

GLOBAL PRIORITISATION EXERCISE (GPE) FOR HUMANITARIAN RESEARCH AND INNOVATION REGIONAL CONSULTATION:

West Asia and North Africa



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ABBREVIATIONS

GBV	Gender-Based Violence		
GPE	Global Prioritisation Exercise		
HRI	Humanitarian Research and Innovation		
IDPs	Internally Displaced Persons		
INGO	International Non-Governmental Organisation		
NCD	Non-Communicable Disease		
NGO	Non-Governmental Organisation		
R&I	Research and Innovation		
SDGs	Sustainable Development Goals		
SRH	Sexual and Reproductive Health		
UN	United Nations		
WHO	World Health Organization		

FOREWORD

In a world with mounting and complex humanitarian challenges, research and innovation (R&I) can play a pivotal role in identifying, prioritising, and addressing humanitarian needs.

The role of R&I at multiple – global, regional, national and local – levels is crucial to developing culturally and contextually appropriate responses to humanitarian crises.

The region of West Asia and North Africa (WANA) is grappling with some of the most complex humanitarian crises in the world against a background of broader longstanding development challenges. The region demonstrates strong research and innovation capacities and has developed coordination mechanisms between government, civil society, and the international system that are unique. The experience and perspectives of the actors involved in humanitarian action and R&I provide invaluable learning that should drive action in the region but that can also shape the global conversation on how our global humanitarian research and innovation (HRI) ecosystem can evolve.

Elrha's Global Prioritisation Exercise (GPE) is a global research and consultation effort that seeks to improve outcomes for people affected by crises by amplifying the impact of investments into R&I. The process aims to build an improved understanding of the strengths and weaknesses of the global HRI system and deepen our understanding of priorities at all levels.

As part of the GPE, we have gained invaluable insights through a series of stakeholder interviews conducted across six geographic regions and three national settings. These consultations share the perceptions of regional and national humanitarian actors, and shed light on priority topics and areas that need HRI attention. This exercise extends further, delving into how the HRI system functions (and occasionally dysfunctions) in complex environments. It also explores how the system can be improved.

Humanitarian crises are varied and so are the landscapes they unfold in. The scale, type, magnitude, drivers, and impacts of these crises vary within and between geographic regions, and as such, so do the associated areas requiring HRI attention. The views of regional and national actors are, therefore, important to improve the way the humanitarian ecosystem functions and how the system in turn responds. This consultation examines the differing perspectives of those international and national actors engaged within WANA's HRI context.

This work is also fundamental to informing priority-setting processes to optimally guide R&I investment, improving coordination and donor funding allocations. Key recommendations, based on the challenges and learning reported, to improve the regional R&I ecosystem are proposed at national, regional, global, and donor levels. By valuing regional voices, these consultations aim to ensure that regional perspectives inform and influence the global HRI agenda.

ACKNOWLEDGEMENTS

Global Prioritisation Exercise (GPE) Regional and National Consultations Consortium

The GPE is commissioned by Elrha and funded by the UK Foreign, Commonwealth & Development Office, and the Netherlands Ministry of Foreign Affairs.

The GPE Regional and National Consultations Consortium is a multi-institutional collaboration led by the Alfred Deakin Institute, Deakin University, and Marian Abouzeid is the Project Director.

The Consortium is supported by Chaza Akik as Qualitative Research Lead. Shahram Akbarzadeh is Data Custodian. The Consortium acknowledges the contributions of the Faculty of Health Sciences, American University of Beirut, to the initial conceptualisation of this work.

Consortium partner organisations are: Deakin University (Australia), All India Disaster Mitigation Institute (India), Eastern Mediterranean Public Health Network / EMPHNET (Jordan), Indika Foundation (Indonesia), Passion Africa (Kenya), University of São Paulo (Brazil), and World Vision International West and Central Africa Regional Office (Senegal).

GPE West Asia and North Africa Regional Consultation

This West Asia and North Africa consultation was undertaken by a joint team from Eastern Mediterranean Public Health Network (EMPHNET) and the Alfred Deakin Institute, Deakin University, and was led by Yousef Khader and Marian Abouzeid.

Data collection was undertaken by Majd Alsoukhni, Adna Maiteh, Sara Abu Khadair, and Ruba Alsouri. Data analysis was conducted by Zeinab El-Dirani and Chaza Akik. This report was written by Yousef Khader, Zeinab El-Dirani, Marian Abouzeid, Majd Alsoukhni, Sara Abu Khadair, Randa Saad, and Adna Maiteh.

The authors wish to thank the research participants who generously shared their perspectives and insights and without whom this report would not be possible. The authors also thank Ruba Hadla for her support with translating project materials, including the interview guide and consent form from English into Arabic.

Suggested Citation: Yousef Khader, Zeinab El-Dirani, Majd Alsoukhni, Sara Abu Khadair, Randa Saad, Adna Maiteh, Ruba Alsouri, Chaza Akik, Marian Abouzeid (2023): *Global Prioritisation Exercise for Humanitarian Research and Innovation*: West Asia and North Africa Regional Report. London: Elrha

ISBN Number: 978-1-917009-00-3

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EXECUTIVE SUMMARY

BACKGROUND

Countries in the West Asia and North Africa (WANA) region face some of the largest emergencies and among the most protracted crises in the world, which have caused enormous issues regarding morbidity, mortality and displacement, and generated profound humanitarian needs. There are around 70 million people in need of humanitarian assistance in the region, including 27 million children. Moreover, there are 71.8 million people in the region in need of health and nutrition assistance, 29.3 million children in need of protection services, 24.9 million children in need of education support, and 50.4 million people lack access to safe water. Research and innovation (R&I) can help forecast and characterise humanitarian crises, understand the scale, distribution and types of needs arising, identify potential solutions, inform humanitarian response, and monitor progress. The ultimate objective of humanitarian R&I (HRI) is to help improve the ways in which the humanitarian sector mitigates and responds to crises, and serves communities affected by crisis.

This regional consultation for the WANA region, one of a series for Elrha's landmark Global Prioritisation Exercise (GPE) for HRI, examines the perspectives of regional HRI actors. Issues explored include how the HRI ecosystem functions, how decisions are made and who has a seat at the decision-making table, and views on topics requiring additional R&I attention.

METHODS

Key informant interviews (KIIs) were conducted with 21 regional stakeholders in the WANA region, the majority of whom were senior personnel with over ten years of experience in the sector. Participants were based across a range of organisation types, including academic institutions (n=9), international (n=6) and local / national (n=2) non-governmental organisations (NGOs), UN agencies (n=3), governmental / intergovernmental bodies (n=3), and the private sector (n=1), with some holding dual affiliations. Whilst a diverse range of participants from a broad range of disciplinary, sectoral and geographic contexts were sought, 11 participants were affiliated with organisations with a health focus or indicated that their role was health-related. Additionally, the majority of participants were based in Jordan; this reflects the fact that Amman is a regional humanitarian hub and the headquarters of many organisations. 12 participants indicated that their organisation engages across both HRI and eight work in humanitarian research only. Three participants identified as having a donor function.

Interviews were conducted in English (n=9) or Arabic (n=12), transcribed and translated into English where required, and analysed thematically.

This report presents a summary of key themes reported by participants in this study.

KEY FINDINGS

This study demonstrates that R&I is believed to play a vital role in identifying and prioritising humanitarian needs and helping inform culturally and contextually appropriate humanitarian responses during crises in the region. However, funding constraints, insufficient human resourcing, arduous administrative processes, competing operational priorities, and practical challenges of conducting research in crisis-affected settings limit the production of R&I in the region.

A range of topics were identified by participants as requiring additional R&I attention in the region. Of these, health-related issues were the most commonly identified topics, mentioned by 16 of the 21 participants, but this may reflect the large number of participants from the health arena. Other key thematic areas identified as requiring additional R&I attention included food and water security, livelihoods, education, and environmental issues and climate change, amongst others.

Most participants reported a **misalignment between R&I investments and the reported humanitarian topics requiring R&I attention**, and this misalignment was largely attributed to factors such as vested interests, priority mismatches, lack of recognition of topics requiring attention, and limited and insufficient funding. Other barriers reported as hindering investments in R&I included political considerations, the geopolitical context, limited availability of qualified researchers, and poor coordination and communication amongst stakeholders. Moreover, the majority of participants in this study reported that there is poor to negligible engagement of national and regional actors in HRI activities. The main **barriers to engagement** cited by participants included limited funding and limited technical capacity, especially in comparison to international organisations.

For R&I priority setting, many participants indicated that there are sufficient and collaborative processes. However, some groups are more represented than others: donors, government decision-makers, regional actors, and international bodies were most commonly reported as being involved in R&I priority-setting processes, whilst community members, populations affected by crises and local organisations were reported as often being absent from the priority-setting table. Regarding the responsiveness of the HRI system to emerging issues and crises, lack of funding and availability of qualified personnel, as well as limited government interest in R&I, were the main factors reported as impeding a timely R&I response. Enablers of timely R&I responsiveness included having sufficient technical expertise, capacity and funding, among others.

RECOMMENDATIONS

The following recommendations are proposed to reorient the regional R&I ecosystem, addressing both the challenges reported and learning from models that work:



At the national level:

- Develop national HRI strategies to address priority topics requiring additional R&I attention and functioning within the constraints and requirements of any national regulatory frameworks. Notably, the topics presented in this report reflect those identified by participants as requiring further attention. Additional work is required to validate these findings and to identify a priority list of topics, through a transparent and inclusive R&I priority-setting exercise that incorporates input from a large and diverse number of R&I stakeholders.
 National strategies must include a domestic financing plan, with funding for HRI being earmarked and prioritised.
- Establish national central coordinating bodies within countries to regulate, prioritise, manage, and coordinate all HRI activities. Depending on the national context and infrastructure, these coordinating bodies may be based within academic institutions, government agencies or local / national NGOs, and the steering groups should include broad and inclusive stakeholder representation.
- Build understanding of the importance of R&I among policymakers, national funders and decision-makers. This may include **establishing R&I units** within key government departments and agencies.



At the regional level:

- Establish a regional HRI platform to support collaboration, engagement and information dissemination. This regional platform may comprise representation from each of the national central coordinating bodies, with a rotating secretariat hosted by the national central coordinating bodies.
- Build a strong, sustainable, sufficiently skilled and resourced HRI workforce, through establishing and supporting national and regional HRI teams to be responsible for planning, conducting, and reporting HRI activities. Building a strong and skilled workforce requires focused efforts at individual and institutional levels, to both build R&I technical skills and capacity, as well as foster an enabling environment, with sufficient and supportive infrastructure and resources. Specialised technical training can be delivered through workshops, seminars, online courses, mentoring programmes, exchange programmes, or through collaborations with academic institutions and research organisations. Training should cover topics such as research methodologies, ethics, project management, data analysis, innovation frameworks, knowledge translation, and other relevant technical skills.

- **Build capacity** within national and regional organisations to conduct R&I activities during all phases of humanitarian crises.
- Ensure broad dissemination of results and evidence from HRI activities to support evidence-based decision-making.
- Strengthen collaboration and partnership between humanitarian organisations, academic
 institutions, local researchers, donors, innovators, private sector actors, and collaborators to
 produce research that is rigorous, actionable and is utilised with innovations that are scalable
 and adoptable.
- In addition to identifying country-specific R&I topics needing attention, conduct further
 research involving a broader range of participants to identify key humanitarian topics and
 priority issues requiring R&I attention at the regional level.



