In the Syrian Arab Republic, some 11 million people needed humanitarian assistance. Indiscriminate attacks continued against civilians and civilian infrastructure, including medical and education facilities, water and electricity infrastructure, and health and humanitarian personnel.

14. In Afghanistan, people in need of humanitarian assistance increased by 49 per cent, to 9.4 million. Hunger and malnutrition were high, with some 10.2 million people at crisis levels of food insecurity. While some 190,000 people who had returned from other countries were in need of protection, 423,000 people were displaced by conflict.

15. In Burkina Faso, 1.5 million people required humanitarian assistance. Violence drove an increase in the number of internally displaced people from 80,000 to more than 500,000 in one of the year's fastest growing displacement crises.

16. Some 4.3 million people in Cameroon needed humanitarian assistance, with about 700,000 people displaced by the end of 2019. Cameroon also hosted 409,000 refugees, including 290,000 from the Central African Republic and 112,000 from Nigeria.

17. In the Central African Republic, 2.6 million people, half of the population, required humanitarian assistance. The humanitarian situation deteriorated, with violence reaching areas previously not affected. Almost a quarter of the population was displaced internally. More than 600,000 people lived as refugees, mostly in neighbouring countries.

18. In Chad, 4.3 million people needed humanitarian assistance, almost one third of the population. People in Chad suffered the effects of a sharp increase in attacks by Boko Haram and intercommunal conflict. The country continued to host more than 465,000 refugees from different countries in the region.

19. In the Democratic People's Republic of Korea, some 10.9 million people needed humanitarian assistance. Recurrent climatic events compounded insufficient infrastructure, national policies, low levels of funding and unintended effects of the sanctions regimes, challenging the ability of humanitarian actors to deliver life-saving assistance.

20. In Haiti, the deepening political and socioeconomic crisis led to a slowdown of public services and nearly doubled the number of people, in need to 4.6 million by year's end.

21. In Iraq, some 6.7 million people needed humanitarian assistance. Instability slowed refugee returns. At total of 1.8 million Iraqis remained internally displaced.

22. In Libya, some 800,000 people needed humanitarian assistance. Violence displaced over 120,000 people, bringing the number of internally displaced persons to over 300,000. Thousands were trapped by fighting, while thousands of refugees and migrants experienced inhumane conditions in detention centres.

23. In Mali, more than 3 million people needed humanitarian assistance. Violence and insecurity spread from the north to the central and western regions, and into the Niger and Burkina Faso. The number of internally displaced persons doubled to almost 200,000.

24. In Myanmar, nearly 1 million people needed humanitarian assistance. The number of internally displaced people in Rakhine, Kachin, Shan and Kayin States reached 275,000. Stateless Rohingya people continued to face discrimination and severe movement restrictions, and some 130,000 were confined to camps in Rakhine State. New access restrictions, following increased fighting in Rakhine and Chin States, hampered delivery of assistance and protection services. More than 900,000 refugees, mainly Rohingya, remained in camps in Bangladesh.
25. In the Niger, 2.3 million people needed humanitarian assistance. Some 440,000 people were displaced within the country by conflict, including refugees from Nigeria and Mali. Chronic food insecurity, malnutrition and armed violence disrupted essential social services.
26. In Nigeria, some 7.1 million people needed humanitarian assistance, with nearly 2 million internally displaced persons, and another 300,000 displaced abroad, mostly in neighbouring countries, in the tenth year of conflict against Boko Haram.
27. In Pakistan, more than 7.1 million people were in need, and the transition from humanitarian to development assistance was ongoing in the former Federally Administered Tribal Areas. Returns of internally displaced persons continued, and host communities faced food insecurity, ongoing violence and a lack of livelihoods in the areas of return. Pakistan remained the second largest host country for refugees.
28. In Somalia, while humanitarian action helped to avert a projected 30 per cent increase in food insecurity, 5.4 million people still needed humanitarian assistance. More than 770,000 people were internally displaced by conflict, flooding and drought, adding to the 2.6 million people already internally displaced.
29. In South Sudan, conflict and climate change meant 7.5 million people, more than two thirds of the population, needed humanitarian assistance. Malnutrition rates surpassed the global emergency threshold. Nearly 4 million people remained displaced, 1.5 million internally and 2.2 million as refugees in neighbouring countries.
30. In the Sudan, some 8.5 million people needed humanitarian assistance, with an economic crisis leading to increasing needs. Positive developments, including political transition and renewed peace efforts, helped increase humanitarian access to parts of Southern Kordofan, Blue Nile and Darfur.
31. In Ukraine, some 3.4 million people required humanitarian assistance. Older persons, persons with disabilities, female-headed families and children were among the most vulnerable, as were 350,000 internally displaced persons living in dire conditions across the government-controlled area.
32. In the Bolivarian Republic of Venezuela, an estimated 7 million people needed humanitarian assistance. As of October 2019, more than 4.5 million refugees and migrants from that country were outside their country of origin, with 3.7 million in the region alone. Meanwhile, diseases such as measles and malaria resurfaced.
33. Some 2.4 million people needed humanitarian assistance in the occupied Palestinian territory. The protracted protection crisis continued, and deep funding shortfalls restricted access to essential services.

B. Disasters associated with natural hazards

34. Across Africa, natural hazards inflicted a heavy toll. In Southern Africa, a prolonged cycle of drought and floods left many vulnerable to the next shock. In March and April, the region's worst sudden onset emergency in two decades occurred when tropical cyclones Idai and Kenneth struck Malawi, Mozambique and Zimbabwe

within weeks of each other. Floods affected 2.2 million people and caused extensive loss of life, injuries and illness.

