

International Development Committee

Oral evidence: Humanitarian access and adherence to international humanitarian law, HC 526

Tuesday 11 March 2025

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Members present: David Mundell (Chair); Monica Harding; Noah Law; Brian Mathew; Sam Rushworth; and David Taylor.

Questions 1 to 37

Witnesses

I: Anna Tazita Samuel, Executive Director, Women for Change; and Steve Dennis, Founder and Owner, Steve Dennis Consulting.

II: Tarini Ross, Head of Humanitarian Programmes, Humanitarian Aid International; Jon Novakovic, Executive Director, Global Interagency Security Forum; and Imogen Wall, Founder, IW Response Associates.



Examination of witnesses

Witnesses: Anna Tazita Samuel and Steve Dennis.

Q1 **Chair:** Welcome to the first session of evidence for our inquiry on humanitarian access and international humanitarian law. We have two panels this afternoon. On the first panel, we have Steve Dennis, founder and owner of Steve Dennis Consulting, here in person. We are joined online by Anna Tazita Samuel, Executive Director of Women for Change. Anna, I invite you to briefly introduce yourself and then, Steve, if you will do the same.

Anna Tazita Samuel: Thank you. Anna Tazita Samuel, the Executive Director of Women for Change, South Sudan, a women's rights organisation in South Sudan. It is a pleasure to join you and to have this discussion. Thank you.

Steve Dennis: My name is Steve Dennis, the founder of Proper Support. Since 2002, I have been an aid worker. In 2012 I had an incident of being attacked, shot and kidnapped. I strongly believe in aid and security for people. I am happy to be here. Thank you.

Q2 **Chair:** Thank you. I will begin, Steve, by asking if you could tell us what happened to you in 2012.

Steve Dennis: In 2012, I was working in a refugee camp on the eastern side of Kenya on the Somali border. I was in a convoy. Five of us were shot. I was one of four people who was then kidnapped. We drove until the car broke down. We walked through the nights and rested through the day. A militia rescued us some days later in a gunfight and another person was killed at that point. In the weeks and months afterwards I was in quite a fog of disbelief and unfamiliarity. Previously I had run complicated programmes but I could not walk outside my house. It was very difficult. My organisation initially supported me with some things but then they left me off to the insurance company.

The insurance company was quite inarticulate about what was required to get their support. They were extremely clear on how I was not satisfying their policy or their conditions or, "Just get us one more report and we'll get through to you". I was quite lost in that time.

As far as an after-action review, things were quite lacking. The head of security was reviewing this security incident internally. He told me that because they did not find anyone or anything at fault, there was no need to have an independent review of the incident. This was touted as the worst security incident for that organisation but because of no fault, no need for an independent review. I was quite lost with that. I was diagnosed with post-traumatic stress disorder and was having a very difficult time.

The discussions I was having on getting support and an independent review, in about a year and a half after the incident, died—the door was closed. I ended up getting a lawyer to help with that process but again it was quite difficult. I was diagnosed with depression around that time.



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Even my girlfriend had told me, “You’re not the person that I fell in love with at the beginning”. Three and a half years after the incident, the case went before a court. The court found the organisation grossly negligent, meaning a heightened disregard for understanding the risks, putting measures in place and post-incident support. This was quite a derogation from the residual risk that was initially concluded.

The impacts are still there. I am much better with the PTSD and depression. I think that the remaining parts of that are quite counterbalanced with the insights this gives and the motivation I have to drive for change so that other of my colleagues do not go through a similar experience.

Another impact that is continuing is that I am disappointed. I am still disappointed that there is no process or structure that compelled the organisation to go through an independent review of an incident in which five people were shot, one fatally, four were kidnapped and there were high suspicions of neglect for our safety. That is one of the lasting impacts. Thank you for the question.

Q3 Chair: Have you had to manage your own working through your physical and psychological trauma or have you had specialist help?

Steve Dennis: Yes, I guess there are somewhat two areas of focus. I was shot, so a physical injury, and I was heavily traumatised from the violent attack, the violent rescue, the hopeless middle bit. With that, I guess with the medical side, I felt that I had to navigate the system myself.

“What do you need?” is not the right type of question to put to someone. I needed somebody to help me understand what I needed. Also, to walk through the medical processes, to get a decently complicated injury assessed and treatment plans put together with no certainty that the insurance would cover the bills as well as the continual erosion of my savings—it biases your decision making. Also, you are in a fog and I really adhere to that description of not knowing where to put your step to go forward and in which direction.

As for the psychological injuries, PTSD and depression, I have a very good trauma psychologist. This is his speciality and I am very impressed with that. Going from being hypersensitive, highly triggered by small things that used to be very familiar to me in my home town, to understand what is happening, the tools to minimise them, and the ability to fix, manage or avoid insights like that were very good.

However, there was another injury that started to come up, I would say a moral injury of a diversion from the vision of “we will support you” to not only guiding my treatments but having to prove that the injury is real. For instance, seven reports from different psychotherapists, psychologists and psychiatrists were not good enough for the organisation to take on the diagnoses. It had to be a court-appointed psychiatrist who was the eighth parallel report on that diagnosis. It was similar with medical things. There was the burden for people, for myself and speaking for



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others too, to have to prove the injury beyond reasonable doubt as opposed to taking that burden away.

I like the analogy that if somebody is in a coma they cannot do anything, but if somebody is conscious but just heavily traumatised, that is a horrible situation to go through. There is a cloud of darkness around. Your decision making is not the best. Your ability to plan and run things is not as it used to be, managing programmes in highly complex areas. So I would say that was a difficult part for me. I still see the people for my leg, my physiotherapist, osteopath, and chiropractor. I still have contact with my psychologist. There are some impacts.

On the moral injury, there is still disappointment when I hear of other colleagues who are up against an impossible burden to get their injuries listened to and addressed, when they have to become the specialists themselves. It is a burden too far.

Q4 Chair: Do you think that the approach to employee safety taken by donors and employers has changed since 2015 when you won your court case?

Steve Dennis: Well, I would like to note—2015, yes, it was the court case and the verdict. Hundreds of people have approached me saying that they either have changed their behaviour or their organisations have changed—psychotherapy, counselling services, security consultancy services and insurance companies. Hundreds of people have told me that their perspective on risk has changed from the verdict.

My incident was in 2012 and I cannot recall one person who has told me that my incident has changed the way that security is managed in the world. Since my incident, there have been about 1,500 other people, according to the aid worker security database, who have been kidnapped. I would propose here that my court case—and I am certain some of my security colleagues behind are agreeing—has had more of an impact than the 1,500 other people who have been kidnapped.

If you look at my testimony of hundreds of people, that security has improved because of this external independent review and some accountability of security; I think that goes to show that there should be more independent review of incidents. Yes, I think it has changed, but it is the court case and it is the only court case that I know of in those almost 10 years from now.

Q5 Sam Rushworth: Before I was an MP, I used to work in your world, so I am very interested in the issues that you are raising. I am interested to understand, when you were initially working in that situation, what sort of steps your organisation took to prepare you—or firstly to assess and analyse the risks but also to prepare you for those risks. What, if any, risk assessment was in place?

Steve Dennis: The verdict was gross negligence, and what that meant is picking apart everything that should be in place—there was a high derogation from that. So looking at training, “Oh, it’s a high-risk area”, the highest category of risk for that organisation. They had top training, the hostile environment awareness training, but nobody there had done



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that training. The security managers who were to put in place security measures had not done training on management.

The head of the crisis team testified in court. What crisis training did he do? He talked about personal training, when bombs are going off, lay down, but not about how to manage the process of setting objectives, resourcing and communicating. I would say that from the organisation's perspective, the verdict is there, and it speaks for itself on any aspect. "Oh, security plans? Well, yes, they had just been updated. Well, did you follow them? No."