At the global level:

Several issues of research ethics and the ethics of conducting research in settings affected by
crises were mentioned in this consultation. Such matters are not unique to the WANA region,
but rather warrant international consideration. A transparent global dialogue addressing
these challenges and considerations is required, with a view to the development of a
comprehensive, contemporary framework for ethical funding and conduct of humanitarian
research in crisis contexts, which captures both ethical issues in undertaking research, but
also the broader ethical issues that a crisis context presents.



At the donor level:

- Ensure transparency and inclusiveness in funding allocations and the identification of priority topics to be funded through **better communication**, including about how decisions are made and justification of why particular issues / crises are the focus of a given funding call.
- Provide more funding, flexible funding mechanisms and transparent reporting processes.
- **Increase funding** towards innovations explicitly catering to the needs of communities affected by crisis.
- Ensure that **funding is based on the needs and long-term goals** of countries in the region and avoid imposing donor agendas by issuing funding calls for R&I priority topics that reflect donor interests or are incompatible with national regulatory or legal frameworks, and baseline local capacities.

SECTION 1 BACKGROUND

SECTION 1: BACKGROUND

WHY A GPE FOR HRI?

Globally, the number of people affected by humanitarian crises and in need of humanitarian assistance and protection are at unprecedented levels: [1] in 2022, there were an estimated 406.6 million people in need of humanitarian assistance. Humanitarian action had to adapt to new and worsening crises, including conflict in Ukraine, climactic shocks in Pakistan and East Africa, and the ongoing socioeconomic impact of the COVID-19 pandemic. Complex, protracted crises are increasingly the norm with three-quarters of people in need facing at least two risk dimensions of conflict, climate and socioeconomic vulnerability, an increase from 61% in 2021. As a result, a growing majority of people in need (83%) now live in a country experiencing protracted crisis. Almost 74% of those in need live in protracted crisis settings.

Research can help forecast and characterise humanitarian crises, understand the scale, distribution, and types of needs arising, inform humanitarian action and monitor progress. Research has a crucial role to play in helping improve the ways in which the humanitarian sector mitigates and responds to crises and serves populations in need.

Innovation can play a critical role in humanitarian crises by providing new and more effective solutions to the complex problems that arise during such emergencies. Strategic investments in R&I and appropriate utilisation and uptake of R&I findings can help improve the way the humanitarian sector uses evidence and identifies and scales solutions and, in turn, contribute to improving the efficiency of the humanitarian response.

Despite the importance of R&I in the humanitarian space, the allocation of resources and the focus of HRI are not equitable. Preliminary results from the 2021/22 Global Prioritisation Exercise Mapping Report [2], which captured humanitarian literature published during the period January 2017 to June 2021, indicate that there has been a steady increase in the number of HRI publications over the five-year period, but there are considerable issues of inequities of attention, with some crises, population subgroups, and geographic areas receiving disproportionately more R&I attention than others. Additionally, R&I actors and institutions remain heavily Global Northbased, and institutions in the Global North continue to receive the largest share of R&I funding [3].

Differential attention matters: what gets measured gets discussed, and what gets discussed gets addressed. Therefore, it is imperative to understand how the HRI ecosystem is structured and functions, including understanding where and to whom R&I funding is directed, how R&I priorities are set, who is involved in these decision-making processes and how, if at all, coordination mechanisms operate. Reflecting the variable nature and impact of crises across the globe, understanding how HRI priorities and topics requiring attention vary by geographic region is also crucial to better inform investment decisions and, ultimately, help improve evidence-driven and efficient humanitarian response.

ABOUT THE GPE

The GPE for HRI is a landmark multi-pronged initiative that seeks to improve outcomes for people affected by humanitarian crises by characterising the existing HRI landscape (including thematic and crisis focus areas, funding, actor engagement, and impact of investments) and identifying priorities for future investment. Commissioned by Elrha, the GPE comprises two distinct research phases:

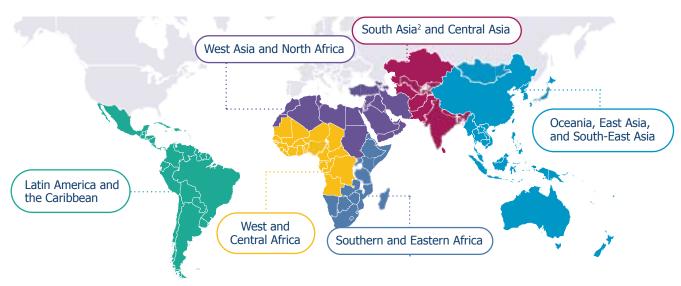


Global mapping of humanitarian research and innovation outputs and investments: Detailed mapping of HRI actors, investments, and thematic and crisis focus areas over the period January 2017 to June 2021 [2], and financial flow analysis tracking HRI funding allocations from a range of donor types over this period [4]. This builds upon the previous mapping of research, innovation, and outputs undertaken in 2017 for the period January 2016 to April 2017 [5].



Stakeholder consultations: A series of consultations with diverse stakeholder groups operating at each of the global, regional, national, and community levels and exploring a range of issues regarding R&I investments, needs and priority-setting, and decision-making processes.

This report is one of a series for the regional and national consultations. Led by Deakin University (Australia) in collaboration with partners in each region, the regional consultations have explored stakeholder perspectives on the HRI ecosystem in six geographic regions, demarcated according to the United Nations Statistics Division (UNSD) Regional Classifications:¹



Three national consultations have also been conducted:



The overarching aim of the regional and national consultations is to understand how the HRI ecosystem functions, how decisions are made, and who has a seat at the priority-setting table, and to gauge perceptions of regional R&I needs.

^{1.} United Nations Statistics Division: Methodology. Standard Country of Area Codes for Statistical Use (M49). Available from: https://unstats.un.org/unsd/methodology/m49/#geo-regions

^{2.} The UNSD classification includes Iran under South Asia, but for the purposes of the GPE consultations Iran was included in the West Asia and North Africa region.

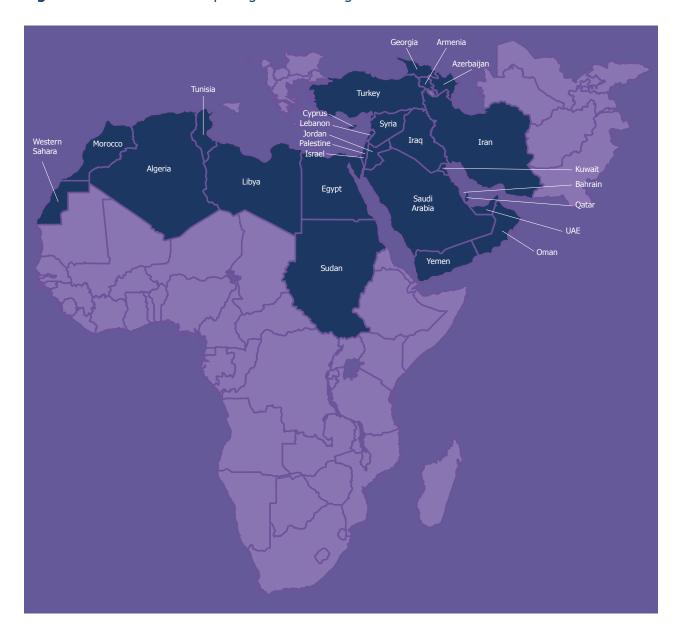
ABOUT THIS REPORT

This report presents key findings for the West Asia and North Africa (WANA) region. This regional consultation was led by the Eastern Mediterranean Public Health Network (EMPHNET) and Deakin University.

THE HUMANITARIAN LANDSCAPE ACROSS WANA

The WANA region comprises 19 countries of West Asia (Armenia, Azerbaijan, Bahrain, Cyprus, Georgia, Iraq, Israel, Jordan, Kuwait, Lebanon, Oman, Qatar, Saudi Arabia, Palestine, Syria, Turkey, UAE, Yemen), seven countries of North Africa (Algeria, Egypt, Libya, Morocco, Sudan, Tunisia, Western Sahara), and Iran (Figure 1).

Figure 1: The countries comprising the WANA region



The region faces some of the largest scale emergencies and most protracted crises in the world, which have caused enormous issues surrounding morbidity, mortality, and displacement, and, therefore, generated profound humanitarian needs. In 2021, the region was home to more than 40 million migrants and 16 million forcibly displaced people. [6] About 70 million people require humanitarian assistance, including 27 million children. According to UNICEF's Humanitarian Action for Children (HAC), there are 71.8 million people in the region in need of health and nutrition assistance, 29.3 million children in need of protection services, 24.9 million children in need of education support, and 50.4 million people lack access to safe water. [7] The multiple and complex crises, including conflicts, natural disasters, socioeconomic collapse and its related economic hardships, such as hyperinflation and unemployment, combined with the consequences of the COVID-19 pandemic, continue to increase the instability and fragility of this region, exacerbating longstanding social and political unrest. [8]

The WANA region is experiencing multiple crises, including wars and armed conflicts, political instability, and socioeconomic collapse.

The decade following the Arab Spring in 2011 has seen numerous ongoing wars and armed conflicts, and political instability in this region, causing soaring death rates and enormous suffering, predominantly among the most vulnerable population groups. [9,10] Human-made crises and complex emergencies in the region include the following:

The crisis in **Syria** is one of the most complex humanitarian and protection emergencies in the world, with two thirds of the population requiring humanitarian assistance due to the worsening economic crisis, continuous localised hostilities, displacement, and damaged, destroyed, and disrupted public infrastructure. [11] The Syrian conflict has generated the largest number (6.9 million) of internally displaced persons (IDPs) in the world. [12] After 11 years of conflict, humanitarian indicators continue to deteriorate and basic services are collapsing. [12] As a result, even prior to the devastating February 2023 earthquake, it was estimated that at least 15.3 million Syrians would require humanitarian assistance in 2023. [13] About 90% of Syrian families live in poverty and 55% are food insecure. [14] Undernutrition, high stunting levels, micronutrient deficiencies, and obesity affect 3.75 million children. [14] Moreover, 2.4 million Syrian children are out of school and a further 1.6 million are at risk of dropping out. [14]

The Syrian conflict has generated the largest number (6.9 million) of internally displaced persons (IDPs) in the world.[12] After 11 years of conflict, humanitarian indicators continue to deteriorate and basic services are collapsing. [12]

Lebanon is also facing a rapidly escalating and multipronged humanitarian crisis, including a massive socioeconomic collapse which has been described by the World Bank as a "deliberate depression" and among the most severe globally since the mid-19th century. [15] Lebanon is also home to the largest number of refugees per capita in the world, accommodating over 1.5 million Syrian refugees and 480,000 Palestinian refugees. [12] The country is also still reeling

from the effects of the devastating August 2020 Beirut blast, which killed over 220 people and caused extensive damage to infrastructure. In late 2022-June 2023, Lebanon also experienced a widespread cholera outbreak, the first in decades. This multipronged crisis in Lebanon has generated profound humanitarian needs and placed a generation at risk. [16]

All population subgroups are impacted and in need, and the most vulnerable requiring humanitarian assistance include 2.3 million Lebanese, 1.2 million Syrian refugees, 207,700 Palestinian refugees, 86,200 migrants, and 700,000 children. [17]

In **Iraq**, nearly 4.1 million people (including 1.1 million children and 2.4 million people in acute need of assistance) are affected by the protracted conflict. [18,19] Although the conflict and armed violence in Iraq have declined, unpredictable attacks continue to occur throughout the country by armed groups and small-scale military operations. [19]



