**QUESTION 1**

The There are five generic conditions that have to be fulfilled if the Secretary- General of the United Nations is to be able to apply the preventive treatments effectively. Fulfillment of the conditions becomes more difficult when, as is so often the case, the potential conflict is an internal one. More than 60 percent of the actual or potential conflicts in which the United Nations played an active peacemaking or peacekeeping role related to disputes within states, though several of them also had a significant international dimension too.

The Secretary-General also has to be ready to propose preventive action in cases where a country no longer has a government capable of exercising sovereignty in an effective way, the so-called failed state syndrome epitomized by Somalia. In such cases, the Security Council may decide that the state of war is so threatening to the country’s neighbors or is causing so much suffering that the Council is obliged to establish a UN operation to bring it under control without seeking governmental consent. But the United Nations will still need the consent and cooperation of those who actually control the situation on the ground in the various parts of the country. As has been demonstrated in Somalia and Bosnia, the lack of such consent and cooperation can prevent the United Nations operation from carrying out the tasks entrusted to it by the Security Council.

The first of the five conditions for preventive action is that the Secretary-General should have the necessary capacity for the collection and analysis of information. It is sometimes said that the United Nations is handicapped in its peace efforts by the lack of an intelligence service of its own.

That said, for example the United Nations, like the rest of the international community, was caught unaware by the assassination of the President of Burundi in October 1993, as it was by the shooting down of the aircraft carrying the Presidents of Burundi and Rwanda in Kigali six months later, and by the horrors that followed both incidents. There will always be acts of extreme political violence that cannot be predicted with precision. But the United Nations needs both to be sensitive to the conditions that can lead to such acts and able to contribute to contingency planning for an adequate response by the international community when they occur.

The second condition is that the Secretary-General should have the clinical capacity to prescribe the correct treatment for the condition diagnosed. To fulfill this condition, he needs to be able to assess both the factors that have created the risk of conflict and the likely impact of the various preventive treatments available. Making those judgments in an interstate situation is easier than in an internal one. In the first case, much can be learned from consultation with the States involved and their neighbors, friends, and allies. In the second, the crisis is often due to ethnic or economic and social issues of an entirely internal nature and of great political sensitivity, in which the potential protagonists may include nonstate entities of questionable legitimacy and with shadowy chains of command.

If in such circumstances the Secretary-General probes for the information needed to identify the right treatment, he can find himself accused of professional misconduct by infringing the sovereignty of the country concerned.

His analysis of the symptoms may lead him to conclude that there is no preventive action that the United Nations can usefully take. This could be because he judges that, contrary to the general impression, conflict is not actually imminent and that what is being observed is posturing or shadow-boxing rather than serious preparations for war. Or he may judge that there is no effective treatment that would be accepted by the parties, or even that there is no effective treatment at all.

But the reality is that not all, perhaps not even many actual or potential conflicts are susceptible to the United Nations treatment at all times. Selectivity and careful timing are necessary, especially when Member States are so reluctant to make resources available for the Organization’s peace efforts like in Burundi, the ethnic massacres of October 1993.

The **third condition** for preventive action is that the parties to the potential conflict (the patients) should accept the action proposed by the Secretary-General. This is a sine qua non because he has no power to impose any remedy on them and can act only with their consent. In any case the remedy will have no effect unless the patients have confidence in it. Sadly, this is usually the most difficult condition to fulfill. There are, of course, at least two patients in every potential conflict. Usually one of them is more favorable than the other to international involvement; indeed, the very fact that Party A wants international involvement is often cause enough for Party B to oppose it. Sometimes also there exists earlier agreements committing the governments involved to give priority to bilateral means. An example of this is the Simla Agreement of July 1972, in which India and Pakistan agreed “to settle their differences by peaceful means through bilateral negotiations or by any other peaceful means mutually agreed between them.” At other times, powerful countries in the region concerned may object to United Nations involvement and may insist that the parties have recourse to regional mediators.