The big part there that came out in the review was that the security advice and the security advisers were cut out from the security decision making. I guess this comes a little bit to an inquiry question of what the Government can do to hold perpetrators accountable for atrocities to aid workers. I would say that it is not only the perpetrators but the organisations that train, prepare, give equipment to and really promote that culture of security and safety awareness. That should be looked at too. In our regard, it was not the organisation that shot and took us, but there is a role. The verdict does get quite clearly that reasonable measures were not put in place. So there is a gold standard, absolutely.

I would like to refer to other security colleagues or the written statements on what is required, but this is the only real independent review of a situation, and I do not think for those 1,500 people who have been taken after me that there has been a review and it is virtually impossible to bring a case forward.

For this burden to be put on somebody who is heavily traumatised, just trying to get through their day, just trying to figure out, "Is it an orthopaedic surgeon, or is it a physio; who do I get to help out with a leg?"—that is an impossible burden to be put on people suffering from these things. As I said before, I am disappointed that there was no process to compel independent reviews.

Q6 Sam Rushworth: So it is not just the aftercare? There was very little training beforehand, and little awareness among staff of the situations that you might encounter.

Steve Dennis: Right, yes. To echo that, if those things do move the odds in your favour, we have to look at whether those things are in place after an incident happens. It could be a bombing from artillery, it could be one of these things, but was there appropriate training or not?

Aid workers also go into Ebola areas—pre-training equipment, measures. If somebody dies of Ebola, you cannot just say, "Perpetrator Ebola". You have to bring out whether there were appropriate measures. High-risk environments, disease or war—there is a structure of assessing the risks, managing the risks, and then should it happen, the comprehensive post-incident care, I think, is the phase of the pre-incident. If a treatable injury is not treated, it becomes permanent. If the permanent injury leads to hopelessness—we know colleagues, every aid worker knows colleagues who have taken their lives, and there are not many studies on



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it but we know. Protecting aid workers should extend to the post-incident area there too.

Q7 Sam Rushworth: Are you still working in that world?

Steve Dennis: I run a service now called Proper Support where, as a non-profit, we work with people who have fallen through gaps. Aid workers contact me. The case went public and a lot of people contact me now saying, "I've been injured, I'm lost" and I help people navigate that space. I have built a team of psychotherapists and doctors and often lawyers because if there is a wall put up between them and proving their injury, it is not fair. It is not a good business to be in. I am trying to be the support that I wish I had had through my claim. In fact, I would like to work myself out of the business; some accountability measures being brought in—absolutely good: work me out of it.

Q8 Monica Harding: Thank you very much for sharing your experiences with us. I want to ask about the public perception of what you went through and about aid workers generally. Did you receive any public sympathy in a wider context?

Steve Dennis: Yes. I think there are different elements there. Sometimes soldiers get this as well, that, "Well, you knew what you signed up for" and it is true. As I was being taken into Somalia, there was a moment of thinking, "I might not get out of this, this might be my end" and I had no regrets about the work I had been part of for the decade before then.

Yes, knowing what we went into is there but when you peel back a review—I had trust that the security measures were in place and decisions were weighed nicely or weighed properly. Finding out later that security advisers were not involved in the decision to remove our armed escorts—well, that is a security decision and you want security people to be involved.

Finding out afterwards, yes, I was pushing back on some of that public perception of, "You know what you are signing up for. What are you complaining about?" I am interested in the sustainability or the continuity of aid work because I am very proud and insistent that it has to continue, but the way for that to continue is to keep aid workers safer and that can only happen with independent review.

I think that societies like the UK honour their military service with, "Thank you for your service, putting your lives at risk". A lot of aid workers make a similar type of sacrifice away from home in high-risk areas and I think there is a different perception there. There is no cohesive organisation taking care of aid workers because they might go from different contracts with different nationalities, definitely locally employed, and international aid workers are sometimes cared for a bit differently.

One thing that I think the Government can do is, like the measures of prevention of sexual exploitation and abuse, policies that are in proposals and requirements to report on issues of fraud and corruption, there should also be safeguarding measures required. Incidents of your staff



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injuries, illnesses, deaths and kidnappings should be reported. There should be an area for independent review there, not just that the organisation has been able to mark its own homework and give itself a passing grade, like mine did.

There are other things. Public perception—sometimes people lose track of what aid work is all about. There is definitely an amount of solidarity with people going through disasters, either through an empathetic application, “I am empathetic, we have resources of people and money to put to problems”, or, “If disaster happens to us, we would also like others to be in our assistance”, or just the pragmatic.

The Ebola outbreak right now in Uganda—there is a direct flight from Kampala to London. There is a pragmatic reason to stop diseases where they are even if you have no other reason to do aid work. I think some of that is lost and so some of the public impressions of aid workers is also lost.

Lastly, I will say that for me to challenge the aid organisation, to take them to court, I think was seen quite negatively. I do not mean to say that there is negativity towards that organisation or to this independent review. I just mean to draw the curtains back and turn on the lights, what happened, and do not let it be the same people who were involved in the decision making. There could be bias there. In marking your own homework, the grades are higher.

I see a role for the Government to be there in an oversight of some sort, not too much but in some sort, to ask questions. These aid worker deaths, kidnappings and injuries, numbers are going up; is it only the perpetrators or is there some role of others? Of the 1,500, I was the only one who brought it all the way to court and I found that it was not just the perpetrators.

Q9 Monica Harding: Can I push slightly further on that? I was really taken by your comparison with the military. Do you think that the public loses a sense of the nationality of aid workers because they work in an international context or for an international NGO? Is there, therefore, a slight detachment from aid workers and not a public perception of what good they are doing for the donor country, for example?

Steve Dennis: I think so, and that is all right. I like the idea that aid is independent of any political influence and impartial to the designs of interest and that the needs are there out of solidarity. There are agreements on international humanitarian law, of the rights of people in conflicts and the assistance that should be there, and I think rightly so. It should.

The UK had a high reputation in the world for the delivery and the solidarity, even when it was just outside of its direct interest. I think that is lost and it is losing, and this discussion right here is relevant. That question is very relevant these days. It should be separated from political things but society is better when one dollar of aid can avoid a military intervention later when people dislike a political situation.



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Focusing back to aid worker safety and one point of mine about the reducing budgets and the relevance to today's situation, when you do not have time to maintain your broken car, you do the oil change and you make the repair. When you cannot replace it, you do the repair. When you cannot recruit and replace experienced aid workers, you focus on the treatment and the post-incident care.

I diverted a little bit there, but please follow up and please dig deep. This is a good question that you are asking and that is where the learning is.

Q10 Noah Law: Thank you, Steve, for sharing very powerful and difficult experiences and for those really concerning reflections on the broader context.

Turning to Anna now, could you describe a bit more the work that your organisation does and some of the threats and challenges that you face?

Anna Tazita Samuel: Thank you so much. Once again, good evening. Women for Change is a national women's rights organisation in South Sudan that was founded in 2016 and we officially registered in 2018 with the main mandate to empower women economically and socially, looking at the historical background of how women in South Sudan have been treated.

We are operating and doing basically four things—the domestic areas we have, the economic empowerment of women, where we do a lot of income generating activities, we do a lot of FSL and education, and also we do protection, that is gender-based violence and child protection, including general protection, where we do programming response and management.

Right now, we are also doing co-ordination as the only women-led organisation co-ordinating the GBV sub-cluster at the national level and also at the state level. We also do peace building and advocacy, looking at the continuous conflict in South Sudan, and inter-communal fights. We needed to empower the community on how to manage themselves or how to live in peace and how to manage some of the conflict that arises in the community among themselves. Basically, that is what we do.

Of course, we are also in different networks, including the Start Network. We are members of the Start Network. We are members of the C4C, that is the Charter for Change. We are a member of the local working group where currently I am the chair and co-chair of Save the Children. We are also members of work leading from the South Consortium in very many areas.