As a result, millions of Iraqi families are facing new concerns regarding displacement and continue to face limited access to basic services and critical protection risks. [19]

Libya is considered one of the most vulnerable countries in the region due to the presence of foreign armed groups, the trafficking of drugs and migrants, uncontrolled borders, organised crime and corruption. [20] These have had a major impact on health services as well as social protection and education services. [20] With ongoing violations of international human rights and humanitarian law against civilians, conflict-related sexual violence and major violations against children, there are an estimated 803,574 people (including 321,430 children) requiring humanitarian assistance, and 667,440 migrants and refugees have limited access to healthcare services. [21]

Yemen is one of the poorest countries in the region and has been in the grips of civil war since 2014. [22] Yemen is facing one of the worst humanitarian crises in the world, with massive economic collapse, increased poverty, breakdown of national social protection systems, and a worsening of the already dire food insecurity situation. [23] Of a total population of 30 million, more than 17.9 million, including 9.2 million children, lack access to safe water, sanitation, and hygiene services. [24] Moreover, only 50% of Yemen's health facilities are fully functioning, with widespread issues, including a lack of qualified health staff, basic medicine, and medical equipment. [25] Nearly 16.2 million Yemenis, comprising 55% of the population, are acutely food insecure. [26] About 11 million Yemenis have reached 'crisis' levels of food insecurity, 5 million have reached 'emergency' levels, and 47,000 people have reached 'catastrophe' levels. [26]

Sudan is facing a complex crisis caused by political instability, leading to more than 14.3 million Sudanese being in need of humanitarian assistance in 2022. [27]

The Sudanese socioeconomic crisis caused currency depreciation and high inflation rates, and severe food insecurity now affects 11.7 million people. [28] As of 7 October 2023, a total of 1,265 people have been killed and 8,396 injured across the country since the onset of the conflict, according to the Federal Ministry of Health. In the same period, about 5.5 million people have fled their homes and sought refuge within Sudan or in neighbouring countries. Disease outbreaks have been reported nationwide, including measles, malaria, dengue fever, and cholera. The devastating impact that fighting has had on civilians, including deaths and sexual violence, continues to be reported.³

The WANA region also has one of the world's longest ongoing conflicts – the Israeli occupation of the state of **Palestine**, which dates back to 1948. [29] As a result of this occupation, Palestinians have been living in an increasingly coercive environment where of a population of 5.3 million, about 2.1 million people, including 934,000 children, are facing multiple deprivations. [30] The Israeli-Palestinian conflict has resulted in a range of humanitarian consequences. The occupation of the Palestinian territories, restrictions on movement, limited access to resources, and the construction of Israeli settlements have significantly impacted the lives of Palestinians. The Gaza Strip, a densely populated coastal territory, has been particularly affected. It has experienced several conflicts between Israeli and Palestinian armed groups, resulting in significant damage to infrastructure, loss of life, and displacement. The blockade imposed by Israel, along with restrictions on goods and services, have led to economic hardship, high unemployment rates, and limited access to basic services such as healthcare and clean water. In the West Bank, Palestinians face restrictions on movement due to the setting up of checkpoints, roadblocks, and the separation barrier. Israeli settlements continue to expand, leading to the loss of Palestinian land and resources. Palestinian communities also face challenges in accessing essential services, including healthcare and education. Palestinians face high levels of poverty and unemployment, further exacerbated by the political and security situation.

^{3.} Reliefweb. Sudan Humanitarian Update (7 October 2023). https://reliefweb.int/report/sudan/sudan-humanitarian-update-7-october-2023-enar

Climate crisis

Countries in this region are also highly vulnerable to the impacts of the climate crisis, as they have a baseline of harsh climatic conditions, extremely high temperatures, limited groundwater and rainfall, and limited agricultural and arable land. [31]



This region is warming about twice as fast as the global average, which makes it highly vulnerable to the effects and impact of climate change including, extreme water scarcity. [32]

Other implications of climate change are starting to be observed in the region, including desertification and the increased frequency of droughts and floods. [33] For instance, millions of people are at risk of forced migration due to the drying up of natural freshwater bodies in Iran. [31] Up to 40 million people are threatened by the rising sea levels in the Nile delta. [33] Saltwater encroachment leading to aguifer salination in the occupied Palestinian territory is irreversible and expected to make this part of the region uninhabitable. [34]

Both Iraq and Yemen have been grappling with significant water and food insecurity, which have had severe humanitarian consequences in both countries. [31] Iraq faces challenges related to water scarcity, deteriorating water quality, and inadequate water infrastructure. Factors such as climate change, drought, upstream dam construction, pollution, and inefficient irrigation practices have contributed to water scarcity. This has impacted agricultural production, disrupted livelihoods, and led to the rise of waterborne diseases. Yemen faces a severe water crisis characterised by water scarcity, depletion of groundwater resources, and limited access to safe drinking water.

Natural hazards and disasters

The region faces heightened risks of natural hazards and disasters. Although the number of disasters around the world has almost doubled since the 1980s, it has tripled in the WANA region. [35] These events, including floods, earthquakes, and droughts, pose serious challenges to growth and stability in this already vulnerable region. Between the period of 1981 and 2011, there were at least 300 flood events, accounting for 53% of the total number of disasters in the region. [35] Earthquakes were also frequent, accounting for 24% of all regional disasters, while storms and droughts both accounted for almost 10%. [35]

It is estimated that about 40 million people were affected by over 350 disasters due to natural hazards between 1981 and 2011. [35] Poor existing infrastructure and limited social protection, and lack of support in many parts of the region render the impacts of these natural hazards even more devastating.

In 2019, severe flooding in Iran affected 10 million people and displaced 500,000 (half of whom were children). [36] More than 1,000 health facilities and 1,000 schools were destroyed, depriving thousands of people of essential healthcare and forcing 100,000 children out of school. [36] In 2020, heavy rains and devastating flooding in Sudan killed more than 100 people, displaced thousands, and destroyed infrastructure and homes. [37] In 2022, further severe flooding across Sudan resulted in additional deaths and worsened an already unstable situation for many communities, increasing the need for shelter, sanitation and hygiene services, healthcare and food supplies. [37]

The WANA region is considered the driest region in the world, with only 2% of the world's renewable water supplies. [38] Drought affected about 38 million people between 1970 and 2009. [35] By 2010, three consecutive years of drought in Syria had affected 1.3 million people, and 800,000 people lost almost all their sources of livelihood. [39] In Djibouti, within four consecutive years of rainfall deficit, the 2008-2011 drought caused economic losses affecting at least 120,000 people. [35]



The region is also prone to earthquakes. For example, Algeria, Djibouti, Egypt, Iran, Morocco, and Yemen have been affected by over 100 earthquakes that have killed almost 170,000 people and affected 4.5 million others between the period from 1900 to 2011. [35]

The devastating earthquakes in Turkey and Syria in February 2023 have caused massive death and destruction, and are the worst to strike the region in nearly a century.

This increasing frequency of, and vulnerability to, natural hazards, the impacts of climate change, and the large number of human-induced crises and complex emergencies across the region, all against a background of longstanding development challenges in many settings, generate a heavy humanitarian caseload and a challenging, multi-faceted regional humanitarian landscape.

Humanitarian needs are soaring

The many humanitarian emergencies across the region have generated huge numbers of IDPs and refugees, many of whom have limited or no access to basic healthcare services, including vaccinations amongst other concerning implications. This has increased the likelihood of the emergence and re-emergence of infectious diseases in the region. [40]

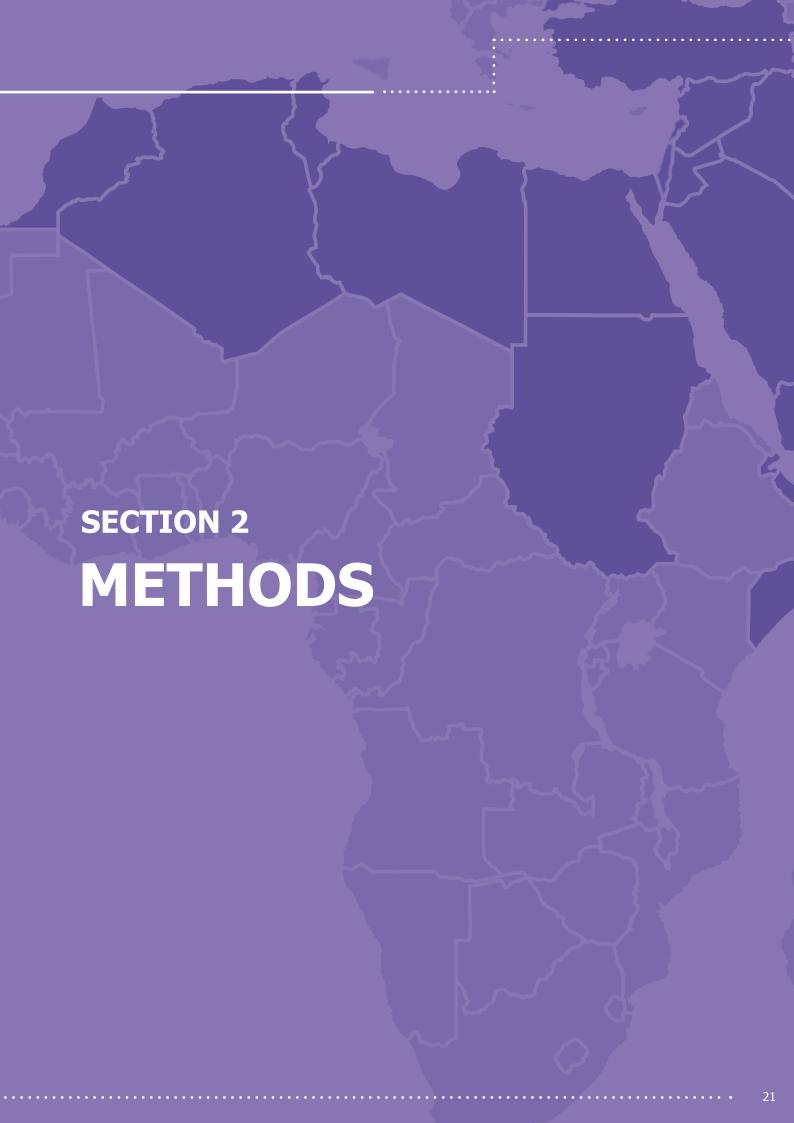
In 2019, about 2.3 million people were affected by various disease outbreaks, leading to over 10,000 deaths [41] and increasing the need for humanitarian support.

19

In 2020, all the challenges facing the region were intensified as COVID-19 spread. [42] COVID-19 has impacted all countries across the region, with severe public health and economic consequences. [43]

COVID-19 and its impacts have contributed to, and exacerbated, poverty, inequality, and changed the labour market leading to the emergence of 'new poor' groups in the region. [42,43] In addition, the effects of COVID-19 have been particularly pronounced among already atrisk groups such as refugees and IDPs, resulting in reduced incomes, increased gender-based violence (GBV), and disruptions to education. [44]

Across the region, the needs of communities affected by crises are increasing in scale and severity, fuelled by economic crises, chronic underdevelopment, natural hazards, and disease outbreaks. The escalation of many conflicts is resulting in new displacements, increased vulnerabilities, and humanitarian needs. All this is leading to a vicious circle of deteriorating economic situations, aggravated domestic and international tensions, an increased number of refuge seekers and IDPs, and poverty. Humanitarian needs are soaring. Additionally, many of the crises across the region have resulted in significant human rights challenges. These crises often involve violations of civil, political, and socioeconomic rights, including restrictions on freedom of expression, assembly, and association. Displacement and insecurity disrupt access to basic services such as healthcare, education, and housing. People affected by conflicts and political instability require assistance in areas such as food security, clean water, healthcare, and shelter. Humanitarian organisations strive to address these needs and human rights organisations seek to address and raise awareness of violations and pursue justice and accountability, but often face obstacles due to security risks, resource constraints, and limited access to affected populations.