35. The Horn of Africa experienced two consecutive failed rainy seasons in some areas and floods in others. Malnutrition levels were alarmingly high, with some areas facing global acute malnutrition rates above 30 per cent, more than double the emergency threshold. Lack of access to clean water, poor hygiene and sanitation facilities worsened outbreaks of preventable diseases. In Somalia, drought resulted in harvest yields some 70 per cent below average, the lowest in 25 years. The south-eastern areas of Kenya experienced crop failure. In South Sudan, major floods increased the number of food insecure people to 6.4 million. In Ethiopia, climate and conflict drivers saw 2 million persons face some form of displacement.

36. In the Great Lakes region, unprecedented floods in the Central African Republic, the Congo and the Democratic Republic of the Congo affected 50,000, 170,000 and 900,000 people, respectively.

37. In Asia and the Pacific, Cyclone Fani triggered heavy rainfall and high winds, causing over \$1.8 billion in damage in Bangladesh and India. In the Democratic People's Republic of Korea, Typhoon Lingling displaced more than 6,000 people and inundated 46,000 hectares of farmland. Heavy monsoon rains led to widespread flooding across Bangladesh and Myanmar, affecting 7.6 million people in Bangladesh and displacing over 400,000 people across both countries. In the Philippines, Typhoon Phanfone displaced 145,000 people and affected 2.4 million. Another 458,000 people were displaced by Typhoon Kammuri, while a series of powerful earthquakes in Cotabato affected more than 350,000 people and displaced 160,000. The Mount Ulawun volcano erupted in Papua New Guinea, affecting 16,000 people and displacing over 13,000. An outbreak of measles in Samoa killed about 80 people, most of them children. Heavy rainfall caused unseasonal flooding in atypical locations in Afghanistan, affecting 280,000 people. Drought affected 5 million people in Pakistan.

38. In the Caribbean, Hurricane Dorian struck the Bahamas in September, bringing 320 kilometre-per-hour winds, heavy rains and storm surges to the islands. The hurricane left widespread devastation, with economic losses estimated at \$3.4 billion.

III. Key themes of humanitarian response in 2019

A. Upholding norms

Respect for international humanitarian and human rights law

39. Tens of thousands of civilians were killed, injured or maimed in direct or indiscriminate attacks by parties to conflict, or were subjected to sexual and gender-based violence. Attacks damaged houses, schools, markets, places of worship and essential civilian infrastructure, such as hospitals, electricity, and water and sanitation systems, with widespread and long-term consequences. Cumulatively, the magnitude of harm affecting civilians and the lack of compliance with international humanitarian law caused humanitarian needs to reach record levels. With conflict as a main driver of global hunger, acting on Security Council resolution [2417 \(2018\)](#) remained critical.

Humanitarian access

40. Hostilities, violence against humanitarian personnel and restrictions on their movement and that of assets and goods continued to hamper delivery of humanitarian assistance. Humanitarian operations were constrained by bureaucratic impediments, arbitrary taxation and delays. Interference in humanitarian operations by authorities or non-State actors included attempts to influence the selection of beneficiaries or

implementing partners or to coerce humanitarian partners to work under conditions that contradicted humanitarian principles. Such obstruction prevented humanitarian operations from reaching people in need, thereby depriving beneficiaries of their basic human rights.

Protecting humanitarian workers and assets

41. Attacks against aid workers occurred in 35 countries, with 405 attacked, 131 killed, 144 injured and 130 abducted in 2018. Looting of relief supplies and occupation of humanitarian premises disrupted deliveries of aid and services. More than 90 per cent of those killed and injured were national staff members.⁹

Protecting medical care in conflict

42. In 2019, the World Health Organization recorded 1,007 attacks on health-care workers and facilities, causing 198 deaths and 627 injuries in 11 countries and territories,¹⁰ including the destruction of hospitals, attacks on medical transport and supplies, the military use of medical facilities, and the removal of medical items from aid convoys. In the Democratic Republic of the Congo alone, in the context of the Ebola response, there were 406 incidents, with 11 deaths and 86 injuries among health workers and patients. Moreover, efforts to provide impartial medical assistance were, in some situations, impeded by counter-terrorism legislation criminalizing material support in terms broad enough to encompass medical care.

Impact of urban warfare

43. Conflict in urban areas affected more than 50 million people.¹¹ Respecting international humanitarian law and protecting civilians in urban settings was a significant challenge due to high population density; the possibility of the sudden and unexpected presence of civilians among combatants; the proximity of military objectives to civilians and civilian objects; the vulnerability to damage of essential services infrastructure, such as water and electricity systems; and the likelihood of large-scale displacement of civilians in need of protection and assistance. The widespread use of explosive weapons in populated areas had devastating immediate and long-term impacts on civilians, especially children.

Adverse consequences of counter-terrorism measures

44. Counter-terrorism measures can adversely affect principled humanitarian operations and jeopardize the mission of humanitarian organizations to assist and protect people affected by conflict. Impartial humanitarian action in areas where non-State armed groups operate has sometimes been considered illegal, creating legal and reputational risks for humanitarian staff and organizations and inhibiting their engagement with non-State armed groups in order to assist people in need.

45. The situation has sometimes resulted in funding being curtailed for humanitarian activities or has led organizations to de-prioritize areas with the greatest humanitarian needs, as well as restricting access to financial services because of bank de-risking. Importantly, the Security Council, in its resolutions [2462 \(2019\)](#) and [2482 \(2019\)](#), reaffirmed that Member States must ensure that any measures taken to counter

⁹ Meriah-Jo Breckenridge and others, “Speakable: Addressing sexual violence and gender-based risk in humanitarian aid”, Aid Worker Security Report 2019: Humanitarian Outcomes (United States Agency for International Development, August 2019).