In internal conflicts, sovereignty is an added complication. A government faced with an opposition that is threatening to take up arms is understandably reluctant for an international organization to come on stage, professing its impartiality and apparently treating government and opposition as equals. The Secretary-General has to proceed with great delicacy and finesse in such circumstances if he is to succeed in persuading both patients to consult the doctor and to take the medicine he prescribes.

Returning to the example of Burundi, the parties have very different views about the desirability of United Nations—or any other foreign—intervention. The main political party representing the Hutu majority has welcomed proposals for contingency planning for a possible humanitarian intervention. But the main party representing the Tutsi minority has reacted very negatively, as have the Burundi Armed Forces, which are largely recruited from the minority.

The **fourth condition** for action is that the Secretary-General, having prescribed a preventive treatment and got the patients to accept it, must persuade the other Member States, and especially the members of the Security Council, to give him steady political support. Unless they are ready to use their influence in a concerted effort by the international community as a whole, the efforts of the Secretary-General alone are unlikely to produce the desired results. The reactions of the Security Council to my various proposals for preventive action in Burundi have already been described.

The Secretary-General must finally, as the **fifth condition** for success, persuade the Member States to provide the necessary resources to finance the agreed preventive action.

The mandates given to him by Article 99 of the Charter, by the Security Council statement of January 31, 1992, and by the Resolutions and Statements adopted by the General Assembly and the Security Council, respectively, provide the Secretary General with considerable freedom of maneuver in diagnosis and prescription but he has no power to commit funds without the authority of the General Assembly, which will have to be convinced of the legitimacy, feasibility, and likely efficacy of the prescribed treatment. If it includes the deployment of military personnel, more than financial authority will be needed. The political authority of the Security Council will also be necessary, as well as a readiness on the part of Member States to contribute the troops and equipment required, whether as a UN peacekeeping operation or as a multinational force authorized by the Security Council but under national command.

To sum it all up, the significant fact that emerges is that the Secretary- General’s ability to take effective preventive action depends most critically on the political will of the parties to the potential conflict. In international politics, as in human medicine, the physician cannot impose treatment that the patient is not prepared to accept. Failure to take effective preventive action is, in any case, only rarely due to lack of early warning; the symptoms are usually there for all to see. What is too often lacking at present is a predisposition by the parties to accept third-party assistance in resolving their dispute. Ways have to be found to persuade them, without infringing on their sovereignty or other rights that it is in their own interests to accept the help of the United Nations and other international players, rather than to allow their dispute to turn into armed conflict.

**QUESTION 2**

[[1]](#footnote-1)Terrorism is the premeditated use or threat to use violence by individuals or subnational groups to obtain a political or social objective through the intimidation of a large audience beyond that of the immediate noncombatant victims (**Enders and Sandler, 2012, p.4**). The two essential ingredients of terrorism are its violence and its political or social motive. Terrorists tend to employ shockingly violent acts, such as beheadings, downing of commercial airlines, bombings in public markets, and armed attacks in public places, to intimidate an audience. Their unpredictable and horrific attacks are meant to make everyone feel at risk even though the true likelihood of falling victim to a terrorist incident is rather minuscule, roughly equivalent to that of drowning in one’s bathtub (Mueller, 2006). Terrorists seek to circumvent normal channels for political change by traumatizing the public with brutal acts so that governments feel compelled to either address terrorist demands or divert public funds into hardening potential targets.

Terrorist campaigns are more prevalent in liberal democracies, where the government’s legitimacy hinges on its ability to protect the lives and property of its citizens (Eubank and Weinberg, 1994).