Of course, we are also working with refugees and as Women for Change, we work with the women, by the women and for the women. Looking at the current situation in South Sudan, with a lot of influx from Sudan—the returnees, we call them, we have returnees—of course, we have South Sudanese living in Sudan. We have the refugees, the Sudanese coming to South Sudan, and we have to also take care of them. We are working with the refugees and of course, there are also a lot of challenges just deriving from the challenges that we face as a local actor in the context of South Sudan.



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As a national organisation, of course, the community looks to you to be the first responder on the ground. Unfortunately, it is very hard. Sometimes you cannot respond due to some financial or logistic crisis that you are not able to support. Also, when you reach out to the other agents to support you with supplies, it is a long process. So that is one challenge that we face. Then, of course, there is the challenge of accessing decision-making spaces is one challenge that as a national organisation is very tricky. Decisions are made at a different level.

As a national organisation, or a WRO, a women's rights organisation, you do not access those decisions; they are just passed to you to implement. It becomes very difficult sometimes to share your views because you do not have the space to share your challenges there, as it is mostly dominated by different agents, the international agents, and then also the UN, especially in the cluster system.

Then, of course, we come to the security challenges. Operating in South Sudan—for example, Women for Change is operating in Jonglei State, in an area called Fangak and Warrap States, and Central Equatoria State. We operate in areas where sometimes there are crises, especially communal fights that will erupt in the middle of the night and we need to evacuate staff from there, away from the field to a safer place. Sometimes it is very difficult for us because we do not have budgets for them.

In most cases, for the projects that we have, we are not given security, a percentage. When we ask for security, like some money for security for our staff, they will tell us, "You are local actors. You don't need security. Security money is only given to international agents." So those are the challenges.

It leaves us in a very difficult situation to be able to support the lives of people in the field. When you send someone there, you need to be ready to have enough resources to evacuate. Any time, any minute, conflict will erupt in the community. It is not about maybe political or whatever, but intercommunal fights that happen and that is the most difficult situation. Sometimes floods come and start covering the whole place, so we need to also evacuate staff from there. That is one challenge that we face as national actors and especially as a women's rights organisation in the global south and a country like South Sudan.

Then, of course, we also have other challenges like very limited or short projects given to us. For example, we are given a project of three months or six months to implement and that is the time you are trying to really be helping the community so much. Then you receive an email that you have to submit an end-of-project report. It creates a lot of conflict with the community. The community feels you are the one delaying responding to them when we really are not the ones who are delaying.

Sometimes the delays come from the intermediaries that are also giving us the money, of course. Then also the lack of accessing funds directly from the donor is a big challenge because the money comes through the intermediaries and sometimes there are delays. The bureaucratic system also happens and it affects the operation on the ground.



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For example, a project was supposed to start in January. Up until now, we have not started the project and it is ending in December. It is just because we have to wait. Also, the intermediary has to finish their logistical process. Then, by the time the money is coming, the first quarter has already gone. We are looking now at three-quarters of the year and the unfortunate part is that they will ask you for a report on quarter one. The report of quarter one is not there.

It is a very difficult situation that in most cases we are put in as local actors. For example, I can talk on behalf of Women for Change that it is a very difficult situation and it is a very big challenge that sometimes you end up urging, asking, "Why is the project delaying?" They will answer, "You know, we are doing our logistical challenges", and when you push so hard, the next thing they say is, "You are not a co-operating agent" so the next year, you are already dropped out from partnership with that agent. It is all a lot of stress and a lot of—I don't know how I can put it, but the bureaucratic system is a very big challenge that we and also other local actors face in South Sudan and also in our context.

- Q11 **Noah Law:** Thank you, Anna. Could you describe a bit more the kind of impacts that can have on you as individuals and your own lives, your physical and emotional wellbeing and a bit more about what you have talked about there, the stresses?

Anna Tazita Samuel: One immediate effect that always affects us, especially those of us who go into the field, is the emotional and psychological stress. Sometimes we have a lot of stress, sometimes with trauma. I remember one of our staff who was caught in a communal fight and in the middle of the night all the other aid people were evacuating their staff away from that location.

As the head of the organisation, I have to look all night for how these staff could come out because now here we are saving lives. The staff on the ground was very stressed because he had to stay on the ground for about four days without water or food. That is one thing that really is affecting us so much, the psychological stress that is associated with our work.

- Q12 **Noah Law:** Do you feel that you are getting enough support? How does your team put mechanisms in place to deal with that stress and the challenges that you are facing?

Anna Tazita Samuel: The strategy that we have adopted as Women for Change is that we are working so closely with the South Sudan NGO Forum, which includes INGO colleagues and also the national organisation colleagues. In that, when there is anything, we reach out to them and ask, "Please, there is this. How can we get some help?"

The South Sudan NGO Forum is very quick in sharing information. Sometimes we find that maybe one agent is already saving their staff from a location and we just add something small and tell them, "Please include our staff to come together with their staff". Working in collaboration is one thing that we have adopted. We do not want to work



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alone. We want to work with the bigger community and that is one thing that has helped us a lot.

Another thing is, of course, when the staff come back, or if something has happened, we allow them to go for a stress management session and we also allow them to go home for at least one week off work and just relax so that their emotional and psychological wellbeing can come back. We will also check on them and see how they are progressing and maybe also connect with some of our colleagues who offer psychological support services. A person can go through those services. We see if by the end of one week or two weeks, depending on the magnitude of the event that has happened, we can give that service to them and by that time, they come back when they are ready and okay. We will keep supporting them until they recover fully and we move on.

As local actors, we are also resilient. When something happens, sometimes we find that when you send the person home, the following day the person comes saying, "If I stay at home, it is more stressful than me staying in the office with colleagues". So we find ourselves working throughout.

Q13 Noah Law: It sounds as if it is discouraging people from coming in to work in your world, but do you find that it is discouraging your close colleagues locally from doing the work?

Anna Tazita Samuel: I can categorically say that it is not discouraging because it is their community, these are our people. These are our own people. If we fear to serve them, who will serve them? Do you see? At the end of the day, we have to. We serve our people in the community who are hard to reach.

Most national local organisations in South Sudan are not really giving up despite all the challenges, all the crises that they go through. They are still committed to serving their community. When given support, they are always there and they are always the first to reach to the ground to support their communities. The challenges we face give us more strength than ever to serve the community.

Q14 Noah Law: I understand. Lastly, you have described some of the support mechanisms in place but do you feel that they are well-resourced enough? Do you feel that you are getting the support you need from partners and your donors, for example?

Anna Tazita Samuel: From a local perspective, working together with counterparts, with the NGO Forum, which has different agents, is the number one remedy to solve urgent crises that happen on the spot. However, in the long term, there is not enough support because at the end of the day, you need resources even for the South Sudan NGO Forum to support you. At the end of the day, you need security personnel who will be advising that, "Okay, today the context is like this. Tomorrow, the context is like this" because the other staff, everybody, are busy with their projects. For example, I am also busy with meetings or with other things. It is very hard for me to be concentrating on security matters for example also when there is no dedicated person.



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Sometimes, with security issues, we are taken by surprise unless we receive a message from maybe the South Sudan NGO Forum to say that there is a security problem, for example in Yei. Yei is a county in Central Equatoria state. If we had security, for comparison like most international organisations and even the donors have, we could get first-hand information. Then by the time the secondary information is coming, when we are already in position, that there is something happening like this, there is already a plan and we can easily save our lives or we can easily evacuate or we can easily have a mitigation measure to that crisis other than waiting until it is now secondary information coming from outside.

It is as if we are working in the dark, which is a very big challenge. That is because, as I mentioned, mostly the donors do not support security for all persons for national organisations. Maybe one thing I would recommend is we would be very grateful if donors will support security for all persons for local organisations.