¹⁰ World Health Organization, Surveillance System for Attacks on Health Care, available at: <https://publicspace.who.int/sites/ssa/SitePages/PublicDashboard.aspx>.

¹¹ International Committee of the Red Cross, *Urban Services during Protracted Armed Conflict: A Call for a Better Approach to Assisting Affected People* (Geneva, 2015).

terrorism comply with their obligations under international law, including international humanitarian law, and urged States to take into account the potential effects of counter-terrorism measures on exclusively humanitarian activities, including medical activities, that are carried out by impartial humanitarian actors in a manner consistent with international humanitarian law.

B. Reducing displacement

Addressing and reducing forced internal displacement

46. Internal displacement continued to grow in 2019, placing enormous stress on displaced people and their host communities. In October 2019, the Secretary-General announced the establishment of a High-level Panel on Internal Displacement to draw attention to internal displacement and propose concrete solutions to help all affected people and communities.

47. In addition, the Guiding Principles on Internal Displacement multi-stakeholder initiative, which marked its twentieth anniversary on 4 September 2018, intensified collaborative action to prevent, protect and resolve internal displacement. Its three-year plan of action established platforms for dialogue and sharing of best practices. In 2019, they included State-to-State exchanges in the regions of the Economic Community of West African States and the Intergovernmental Authority on Development and engaged internally displaced persons in developing national laws pertaining to such persons in the Niger and South Sudan, as well as multi-stakeholder engagement on solutions in Ethiopia and Ukraine.

48. The African Union declared 2019 the “African Year of Refugees, Returnees and Internally Displaced Persons: Towards Durable Solutions to Forced Displacement in Africa”, with the United Nations supporting African Union events on solving displacement and commemorating the anniversaries of the African Refugee Convention and the African Union Convention for the Protection and Assistance of Internally Displaced Persons in Africa.

49. In 2019, the Platform on Disaster Displacement supported measures to address internal and cross-border displacement in the context of disasters and the adverse effects of climate change, including training and the exchange of effective practices. It also informed the mapping process for the implementation of disaster displacement provisions in the guidelines on disaster displacement of the Sendai Framework for Disaster Risk Reduction 2015–2030.

Refugees

50. The number of refugees continued to increase, reaching 25.9 million by 2019. Following the affirmation of the global compact on refugees, the first Global Refugee Forum in December 2019 resulted in 1,025 pledges, 410 good practices and 6 new arrangements contributing to the objectives of the compact.¹² Three regional support platforms were launched to reinforce refugee responses in Central America and Mexico, in East Africa and the Horn of Africa and in support of the Solutions Strategy for Afghan Refugees to Support Voluntary Repatriation, Sustainable Reintegration and Assistance to Host Countries.

¹² UNHCR, Global Compact on Refugees Digital Platform, available at: <https://globalcompactrefugees.org/channel/pledges-contributions>.

Migrants in vulnerable situations

51. At least 3,431 people died along migratory routes in 2019.¹³ Migrants in vulnerable situations were exposed to heightened risks and transit through or stays in risky areas, where they faced potential loss of life, disappearance, violence, sexual violence, exploitation, trafficking, abduction, extortion, lack of access to services and arbitrary detention. In follow-up to the Global Compact for Safe, Orderly and Regular Migration, the United Nations Network on Migration, led by the International Organization for Migration, supported States in implementing the Global Compact, prioritizing the rights and well-being of migrants and host communities.

C. Advancing humanitarian and development collaboration and its linkages to peace

52. As humanitarian crises continued to increase in duration and complexity, humanitarian, development and peace communities have increased collaboration with the ambition to reduce needs, risk and vulnerability and to support communities in strengthening their resilience and achieving the Sustainable Development Goals.

53. The Joint Steering Committee to Advance Humanitarian and Development Collaboration worked to ensure greater coherence, synergy and impact of humanitarian and development action. In collaboration with United Nations country teams, it reviewed progress and bottlenecks in seven countries¹⁴ and adopted recommendations to assist country teams in supporting national efforts to foster country leadership, joint analysis, joined-up programming, and the articulation and financing of collective outcomes and monitoring.¹⁵

54. Joint analysis across humanitarian and development actors led to the identification of priority areas and the articulation of collective outcomes in Burkina Faso, Cameroon, Chad, Nigeria and Somalia. Other examples include the Democratic Republic of the Congo, where joint risk analysis led to the development of collective outcomes in the provision of basic services, and the reduction of gender-based violence, forced displacement and food insecurity. In Burundi, the launch of a humanitarian response plan was accompanied by a complementary strategy outlining joint resilience objectives. The Government of Ethiopia, with the United Nations and the World Bank, finalized a multi-year strategy, proposing five collective outcomes that addressed a range of issues, including food security.

55. While collective outcomes have started to result in some programmatic and budgetary changes in some United Nations entities, more systematic progress by Governments and donors to enhance the complementarity of interventions is required to address fragmented funding sources across humanitarian, development and peace interventions at the country level. Closer collaboration with development partners, multilateral and bilateral donors has started in several countries, including the Democratic Republic of the Congo and Somalia.

56. The repositioning of the United Nations development system offers opportunities to further strengthen humanitarian, development and peace collaboration. Empowered resident coordinators and humanitarian coordinators will lead the development of joint analyses, including common country analyses, which allow development, humanitarian and peace actors to share an understanding of the

¹³ International Organization for Migration, Missing Migrants Project, available at: <https://missingmigrants.iom.int>.

¹⁴ Burkina Faso, Cameroon, Chad, Ethiopia, Niger, Nigeria and Somalia.