The four airplane hijackings on 11 September 2001 (9/11) are terrorist acts since the perpetrators were members of al-Qaida, a subnational terrorist group, bent on pressuring the USA to remove its troops from Saudi Arabia, which was al-Qaida’s primary political goal at the time. These skyjackings intimidated a global audience, caused huge temporary losses to the major stock exchanges (Chen and Siems, 2004), and created $80–90 billion in direct and indirect damages (Kunreuther et al., 2003). Even though stock exchanges recovered lost values in just over a month, the death of almost 3,000 people caused rich industrial countries to allocate more resources to counterterrorism, shook insurance markets, and made an indelible impression on virtually the entire world. Heinous terrorist incidents continue to capture headlines with recent newsworthy incidents involving al-Shabaab’s armed attack on the Westgate Mall in Nairobi, Kenya, on 21 September 2013; Chechen separatists’ suicide bombings of a train station and a trolley in Volgograd, Russia, on 29 and 30 December 2013, respectively; and Boko Haram’s kidnapping of more than 200 female students in Chibok, Nigeria, on 14–15 April 2014. These and countless other incidents since 9/11 indicate that the government must allocate resources in an effective and measured manner to counterterrorism activities so that terrorists cannot circumvent legitimate political processes or cause significant economic losses. These losses may involve reduced foreign direct investment (Enders and Sandler, 1996; Abadie and Gardeazabal, 2008), lower economic growth (Abadie and Gardeazabal, 2003; Eckstein and Tsiddon, 2004; Gaibulloev and Sandler, 2008, 2011), less trade (Nitsch and Schumacher, 2004), reduced tourism (Enders et al., 1992; Drakos and Kutan, 2003), or lost values of stock and bond indexes (Kollias et al., 2013). Any definition of terrorism involves much debate (Hoffman, 2006; Enders and Sandler, 2012). The research community is converging to a consensus based on an operational definition on which to construct event data sets to test theoretical propositions. The article puts forward a definition that is consistent with that used by the main event data sets and relied on by researchers. Also, this definition possesses the main ingredients that are agreed on by economists, political scientists, and political economists. The three stakeholders in this definition are the perpetrators, the victims, and the audience. By limiting terrorism to subnational agents including individuals or a ‘lone wolf’, my definition rules out state terror in which a government terrorizes its own people. The definition, however, does not rule out state-sponsored terrorism where a government clandestinely assists a terrorist group through various means, including supplying weapons, safe haven, intelligence, training, funding, or safe passage (Mickolus, 1989; Bapat, 2006). There was a lot of state sponsorship of terrorism during the final decade of the Cold War with groups such as the Abu Nidal Organization serving as a terrorist group for hire (Hoffman, 2006).2 The most controversial element of my definition is the victim, since some definitions exclude combatants, so that attacks against an occupying army, such as US forces in Iraq or Afghanistan, are not viewed as terrorism. Generally, an attack against peacekeepers, such as the 23 October 1983 suicide bombing of the US Marines barracks at Beirut International Airport, is considered an act of terrorism. The barracks’ bombing had the political objective of removing peacekeepers from Lebanon, which happened in February 1984. Terrorism is a tactic employed by both insurrections and guerrilla movements. As a consequence, many guerrilla groups are listed as terrorist groups despite their control of territory. Often, countries with jungle cover or mountainous terrain provide remote areas where guerrillas can conduct training and operations. In this special issue, Carter (2015) is interested in the interaction between a guerrilla group and the government, as the former chooses between terrorism and the control of territory and the latter chooses between defensive counterterrorism actions and proactive military responses to influence the group’s decision.