Chair: Mr. Dennis, I think you wanted to say something.

Steve Dennis: Yes, and I hope you do not feel that I am overstepping, but I spent a year and a half in South Sudan in Jonglei province, so I think I can say this with some authority. I want to emphasise some things that Anna brought to the room here.

You were talking about when an insecure situation arises. Just picture yourself in a small village, gunshots go off, then more, then your dinner stops. People see people running. You get what you can and you start running away from the gunshots. Anna is probably thinking, as a leader, "Are my staff safe? Are my family safe?" a burden that a lot of our local staff live with.

Then fine, you are out, people are safe. The situation has gone away. Then to realign and as a leader of an organisation, to focus on the objectives of the organisation, to make meaningful lifesaving improvements to people's lives, lifesaving interventions, is a hard skill for somebody to go through. It does not come by coincidence.

I think the resilience of a lot of people is one thing, but there is resourcing that. This is donors looking beyond just the project but funding the organisation and for these elements of increasing the capacity to manage one's stress through those things. Your heart goes through your chest sometimes when the gunshots are too close. To manage that, set priorities and get through and then the next day have a staff meeting, "Is everybody okay? Let's focus. How is our quarterly report going?" is a high skill level that people like Anna go through.

Q15 **Chair:** I will come back to you, Anna, but do you think, Mr Dennis, that Government donors like the FCDO or other donors could do more to support the safety and wellbeing of staff delivering UK aid?

Steve Dennis: Yes, I think there is an opportunity on the three elements of that. One is accountability has to be expanded to look at aid organisations, their accountability. Secondly is comprehensive post-incident support. A coma? We do everything for them. Heavily



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traumatised? We have to do a lot for them and we are not; we are failing there. Thirdly, just as in the prevention of sexual exploitation, fraud and collusion, in the proposal time, asking about staff care, asking about incidents, that is there to get guidance. There are interagency security forums that we know of that have great advice on these things. The knowledge is out there and the insights are out there.

As well, I am sure Anna would welcome anyone from this committee to visit, to see it themselves, to ask these questions. I think that from this distance you do not smell the reality as well as the majority of the aid workers are experiencing there.

Sorry, none of what I am saying has any differentiation as to where a person is coming from, internationally or locally. Reasonable measures, foreseeable risks is for local or international.

Q16 Chair: Anna, is there anything you'd like to add to that?

Anna Tazita Samuel: Thank you. I wanted to add to the question you asked Steve. I strongly feel that donors like FCDO can do a lot. For example, I just want to give an example to this House that from 2021 to 2024 we have had projects funded by the FCDO through the CSSF department and through international organisations like Saferworld and Women for Women. That fund was a flexible fund supporting women's rights organisations in conflict-related areas. In that fund, we were allowed to do anything with that money and because of that money, that grant that we got from the FCDO, the flexibility, we were able to evacuate one of our staff from a very dangerous place, even out of the project location.

That means that when donors give money for projects, it should be flexible, there should be flexibility that the local actors will be able to use that money beyond the project objectives. That really can strengthen the institutions, save lives, help reduce stress management and we can reach very many people, save the lives of very many people, and we can improve the delivery of aid. That also comes with the proper accountability for the money that is given to local actors to implement through intermediaries.

Q17 Sam Rushworth: Steve made a very interesting point that sparks a question. In your experience, do you feel that there is a difference between the way that local and international staff are treated by an international NGO for risk?

Steve Dennis: Yes. Of course I will say yes. There is often differentiation, of course. Sometimes, if a risk assessment is not done properly, the assumption would be, "You are from here, you know the risks better. You can do it" whereas internationals might be pulled back, whereas the opposite might be true. I have gone forward where people from that area actually are more targeted and that is an inappropriate risk thing.

Also, on post-incident care, the ability to navigate systems might not be quite so easy. I had many more safety nets than my colleagues who were



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locally employed, and many other resources to forward my grievance to, asking for an independent review, many, many more.

Yes, the areas are different, but I think proper risk assessments are important and inclusive risk assessments. How do you feel about that? Generalisations are dangerous in a lot of ways, yes, but I really want to hear from Anna as well on this.

Anna Tazita Samuel: Yes, thank you. I think I will not really say much apart from that what Steve has said is correct. In our typical talk in the context of, let's say, east Africa or South Sudan, international staff have more safety packages than local staff. Even if they work in the same institution, in most cases they are not treated the same, so it becomes challenging. For example, when crises happen, if there is an evacuation, it is always the internationals who are evacuated first. Then the nationals are left to mitigate around with the conflict that is happening, and yet it is the same contract that is signed. I feel that sometimes—80% of the time—it is unjust.

However, of course, as Steve said, it depends on the context. Even in South Sudan, there are areas where specific individuals cannot go, even if they are South Sudanese. They cannot go and operate in that location. If they go there, it becomes more risky for them, so their risk package is also different from another South Sudanese from another area to go and work in that location.

Sometimes when we ask, they say, "It is the donor policy. The donor gives more security packages to the international staff than to the local staff", so again the ball comes back to the donor and what they do on the ground. Thank you.

Sam Rushworth: Thank you. I appreciate that.

Steve Dennis: One last part of that, in a conflict often people not from one side or the other can cross the frontline and that is an important thing, or can say something, whereas somebody else from that area cannot. But again, risk—knowledge is important.

Q18 **Monica Harding:** Do you think that the impact of cuts to USAID and also British assistance will impact your security or the security of aid workers, in that the efficiency savings will be such that they will want them to go into the programme rather than the security of aid workers?

Steve Dennis: It has thrown the whole industry into turmoil. For people to get back into a steady state and then figure out the nuances will take some time. I think that there will be a lot of problems in this turbulent time until we get back to a new normal.

I hope that the concept is that when you do not have a lot of money you invest in better risk management, so there are fewer incidents, and less post-incident care. When you are doing post-incident care, it is better so that you do not have false starts on treatment and you treat things so that they are not permanent and you do not lose an experienced aid worker and have to recruit another one at a lower level of experience and figuring things out. I hope that is a concept that floats to the top of this



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discussion. But what is happening is horrible, first to our beneficiaries and then, yes, to safety, absolutely. There are many impacts of that, for sure.

Sometimes, staff care is considered a luxury or a thing on the side. It is not. I have ended my field career. I do not work in the field any more and I can run good programmes. I used to. There are just some things that I cannot do any more. It is a shame that this resource is out of the game. You have to train somebody else up and that is expensive.

Q19 **Monica Harding:** Thank you. Anna, is there anything you wanted to add to that?

Anna Tazita Samuel: The cutting of funding from USAID and UK aid has affected us a lot, especially national organisations. One thing, right now: as we are struggling, as I talk to you now, my staff are in the field trying to explain our position that we are not able to deliver these services to this community because the funding has been suspended or has been cut. It is a whole lot of struggle.

The community does not understand what is happening outside. What they know is that there are Governments outside supporting them, because they are refugees, returnees, and because also the current economic situation in South Sudan is severe. People look up to the angels or to the aid that the Governments support the community with. With the cut, right now we are facing a lot of security risk from the community. That is one thing.

Another thing is conflict between the community and the institution. Right now, as I said, I have my staff on the ground explaining. At 1 pm, they are still explaining themselves. We are explaining our position that we cannot offer this service. They are asking why. They are saying we have hidden their money. They come to the office and say, "This project, we need the money. Why is it not going through? Why are you not coming to us these days? We are dying. Our children are dying."

It has put us into a very big position of explaining. When you say that London has decided to cut the fund, Washington has decided to cut the fund, you are speaking a language that they do not understand, you see. It is a very dire situation at the moment for local actors like us. We are just trying to mitigate, trying to balance between the realities and assuming that things will change, but the reality is that funds have been cut.