¹⁵ See www.un.org/jsc/sites/www.un.org/jsc/files/general/jsc_review_synthesis_and_recommendations_0.pdf.

risks and vulnerabilities driving people's needs. Based on joint analysis, the new generation United Nations Sustainable Development Cooperation Framework should be more effective in addressing the root causes of risk, need and vulnerability in complementing humanitarian needs overviews and a humanitarian response plans.

57. Some donors are adapting their policies and financing mechanisms to provide better aligned humanitarian and development assistance, following the recommendation of the Development Cooperation Directorate of the Organization for Economic Cooperation and Development on closer humanitarian, development and peace collaboration. Donors and the Inter-Agency Standing Committee also engaged to advance financing solutions to drive closer collaboration, including through collective outcomes.

D. Humanitarian financing: anticipatory approaches and early action

58. United Nations-managed pooled funds demonstrated their value in catalysing early action again in 2019. Humanitarian organizations continued to strengthen anticipatory approaches to act ahead of specific, high-impact and high-probability risks to mitigate their humanitarian consequences. Anticipatory approaches yielded faster, less expensive and more dignified responses that also helped protect development gains and address problems before their humanitarian effects multiplied.

59. 2019 saw greater implementation of anticipatory approaches and early action. For example, in Somalia, the humanitarian country team, the World Bank and other humanitarian partners set up a system-wide anticipatory action framework to respond to extraordinary drought. In Mongolia, a dzud risk map tracked 14 scientific indicators, such as rainfall deviation, risk of drought and regional temperature, to set up forecast-based financing through the Disaster Relief Emergency Fund of the International Federation of Red Cross and Red Crescent Societies. Ensuing efforts targeted 40 most-at-risk districts in 12 provinces and assisted 2,000 herder households, allowing early action to be taken well before the loss of livestock. In 2019, the Food and Agriculture Organization of the United Nations early action fund supported the implementation of anticipatory actions ahead of forecast disasters in 12 countries across Southern Africa and Central America and in Asia.

60. In July, the Government of Bangladesh and the World Food Programme (WFP) identified communities under imminent threat of flooding in north-western Bangladesh. WFP provided 5,000 of the most vulnerable families with \$53 each via the mobile banking system, three days in advance of the cyclone and floods, to move to safer areas, fortify their homes or buy essential supplies. In October, the Start Fund allocated \$325,000 in Rwanda before anticipated flooding, providing complementary support to Government efforts, which allowed people to stockpile food and essential items at dry storage points. The funding also enabled early warning messaging for people living in high-risk areas, with a specific focus on people with disabilities.

61. The use of disaster insurance to mitigate the effect of high-probability and high-impact events was also a feature in 2019. In September, the Caribbean Catastrophe Risk Insurance Facility paid out \$12.8 million to the Bahamas following the unprecedented impact of Hurricane Dorian. In the same month, the African Risk Capacity triggered an insurance policy for Senegal, effectively doubling the coverage available to vulnerable people affected by an anticipated drought. It paid \$12 million to the Government of Senegal, and \$10 million was provided to the Start Network to launch pre-agreed activities, including cash transfers to about 1.1 million people. The work of disaster risk finance is also seen through the Insurance Development Forum, in which a tripartite agreement between the Forum, Germany and the United Nations

Development Programme committed to connecting 20 countries to disaster risk finance from the private sector by 2025.

E. Climate impacts

62. Climate change is causing more extreme weather events and weakening the resilience of people and communities. The impact is particularly devastating where conflict and climatic events come together. The world's eight worst food crises were all linked to both conflict and climate shocks. In 2019, 13 of the 20 countries most vulnerable to the effects of climate change launched an inter-agency humanitarian appeal. Within the scope of humanitarian action, anticipating climate-related events and acting early can help mitigate the impact of such events and ultimately save lives and livelihoods.

63. Further details and additional recommendations on disasters and climate-related impacts are addressed in the report of the Secretary-General on international cooperation on humanitarian assistance in the field of natural disasters, from relief to development ([A/72/348](#)).

IV. Humanitarian response in 2019: developments in operations and coordination

A. Improving humanitarian coordination and response

Humanitarian programme cycle

64. In 2019, enhancements made to the humanitarian programme cycle focused on stronger analysis of humanitarian needs and tools to better prioritize response in humanitarian response plans to meet the specific needs of affected people based on a more accurate understanding of the severity of needs.

65. The intersectoral analysis of the humanitarian programme cycle looked beyond immediate causes and consequences of crises to capture chronic and structural drivers of need and considered emerging risks. The analysis in the humanitarian needs overviews identified specific problems for population groups and geographic areas, articulated around overarching protection issues, physical and mental well-being, living standards and self-sustenance capacity, and recovery and resilience. Improvements included more strategic and systematic monitoring of changes in needs and progress against objectives.

66. The enhanced humanitarian programme cycle package ensured inclusivity by disaggregating by sex, age, disability and other diversity dimensions and strengthening communication with feedback from affected communities. Special attention was paid to protection against sexual exploitation and abuse. New guidance on disability inclusion was considered in the 2019 humanitarian needs overviews and humanitarian response plans.

United Nations humanitarian pooled funds

67. In 2019, the Central Emergency Response Fund allocated \$539 million to 49 countries and territories across the globe, the highest total allocations to date, made possible by record donor support. A total of \$200 million was allocated to life-saving humanitarian action in 21 underfunded crises and \$339 million was allocated to

respond to new humanitarian needs in 34 countries.¹⁶ In 2019, country-based pooled funds allocated a record-breaking \$1.01 billion to humanitarian operations in 18 countries, of which \$252 million (25 per cent) was directly allocated to national non-governmental organizations (NGOs).