SECTION 2: METHODS

STUDY OVERVIEW

Detailed methodological information is available online. Briefly, this study sought to include between 15-25 regional actors engaged with the humanitarian research and innovation (HRI) space in any of the following capacities:

- · Researcher, innovator.
- Donor.
- End user of R&I findings and outputs (eg, humanitarian operational practitioner, policymaker).
- R&I commissioner / administrator.

Regional actors were defined as those with a portfolio, mandate or focus spanning two or more countries in WANA.

A standardised key informant interview guide, modified to ensure cultural sensitivity and regional relevance, comprised seven modules covering:

- demographics
- the role of R&I in humanitarian crises
- regional HRI topics requiring attention, and priority topics
- alignment of investments with HRI topics requiring attention
- · regional and national stakeholder engagement with HRI
- donor decision-making and coordination processes
- responsiveness of the HRI system.

The final interview guide used in this WANA consultation is <u>available online in English and in Arabic</u>.

Interviews were conducted in English or Arabic, transcribed (and translated into English where required), and analysed thematically. All analysis was undertaken in English, using a coding framework that was developed both inductively and deductively. Where participants had referred to issues outside the region, discussed issues not relevant to the humanitarian space, or referred predominantly to the humanitarian operational sector rather than HRI, these excerpts were not used in the current analysis.

Ethics approval to conduct this study was obtained from the Deakin University Human Research Ethics Committee (ref 2022-163).

LIMITATIONS OF THIS WORK

This report presents perspectives of a small number of interviewees, who were purposively sampled. Whilst attempts were made to ensure broad sectoral and disciplinary engagement and representation from diverse organisation types and from across the region, this small sample cannot be considered representative of the entire HRI sector in WANA.

In particular, around half of the participants were either based in health-focused organisations or had a health-related role within organisations with a broader scope. Additionally, 15 of the 21 participants were based in Jordan.

This geographic skew partly reflects the fact that Jordan is a regional humanitarian hub, with many organisations and humanitarian actors locating their regional headquarters in Jordan due to the stable political conditions. There were no participants from some countries in the region hosting large numbers of refugees (for example Lebanon or Turkey) or experiencing conflict (eg, Yemen), however, many of the participants who were included have a regional focus and the country base does not necessarily reflect the exclusive focus of their work.

This study is also subject to the limitations inherent in all qualitative analyses, namely that coding is subject to interpretation. This was minimised through an iterative coding process, including an initial validation exercise between the regional analyst and qualitative research lead, and re-analysis and recoding as required by team members to resolve any disagreements or review specific transcripts or excerpts. In some instances, the participants did not address the question as intended or the interviewer statements or question as presented by the interviewer may have been considered as leading. Any such excerpts were excluded from the analysis.

Although definitions and clarifications were provided as required, participant interpretation of the concepts and scope of R&I varied.

This study explored participant perspectives regarding how the HRI ecosystem functions and humanitarian topics requiring additional R&I attention in the region. This report presents summaries of the key points raised by participants.

Therefore, not all humanitarian issues or R&I needs impacting the region are necessarily covered in this report if they were not mentioned by participants. Provided they were relevant to the humanitarian space and region, the key issues reported by participants are summarised in this report, regardless of whether the report authors perceived the responses to be accurate or a true reflection of the situation in the region. Similarly, the topics reported as requiring additional R&I attention reflect the views of participants in this small consultation – they are informative, but not necessarily exhaustive and were not ranked. As such, they do not represent a priority list of topics for the region, and further work (including gauging the views of a large and diverse number of regional stakeholders) is required to validate the findings from this initial scoping exercise and inform development of an agreed regional R&I agenda.

CONSULTATION PARTICIPANTS

In total, interviews were conducted with 21 participants. Nine interviews were conducted in English and 12 in Arabic; ten interviews were conducted online using a secure Microsoft Teams platform, while 11 interviews were conducted face-to-face in a private setting. Interviews were conducted in October and November 2022.

Summary characteristics of participant and organisational details are presented in Table 1.

Eleven participants were affiliated with organisations with a health focus or indicated that their role was predominantly health focused. Participants were based in seven different countries, but the majority were based in Jordan. Notably, the country base refers to the country where the individual participant is based and does not necessarily reflect the country where the organisation is headquartered nor the geographic focus of the organisation's or individual's work. The majority of participants reported that their organisation works across both HRI (n=12) or humanitarian research (n=8). Most participants were senior in terms of their career, reporting over ten years of experience in the sector.

Three participants identified as having a donor function. Notably, any organisation that provides any type or magnitude of funding for R&I could be considered a donor, including, for example, large philanthropic organisations, governmental bodies, academic institutions, or smaller organisations that provide seed grants or sub-awards.

Table 1: Summary of participant and organisational characteristics

Participant and organisational characteristics	Number of participants
Organisational type*:	
Governmental / intergovernmental	3
Academic	9
International NGO	6
UN agency	3
National / local NGO	2
Private sector	1
Participant country base^:	
Jordan	15
Egypt	1
Sudan	1
Morocco	1
Tunisia	1
Palestine	1
Iran	1

Participant years of experience in the sector:			
Less than five years Between five and ten years More than ten years	1 5 15		
Participant years of experience in current role:			
Less than five years	4		
Between five and ten years	4		
More than ten years	13		
Organisational involvement with R&I:			
Humanitarian research only	8		
Humanitarian innovation only	0		
Both HRI	12		
Not reported	1		

^{*} total sums to more than the total number of interviews, as three participants had dual affiliations

[^] this refers to the country where the participant is based and does not necessarily reflect the country where the institution is headquartered nor the geographic focus of the organisation's or individual's work



SECTION 3: THE ROLE OF RESEARCH AND INNOVATION (R&I) IN HUMANITARIAN CRISES



KEY FINDINGS

- All but one participant indicated that there is a role for R&I during a humanitarian crisis.
- The most commonly reported roles of R&I during a crisis are to anticipate and predict crises, prevent or mitigate their effects, inform needs-driven humanitarian action, and inform learning and recovery post-crisis.
- While many participants indicated that R&I is enabling improved responses to humanitarian needs, several reported that R&I is having limited impact in the region, and this was attributed largely to the limited implementation of findings and utilisation of evidence, with some also reporting limited production of R&I.
- Reported barriers to the **production of R&I** included funding constraints, human resourcing, administrative processes such as prolonged ethics review times, competing operational priorities, and the practical challenges of conducting research in settings affected by crises.
- Reported barriers to uptake and utilisation of R&I included limited access to R&I results, and vested interests and agendas.
- Key considerations and approaches for conducting R&I during acute crisis events reported by some participants included ensuring that any R&I is operationally focused, participatory, and requires researchers to be based in the crisis-affected setting rather than engaged remotely.
- Factors identified by a few participants as being required for the humanitarian R&I sector in the region to function effectively include improved investment into monitoring and surveillance systems, and the establishment of a central agency at national level to support the prioritisation of R&I topics and communicate these needs to donors.

IS THERE A ROLE FOR R&I DURING HUMANITARIAN CRISES?

The majority of participants stated that R&I is essential to inform evidence-based decision-making and can help inform recommendations and action. It was emphasised that research is 'an ongoing and systematic process' that should be done not only to understand an acute situation, but also to evaluate whether humanitarian responses or actions are effective. Almost all of the 21 interviewees who answered this question indicated that R&I has a role to play during crises. The most commonly reported roles of R&I during a crisis are summarised below in Table 2.

Table 2: The most commonly reported roles of R&I during humanitarian crises

Role of R&I	Reported examples
Anticipate and predict events. Inform the prevention of crises and mitigation of their effects.	Modelling and forecasting climate crisis events.
	 Understanding how to prevent a crisis and what to do during a crisis.
	 Understanding the types of shelters that offer the best protection in case of weather change.
Inform needs-driven humanitarian action.	Understanding and prioritising community needs.
	Conceptualisation of the humanitarian response.
	 Understanding population behaviours and preferences to inform action such as preferred types of contraception, type of foods consumed, or preference for unisex versus gender-segregated public bathroom facilities.
	Rationalising resource distribution based on needs.
	 Bridging the gap between needs and available resources.
	Informing actions toward crisis resolution.
Inform learning and recovery post-crisis.	Helping to set short- and long-term goals.
	 Assisting in development and societal recovery after crises.

Notably, one participant reported that there is poor understanding of what is meant by R&I and that some believe that R&I is very costly.

WHAT ROLE DOES R&I PLAY THROUGHOUT THE VARIOUS PHASES OF HUMANITARIAN CRISES?

Many participants acknowledged the significance of R&I throughout all phases of a crisis, including preparedness, response, and recovery. The main reported roles of R&I throughout each crisis phase are summarised in Figure 2.

Figure 2: Main reported roles of R&I during the various phases of a humanitarian crisis



Preparedness

- Provide projections and early warning signs about potential or anticipated threats and challenges.
- Predict and forecast events and scenarios using R&I tools, methods, and processes.



Response

- Identify and prioritise humanitarian needs for the formulation of tailored solutions.
- Assist with the development of a needsbased operational response that is responsive to, and deals with, the root causes of humanitarian needs.
- Provide alternative solutions to problems and help bridge the gap between the availability of resources and humanitarian needs.
- Improve response effectiveness and efficiency.
- Inform decision-making around resource allocation.



Recovery

- Inform future programming.
- Demonstrate knowledge of any lessons learnt.
- Help address the aftermath of crises.

IS HRI ENABLING BETTER OUTCOMES, AND IF SO, HOW?

Most of the 18 respondents who addressed this issue indicated that R&I enables humanitarian responses to better address the needs of populations affected by crises. Participants indicated that R&I is enabling improved humanitarian responses by creating knowledge about interventions, programmes, policies, and services, as well as informing development of tools and practices that are culturally acceptable, accessible, efficient, and effective. Most of the respondents reported that R&I enables better outcomes through the following mechanisms:

- R&I improves the efficiency and cost-effectiveness of interventions.
- R&I informs needs-driven responses and programmatic action.
- R&I allows the development of culturally acceptable interventions, products, and tools.
- R&I helps identify the population groups most affected by a crisis.
- R&I informs risk assessment, risk reduction, and prevention.
- R&I helps inform preparedness and awareness while increasing the resilience of governments and agencies involved with crisis response through informing risk assessment and risk reduction, and the development of future management plans.

However, some participants indicated that R&I is not enabling (or does not always enable) improved humanitarian action and outcomes in the region, and this was attributed largely to limited knowledge translation, as well as **actions and decisions in the region rarely being based on evidence**. Research production was described as weak by two participants, with limited utilisation of evidence in decision-making. It was also reported that insufficient funding results in weak research production such that the emerging research findings are not effective in informing action.

It was also reported that R&I is not supporting improved outcomes because there is often duplication in initiatives, which makes the HRI work distracting and wasteful of resources. Some participants described **limited utilisation and uptake** while reporting that considerable HRI is being undertaken, but is not being used to inform action including, for example, increased preparedness for emerging threats.