In the past, we were at first jubilant that if the US has cut their fund, the UK aid is there. UK aid has been supporting South Sudan for quite some time and a lot, really. Now when we also saw the news that UK aid has also reduced the funding or cut the funding, it really killed most of us, if I can use that language.

You just cannot imagine the next day what to say to the community that is coming, walking into your office and asking you questions and also sending staff home because, at the end of the day, you do not have salaries to pay somebody. You send somebody home who has children, and this is the only job the person is doing with the current situation in South Sudan. Even, like some of our colleagues in other organisations,



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staff want to commit suicide—I am sorry to say this—because they are sent home.

There is no means, and in the African setting, especially South Sudan, I may have a family of maybe only two children but I take care of 15 children. You see the whole extended family just looking at you, and you are looking left and right and there is nothing. The only means of survival has been taken away.

Right now people are struggling with a lot of issues, especially in South Sudan. It is a crazy thing. We are navigating how to go there. Especially for us who are leaders, we end up having sleepless nights thinking about what to do. Do you send someone home? Of course, they are realities, but what that person does do next is the challenge because the economic and political situation is not favourable for someone to survive without work.

Chair: Thank you very much, Anna, for joining us today and for your contribution to our deliberations. We are very grateful for that. We are very grateful, Mr Dennis, to you for joining us in person. We will conclude this first panel of our evidence and move to the second panel. Thank you very much indeed.

Examination of witnesses

Witnesses: Tarini Ross, Jon Novakovic and Imogen Wall.

Q20 **Chair:** Can I just check, Ms Ross, that you can hear us?

Tarini Ross: Yes, I can. Yes. I hope you can hear me clearly too.

Chair: Yes, we are happy with that. I think you are aware that we have two people in the room as well as you joining us online. So the questions will move between yourself and the people in the room on the panel. I will begin by asking you if you could introduce yourself, and then I will ask Ms Wall and Mr Novakovic to do the same.

Tarini Ross: Great. Thank you, and good afternoon, everyone. My name is Tarini Ross. I am Head of Humanitarian Programmes at an Indian nonprofit called Humanitarian Aid International. We also represent a coalition of 22 grassroots organisations in India called LOCAL. It is a non-financial peer support platform to strengthen the frontline response mechanism that includes looking at issues of frontline worker safety, supporting mutual aid groups that include community volunteers who are also playing the role of frontline workers. Recently, we undertook a global study on the status and conditions of humanitarian frontline workers and disparities in our sector. We looked at 700-plus frontline workers across 60 countries. That study is available now. Thank you.

Imogen Wall: I am an independent consultant now. I worked for about 15 years in the frontline of the aid world, mostly for the UN, mostly in humanitarian, so frontline, sudden onset natural disaster response. I am now based in the UK and work mostly in mental health. I am a qualified therapist and mental health first aid instructor. In the interests of



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transparency, I am also on the DFID roster, now FCDO roster. I still do some HSOT contracts from time to time.

I am also the founder of an online community for aid workers called Fifty Shades of Aid that has been running for about 10 years and has about 27,000 members. I have worked now for the last few years providing psychological risk management and mental health support services to private clients but also to organisations across the aid sector within the UK and beyond.

Jon Novakovic: I am the Executive Director of the Global Interagency Security Forum, which is a UK-based network of over 130 INGOs. We work to bring the NGO sector together to advance safety and security through collaboration, knowledge sharing and capacity strengthening.

Q21 **Chair:** Can I begin, Ms Ross, by asking if you could describe the threats frontline workers face as they deliver humanitarian assistance?

Tarini Ross: Thank you for that question. I will also be sharing not just our local perspective but also the findings from the study. What we saw is that local frontline actors face risk every day. From the figures we have, in 2023 alone there were 595 attacks on frontline workers; 96% of those affected were local staff. Ironically, less than half of them have any access to basic security infrastructure.

We also alarmingly saw that when it came to evacuations, 40% of local staff said that they were left behind. Other than just conflict settings and the risks of armed groups and armed violence, we are also seeing that the risk expands to climate-related disasters, including health risks, because a lot of the frontline workers that serve affected communities are also exposed to the same risks of poor living conditions, poor infrastructure and limited access to support.

Local organisations particularly do not get the resources and support maybe their INGO counterparts get. We are seeing a lot of overworked, understaffed organisations because of resource constraints. Now we are seeing globally the trend is towards fewer resources for critical humanitarian support. Even with mental health, 78% of the frontline workers we surveyed said they were suffering from chronic stress and PTSD. Less than 15% had access to mental health support by their organisations and employers.

Specifically for our context and the local members we work with, the main issues they are also dealing with are income insecurity, job insecurity, and almost no social security coverage. We have people who are on the frontlines risking their lives, but also have to think of their own basic survival and how they will manage to feed their own families.

We have a lot of local colleagues who are doing two jobs. One is just based out of their passion, serving communities, but they also have to do something to earn an income managing their own costs. For social security, we saw that only 12% of frontline workers had any kind of life insurance, disability insurance. Looking at it from a gender lens, one in three female aid workers were experiencing sexual harassment or assault but had very limited support structures to deal with that. That is also



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something I think that we heard from Anna and Steve, just reinforcing it with the figures that came out from the study.

Q22 Chair: What challenges do you face in trying to support staff recovering from what they have witnessed and experienced?

Tarini Ross: There are several challenges at several layers. One is that a lot of the partnerships that local organisations have are with INGOs and intermediaries. We are seeing that they are not really partnerships and are very inequitable in their structures. Local frontline workers are treated as cheap implementers or just delivery agents when it comes to aid, so they do not get the support costs.

I can give you one example. In covid, when we were responding ourselves and our frontline workers were dealing with their own health risks but also we were seeing lockdown conditions and the health system itself struggling to cope, we worked with one of the biggest INGOs and we asked, "Can we make some allocation for at least operation costs, let alone safety, security risk?" They said they had no budget to share with local actors, but ironically, they had a budget to send two professional photographers to cover their communications and visibility.

For us, it is an issue of prioritising whose lives matter most, and what we are seeing is local frontline workers are being treated as a dispensable workforce. In these partnerships also we do not get security budgets. We have to dip into our overhead if we get it at all. We have been trying to see if we can have a model where, as local actors, we can support low cost/no-cost solutions to frontline workers.

That is what we did under our local coalition. All frontline workers in our coalition, irrespective of whether they were local staff, whether they had any staff contract or not, or even if they were community volunteers that were engaging just for one week for aid distribution, we covered one year of accident insurance for them. We were able to do that at a very low cost. It cost us just \$14 to get a cover of 5 lakh Indian rupees. We are also asking and encouraging local actors to prioritise that, that we can cover it for one year but next year demand it from your donors, your partners, to include.

Q23 Chair: You have already made some reference to it, but what is the difference between the threats that men and women face?

Tarini Ross: For gender-based violence, as I mentioned one in three female aid workers reported facing issues of sexual harassment or assault. We have a limited support infrastructure for that. For instance, with local organisations, because we do not get operation and overhead costs, a lot of us struggle to even have HR personnel full time and because we do not have that, we do not even have proper systems yet. There is not much investment in staff welfare, staff safety, in dealing with sexual harassment. That is one particular issue that comes up.

As a local consortium, we pooled HR support for our local members. Instead of 22 organisations struggling to manage budget salaries for HR people, we can provide centralised support at least to share policies with each other, share support, resources, linkage, whenever that is possible



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with each other. That is how we have been dealing with it without any separate budgets to deal with such situations.

- Q24 **Chair:** We are hearing you very well, but the picture is not working too well in broadcast quality. We will move to sound only for you. We can hear everything that you are saying, but we will have audio rather than visual because the picture is not good for broadcast quality. I hope that is okay because I have a further question, and then my colleagues will have further questions for you.