68. The humanitarian pooled funds demonstrated their enormous value as critical, rapid and flexible live-saving funding instruments. For example, only days after Cyclone Idai struck Southern Africa, the Central Emergency Response Fund allocated a total of \$21 million for response in Malawi, Mozambique and Zimbabwe. Within five days of the grant application, \$14 million was disbursed to Mozambique to support the Inter-Agency Standing Committee system-wide scale-up in the country. Pooled funds also allowed early response to emerging risks. For example, the Fund allocated \$10.5 million to Burundi, Rwanda, South Sudan and Uganda for preparedness and contingency plans, given the imminent risk of the spread of the Ebola outbreak in the Democratic Republic of the Congo.

Cash and voucher assistance

69. Cash and voucher assistance helped deliver assistance rapidly and flexibly in emergencies, providing people with the ability to prioritize their own needs in a dignified way and helping to stimulate local markets and assist recovery. Such assistance also offered linkages with longer-term social protection systems and development programmes. The scale of cash and voucher assistance in emergencies has continued to rise, reaching approximately 16 per cent of total humanitarian assistance in 2018, up from 10 per cent in 2016. While the increase was a marked improvement, the use of such assistance in emergency response remained below its potential.

70. In 2019, efforts to improve the scale, efficiency and effectiveness of cash and voucher assistance intensified. A statement on the use of a common cash system, signed by the Office of the United Nations High Commissioner for Refugees (UNHCR), the World Food Programme, the United Nations Children's Fund (UNICEF) and the Office for the Coordination of Humanitarian Affairs, as well as the NGO-led common cash delivery network, aimed to strengthen collaboration around transfer mechanisms, interoperable systems and programmes to deliver cash and voucher assistance more efficiently and effectively.

B. Disaster preparedness and response: building partnerships

71. In 2019, the United Nations Disaster Assessment and Coordination system, managed by the Office for the Coordination of Humanitarian Affairs, supported Member States and worked with regional organizations and United Nations country teams to manage and prepare for emergencies.

72. The joint development by Member States and humanitarian partners of specialized humanitarian surge and expert rosters, methodology, training and tools contributed to international, national and regional emergency response capacities. In 2019, preparedness exercises included a joint induction training in Indonesia carried out by the United Nations Disaster Assessment and Coordination system with the Association of Southeast Asian Nations Coordinating Centre for Humanitarian Assistance on Disaster Management and Emergency Rapid Assessment Team members, and the International Search and Rescue Advisory Group regional earthquake exercise in Thailand to strengthen collaboration and interoperability in Asia. In Solomon Islands, the United Nations Disaster Assessment and Coordination

¹⁶ See <https://cerf.un.org/what-we-do/allocation-by-country>.

system response methodology and approaches were adapted to support the induction of a national emergency response team. The work of the Office for the Coordination of Humanitarian Affairs with the United Nations Disaster Assessment and Coordination system partners also helped the Capacity for Disaster Reduction Initiative by supporting capacity assessment missions requested by Bolivia (Plurinational State of), the Comoros, Mauritius and Togo.

73. The value of such networks and partnerships was evident in several sudden onset responses in 2019. Following tropical cyclones Idai and Kenneth in Mozambique, with the Government in the lead, the Office for the Coordination of Humanitarian Affairs/United Nations Disaster Assessment and Coordination team provided coordination structures for close collaboration with the International Federation of Red Cross and Red Crescent Societies, NGOs, clusters of United Nations agencies, the military, emergency medical teams, and search and rescue teams, and in humanitarian financing. They also worked with the United Nations Environment Programme to provide dam and flood experts to advise Governments.

74. Inter-agency evaluations of the humanitarian response to cyclones Idai and Kenneth identified some best practices, such as early deployment of senior humanitarian staff ahead of and during the first months of the crisis to support Government-led responses, timely deployment of coordinators and information management personnel and pre-positioning of contingency stocks of relief items in strategic locations. Investing in robust early warning systems and emergency response preparedness was critical to saving lives.

75. As Hurricane Dorian landed on the Bahamas, the Government-led response was supported by the participation of United Nations Disaster Assessment and Coordination members in establishing support centres for island-level emergency operations and by prompt predeployment as part of the first needs assessment teams, which helped support coordination mechanisms prior to the arrival of large amounts of aid and aid workers. The civil-military coordination capacities of the Office for the Coordination of Humanitarian Affairs helped support the coordination of bilateral military support for search, rescue and the delivery of assistance. Regional coordination was supported through the deployment of humanitarian personnel to Barbados to work with the Caribbean Disaster Emergency Management Agency and with subregional offices of United Nations agencies and humanitarian partners.

C. Empower women and girls

76. Humanitarian leadership strengthened its focus on gender equality in humanitarian action, including support and assistance to women and girls; the mitigation, response and prevention of gender-based violence and the enabling of access to sexual and reproductive health care in emergency settings; the strengthening of meaningful participation by women; and improved funding to women's organizations.

77. The robust gender analysis of the distinct needs of women, girls, boys and men, of different ages and diversities, was essential to informing effective humanitarian response. Improved processes for the collection and use of sex- and age-disaggregated data enabled stronger gender analysis for humanitarian needs overviews and humanitarian response plans and better responses to risks of gender-based violence. In addition, the Gender Standby Capacity project deployed advisers to 13 countries to help ensure that gender equality and women's empowerment were incorporated at all stages of humanitarian action.

78. An inter-agency humanitarian evaluation on gender equality and the empowerment of women and girls began in 2019 to further analyse the advancement

of gender equality in humanitarian settings. Gender with Age Marker, a tool for designing and monitoring humanitarian interventions, was used in more than 6,500 projects.