Domestic versus transnational terrorism Domestic terrorism is homegrown and home-directed, and represents the most common form of terrorism. For domestic acts of terrorism, the perpetrators, victims, and audience hail from the venue country, where the attack takes place. Domestic terrorist incidents include Timothy McVeigh’s bombing of the Alfred P. Murrah Federal Building in Oklahoma City on 19 April 1995 or Eric Rudolph’s anti-abortionist bombing of Centennial Olympic Park in Atlanta, Georgia, on 27 July 1996. Civil wars often involve numerous domestic terrorist attacks before and during the conflict by the adversaries (Findley and Young, 2012).These terrorist acts are more apt to be domestic when an intervention by a third party from outside the country is not involved. Boko Haram’s kidnapping of more than 200 female students is a domestic terrorist incident, which involves victims and perpetrators from the venue country of Nigeria. Boko Haram is an Islamic jihadist terrorist group that controls territory in the northeast portion of Nigeria. Given the country’s limited military capabilities, its government sought some assistance from the USA in terms of military advisors and intelligence in addressing the significant threat that Boko Haram poses. At times, Boko Haram crosses into Chad. If one or more of the schoolgirls are moved into a neighboring country, then the kidnapping becomes a transnational terrorist incident. In general, poor countries may request foreign assistance if they cannot properly confront an indigenous terrorist group that may attack at home or abroad (Azam and Thelen, 2010; Fleck and Kilby, 2010; Bandyopadhyay et al., 2011, 2014; Young and Findley, 2011). Terrorism is transnational when an incident in the venue country concerns perpetrators or victims from another country. If a terrorist attack in the UK is perpetrated by terrorists from Yemen, then the incident is one of transnational terrorism. When a terrorist attack in France harms Dutch citizens, the attack is transnational. If one or more victims or perpetrators are not citizens of the venue country, then the terrorist attack is transnational. The kidnapping in January 2002 and subsequent murder of US reporter Daniel Pearl in Pakistan is classified as a transnational terrorist incident. The same is true of the near-simultaneous bombings of the US embassies in Kenya and Tanzania on 7 August 1998. Terrorist attacks against another country’s embassy, even when perpetrated by citizens of the venue country, are transnational terrorist events because an embassy’s grounds represent foreign soil. Similarly, terrorist attacks against international organizations’ personnel or property are considered to be transnational terrorist acts. An important transnational terrorist incident is the August 2006 plot to use liquid explosives to blow up 10 or more transatlantic flights departing the UK for the USA and Canada. A skyjacking originating in one country that is diverted to another country for political purposes is a transnational terrorist event. If a politically motivated hijacked plane has citizens from more than one country, the event is transnational terrorism even if the flight is domestic and ends in the country of origin. On 9/11, the four skyjackings are transnational terrorist acts since the victims were citizens from upward of 80 nations and the perpetrators were foreigners. The kidnapping of US journalist James Foley in Syria on 22 November 2012 and his beheading on 19 August 2014 is a transnational terrorist act. The victim was American, whereas the murderer is allegedly a British citizen from the Islamic State in Iraq and Syria (ISIS), also known as Islamic State (IS). Transnational terrorist incidents frequently imply transnational externalities—for example, perpetrators from one country impose uncompensated costs on the victims of another country. If a country provides safe haven to a transnational terrorist group that attacks other countries’ interests, then transnational externalities ensue. The Taliban in Afghanistan had given safe haven to Osama bin Laden’s al-Qaida, which planned and executed the events of 9/11. When the Taliban would not surrender bin Laden to the USA following 9/11, the USA led an invasion of Afghanistan on 7 October 2001 (Enders and Sandler, 2012). In this extreme case, the transnational externality resulted in a military invasion with the intent to defeat the Taliban and al-Qaida. Transnational externalities also arise from counterterrorism policies of targeted countries, which result in inefficient levels of these policies (Sandler and Lapan, 1988; Sandler and Siqueira, 2006; Bueno de Mesquita, 2007). Actions by one targeted country to secure its borders and ports of entry may merely transfer the attack abroad, where borders are more porous (see Section 5). Since 9/11, few transnational terrorist incidents occur on US soil but 35% to 40% of such incidents involve US people or property in other countries (Enders and Sandler, 2006, 2012).

**QUESTION 3**

[[2]](#footnote-2)The morning of December 26, 2004, saw a sequence of events that devastated communities and shocked the world. In the space of a few short hours, more than 230,000 people lost their lives as a result of a tsunami that affected 13 countries and left close to 3m people struggling to survive.

Indonesia was the worst affected in terms of human lives lost and physical damage. The death toll for Indonesia alone was 167,708 and over 500,000 people were displaced. The global response was unprecedented. Initially, vital life-saving search and rescue activities were carried out by surviving family members, neighbors, and holidaymakers. Within hours of the tragic event, national governments began to put emergency response plans into action.