What does what you have described lead to with the challenges of delivering the aid that you are looking to deliver?

Tarini Ross: One thing specifically we are seeing is more and more issues of brain drain. One in five on the frontlines said that they were thinking of quitting the sector altogether because of all the challenges that they have to face just for survival. Conversely, we see that it is community volunteers who take up this role. It is active youth from the communities, members of sports clubs are also playing the role of frontline workers. They remain committed and continue working in very hazardous situations. The guidance for withdrawal or evacuation does not even apply to them because they are from the community itself. Where would they go? That would be like displacement.

One thing we are particularly seeing is, even with local organisations we have had to prioritise community needs sometimes over the safety of staff because resources are so limited. We are trying to ensure that the maximum reaches communities but that is also very challenging. It is our responsibility as frontline organisations to ensure we are doing as much as we can in our duty of care because we cannot expect frontline workers to deliver quality aid unless we are taking care of their other needs. We are not just expecting them to deliver aid; we are expecting them to support community-led initiatives to address the conditions that are creating vulnerability or sustaining conflict. We are expecting them to do much more than that.

I think one of the main challenges is that if we lose these frontline workers we have to go back to hiring other people, retraining them. That is one of the most critical challenges we are facing.

- Q25 **Monica Harding:** I want to ask a question of everyone and I will start with Ms Ross. In your experience, how responsive are the donors and INGOs that you work with to the security and welfare needs of organisations?

Tarini Ross: With donors, unfortunately, we are seeing that this is not a priority. Security support tends to be tied to project-based funding, which is very short term. It is challenging that we are not just looking at financial support but even going beyond that, because risk does not start and stop with projects' start and stop dates.

I think that is one place for donors to look at, not as an additional cost but as an investment in the quality of aid that is being delivered in ensuring that there is no disruption in service delivery when it comes to critical aid and also looking at longer-term issues.



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With INGO partners, I think the model has become a business model. We are dealing with an aid industrial complex where everything is monetised, so the same pattern is being replicated even with INGO local organisation partnerships. The priority, when it comes to security risk management, becomes training but training without any resource allocation for local organisations to take that training forward.

As we mentioned, a lot of security resources exist but right now are confined to international frontline workers or expats who have been deployed. The duty of care from to INGOs is not always extended to local and national actors. That is something we are challenging, even beyond local partners to community frontline workers, community volunteers who are engaged and also playing the role of humanitarian frontline workers.

Imogen Wall: From my notes, the question was about donors and INGOs and how responsive they are to risk management. It is a very big and broad question. I entirely endorse everything that was just said. I am going to say something slightly different.

First, you can ask that question of the different levels within an organisation. My experience is that you often find very good managers and very good team leaders within organisations who will go above and beyond and out of their way to support their staff and take their pastoral responsibilities very seriously, even when an INGO or the lead organisation does not have that within their mandate. A lot of the best work is done in these grey areas. It is personal initiative.

That is not to say that acknowledgment at a higher level and the funding that all my colleagues here have talked about is not important, because it absolutely is. But a lot of this is about attitude and support and shift, particularly at managerial level, and equipping people who are very concerned about their staff and work extremely hard to take their pastoral responsibilities seriously, making sure they are equipped to deal with distress and trauma rather than finding those conversations frightening and difficult and to be avoided.

The other challenge, to break down to your question, is to take the concept of risk itself and how that is fundamentally changing and very, very fast. Mr Mundell talked about frontline workers a lot, and that is classically how we understand risk. It is people in conflict environments who are in the field. Historically we have become quite good at managing that risk. We do hostile environment training and have conversations like this; it is at least part of the discourse. Certainly in my world of psychological risk management, that profile is fundamentally changing, particularly being driven by Ukraine and Gaza. The consequence of digital exposure to content from war zones means that risk can now be anywhere.

If your job is to monitor what is happening on the frontline in the West Bank right now, you could be sitting in Washington, Nairobi, New York, Geneva. If you are looking at that content eight hours a day, you will be impacted by it. It is called vicarious trauma and there is significant clinical evidence for many other sectors, particularly social media and journalism, to show that that is a risk on a par with being attacked.



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What happened to Steve—and I have known him for many years—was awful and it does happen and those numbers are increasing. There is no question about that in the data, but they remain rare and trauma is a rare experience. If you look at a study from 2018 that asked aid workers what they found stressful about their jobs, what was impacting their mental health, only eight out of 200 mentioned traumatic incidents.

Traumatic impact comes, from a trauma point of view, increasingly from vicarious trauma and exposure, but it primarily comes from the way that organisations are run and the way that staff are interacted with. There is now significant data to show that in the aid sector. If you ask people, that comes top of the list: what makes our lives difficult?

I took the liberty in preparing for this by going to my community and my network and saying, "What do you want me to say?" because I do not represent an organisation. To quote, "In Ukraine, several of us noticed that the internal functioning within the organisation was making people feel worse than the shelling and the bombing. It was the lack of institutional support that did the damage."

Ms Harding, you asked earlier about how psychological suffering is regarded. To quote another colleague of mine, "After an intensive leadership role for two years, I turned down a new role because I said I needed a break. Six months later I applied for a different role. HR team informed the hiring manager that I might not be stable because I had turned down going straight from one intensive response to another with no break. Rather than be encouraged to and supported to take breaks between leadership roles in humanitarian settings, this was weaponised and notified in my personnel file."

The stigma remains huge and the stigma remains not a matter of fear. It remains a very clear personal risk assessment about the implications of disclosing. This is, in my experience as a therapist, why people do not talk about this subject and why they do not disclose. Instead, as colleagues have already said, they leave the organisation and they leave the sector.

The impact on the quality and retention capacity of organisations is very severely impacted for reasons that are entirely avoidable if they were discussed and managed, because a lot of the risks I have just described can be managed. Until we expand our understanding of what risk is, and as colleagues particularly from the field have talked about understanding what risk mitigation actually looks like when you take a broader understanding of risk, I do not think we will get beyond discussing what happens in the very small number of incidents where something obviously traumatic has happened.

Monica Harding: Let me come back to you. If you could just come in, Mr Novakovic.

Jon Novakovic: I think, usefully for you, I am going to give you a third perspective. I might even step up a level. I think this is a particularly useful question given that the UK is one of many donors that are pushing



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to deliver 25% of aid through national organisations. I think we are at 5%, something like this, globally.

It is important to understand the delivery chain at a very basic level. You have the donor, and then typically they will have a contractual legal agreement with an intermediary, which is typically an INGO—Oxfams, World Visions and so on. Then there will be separate legal agreements with, say, the INGO and a national NGO, like Tarini's.

What is happening between them is generally what we would talk about as risk transfer. A donor will not accept liability for anything that is happening down that chain. The way that the agreements between the donor and the INGO are framed typically affects how the INGO can be responsive to the needs of a national NGO. At the end of last year, we surveyed our membership and 60% of the INGO respondents said that they struggled to allocate security resources to their national partners due to the donor restrictions, the terms and conditions in the paperwork.

When you have a situation like that, it does not matter about your best efforts and so on because then lawyers get involved and they start saying, "Well, if you do X you might end up having us absorb liability" and then everything gets chocked up.

I think that there is a lack of donor recognition of the partner-specific security needs, and it would be a rarity that you would have direct dialogue. It would be a welcome rarity, but a rarity none the less, of direct dialogue between a donor representative and national NGOs to understand their risks and how they need to operate. Usually, again, you have an intermediary with the INGO.

Donors can be more responsive to the security needs of national NGOs by maybe taking a step back from always thinking about, "How can we just push more money down the chain?" As Tarini said, a big part of the issue is the grant-based, project-based nature. In between the projects and the grants the risks continue, and they have an organisation to run. If the security funding, such as it is, or the overheads are restricted to those, it is difficult to manage your risk to build up your long-term capacity, which is what INGOs have done over the last couple of decades. They have gradually built up their security capacities.