D. Centrality of protection

79. In 2019, the Inter-Agency Standing Committee prioritized protection in humanitarian response, bringing critical protection issues to the attention of its principals and supporting humanitarian country leadership on the implementation of its protection policy. Humanitarian country teams developed protection strategies, supported by protection clusters, and included protection as a standing item on humanitarian country team and inter-cluster agendas. They also developed multisectoral approaches to address jointly identified protection risks. With just 35 per cent of protection activities in humanitarian response plans being funded in 2019, the scope and depth of protection interventions were curtailed.

Gender-based violence, including sexual violence

80. Mobilizing action to prevent, mitigate and respond to gender-based violence was a priority in 2019 and was advanced through key initiatives. In 2019, the international conference, Ending Sexual and Gender-Based Violence in Humanitarian Crises, brought together survivors and specialists, and national and international organizations and mobilized over \$363 million and hundreds of political, policy and operational commitments. Minimum standards were launched to strengthen gender-based violence considerations throughout humanitarian programming. The Gender-Based Violence Accountability Framework, an essential part of the Call to Action on Protection from Gender-based Violence in Emergencies, was promoted across all operations.

Protection against sexual exploitation and abuse

81. More people in humanitarian situations reported sexual exploitation and abuse in the past year than in previous years.¹⁷ While the reasons for the increase are unclear, it may be due, in part, to more people speaking up and more accessible complaints channels. The humanitarian community is determined to fully protect people from exploitation and abuse and to ensure that perpetrators be held accountable. In 2019, the Inter-Agency Standing Committee strengthened the six core principles on protection from sexual exploitation and abuse by prohibiting sexual relationships between humanitarian workers and persons benefiting from humanitarian assistance and protection that involved improper use of rank or position¹⁸ and announced three overarching priorities for the year: bolstering prevention, expanding safe spaces so that all survivors could speak out and promoting respectful use of authority.

82. Inter-Agency Standing Committee members scaled up resourcing of country-level systems and services for protection from sexual exploitation and abuse, supporting senior leadership and deploying technical specialists. More than half of the 34 countries with ongoing humanitarian operations had protection from sexual exploitation and abuse coordinators by the end of 2019. The Results Group on Accountability and Inclusion of the Standing Committee provided operational guidance and technical support to in-country networks on protection from sexual exploitation and abuse and humanitarian country teams. Partners of the Standing

¹⁷ See www.un.org/preventing-sexual-exploitation-and-abuse/content/data-allegations-un-system-wide.

¹⁸ See <https://interagencystandingcommittee.org/inter-agency-standing-committee/iasc-six-core-principles-relating-sexual-exploitation-and-abuse>.

Committee accelerated collaborative efforts on training for staff, protection from sexual exploitation and abuse focal points, coordinators, and implementing partners and strengthened access to information on protection and service delivery. In 2019, the Office for the Coordination of Humanitarian Affairs also created a \$1 million fund to provide investigation capacity to Standing Committee partners to respond to allegations of sexual exploitation, abuse and sexual harassment.

Child protection

83. Children continue to be victims of “grave violations” in armed conflict, including recruitment and use, killing and maiming, rape, abduction, attacks on schools and hospitals, and denial of humanitarian access. Children associated with armed groups or armed forces often do not receive the necessary support for their repatriation, rehabilitation and overall reintegration into society. Children associated or allegedly associated with groups designated as violent extremist, or born to their members, face acute challenges, including detention by authorities. Conflict-related damage to critical infrastructure, such as water and sanitation systems, has a disproportionate impact on children, for example, by increasing risks of contracting communicable diseases and malnutrition.

84. Humanitarian partners continued to provide response services to affected children and their families, including family reunification and holistic reintegration support, in line with the Inter-Agency Standing Committee Minimum Standards for Child Protection in Humanitarian Action, which were revised and launched in October 2019.

E. Localization

85. Stakeholders continued to engage actively in broader initiatives linked to localization as a core part of their work. They adapted organizational policies and approaches in line with commitments agreed under the initiatives. Some progress was made in supporting national and local actors in humanitarian action, including investing in local capacities through training and directing a greater share of resources to them. Country-based pooled funds remained the largest source of direct funding to national and local NGOs, allocating \$252 million (25 per cent) to them in 2019, which was more than triple the \$74 million recorded in 2015.

86. More national and local NGOs participated in humanitarian structures and led technical working groups established to support clusters. Language was important to accountability and effectiveness and could also reflect the extent to which coordination was localized; 55 per cent of clusters surveyed at the national level indicated that an official national or local language was spoken at meetings. Most reported using multilingual staff to interpret at meetings and translate minutes afterwards.

F. Accountability and inclusion

87. Accountability and inclusion involved making sure that individuals who were most at risk were at the centre of, and driving, humanitarian action. Inter-Agency Standing Committee principals viewed systematic accountability and inclusion as essential to meeting collective standards and commitments.

88. There was an increase in response operations collating, analysing and integrating community feedback and people’s information needs and communication preferences in response-wide products and processes for the humanitarian needs

overviews and humanitarian response plans, with support from the Standing Committee Results Group on Accountability and Inclusion in 12 countries. More work needed to be done to ensure that feedback from affected populations was not just collected but also acted upon.

Persons with disabilities

89. Progress continued in making persons with disabilities more central to humanitarian action. Driving change, the Secretary-General introduced in June a system-wide United Nations Disability Inclusion Strategy. In addition, the Inter-Agency Standing Committee *Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action* were launched to ensure and guide inclusive humanitarian action.

90. Humanitarian partners also developed guidance on strengthening disability inclusion in humanitarian needs overviews and response plans, with a focus on the use of reliable data to support evidence-based action on disability inclusion. Prioritization of persons with disabilities was supported in allocations from the Central Emergency Response Fund and country-based pooled funds in 2019. Acting unanimously, the Security Council adopted its first-ever resolution calling for the protection of persons with disabilities in conflict situations, resolution [2475 \(2019\)](#).