Many participants highlighted barriers to the production of R&I. These included:

- Limited research and innovation capacity: Several participants asserted that a lack of
 human resources, including limited technical expertise and limited organisational capacity,
 hinder the ability to conduct R&I. This results in, for example, the overuse of specific research
 designs such as cross-sectional studies, as well as the absence of in-depth or multi-disciplinary
 analysis methods.
- **R&I** is sometimes not considered a priority: Many participants indicated that a key barrier to the production of R&I is the limited attention to HRI, which is not recognised as a priority by governments, institutions, and communities. This attitude towards R&I results in poor allocation of funding for R&I which, therefore, precludes production.
- **Funding constraints**: Some participants stated that the key barrier to conducting R&I activities is generally a lack of funds.
- **Constraints due to institutional processes**: One participant reflected on institutional administrative processes, including institutional review boards that should have a faster process of reviewing and approving research proposals.
- Challenges of conducting research in settings affected by crisis: Three participants reflected on the challenges faced during particular crisis events, such as armed conflicts and the COVID-19 pandemic, including difficulties in gathering accurate data, and the mismatch between protracted research timeframes, and the need for immediate evidence and action.

Several participants mentioned barriers to the **uptake and utilisation** of R&I. These included the commercialisation of R&I patents or limited dissemination of results which prevent widespread uptake and adoption. One participant stated that decisions and actions are heavily influenced by politicians and what could benefit their own agendas. Hence, political interests can influence the uptake and utilisation of R&I findings.

HOW SHOULD R&I BE CONDUCTED DURING ACUTE CRISES?

Several participants described various ways in which R&I should be undertaken during acute crisis events:

- Research should be focused on solving problems, driven by needs and priorities, and have practical outcomes and recommendations.
- All R&I should encompass participatory approaches and processes.
- Researchers and innovators should be located in the setting affected by the crisis so that they can optimally engage with the affected populations and with local issues.

HOW CAN R&I BE BETTER USED?

Some participants described the following ways in which R&I could be better utilised:

- Expectations about the outcomes of R&I should be determined from the outset to ensure clarity about the rationale of the work.
- R&I should be undertaken at every stage of the humanitarian cycle in order to ensure that needs are properly identified, the response is adequate, and to learn from the initiatives.
- Data and information collected through R&I should be analysed, documented, and disseminated to support development of an evidence base.

ETHICAL CONSIDERATIONS AND CHALLENGES IN THE HRI ECOSYSTEM

Across this consultation, a number of participants mentioned issues of ethical considerations and ethical challenges at both structural levels and in the implementation of R&I findings. Reported issues included:

- Corruption and vested interest:
 - some issues do not receive sufficient attention, because there are people who stand to benefit from maintaining the status quo and not investigating the issue and solving the problem
 - funding is sometimes not distributed, but rather funds are retained to support the interests of, and benefit, senior personnel
 - nepotism.
- Lack of accountability.
- Lack of transparency.

- Suboptimal use of funding:
 - spending large portions of a project budget on conferences, offices, cars, and expatriate teams
 - squandering of resources
 - investments are sometimes made to support initiatives that just provide band-aid solutions, rather than investments into R&I which can help inform sustainable solutions and definitively address the root cause of a problem.
- Lack of adherence to research ethics.
- Researchers undertaking work that has no meaningful impact and are funded to do such work in order to achieve promotions.
- Ethics of conducting research: Given the large amounts of money invested into the Syrian response, it became common for there to be an expectation among Syrian refugees that they would be paid to participate in any kind of research activity.
- Failing to put knowledge and R&I findings into practice:
 - failure to implement recommendations that could help achieve better outcomes, despite much research being undertaken and generating results that could usefully inform action
 - political interference and interests. Sometimes, R&I findings and recommendations are
 completely overlooked for political reasons, and instead of investing into areas identified as
 being of need, implementation / programmatic funding is directed to other areas.

WHAT ELSE DOES THE HRI SECTOR NEED TO PROPERLY FUNCTION?

Some participants provided additional suggestions for what the HRI sector in the region requires to function effectively. Suggestions included:

- Investment to enhance and establish surveillance and monitoring systems in the region, including for meteorological events and other natural hazards.
- A central agency that directs and prioritises research topics at a national level and communicates these priorities to donors.

SECTION 4

HUMANITARIAN RESEARCH AND INNOVATION (HRI) TOPICS REQUIRING ATTENTION AND PRIORITY TOPICS

SECTION 4: HUMANITARIAN RESEARCH AND INNOVATION (HRI) TOPICS REQUIRING ATTENTION AND PRIORITY TOPICS



KEY FINDINGS

- The main HRI topics cited by participants as requiring attention were health related, and these predominantly focused on communicable diseases and mental health.
- Other key R&I topics reported as requiring attention included issues in the areas of environmental and climate crises, food and water security, education, livelihoods, shelter, and aspects of gender, cultural, and social practice.
- There were conflicting views amongst participants about whether R&I topics needing attention varied across the region. However, many participants highlighted that some variation in R&I needs exist due to the sociocultural, economic, and political diversity seen across the region.
- The main reasons cited for why R&I priority topics have not received sufficient
 attention to date included R&I being influenced by donor mandates rather than
 being needs driven, insufficient funding and human resourcing, the sheer number of
 topics requiring R&I attention, and political sensitivities against some populations or
 towards certain issues resulting in a tendency not to focus on such groups.



The main HRI topics cited by participants as requiring attention were health related, and these predominantly focused on communicable diseases and mental health.

HRI TOPICS REQUIRING ATTENTION IN THE REGION

Twenty participants identified priority HRI thematic areas and topics requiring additional attention. Table 3 presents the HRI topics that were mentioned by at least three participants.

Table 3: Humanitarian topics reported as requiring additional R&I attention

HRI priority area / theme	Number of participants who reported this topic	Reason for listing it as a need	Examples
Health	16	To reduce the burden of disease, understand risk factors, and improve the health system.	See Table 4
Environmental issues and climate change	7	The region is disaster prone and vulnerable. The damage caused by climate change is mounting.	See Table 5
Education	6	The region has poor capacity to respond to the increasing number of students due to population displacement. Curricula are outdated and do not meet labour market trends. Lack of attention to education leads to an increase in the number of school dropouts.	Ways to rehabilitate schools. Integration of displaced children into education systems and the issue of school capacities. The social, emotional, and learning needs of school children.
Access to livelihood and economic opportunities	5	Economic issues are directly related to health as well as food and water security. Large numbers of people struggling to secure an income and jobs, exacerbated by the many crises impacting the region.	A need to understand how to integrate migrants into services and develop inclusive policies addressing their livelihood issues.

Food security	3	Food insecurity in the region is a major issue and contributes to increased displacement.	No specific examples provided.
Water security	3	Water scarcity in the region	No specific examples provided.
Shelter	3	Need for shelters to be high quality, comfortable, and able to offer protection from climate crises and disasters. Innovation helps in the construction of shelters despite limited resources.	No specific examples provided.
Gender, cultural, and social practices	3	Needs vary from one setting to another, and this has direct implications for humanitarian service provision. Gender, cultural, and social practices affect people throughout their lives.	Family dynamics and functional families. Studying human behaviour in societal contexts. Integrating gender dimensions into social science research and conducting studies specifically targeting women.

Health

Health-related needs were mentioned by most participants, although this is likely due to the fact that 11 of the 21 participants were health experts or based in health-focused organisations. Health-related R&I topics were sometimes mentioned broadly, such as a need to examine health security, to improve the health sector, or to enhance various aspects of the healthcare system, such as the availability and accessibility to medication and health services. A range of specific health topics were also identified, and the main reasons for identifying these issues as R&I topics warranting further attention were generally to better understand the burden of disease, risk factors, and issues of health systems and service provision (see Table 4).

Table 4: Humanitarian health-related topics reported as requiring additional R&I attention

HRI priority area / theme	Number of participants who reported this topic	Reason for listing it as a need
Communicable diseases* and health security*	8	Health systems and service provision: To help understand the magnitude of these infections and how to tackle them. Burden of disease: Infections are easily transmitted among displaced populations. High risk of pandemics and epidemics in the near future.
Improving access to, and availability of, healthcare services*	5	Health system and service provision: To help address the gap in provision of certain health services.
Mental health and psychological wellbeing*	5	Burden of disease: High prevalence in the region. Risk factors: Mental health is directly affected by the deteriorating living conditions of populations in this region. Health systems and service provision: Lack of comprehensive packages tailored to mental health needs.
Sexual and reproductive health rights and services*	2	Reason not stated.
Gender-based violence (GBV)	2	Burden of disease: Number of women affected by GBV increased during the COVID-19 pandemic; increased violence against women leads to more unwanted pregnancies.
Non-communicable diseases (NCDs)*	2	Risk factors: R&I can help better understand determinants of NCDs. Burden of disease: NCDs are highly prevalent in the region; burden of NCD complications is high.
Health promotion and community health*	1	Health systems and service provision: Can reduce burden on health services.

Monitoring and surveillance mechanisms	1	Health systems and service provision: The region lacks monitoring systems for health.
Maternal and child health*	1	Component of the UN Sustainable Development Goals (UNSDGs)
Adolescent and young people's health*	1	Reason not stated.
Understanding health risk factors and determinants*	1	Risk factors: To understand population behaviours and environment. Health systems and service delivery: To design interventions that target risk factors.

^{*} Participants were asked to name the top three R&I priority topics for the region. Topics marked with an *asterisk denote that they were identified as a priority by at least one participant.

Environmental issues and climate crises

Several participants considered climate change and natural hazards as important humanitarian topics requiring additional R&I attention in the region (see Table 5).

Table 5: Humanitarian environmental and climate-related topics reported as requiring additional R&I attention

HRI priority area / theme	Number of participants who reported this topic	Reason for listing it as a need
Climate crisis (in general)*	5	Climate change is having a profound effect on the region and it affects every aspect of life, including leading to scarcity and deterioration in water resources, an increase in heatwaves, and causing the formation of arid lands. The region is vulnerable to climate change, and this issue affects people disproportionally (ie, poorer populations are more at risk of its repercussions).
Environmental security*	1	Reason not stated.
Hazard identification and monitoring schemes*	3	The current hazard identification approach is based on outdated approaches and needs to be enhanced. The region lacks monitoring schemes for climate change and natural hazards.

^{*} Participants were asked to name the top three R&I priority topics for the region. Topics marked with an *asterisk denote that they were identified as a priority by at least one participant.

Food and water security

Several participants identified food security as an HRI priority topic, with one flagging it as an issue given that food security is directly related to the availability of agricultural technology and green landscapes and is a potential driver of migration. Water security was reported as a topic or priority topic by three participants.

Education

Six participants reported a need for R&I to inform improved access to quality education, and three out of the six identified education as an R&I priority topic.

Livelihoods

Six participants reported livelihoods and economic opportunities as topics warranting R&I attention; five out of six participants identified them as priority topics.

Shelter

Three participants referred to shelter as an issue / priority issue requiring additional R&I attention in the WANA region.

Gender, social, and cultural practices and behaviours

Integrating gender dimensions into social science research and conducting studies specifically targeting women was reported as an R&I priority topic by one participant. A need to understand family dynamics and the characteristics of functional families was also identified as an R&I topic by one participant, due to associations between adverse childhood experiences and life trajectories. One participant stated that R&I should examine population behaviours and practices, as such an understanding is important to inform culturally sensitive humanitarian action, citing an example of higher daily water allocations required for practising Muslims (above the minimum daily requirements specified in international guidelines) in order to meet both basic needs plus water to be used for ablution before performing prayers.