Rather than simply look at what we can do and what donors can do through that lens, and there is progress to be made, it is also about starting to look at how can national NGOs be treated more like peers of INGOs, simply another part of the system rather than the bottom of the chain.

Q26 Monica Harding: Do you have any examples of good practice where that is done well?

Jon Novakovic: There are a couple of initiatives under way at the moment. A number of my members are working on those. There is a representative of the World Food Programme in the observers here, who is working on some new initiatives of different ways whereby the capacity of national NGOs can be built, whether that is around access to shared resources.



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I note that Tarini mentioned the concept of pooled resources for HR and so on. There are some initiatives under way there on pooled resources, which are usually housed in the NGO co-ordination forums. Anna mentioned the South Sudan NGO Forum. These are quite good avenues where you can direct shared resources. We sent somebody into Lebanon in November last year when there was the peak of the crisis there, who was made available to work with national NGOs and INGOs on their security contingency plans and so on.

These shared resources, especially given the current global funding constraints, are definitely a positive way forward.

Q27 Monica Harding: I am going to push you and turn the question on its head. You have already alluded to what I am going to ask you, but whose responsibility is it to ensure that aid workers are protected and aided in recovery when things go wrong?

Imogen Wall: As I understand it—I am not a lawyer—UK employment is very clear that there is a duty of care to provide a safe workplace and that workplace needs to be safe physically and psychologically. Nobody has tested that in this country in the way that Steve Dennis tested in his case with NRC, which went through the Norwegian system, but I am genuinely really surprised that nobody has done that because there is that very clear duty of care.

There is straightforwardly a legal responsibility if you are employed, and that is quite aside from the moral and ethical responsibility. There is also a very pragmatic case, as I have said, that if you do not look after your staff you lose them, they leave. There is a pragmatic argument there from a leadership and an organisational perspective.

To answer your last question in part, one person I spoke to, as part of my thinking about giving evidence today, told me about an organisation they had worked for who sent them on deployments as an international staff member to a remote part of northern Nigeria on a difficult assignment. While she was there, the CEO sent her regular messages asking if she was all right. When she came back to her base station, they sent her a care package to make sure she was all right. That was a small organisation and the work was very difficult. She stayed with them for four years longer because she felt cared for and supported.

I can quote you other examples of clients I have had. One who was, let's say, forcibly evacuated from South Sudan in a siege situation that took about 10 days to resolve. It is a client and I have her consent to tell this story. The only time her organisation expressed any interest in what had happened to her was when the IT department got in touch asking for written confirmation if she was unable to return her laptop. There was no other debrief or discourse.

We can sit here and talk about technical, funded, supported initiatives, but a lot of it, in my experience, comes down to very basic things like being asked if you are all right.



Q28 Monica Harding: Returning to that last example, and thank you for that, where does accountability lie? In another organisation there will be some accountability for what happened.

Imogen Wall: She was an employee of a UN agency, and the UN agency system obviously is slightly different because you are outside a national jurisdiction. I think this is genuinely a complex question when it comes to the legal aspect of who is responsible for somebody, but there is clearly a moral and an ethical responsibility. If you pay somebody to put themselves in harm's way, something we choose to do, there is an expectation on the part of the person who goes into that situation that they will not be thrown under the bus if something happens to them. That sense of somebody having your back is so critical for people going into these environments in the first place.

I think it is a complex question, genuinely, and I know in Steve's case that was part of the complexity. I think that you are right, we push risk down the line and we expect, particularly national staff—in my experience there is an assumption that because they are national, they are somehow either safer or they are better equipped to handle risk when the risk profile is fundamentally different, as is the support that they require.

Back to your point about bothering to ask people what they need is helpful. I am a therapist and that works well in the UK. There are many parts of the world where the idea of sitting down with a complete stranger and talking about your most intimate problems is a weird one, and one that frankly just does not fly.

To pick up what Steve said, taking a blanket approach to risk management is to ignore the social and cultural needs of people outside our own, what tends to be a very western framework, of what constitutes psychological risk and what constitutes effective mitigation, which again complicates the question of accountability for sure.

To give an example, I worked in Indonesia after the tsunami and we were quite concerned about the one year on anniversary being impactful because obviously of all our staff were bereaved on multiple levels. The day that turned out to be really significant was the first day of Ramadan when you mark the loss of the dead. There were 13 plus mass graves in Banda Aceh and to meet their religious requirements our staff had to go and carry out the rituals for their lost loved ones at every single mass grave because no one was sure who was where. My very experienced head of office, rather than suggest everybody go to counselling, gave everybody the day off to go and do that and more time if they needed it.

You asked about good practice. I will refer you to the HAG paper, helpfully published late last year. It is psychological care for national staff. They look particularly at Bangladesh and Afghanistan. Picking up on Anna's point about giving people time off, we have R and R usually for international staff and not for local, but that paper records an example of an organisation in Cox's Bazar, which has a policy of offering national staff 2.5 days of paid leave per month to counterbalance the R and R that international staff are offered. That does need funding, mandatory leave.



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In my personal experience, peer support networks, buddy systems—you do not need paid psychologists but people who have some mental health first aid training, psychological risk management training, who can run informal debrief, end-of-day check-ins, the things that doctors and medics in this country do as a matter of routine. A little bit of training can go a long way in those environments.

Q29 Monica Harding: You talked very much about direct dialogue and acknowledgement within the donor country, with the national NGO. In the face of the cuts, training is often the first thing to go, as is dialogue. How do you feel about how the cuts will affect what we are talking about?

Imogen Wall: I am glad you asked that question. Do you want to start?

Jon Novakovic: I want to quickly touch on your previous question about where responsibility lies, because it is very important in how we approach security risk management. The first level of responsibility is around the enforcement of international humanitarian law. Member states have the highest level of responsibility. To sum it up, it is that aid workers will not be targeted and aid workers will not be impeded. That is a political issue. That is not for NGOs to deal with. We can shine a light on it and so on.

But it is relevant pragmatically because the more or less that IHL has observed is the more or less burden that then NGOs have to absorb to keep aid workers safe. When there are low levels of compliance with international humanitarian law it becomes more resource intensive, more risky and more complex. This relates to member states but also non-state armed groups, who are also obliged to comply with IHL.

I think it is also worth noting, before I come to your question, that donors are not incentivised to take risk by their own self-imposed rules because they transfer liability, by and large. That is not to say that they cast us into the wind. There are great initiatives that donors do undertake. There is no real incentive at a practical level, apart from maybe reputation or risk in the success of those programmes, but there is not necessarily an incentive beyond that. There is no moral incentive maybe to keep aid workers safe.

On how the cuts are affecting aid worker security, over the last 20 years, the system to keep aid workers safe, the professionalisation of NGO security, has advanced significantly. Then it had another bump after Steve's case because suddenly that really focused the minds of boards of directors and trustees everywhere.

In the short term—and let me preface this by saying that NGO security generally works on the basis of acceptance: we do not go in with guns and guards and gates any time we can avoid it. Guns especially, armed escorts are the absolute last resort. We want to be accepted with the community, understand the community, work with them to identify risks. That is important to understand because that is directly affected now when there are large-scale immediate aid cuts, such as the US has implemented. Slightly less acute is longer-term aid cuts that are being highlighted by a number of western donors.



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In the case of the US you are having to have conversations with communities saying, "We promised that we would do X. We are not going to do that any more." Then that trust is broken, and it is very time-intensive and resource-intensive to build up again should somebody want to work there.