91. Ensuring the effective implementation of all the new tools and instruments at the field and global levels to ensure the rights and needs of persons with disabilities are addressed and promoting their meaningful participation in humanitarian contexts will be key next steps.

Mental health and psychosocial support

92. The World Health Organization estimates that one in five people who have experienced conflict in the previous 10 years have some form of mental health condition. By incorporating mental health and psychosocial support in preparedness, relief and recovery activities from the start, the quality and reach of response is improved, the coping of affected people is enhanced and the recovery and rebuilding of communities is accelerated. UNICEF estimates that 2.6 million children living in crisis-affected areas accessed mental health and psychosocial support in the first nine months of 2019, including those displaced by conflict, persecution and natural disasters. In 2019, the 33rd International Conference of the Red Cross and Red Crescent, held in Geneva, and the International Conference on Mental Health and Psychosocial Support in Crisis Situations, held in Amsterdam, emphasized the importance of addressing critical gaps, access and funding.

93. The Inter-Agency Standing Committee Reference Group on Mental Health and Psychosocial Support in Emergency Settings supported implementation of the Standing Committee guidelines and provided support for country-level mental health and psychosocial support working groups and for managing mental health and psychosocial support in emergencies as a cross-cutting area of work. The Standing Committee also worked on developing a common monitoring and evaluation framework for mental health and psychosocial support to improve its quality. It is expected to be finalized in 2020. Country-level mental health and psychosocial support technical working groups currently operate in over 20 emergency settings.

G. Disease outbreaks and epidemics

94. Disease outbreaks are compounding humanitarian needs in some of the most dire emergencies, demanding more resources and making responses more complex. Yemen, the largest humanitarian crisis area in 2019, was also fighting its worst

cholera outbreak. In the Democratic Republic of the Congo, the Ebola outbreak that began in August 2018, which is the second deadliest on record, added to already enormous and complex humanitarian needs, with more than 2,300 lives lost and 3,400 confirmed infections.

95. Globally, infectious diseases posed a growing threat to millions of people. Outbreaks of cholera affected 3 million to 5 million people each year. Children under 5 years of age were more than 20 times likely to die from diarrhoea linked to unsafe water and sanitation than from direct violence in conflict. After years of progress, cases of measles spiked around the world due to gaps in vaccination coverage. In 2019, the Pacific saw the re-emergence of measles, with outbreaks declared in Fiji, Samoa, Tonga and American Samoa. Across Africa, reported cases of measles in the first three months of 2019 were 700 per cent higher than for the same period in 2018. The global incidence of dengue has also grown dramatically in recent years, with half of the world's population, approximately 3.7 billion people, now at risk. Progress in combating malaria has stalled.

96. The World Health Organization worked with United Nations agencies and partners to lead the emergency health response and to support countries in strengthening their capacities to better manage the risk of outbreaks and implement International Health Regulation 2005, including developing country road maps for collaboration at the human-animal interface. The Office for the Coordination of Humanitarian Affairs supported wider humanitarian response and deployed the Central Emergency Response Fund and country-based pooled fund allocations to address needs and to get ahead of disease outbreaks, including to support health systems in affected countries and neighbouring countries to prevent the spread of outbreaks.

H. Data, new technologies and innovation

97. Data forms an essential part of early and effective response and strengthened humanitarian coordination. The Centre for Humanitarian Data continued to promote the sharing and use of data and collaboration to advance applications for analytics and predictive modelling of disaster risks. By year's end, the Centre's Humanitarian Data Exchange platform hosted more than 17,000 data sets shared by hundreds of organizations ranging from large United Nations agencies to local NGOs. Over 700,000 users accessed the platform from almost every country.

98. Innovative approaches in humanitarian responses increased the quality and effectiveness of humanitarian aid. Innovation and new technologies were being used to better map health concerns, model risks and deliver assistance. For example, the International Organization for Migration uses a commodity tracking system that allows geotagged QR codes on boxes of aid to be tracked to warehouses and to the final, individual beneficiary, increasing the transparency, accountability and effectiveness of humanitarian operations.

99. The humanitarian system also has to adjust its approach to new technologies. The International Committee of the Red Cross, for example, is updating guidance to reflect cyberoperations in armed conflict, lethal autonomous weapons systems and the use of weapons in outer space. Protecting beneficiary data and ensuring the responsible adoption of new technologies in a way that does not give rise to unintended harm is another growing protection challenge.

I. Strengthening human resource capacity

100. In line with the Secretary-General's human resources strategy and the system-wide strategy on gender parity, the Office for the Coordination of Humanitarian Affairs made progress towards more gender parity and geographical representation in 2019 through its four-year People Strategy 2018–2021. It included a new Leadership Development Programme that prioritized women, national staff and nationals of underrepresented states. National staff career development was promoted as a key pipeline for geographically diverse talent for international professional positions.

101. Working with Inter-Agency Standing Committee members, the Office for the Coordination of Humanitarian Affairs maintained the Humanitarian Coordination Pool and the High Potential Pool, and promoted higher diversity among potential candidates, especially in terms of gender, geographic origin and language skills relevant to humanitarian leadership roles.

102. United Nations agencies developed similar initiatives to increase diversity. For example, UNHCR, UNICEF and the World Food Programme gender parity policies led to increased representation of women in international staff categories, including an increase in staff from developing countries. Agencies established future international talent pools to increase diversity, including geographic diversity. UNHCR reported an increase of women in the field and in non-family duty stations and targeted efforts to increase diversity across its seven regions within regional bureaux.