VARIATION IN TOPICS REQUIRING R&I ATTENTION ACROSS THE REGION

There were conflicting views amongst participants about whether R&I topics needing attention varied across the region. However, many participants highlighted that some variation in R&I needs exist due to the sociocultural, economic, and political diversity across the region. Differences may be due to the scale of displacement, the political situation, government involvement and response, as well as differing health risks, determinants, and practices. The region is also developmentally and socioeconomically diverse, spanning the wealthy oil and resource-rich nations of the Gulf countries and impoverished, low-income settings in North Africa and the Levant.

REASONS WHY THESE ISSUES HAVE NOT RECEIVED SUFFICIENT R&I ATTENTION TO DATE

Participants in 16 out of the 21 interviews suggested reasons why they thought topics requiring more R&I had not received sufficient attention (see Table 6). The reasons varied and depended on the nature of the topics and the perceived interests of relevant actors such as funders, researchers, and decision-makers.

Table 6: Reported reasons why R&I topics needing attention have not received sufficient attention to date

Reason	Number of participants who reported this	Explanation / examples
R&I is donor-driven	5	Many researchers are not proactive in advocating for more attention to priority topics and might end up working according to donor mandates. Donors often have their own set of priorities which are not necessarily always aligned with the issues that need to be addressed in order to inform and meet population needs.
Insufficient human resources	2	Some topics do not receive attention because of limited human resources and a lack of expertise in the respective fields.
Cultural biases and political sensitivities		GBV does not receive sufficient attention because much of the region reportedly remains patriarchal. Lack of interest in researching refugee issues in some settings, reportedly reflecting broader community sentiments against helping refugees at a time when the host country itself is struggling.

Limited recognition of R&I topics needing attention in the first instance	2	In certain situations, humanitarian needs are not researched, as they are not identified as needs in the first place. In some cases, there is a false belief that needs have been met, such as when a population is provided with food, medical care, and shelter assistance without acknowledging the need to address any associated trauma and mental health issues.
Evidence from elsewhere is being used, rather than evidence generated in the region	1	Some R&I topics have not received sufficient attention, because the evidence used in the region is often based on studies conducted elsewhere, rather than locally. The region tends to rely on lessons learned from the West without regional adaptation or further research.
Insufficient funding	1	Funding is required to undertake R&I, therefore, some topics do not receive enough attention.
Vested interests	1	Some people are benefiting from the crises and the suffering, so there is an incentive to maintain the status quo and not have R&I inform potential solutions.

(MIS)ALIGNMENT OF RESEARCH AND INNOVATION (R&I) INVESTMENTS WITH NEEDS

SECTION 5: (MIS)ALIGNMENT OF RESEARCH AND INNOVATION (R&I) INVESTMENTS WITH NEEDS



KEY FINDINGS

- Most participants reported that there is a mismatch between humanitarian topics requiring R&I attention and R&I investments.
- Insufficient funding, donor interests, rather than actual needs driving investments, lack of recognition of topics requiring attention, limited attention to some population subgroups, and vested interests were perceived as the main barriers to the alignment of R&I investments with needs.

BARRIERS TO ALIGNMENT OF HUMANITARIAN R&I (HRI) NEEDS

The majority (n=18) of participants reported a mismatch between HRI investments and the topics that require additional R&I attention. This mismatch was attributed to a range of factors (see Table 7).

Table 7: Reported barriers to alignment of HRI investments with topics requiring attention

Reason	Number of participants who reported the barrier	Report explanation / examples
R&I investments are donor-driven	7	R&I investments are reportedly frequently based on donor interest rather than need. For example, it was reported that research into certain population subgroups such as adolescents is underfunded because donor attention and investments are primarily focused on children under five.

		Inadequate R&I funding.
Inadequate and insufficient funding to cover HRI needs, and	6	Even when projects are funded, the budget for R&I activities is almost non-existent or just partially allocated, and often comprises just a very small portion of the overall budget.
suboptimal use of available R&I funds		Limited available R&I budget is sometimes used to cover expenses, such as conferences and events rather than R&I activities.
'Invisible' R&I needs	3	Some 'hot topics' receive attention and funding at the expense of more pressing needs because the latter are not as visible nor seen as being a priority. Others are not anticipated.
R&I donor commercial interests	2	In some instances, R&I investments aim to serve donor interests rather than the humanitarian cause.
Lack of commitment and limited attention to marginalised communities	1	Some national decision-makers have little interest in assisting certain population subgroups.

Even when projects are funded, the budget for R&I activities is almost non-existent or just partially allocated, and often comprises just a very small portion of the overall budget.



SECTION 6: STAKEHOLDER ENGAGEMENT



KEY FINDINGS

- The majority of participants reported that there is poor to absent engagement of national and regional actors in humanitarian R&I (HRI) activities, although some provided examples of good engagement and models that work. The main barriers to the engagement of these actors included lack of funding, limited technical capacity, limited political buy-in, mismatches between donor priorities and local / national organisational scope or mandate, and issues with partnerships and coordination.
- Several participants reflected on strategies used to engage national and regional actors. These included advocacy efforts, coaching and capacity building across countries, conducting stakeholder analysis to improve coordination and communication, and provision of small grants to allow local bodies to fund their own R&I.

REGIONAL AND NATIONAL STAKEHOLDER ENGAGEMENT IN R&I

Twenty participants commented on the level of engagement of national and regional actors in HRI initiatives. The majority indicated absent, insufficient, or generally unsuccessful engagement of national and regional actors in HRI activities.



"I believe there is a deficit in cooperation efforts to achieve goals, and I think that each organisation operates per its concerns."

It was also reported that:

- Planning and conducting R&I activities is mainly done through international bodies and organisations, and without such actors, very limited R&I would be undertaken.
- R&I is not a priority for some national entities and for some countries.
- Universities conduct R&I activities and not national, non-academic organisations which seldom and irregularly conduct research.
- The regional environment for research is not conducive.



The following barriers to the engagement of regional and national actors in R&I were identified:

- Lack of funds affects the engagement of local and national actors: Engagement of national and regional organisations "depends on the whims of the donors." This suggests that local and regional R&I initiatives are halted when the funds stop.
- Regional and national actors may lack the technical capacity to implement R&I.
- Political buy-in and the level of perceived value and interest in R&I at the national level, especially among decision-makers, influences the strength of engagement at the national and regional levels. Additionally, if the subject matter is of a sensitive nature, some governments might not only opt out of participating, but might also actively hinder the process of disseminating results.
- A mismatch between donor priorities and national / regional organisational
 focus: When donors earmark their funds for issues that do not align with the mandates of
 organisations, the organisations might choose not to participate.
- Ways of working:
 - Issues with partnerships and coordination. Geopolitics and conflicting political relationships between countries in the region affect the ability to establish partnerships and collaborations between stakeholders.
 - Engagement with other organisations is made more difficult by the turnover of decision-makers who would typically be the main points of contact. This presents a barrier since it takes time for new people in positions of authority to develop their skills and capacity.
 - Ineffective coordination mechanisms between countries. Some coordination platforms exist, such as the International Health Regulations (IHR), but they are not being effectively enforced or used, or do not address humanitarian crises.
 - The lack of platforms that connect researchers can hinder the process of building local R&I capacities.
 - ♦ The multiplicity of actors making decisions decreases efficiency.



"Unfortunately, because of a political difficulty between the countries in our region, we do not have adequate communication and collaboration on research projects about humanitarian problems or any other issue. This is the big problem. [...] I tried to open a discussion on working together on humanitarian problems in the region, but we have limited access or travel to each other's countries. Many countries do not allow us to travel to their countries even if they are next to us."

STRATEGIES PROMOTING GREATER REGIONAL AND NATIONAL STAKEHOLDER ENGAGEMENT

Several participants mentioned examples of strategies being used to bolster the participation of national and regional actors. These include:

- Advocacy to push R&I onto the agenda of decision-makers and convince international donors to fund regional research.
- Stakeholder analysis to support the development of ways to improve communication with various stakeholder groups.
- Having long-term national strategies supported by the government (for example, around migrant engagement).
- Coaching and capacity building in countries that are experiencing humanitarian crises or that have less developed R&I capacities.
- Calling for proposals and providing small grants to help organisations fund their R&I activities.
- Agreements set through meetings with local governments and other funding agencies.

Some participants provided **suggestions for additional measures** that would help in enhancing the participation of national and regional actors.

These included:

- Early engagement with decision-makers, including in the design stage of R&I projects, to ensure that their perspectives are captured and as they may have additional sources of information or views that R&I teams may not be aware of.
- Collaboration and sharing information.
- Having a global strategy that addresses coordination and provides a framework for stakeholder engagement during a humanitarian crisis, and this should be adopted and endorsed by a formal international platform such as a UN forum.

SECTION 7 PRIORITY-SETTING AND DECISION-MAKING PROCESSES

SECTION 7: PRIORITY-SETTING AND DECISION-MAKING PROCESSES



KEY FINDINGS

- Donors, governmental decision-makers, regional actors, and international bodies are the actors most commonly involved in R&I priority setting.
- Community members, populations affected by crises, and some NGOs are reportedly often absent from the priority-setting table.
- Some institutions reportedly do not have any strategies to prioritise humanitarian R&I (HRI) focus areas. Others noted that priorities are determined internally by a central entity that communicates with external research centres and stakeholders to gauge priorities in the region and align its own funding allocations accordingly, through a community participatory approach, or through regular stakeholder meetings.
- Most respondents indicated that R&I priority topics are set based on whether they,
 (1) meet a need or gap and (2) align with national governmental priorities.
- Several participants noted that R&I focus areas are commonly identified after
 collection and analysis of primary data or secondary analysis of existing data and
 literature, although it was reported that systematic reviews conducted to inform
 needs usually capture literature from high-income and developed countries as there
 are limited publications from the region. Formal prioritisation exercises are also
 conducted, although these are subject to the influence of the interests of senior
 personnel.

Seventeen participants commented on how their own organisation identifies and prioritises the focus of humanitarian research and / or innovation work.

HOW DO ORGANISATIONS IDENTIFY R&I NEEDS?

Different strategies for identifying R&I needs were identified:

- Formal or structured strategies to prioritise HRI needs do not always exist. Four
 participants reported that their organisations do not follow a strategy or a process to prioritise
 R&I needs, and two of these four reiterated that R&I is not considered a priority in their
 organisations, despite having an appropriate environment for research and so could support
 others to do so.
- **Community participatory approach**: One participant discussed a community participatory approach to research and having strong ties to the community as "the street is what identifies priorities, not the research institution."
- **Stakeholder meetings**: One participant stated that the organisation conducts biannual meetings with various stakeholders to prioritise HRI needs.
- Internal unit determines HRI priority issues: One academic participant stated that
 prioritisation is done by a specific internal unit within the university that coordinates with
 external research centres, including at regional and national levels, and provides funds to its
 researchers for work that it assesses as being aligned with the priorities of the government
 and the region.

WHAT IS THE RATIONALE FOR THE PRIORITISATION? HOW ARE R&I NEEDS PRIORITISED?

A number of factors considered when determining R&I focus areas were reported by participants. These included:

- Extent to which R&I topics can bridge a gap or meet population needs (n=9).
- Extent of alignment with national agendas (n=6).
- Extent of alignment with international agendas (n=1).
- Alignment with donor priorities or interests, as reflected in the calls for proposals issued (n=2).
- Based on the urgency of the topic and humanitarian need to be addressed (n=1).
- Extent to which the R&I addresses an emerging threat, as identified by surveillance systems (for example, communicable disease outbreaks) (n=1).