The Irish government responded quickly, immediately pledging support and following through to ensure funds were delivered where they were needed most. An assessment team travelled to the region to see how Ireland could best respond. In total, over $6.25bn in global humanitarian funding was provided for the response to the Indian Ocean tsunami. Ireland contributed in excess of €100m, made up of €20m in official government funding and €80m in donations from the public. The total per capita contribution from Ireland was at least €25 per person, placing Ireland among the top five contributing countries in the world. I was proud to see such an outpouring of generosity and solidarity.

The role of the UN in providing direct help, coordinating the overall response, and planning for future protection mechanisms was critical. In 2005, the UN initiated extensive reform efforts to enhance humanitarian co-ordination, leadership and financing. These initiatives have resulted in new approaches to working more accountably, predictably, and effectively.

The difficulties of responding quickly enough to such a huge emergency highlighted the need for a flexible and swift global fund. As a direct result, the UN’s Central Emergency Response Fund (Cerf) was established. This enables donors to pre-position money so that when a disaster strikes, the urgently needed funding can be accessed quickly. Since its establishment, the Cerf has proven very effective in delivering aid quickly to where it is most needed. Ireland has been one of its most committed supporters, contributing over $150m since its establishment.

One of the important lessons learned from 2004 was that deploying large numbers of volunteers can hamper relief efforts. Irish Aid established a rapid response corps to provide highly skilled volunteers for deployment at short notice to work with UN partners on the ground.

Irish Aid has deployed 250 roster members to over 40 countries since September 2007. Some 32 members have been deployed so far in 2014 to countries such as South Sudan, Central African Republic, Jordan, Lebanon, Ethiopia, Somalia, and Senegal.

[[3]](#footnote-3)A decade later, lessons learned from the tsunami humanitarian response continue to influence and improve how the world responds to disasters today.

A report from CARE International marking 10 years since the Indian Ocean tsunami outlines some of the major milestones and innovations in the humanitarian system and in CARE’s own emergency work, and raises questions for how the world will continue to evolve and address emerging challenges in the years ahead.

“The tsunami was a turning point for the global aid community. Never before had such a massive, coordinated emergency response been launched after a natural disaster. The world succeeded in helping the affected countries rebuild and recover, and the way we respond to and prepare for crises was altered forever,” says Sally Austin, CARE International Head of Emergency Operations who previously worked in Indonesia as CARE’s Tsunami Response Director.

The global community mobilized with a massive emergency effort. CARE was among the leading humanitarian agencies that responded and worked with affected communities across five countries to reconstruct homes and livelihoods and promote economic and social development, reaching more than 1.3 million people. At the global level, the Indian Ocean tsunami prompted a shift in how the traditional humanitarian community coordinates with the multitude of new actors. The Cluster System, which today brings UN and non-UN aid agencies together in sector-specific groups to coordinate emergency responses, was being piloted during the tsunami response but had not been institutionalized. Without it, information sharing and adherence to quality standards was limited. As this early trial during the 2004 tsunami showed, when aid agencies come together and when they work better with national governments, the quality of the response is improved and a greater number of vulnerable people are reached.

It was also after the Indian Ocean tsunami that the Humanitarian Reform Agenda, the product of the UN-led Humanitarian Response Review of 2005, determined that clusters should be a mainstay in every large-scale humanitarian crisis.

This new approach had been triggered by concerns around the weak international response to the humanitarian crisis in Darfur, although its timing meant that it could also absorb and act on lessons learned from the tsunami response.

Clusters are now a core component of global emergency response operations and are, as time passes, growing in their effectiveness. In every large crisis since the Indian Ocean tsunami CARE has engaged in these clusters by participating in sectoral assessment and planning processes, sharing information, helping to define technical standards, and often seconding staff to coordination teams as well as to the clusters themselves. CARE also continues to influence and support clusters between emergencies so that they become more efficient, more inclusive and more accountable. CARE was instrumental in creating the new Food Security Cluster, which was launched in late 2010, to improve coordination in emergency response on issues relating to food availability, access and use.

With growing needs, there are emerging challenges both for people affected by disasters and for humanitarian actors. Aid organizations and donors need to be more flexible and innovative; build resilience of communities before, during and after a crisis; and expand partnerships with local communities, governments, civil society groups, the private sector and all who have a stake in responding to crises.