V. Recommendations

103. **Based on the foregoing, the Secretary-General recommends the following:**

(a) **Member States, parties to conflict and humanitarian organizations should promote and ensure full respect for and adherence to the humanitarian principles of humanity, impartiality, neutrality and independence;**

(b) **Member States and parties to conflict should allow and facilitate the rapid, unimpeded and sustained access of impartial humanitarian relief, simplify and expedite procedures for the entry and deployment of humanitarian personnel, goods and services and remove barriers, constraints or levies that impede such access;**

(c) **Member States and parties to conflict should urgently take all measures necessary to promote, respect and ensure respect for international humanitarian law, international human rights law and international refugee law, including by ensuring the protection of civilians, other protected persons and civilian objects. They should develop national policy frameworks establishing clear institutional authorities and responsibilities for the protection of civilians, strengthening accountability measures for perpetrators of serious violations, including those perpetrated against children;**

(d) **Member States and parties to conflict should respect and protect health and humanitarian workers and their facilities and assets, including by refraining from direct attacks against them and taking all feasible precautions to avoid them in military operations. They should take all practical measures necessary to protect medical and humanitarian missions, including those defined in the recommendations made pursuant to Security Council resolution [2286 \(2016\)](#), and by prohibiting the criminalization of medical care and humanitarian assistance, strengthening accountability for serious violations, incorporating into**

domestic law required protections under international law and sharing best practices;

(e) Member States and non-State armed groups should respect the civilian character of schools and other educational institutions and refrain from undertaking actions that could adversely affect the protection of education facilities against direct attacks and should strongly condemn all attacks and threats of attack against schools perpetrated in contravention of international humanitarian law;

(f) Member States, the United Nations and humanitarian organizations should continue to place protection at the centre of humanitarian action, increase capacity and programming to minimize protection risks faced by affected populations, strengthen the protective environment, promote the safety and dignity of affected persons and systematically scale up measures to prevent and respond to sexual exploitation and abuse in a victim-centred manner, ensuring that victims and survivors receive the protection and assistance they need;

(g) Member States, the United Nations and humanitarian organizations should scale up efforts and funding to respond to gender-based violence, ensuring that survivors have immediate access to critical services at the onset of an emergency, and systematically integrate prevention, risk mitigation and response into humanitarian response plans;

(h) Parties to conflict should avoid the use of explosive weapons with wide-area effects in populated areas, and Member States are encouraged to advance a political declaration to address the humanitarian impact resulting from such use, including commitments to avoid such use, and to develop related operational policies and practices;

(i) Member States, the United Nations and humanitarian and development organizations should support the scaling up of efforts to prevent and reduce forced internal displacement, protect and assist internally displaced persons and achieve durable solutions, in line with international standards, and they are encouraged to engage constructively with the High-level Panel on Internal Displacement and to share practices and challenges encountered, particularly in achieving durable solutions;

(j) Member States should ensure that counter-terrorism measures comply with their obligations under international humanitarian law, international human rights law and international refugee law and do not impede principled humanitarian activities, including medical activities;

(k) Member States, the United Nations and humanitarian organizations should increase efforts to provide and fund cross-sectoral mental health and psychosocial support services that are integrated into humanitarian programmes for preparedness, response and recovery to meet the needs of all affected populations in all emergencies;

(l) Member States, the United Nations and humanitarian organizations should systematically increase strategies to advance gender equality and the empowerment of women and girls, including to ensure their meaningful participation in decision-making, supported by robust gender analysis;

(m) Member States, the United Nations and humanitarian organizations should strengthen their capacities, including human and financial resourcing and expertise, to mainstream the inclusion of persons with disabilities into programmes, policies and strategic frameworks, improve the collection, sharing

and use of data disaggregated by disability and ensure the participation of persons with disabilities at all stages of the humanitarian programme cycle;

(n) Member States, the United Nations, humanitarian, development and peace organizations and other relevant actors should strengthen collaboration, including joint analysis and joined-up planning to reduce risks and vulnerabilities and increased multi-year financing geared towards achieving collective outcomes, while fully respecting humanitarian principles;

(o) Member States and the private sector are called upon to fully resource humanitarian response plans, including in health emergencies, so that all life-saving needs can be met. They are encouraged to continue their strong support for country-based pooled funds and to fund the Secretary-General's Central Emergency Response Fund to the level of \$1 billion;

(p) Member States, the United Nations and humanitarian organizations should continue to work towards meaningful partnerships among international, regional, national and local actors to reinforce, not replace, the capacities of local actors and institutions, and should promote community engagement, including through capacity-building and funding, before, during and after emergencies, with affected people and communities at the centre of such efforts;

(q) Member States, parties to conflict, the United Nations, humanitarian, development and peace organizations and other relevant actors should intensify efforts to prevent and respond to food insecurity, including by enhancing humanitarian, development and peace collaboration, investing in agriculture, climate adaptation and health to protect lives, livelihoods and food production, providing urgent and flexible funding, scaling up support for risk-sensitive and shock-responsive social protection, and ensuring respect for international humanitarian law, including prohibiting the use of starvation of civilians as a method of warfare and facilitating humanitarian access to affected people;

(r) Member States, the United Nations and humanitarian organizations should accelerate efforts to address the humanitarian impacts of climate change, including by increasing the use of climate risk analysis in planning and programming and strengthening early warning systems, preparedness, disaster risk reduction, resilience and the effectiveness and timeliness of response;

(s) Member States, the United Nations and humanitarian organizations should continue to scale up efforts on anticipatory approaches to humanitarian crises, early warning early action systems and emergency preparedness to act ahead of disasters, including disease outbreaks, epidemics and pandemics, and to curb the scale of humanitarian impacts.