WHAT EVIDENCE IS TAKEN INTO ACCOUNT?

14 participants discussed different types of evidence that are taken into account in determining R&I priorities. These include:



Based on analysis of existing data and literature, and collection of new data: R&I needs are identified after an analysis of primary and secondary data collected from the region. In some cases, previous research projects help to identify further gaps and trigger the need for further investigation of a topic. Literature reviews, needs assessments, surveys, situation analyses, and interviews were among the tools used to assess and prioritise needs.



Based on evidence that is mostly generated in high-income settings and outside the region.



Based on formal structured prioritisation exercises such as a nominal prioritisation exercise. One participant mentioned that their organisation is engaged in a nominal prioritisation exercise, however, the results of such activities are biased and heavily influenced by the interests of those in power and senior personnel within the organisation.

TO WHAT EXTENT ARE REGIONAL, NATIONAL, AND LOCAL ACTORS INVOLVED IN THE PRIORITY-SETTING PROCESS?

11 out of 21 participants reflected on the extent to which regional, national, and local actors are involved in the priority-setting process. Many respondents perceived that there are sufficient and collaborative processes where everyone is welcome to participate.

WHO IS INVOLVED IN DETERMINING R&I PRIORITIES?

A range of stakeholders involved with priority-setting were identified. According to seven participants, **officials and decision-makers** are heavily involved in determining priorities. Several participants also referred to the role of **researchers and external consultants** in understanding R&I needs. However, sometimes, researchers tend to implement projects based on the interests of government officials. This is considered important so that R&I findings feed into future programmes and policies.

A participant working in a private organisation mentioned that the corporate affairs department interacts with regional directors to determine needs. The department proposes solutions to the decision-makers, whom the participant described as being "far away from the real scenario."

One participant mentioned that they communicate with other partners and institutions to decide on R&I priorities. This way, they make sure they provide a complementary service.

Several participants reported that international organisations and bodies, including UN agencies, often collaborate with, or advise, national and regional organisations to identify HRI needs and priorities.

Two participants stated that external funds are often linked to certain priorities set and determined by **donors** themselves.



- Communities affected by crises and local organisations: Seven participants reported that local communities and organisations were often missing from the priority-setting table. Rather than consult with community representatives, input is instead sought from proxies who are requested to speak on behalf of these communities. These can include governments and aid agencies that have a specific remit working with particular population subgroups. These groups are often missing, despite recognition of the importance of involving community members in identifying priorities in order to ensure that R&I addresses actual needs.
- **Non-governmental organisations**: One participant reflected that NGOs are not always consulted or involved, despite their active participation in delivering services and developing innovative solutions.

SECTION 8

RESPONSIVENESS OF THE HUMANITARIAN RESEARCH AND INNOVATION (HRI) SYSTEM TO EMERGING ISSUES

SECTION 8: RESPONSIVENESS OF THE HUMANITARIAN RESEARCH AND INNOVATION (HRI) SYSTEM TO EMERGING ISSUES



KEY FINDINGS

- Lack of funding, limited availability of qualified personnel, limited government interest in R&I, poor coordination, and the challenges of data access and data sharing were the main factors identified by participants as impeding timely R&I response to new crises and emerging threats.
- Factors perceived as supporting timely R&I response included the availability of funding, sufficient human resources, early engagement of decision-makers, and collaboration.

Participants were asked to consider factors that may support and those that may impede the timely responsiveness of the R&I system to emerging humanitarian issues.⁴

FACTORS THAT IMPEDE R&I RESPONSIVENESS TO NEW ISSUES

Participants identified different factors that **impede** timely R&I responsiveness to emerging threats, including:

- Lack of funding dedicated to R&I: The issue of funding was perceived to be a common barrier across the region. Some participants stated that funding might be available sometimes, but donors are more interested in service delivery rather than R&I.
- **Shortage of qualified human resources**: Many respondents stated that it may be difficult to build a sufficient response to emerging threats due to a shortage of qualified personnel dedicated to R&I. Shortage was expressed either in terms of the inability to undertake research generally or a lack of expertise in specific R&I areas. This was seen as impeding timely R&I responsiveness even in cases where funding is available. Some participants also attributed human resource limitations to the lack of training for researchers and innovators.

^{4.} Notably, the question stem provided some examples in order to clearly illustrate what was meant by the question. *Q. Many factors may impact the ability of the research and innovation sector to respond to priorities as they emerge (for example, these may include national capacity, funding availability, short project cycles etc). What factors support and what factors impede timely responsiveness to emerging priorities in the region?*

One interviewee noted that,



"We have spoken extensively on this matter [referring to the availability of funding], and it is among the obstacles, but even if funds were available, can we conduct proper scientific research? I think that what we need to do is prepare the environment that would organise research and innovation and prepare the coming generations so that they better participate in these operations."

- Lack of government interest in HRI: Two participants described a lack of government interest and willingness to assume an active role in responding to new and emerging needs.
- Poor coordination and multiplicity of actors in both the operational space and R&I: Two participants mentioned that poor coordination and multiplicity of actors impede responsiveness.

Specifically, one mentioned that,



"...The second thing is that the government itself had a very negative role, while it should have played a more solid role by coordinating efforts, meaning that it didn't take the leading role and left it to the UN with all its sector working groups. [...] Having few entities and a proper government role organises the work in cases of crises. It is here that it becomes easier to conduct research because the stakeholders are clear, and they have coordinated among themselves. This makes research operations and identifying needs much easier."

According to one participant, there is a need to enhance coordination across borders and improve the harmony in the response between countries as well. It was also reported that there is a need to ensure coordination between researchers in different countries to avoid duplication of research projects.

- **Challenges in accessing and collecting information**: Some participants discussed how some regional stakeholders do not share information and data with others. For example, it was reported that accurate information is often unavailable, and information is sometimes 'hidden' from those who are not actively involved in the response, including academics.
- The expectation of financial incentives to participants: One participant reported that a factor impeding a timely response is the perception that any participation would require financial reimbursement to participants, given the common experience during the Syrian crisis, with many refugees refusing to engage in any form of R&I unless they were paid to do so.

Other impeding factors included:

- Competition or conflict between those in the research space and those who focus on practical implementation and operational activity.
- Time limitations and the need for a fast response.
- Not following up to ensure the sustainability of interventions.
- Financial integrity and transparency (spending funds according to the plan).
- Researchers conduct desk reviews rather than consulting and collaborating with communities.
- Lack of a leading entity organising, supporting, and overseeing R&I activities.

FACTORS THAT SUPPORT R&I RESPONSIVENESS TO NEW ISSUES

Several participants mentioned factors that support a timely response to emerging threats. These included:

- · Having sufficient technical capacity to respond.
- Availability of funds and resources.
- Early engagement of decision-makers.
- Good planning and identification of priorities.
- Having an anticipatory approach, namely being able to anticipate crisis events such as what the disaster may be, when it would happen, and where it will happen.
- Opportunity to identify innovative solutions and for researchers to publish.

SECTION 9 DONORS AND DECISION-MAKING

SECTION 9: DONORS AND DECISION-MAKING



KEY FINDINGS

- Reported barriers to investment in R&I include political considerations and the geopolitical context, limited availability of qualified researchers, insufficient funding, and poor coordination and communication among stakeholders.
- The only factor enabling R&I investment reported by donor participants
 pertained to the recipient organisation together with its credibility and institutional
 processes.
- Coordination among donors was reported to occur through networks and committee meetings, but the effectiveness of coordination processes reportedly varies by country setting. Additionally, not all funders view coordination as being within their remit.

Three participants identified as having a donor / funder function and completed this module of questions. Any organisation that provides any type or degree of funding for R&I could be considered a donor, including, for example, philanthropic organisations, governmental bodies, academic institutions or smaller organisations that provide seed grants or sub-awards.

BARRIERS TO, AND ENABLERS OF, INVESTMENT IN R&I

ENABLERS

One participant mentioned that the **credibility of the recipient institution** and the **lack of bureaucracy** within the institution are both enablers of investment in humanitarian R&I.

BARRIERS

Several factors that preclude investment were reported as follows:

• (Mis)perceptions of population subgroups and reluctance to fund: Investment is reportedly often hindered by claims that those receiving aid are terrorists.

Political considerations and geopolitical context:

- politics also influences donor funding and ability to invest, for example, impacting the ability to support initiatives and import materials into Gaza
- legislators are not always supportive of the research being conducted, especially when it covers an issue that may be sensitive for some parties, leading them to oppose the project.
- Poor quality research.
- Limited human and financial resources: Insufficient pools of skilled researchers,
 insufficient funding to support the small number of skilled researchers who do exist,
 insufficient funding allocated to specific projects which means that researchers are reluctant
 to undertake such work because the money does not reflect the effort and much additional
 time is required to complete the work unsupported and at the expense of other projects.
- Lack of coordination: Lack of coordination and communication between organisations was reported as a key obstacle to investment.

COORDINATION AMONGST DONORS

According to two of the three participants who identified as having a donor / funding function, their organisations engage well with other donors. One respondent noted that coordination occurs in networks and committee meetings but added that the effectiveness of the coordination depends on the country and the relevant authorities. Another participant asserted that they coordinate aid to countries and advise other funders on their needs and priorities, but also acknowledged that other funders believe that it is not their obligation to coordinate aid. Hence, duplication was viewed as sometimes being unavoidable.

When asked how funders address gaps or duplications, two participants stated that countries should play a more active role in advocating for their needs, with one suggesting that "there is usually room for compromise."

The interviews with the donors suggested that coordination between donors exists to a certain extent. It was reported that coordination exists through meetings within networks and committees in some but not all countries, and that semi-official meetings take place with funders to advise them of the priorities while maintaining trust and strong ties.

RECOMMENDATIONS AND CONCLUSIONS

SECTION 10: RECOMMENDATIONS AND CONCLUSIONS

This consultation has provided detailed insights into how the humanitarian research and innovation (R&I) system functions (and 'dysfunctions') across the West Asia and North Africa (WANA) region, including what works and does not work in this complex regional environment, and how the system can be improved.

The consultation has also identified several R&I topics reported by participants as warranting further attention. Notably, this report presents the perspectives of those who participated in this consultation, and as such, not all the issues impacting the region were necessarily raised. Additionally, there was variable understanding among participants of the scope and conceptualisation of R&I. The findings present an overview and snapshot of key issues impacting the system, and more work is required to glean perspectives of a broader sample.

Based on the key findings from this consultation, the following recommendations are proposed:



Establish national central coordinating bodies

Poor coordination and fragmented communication amongst R&I stakeholders were commonly reported. To improve coordination, the establishment of a central R&I body within countries is recommended. Depending on the national context and infrastructures, these coordinating bodies could be based within academic institutions, government agencies, local / national NGOs or other civil society organisations, and the steering groups should include broad and inclusive stakeholder representation, including that from populations affected by crises. The remit of such coordinating bodies could include to regulate, prioritise, manage, and coordinate all R&I activities in humanitarian settings at the national level and between different organisations, and contribute to coordination and oversight at the regional level through participation in a regional humanitarian R&I (HRI) platform.

Develop national HRI strategies

Given the number and duration of crises across the region, **national HRI strategies** are recommended. The development and implementation of these strategies could be a function of the national central coordinating bodies.