**QUESTION 4**

To make the humanitarian system fit for the challenges it faces and ensure that it becomes more effective and efficient at saving lives and alleviating human suffering, humanitarian actors need to improve their policies and operations, enhance the coherence of the humanitarian system, and redefine the position and role of humanitarianism within the broader aid and policy spectrum.

The transatlantic partners play a critical role in achieving these goals. Together, the European Commission, EU member states, and the U.S. Government provide almost two thirds of global humanitarian assistance. Through their policies and funding decisions, they have an important influence over implementing partners. They shape norms and policies at the global level through their participation in multilateral organizations and multi- stakeholder initiatives, due to their extensive field presence, they also have a direct impact on activities on the ground.

As a result, in recent years the EU and the U.S. have developed an ambivalent relationship in the area of humanitarian assistance. On the one hand, they usually work closely together when responding to specific emergencies on the ground. The European Commission and the U.S. Government also regularly coordinate their activities at headquarters level and jointly participate in a large number of relevant multilateral or multi- stakeholder fora. Moreover, both donors fund NGOs from the other side of the Atlantic. On the other hand, the normative and policy differences between the two sides are tangible and have had a noticeable impact on pragmatic cooperation.

The transatlantic partners now face a unique window of opportunity for strengthening their cooperation in humanitarian assistance. Since the election of President Obama, both sides seem intent on putting their relationship on a new footing, creating the right political environment for addressing key normative and policy differences. Moreover, both the U.S. and the EU are currently introducing major political and potentially also institutional changes relevant to humanitarian assistance.

Efforts to improve EU— U.S. cooperation in humanitarian assistance would certainly have a positive effect on the transatlantic relationship. Since the transatlantic partners are each so actively engaged in humanitarian assistance, efforts to identify greater synergies of effort, adopt lessons learned, develop common or complementary approaches and together engage third party donors more effectively could be positive contributing elements to a reinvigorated transatlantic partnership.

Moreover, the EU and the U.S. have a strong basis upon which to build, including a similar understanding of humanitarian assistance and an established infrastructure for cooperation. A closer working relationship between the EU and the U.S. also promises to enhance the effectiveness and efficiency of humanitarian assistance. Put in simple terms, if the two largest humanitarian donors achieve greater policy coherence and improvements in their policies and practices, this is bound to have a significant impact on the reality of humanitarian assistance.

More specifically, enhanced cooperation promises to achieve the following:

• Greater coherence and better division of labor. The humanitarian policies and activities of the EU and the U.S. are currently not always in sync with each other. In the best case, this leads to unintended complementarity and allows humanitarian agencies to choose the approach that suits them better. In the worst case, however, the activities of the transatlantic partners can become mutually counterproductive. The mass delivery of food commodities purchased in Western countries as practiced by the U.S., for example, can counteract the attempts of other donors, including the European Commission, to strengthen local food markets. Similarly, a strong reliance on the military can undercut the efforts of other humanitarian actors to be perceived as independent and impartial. Closer cooperation would aim at limiting policy divergences and enhancing operational coherence. This would ensure that the EU and the U.S. are not pursuing conflicting strategies. Moreover, it could lead to a better division of labor, eliminating unnecessary duplication, enhancing the efficiency of humanitarian assistance and potentially leading to better coverage, including of “forgotten crises.”

• Mutual learning. The current humanitarian system is confronted with numerous challenges, ranging from new and more frequent emergencies to the emergence of new humanitarian actors. To address these challenges, reforms and new approaches are introduced throughout the system, yet most often in an uncoordinated and haphazard way. Moreover, humanitarian assistance suffers from a lack of analytical capacity, be it within humanitarian agencies or academia. Under these circumstances, mutual learning is of the utmost importance to improve humanitarian practices. The exchange of experiences and lessons learned can take place in different fora, and a number of important multi- stakeholder learning initiatives like the Active Learning Network for Accountability and Performance in Humanitarian Action (ALNAP) exist. Informal bilateral contacts, however, can be very effective instruments for learning because they enable officials confronted with concrete problems to seek the advice of their counterparts. Closer cooperation would foster these contacts and thus strengthen learning.