National strategies should address priority topics requiring additional R&I attention (themselves identified through a transparent and inclusive R&I priority-setting process) and be tailored to function within the constraints and requirements of any national regulatory framework.

These strategies must be inclusive, equitable and have populations affected by crises at the core. National strategies must also include a financing plan, with funding for HRI earmarked and prioritised.

Establish R&I units within key government departments and agencies, particularly in refugee-hosting countries

A major barrier to the production, uptake, and utilisation of R&I identified in this consultation was political interest and government appetite for R&I, with associated implications for funding. Building understanding of the importance of R&I among policymakers, national funders, and decision-makers is important. This may include **establishing R&I units** within key government departments and agencies in those settings which are politically stable and particularly those which are hosting large numbers of refugees.

National governments within such settings are also specifically encouraged to:

- Prioritise and earmark funding for HRI. Countries need to develop a domestic financing plan and resources to consolidate humanitarian response measures into their national budget.
- Reduce bureaucratic procedures, as such practices lead to mistrust between donors and recipient countries, and delays in project implementation.



Establish a regional HRI platform to support collaboration, engagement and information dissemination, and help break down silos between research and operational actors

National central coordinating bodies may feed into a regional HRI platform, alongside engagement with other key stakeholder groups. Such a regional platform could help to strengthen collaborations and partnerships between humanitarian organisations, academic organisations, local researchers, donors, innovators, private sector actors, and collaborators to produce R&I that is rigorous, accessible, and actionable. It can also serve to improve crossborder collaborations, and break down silos between academic and operational stakeholders. An inclusive platform for engaging R&I experts can help to exchange knowledge, expertise, and provide technical support for R&I activities within humanitarian settings. This platform may also provide a mechanism to support the sharing of humanitarian data and study protocols, ethics guidelines, and new funding opportunities. This information repository may also faciliate the broader dissemination of R&I findings. R&I output that sits on a shelf will not inform better humanitarian action. Establishing improved data and information sharing processes, including consideration of publication language, is imperative and the region is currently lacking such an infrastructure.

The secretariat for such a regional HRI platform may be rotational among the national central coordinating bodies.

Sustainably build a strong, sufficiently skilled and resourced HRI workforce

Whilst some participants indicated that a good lot of research is being undertaken in the region, a limited cadre of sufficiently skilled R&I personnel was frequently reported as a barrier to many functions, including impeding ability of the R&I system to produce R&I and timely responsiveness to emerging issues. A number of steps are recommended to sustainably build a strong, sufficiently skilled HRI workforce. These include the establishment of national and regional HRI teams to be responsible for planning, conducting, and reporting HRI activities, and rapidly responding to any newly emerging R&I needs within humanitarian settings.

Attention and funding must be directed to appropriate training of such teams. This may take the form of structured field training programmes, similar to the Field Epidemiology Training Programs (FETPs) currently operational across the region and that have successfully trained a highly-skilled workforce of epidemiologists able to rapidly respond to outbreaks and health emergencies across the region. Additionally, a roster of surge support may be established, drawing on existing Rapid Response Teams (RRTs) operating throughout the region. Integration of HRI training into training courses provided to these teams is also essential to ensure a prompt and effective application of R&I activities during acute humanitarian crises and into academic training programmes. Moreover, specialised training can be delivered through workshops, seminars, online courses, mentoring programmes, exchange programmes, or through collaborations with academic institutions and research organisations. Training should cover topics such as research methodologies, ethics, project management, data analysis, innovation frameworks, and relevant technical skills.

It is important to note that building a solid, skilled workforce requires concerted efforts targeting both the individual level, to build technical competence and capacity, and the institutional level, to ensure a supportive and enabling environment that is sufficiently resourced and promotes workforce development and retention.

Conduct further research involving a broader range of participants to identify key humanitarian topics and priority issues requiring R&I attention

Participants in this study reported a range of topics that they perceived as requiring additional R&I attention, among which, health issues were particularly prominent, reported by 16 out of 20 participants who provided suggestions for topics. Whilst this may reflect a true need for a pronounced additional focus on R&I in the health space in this region, this finding may also reflect a skew in the participants towards those from health backgrounds or working in health-focused organisations or roles. Additionally, among the many topics suggested as needing further attention, several would not necessarily be considered as humanitarian in nature (for example, further research on risk factors for selected diseases that are highly prevalent in the region). The WANA region is home to numerous protracted crises, therefore, R&I undertaken in such settings may be considered humanitarian by virtue of the context in which it is undertaken.

However, further research specifically considering R&I that can inform humanitarian action is required.

The topics presented in this report reflect the views of participants and are not a ranked or prioritised list of topics needing attention across the region. Further research is required to validate the findings of this initial study and to identify R&I topics and priority issues across the region. It is imperative that this exercise is inclusive and engages a broader sample, including strong representation of participants from a diverse range of sectoral, disciplinary, and organisational contexts from across the region.

A formal R&I priority-setting exercise is warranted. This exercise will help inform development of an agreed, ranked regional R&I agenda and help ensure that research and innovation efforts are focused on addressing the most pressing needs and challenges confronting the region and the humanitarian sector.

Ensure transparency and inclusiveness in priority settings through better communication and regular review of priority topics warranting attention

A suite of recommendations to improve priority-setting processes are proposed, including:

- Use of a structured approach and participatory process for priority-setting and decisionmaking in HRI, through a formal priority-setting process. This will help build trust and increase accountability, and ensure that decisions are based on evidence and the needs of diverse stakeholder groups.
- Ensure that priority setting is equitable and takes into account the perspectives of marginalised communities, community needs and preferences, ethical considerations, political and economic realities, and social values. Researchers should be empowered to advocate for HRI priorities and the needs of populations rather than rely on the mandates of funders and donors.
- Conduct R&I impact assessments and periodically review R&I priority topics.



AT THE GLOBAL LEVEL:

Ethical considerations in the HRI space: Development of a global framework for the ethical funding and conduct of humanitarian research in crisis contexts

A number of ethical considerations were mentioned in this regional consultation, including issues and examples of corruption, vested interests, lack of financial accountability and transparency, ethical issues in the conduct of research, undertaking (and funding) R&I on topics that have little meaningful impact, and failing to implement R&I findings and ensure knowledge translation to action. Such issues, which may reflect a combination of systemic and structural weaknesses and cultural / environmental factors, are not unique to the WANA region. Additionally, there are important ethical issues to consider when conducting research in any humanitarian setting and with populations affected by crises.

There is solid body of literature regarding research methodologies in humanitarian contexts.⁵ The ethical challenges of conducting research in humanitarian crises have also been well described⁶ and several frameworks and guidelines exist.^{7,8} A transparent global dialogue addressing these challenges and considerations is required, with a view to the development of a comprehensive, contemporary framework for the ethical funding and conduct of humanitarian research in crisis contexts that captures not only the ethical issues in undertaking research, but also the broader ethical issues that a crisis context presents.



Provide more funding, flexible funding mechanisms, and invest in sustainable infrastructures

Donors must invest in the regional R&I capacity of researchers and institutions and enable the transfer of skills, expertise, and technology to create a sustainable, functioning ecosystem in the region rather than being dependent on external grants. Local researchers and innovators are best positioned to address local challenges in their communities. The following are suggested:

Increase funding and diversify funding streams

Increase the number of funding schemes and the dollar value of R&I funding.

Invest in strategies to sustainably strengthen the regional R&I ecosystem

- Implement strategies to address the challenges within the regional R&I ecosystem and the specific challenges of conducting research in humanitarian crises. Such approaches may include investing in capacity-building initiatives, supporting multisector partnerships, acknowledging and budgeting for complex ethical and methodological issues, and ensuring that local partners are engaged and play leadership roles whenever possible.
- Consider making it a requirement of funding that project teams include representation from both academic and operational settings to help break down silos and facilitate knowledge translation and pathways to impact.

^{5.} Smith, J. & Blanchet, K. (2019). 'Research Methodologies in Humanitarian Crises'. Elrha: London

^{6.} For example, in Mfutso-Bengo J, Masiye F, Muula A. Ethical challenges in conducting research in humanitarian crisis situations. Malawi Med J. 2008 Jun;20(2):46-9. doi:10.4314/mmj.v20i2.10956. PMID: 19537432; PMCID: PMC3345669.

^{7.} Humanitarian Health Ethics. Key guidelines, tools and frameworks for humanitarian research ethics. Available from https://humanitarianhealthethics.net/disaster-research-ethics-resource-repository/key-guidelines-tools-and-frameworks-for-humanitarian-research-ethics/

^{8.} Mezinska, S., Kakuk, P., Mijaljica, G. et al. *Research in disaster settings: a systematic qualitative review of ethical guidelines*. BMC Med Ethics 17, 62 (2016). https://doi.org/10.1186/s12910-016-0148-7

- All donors must take into account regional and national geopolitical challenges when funding
 projects in the region and not allow these challenges to impede donor support for humanitarian
 R&I priorities, even when donors lack confidence in the regional governments. Such a dilemma
 could be resolved through regular and transparent reporting, monitoring, and auditing of project
 implementation and financial flows in a manner coordinated with regional and local partners
 using simple procedures and indicators.
- Donors should consider making engagement with local researchers a requirement of funding.
 Building a trusted relationship with local researchers will enhance transparent communication and timely adaptations to the context and positively impact the quality of research outputs.
- Engagement with affected populations and communities, and including them in R&I agendas
 and processes is essential to enable community trust, improve research designs, and provide a
 pathway for R&I dissemination and uptake, resulting in higher quality R&I and more actionable
 findings.

Ensure that funding is needs based and not donor driven

 Funding must be based on the needs and long-term goals of countries in the region, and donors should avoid imposing R&I priorities that are incompatible with national regulatory or legal frameworks and baseline capacities.

Strengthen communication channels and collaboration between donors

Donor systems and donor-donor relationships should be enhanced by encouraging donors
with common interests to work together to develop common practices and avoid duplication
of efforts. Donor systems should consider providing information on reporting, monitoring
frameworks, concerns, or other topics in user-friendly formats to avoid misunderstandings when
communicating with regional and local stakeholders. Local and regional governments should
bring all sectors together to facilitate better information sharing.

TOWARDS AN IMPROVED, EQUITABLE, AND SUSTAINABLE R&I ECOSYSTEM

The WANA region has a long and protracted history of complex humanitarian crises and is home to a large and growing population in need. Actionable, accessible, and rigorous research and innovation requires a robust, sufficiently resourced, and well-coordinated R&I system. Whilst this consultation has identified many challenges and areas for improvement, there are also encouraging examples of initiatives and mechanisms that work. The adoption of some key systemic and structural changes may have pronounced effects towards an improved R&I system that better allows R&I to improve outcomes for populations affected by crisis. Concerted efforts are needed across the region to realise this vision.

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ABOUT ELRHA

We are Elrha. A global organisation that finds solutions to complex humanitarian problems through research and innovation. We are an established actor in the humanitarian community, working in partnership with humanitarian organisations, researchers, innovators, and the private sector to tackle some of the most difficult challenges facing people all over the world.

Through our globally recognised programmes, we have supported more than 200 world-class research studies and innovation projects, championing new ideas and different approaches to evidence what works in humanitarian response.

ABOUT THE GLOBAL PRIORITISATION EXERCISE (GPE)

The GPE for humanitarian research and innovation aims to improve outcomes for people affected by crisis by amplifying the impact of investments in research and innovation through understanding the priorities at all levels. It will provide an overview of the progress and performance of the humanitarian research and innovation ecosystem with a clear set of priorities for research and innovation funding and attention.

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