• Stronger impetus for system- wide reform. Over recent years, the humanitarian system involving UN organizations has undergone an important reform process. This process, however, has not yet been completed and further changes are necessary, for example, to improve the integration of local capacity into international responses, gender awareness and the quality of needs assessments. The transatlantic partners could also help clarify when and how to better link relief and development activities and promote coherent, risk- minimizing approaches to including business actors and the military into relief and preparedness activities. The U.S. and the EU, including the European Commission and EU member states, wield significant influence over most multilateral organizations and implementing agencies. A joint approach would allow the transatlantic partners to promote reforms much more forcefully and effectively.

But, in contrast to many other policy areas, enhanced EU— U.S. cooperation can also have negative effects on humanitarian assistance. Many NGOs, for example, welcome the current diversity in donorship because it enables them to explore a multitude of different funding channels, limiting the political influence of key donors. More concretely, enhanced cooperation entails the following risks:

• Western bias. The current humanitarian system is dominated by “Western” powers. Europe (including the European Commission and EU member states) and the U.S. together provide 65 percent of total humanitarian funds. Other “Western” governments or private organizations and individuals account for much of the remainder, with the only other significant financial contribution coming from the Gulf States (in 2008, Saudi Arabia contributed 6.3 percent of total humanitarian assistance, the United Arab Emirates 0.9 percent and Kuwait 0.8 percent). The EU and the U.S. are not only leading in financial terms, but also exert significant influence over multilateral organizations such as the OECD or the UN and dominate the donor advisory groups of many implementing agencies. Moreover, the normative framework for humanitarian assistance was developed in the “West” and many of the large NGOs involved in the provision of humanitarian assistance throughout the world are based in the same countries.

Other nations are acutely aware of this dominance, suspect the humanitarian system of having a pro- Western bias, and fear that humanitarian agencies are pursuing other political aims. This perception makes many non- Western governments hesitant to support the humanitarian system. Even more problematic is that a growing number of governments, including Myanmar, Sudan, Zimbabwe, and Sri Lanka, are using this argument as a reason or pretext for at least temporarily or partly denying humanitarian agencies access to those in need. A stronger and more obvious transatlantic humanitarian partnership would reinforce notions of Western dominance in the humanitarian system and exacerbate these problems.

• Dominance of the political agenda. Closer transatlantic cooperation in humanitarian assistance could also further undermine the independence of humanitarian action. If humanitarian assistance is seen at least in part as a means to promoting the transatlantic relationship, this political agenda could take precedence over the humanitarian impetus.

Greater policy coherence could therefore mean that the European Commission integrates humanitarian assistance more closely into its growing foreign policy portfolio. Should this be the result of closer transatlantic cooperation, it would also undermine the independence of humanitarian policy making.

• Threat to the independence of humanitarian agencies. The issue of independence is not only relevant for the donors themselves, but also for those who receive funds from them. As mentioned above, a joint approach would increase the ability of the two donors to make their influence felt in multilateral and implementing agencies. On the upside, this would enable the EU and the U.S. to promote positive reforms more forcefully. At the same time, however, it would undermine the independence of these agencies.

• Costs of coordination. Finally, high levels of cooperation and coordination come with a price tag. Activities to enhance cooperation and coordination themselves are costly in terms of staff time and travel and divert scarce resources away from those who need it most. At the same time, NGOs in particular claim that excessive levels of coordination would diminish the system’s diversity and capacity to innovate, thus leading to long term losses in humanitarian effectiveness and efficiency. Since current levels of donor coordination are relatively low, the threat of reaching excessive levels of coordination seems, however, low.

On the whole, therefore, the transatlantic partners should choose cooperation modalities that can address current challenges while being mindful of these risks. To achieve this, enhanced cooperation should remain open to other parties and strengthen the voices and participation of affected populations; focus on improving the delivery of humanitarian assistance; respect the independence of implementing partners; and allow for a certain level of diversity within the humanitarian system.

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