NGOs are having to reduce security staff in highly sensitive areas like Yemen or Sudan. Security is what allows those aid programmes to get where they need to go and to get to the communities they need to support. We are seeing issues such as with what we call UNHAS, which is the UN's Humanitarian Air Service. In large countries, conflict-ridden countries where you need to be able to get safely from point X to point Y, the UN puts on helicopters, fixed-wing aircraft and so on. In a number of countries, the funding for that is threatened and I think is not going to last until the end of March. There are three particular countries where that will not be happening.

Finally, in addition to all of these aid cuts, you have the narratives that are coming with them, and these are not just contained to US funding. This is affecting British funding. There is the narrative around NGOs are corrupt, NGOs are fraudulent. That is already being quoted back to NGOs negotiating access in Yemen by armed groups. In Niger, anti-NGO narratives have coincided with the military Government expelling two aid organisations. There is a number of other examples I could give you where authorities that do not welcome necessarily the presence of pro-democracy organisations or humanitarian organisations are using this as an opportunity to push back and close civic space even further than it was already closed.

Imogen Wall: I could not agree more with any of that. It certainly overlaps with what I have been hearing from people on the ground and in my community. You are right; training is often the first thing to go. This is despite the evidence base being really clear. There is very good research from the private sector. There was a paper that the Government took action on for the UK policy back in 2019, written by Deloitte, about investment in wellbeing, which put a return on an investment figure—for every pound you spend on wellbeing and psychological support services for your staff, you get four back in productivity. I like quoting that because that is not an advocacy group; it is very hard-nosed private sector analysis.

You can cut the training but it has consequences; you lose people and you put people directly at risk. Given how cost effective a lot of these investments are, cutting them seems to be a very odd form of economy.

When I asked people what they wanted me to talk to you about today, job security came top of the list. I think it is an issue that most of your written submissions came before current events in America and here in the UK, because the landscape is unrecognisable from where we were. I have colleagues who are realistically and fairly describing what is happening as an extinction-level event across the sector, what that is doing at every single level.



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I have to relay to you the feeling against the British Government among my colleagues. We expected it from Trump; we did not expect it from this Government. The sense of betrayal is very acute. I think you have a very significant job ahead of you in winning back the trust of the NGO community and that trust, as you said, is easily lost. It is very hard to win back. You might not hear it when you are talking to organisations because they need your funding, but that is absolutely the feeling. Can we trust them?

Sam Rushworth: Just to be clear, we are not the Government.

Imogen Wall: I completely understand that. I am placing this on the record on behalf of the community that have asked me to do that.

The challenge ahead of winning back the trust on a macro level I think is very significant but also crucial. It can be done. There is a community out there seeing opportunity in the cuts, particularly in possibly creating ways that work more directly with local communities. That opportunity conversation is there to be had. But if you are asking about the risk then, like I said, if you are going to go into hostile environments you need to know that somebody has your back. If you think you are going to a hostile environment with a donor who will change their mind about their funding with no warning, that is a very significant part of your personal risk calculation about getting involved.

The final point I want to make is about politicisation and community acceptance, because that narrative, particularly coming from the American Administration of the tying of assistance to explicit political aims, is frightening people who are on the frontline, particularly in conflict-affected countries, who are saying things like, "What happens when next time I am in a community and they say, 'But you are not here to provide aid independently, you are here as part of a conflict effort essentially'?" That is a very significant fear among the people in the community that I have spoken to. The instrumentalisation, moving away from the core humanitarian principle of independence and neutrality, has real practical dangers attached to it for those on the frontline.

Q30 **Monica Harding:** Can I just push you on this dismay with the British retreating; how widespread is that?

Imogen Wall: I have just spent five weeks travelling around south-east Asia. I was in East Timor three weeks ago, sitting with—he was British, by chance—a guy who was running a large infrastructure project to bring a sewage system to Dili, which it has not had. That is USAID funded. He was sitting there with his head in his hands saying, "I have trained all my engineers—we are ready to go, and now the whole thing is paused". There was an unspoken sense around the table, and I heard it from other people, this was in the window, that at least the Brits are not going to do that, and then they did.

The terms that have been used to me, and you can see them if you look at the Facebook group I run, are terms like moral injury, a feeling of betrayal that a party that has historically been very supportive, and indeed the architect of DFID, is now not only cutting, which everybody



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understands—a lot of my colleagues working on it in Ukraine entirely understand the need to support Ukraine. But there has been an apparent lack of consultation or warning.

I entirely endorse the Minister's letter of resignation on this. The statement that we can continue to deliver what was promised with the 50% effective budget cuts—nobody buys that. To see that and think this is a Government that can be quite so misplaced in their assessment of what it is possible to do with available funding—there are multiple parts to it. It is not just the lack of funding, but the way it was done.

I know you are not the Government but when you are talking about the psychological impact of cuts, you cannot leave that part out of it. My heart goes out to the colleagues in the field who are having to go to communities and say we cannot deliver any more because—you have seen it. If the trust levels are not there, people will think that their organisations are keeping the money, that they are being lied to and the security risks then become significant, the relationship breaks down.

Chair: Noah, I think that Mr Novakovic has answered some of the questions you had for him. If we could bring in Ms Ross again, because she has not had the opportunity to contribute for a while. Ms Ross, are you still with us?

Tarini Ross: Yes, I am.

Q31 **Noah Law:** Going back to a point that Mr Novakovic touched on, there have, at least prior to the situation we are in now, been improvements with donors, particularly the FCDO, and the way that safety is handled. Are you able to speak from your experience to some of those improvements and also why there is further space for improvement?

Tarini Ross: Sure. On improvements, I think it is good that we are still having conversations about it, especially with the IDC giving space to local actors to share it from their perspective. I think that is brilliant, and something that maybe other Governments can be encouraged to do.

On what more could be improved, there are so many things. The point I want to re-emphasise is that on duty of care and liability, we want to look at it a bit differently from the perspective of the rights of frontline workers. They are not just volunteers; they are workers as well. Occupational safety is a worker-right issue.

For us, we do not even look at it as formal staff who have contracts with us. It is anyone engaged in the work we are doing on the ground, which includes community volunteers. I think that space for improvement is to look at security risk management and duty of care more holistically about who are the people playing the role of frontline workers on the ground and how we can extend our responsibility to them. Every layer in the chain that Jon explained has a responsibility that includes local and national actors as well.

On the rights part, one of the recommendations from our study is that can we come up with this bill of rights for frontline workers and look at it from that perspective; how can that be supported? Other than that, as



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with the eight cuts that are coming in, bigger organisations that had ICR costs available to them from donors were able to build up reserves. This same benefit is not available for local organisations on the ground, so they do not have reserves to manage right now with this sudden decision in keeping on staff and using their reserve funds to do that.

Something that was committed many years ago, even the World Humanitarian Summit, but maybe a refocus on quality funding that includes ICR sharing. That is something that donors can maybe include in their budgets to give flexibility and also push the intermediaries of funding to include that and share the same with the local and national organisations they partner with, who are actually on the ground.

The other recommendation was: can we come up with a global fund? Someone said earlier about donors to pool in the money for frontline workers to access in case they face any incidents, and I think GISF is already at the forefront of that. They have been able to put together that fund, and we would encourage other donors to look at that.

On donors also investing in the existing pool funds that are there, what we encouraged is that in this investment, if you can push for at least some security risk allocation within those budgets that would be available as a pool and also invest in local intermediaries who are doing—even with aid cuts, they do a lot of work non-financially. It does not stop the work in case such funding decisions are made. This peer support is available non-financially as well.

I think Anna or someone mentioned about having security personnel at local organisations. We understand donors may not be able to do that for every local organisation, but you can do that with local consortia and local intermediaries that can maybe pull the support and extend it to all their members. GISF is supporting us to do that as well and access that technical expertise.

Lastly, it is for us at all levels to have a perspective change. With security, risk management, our priority is not just training. Although that may be cut, we are seeing that if training is done—is given without resources to take the training forward, post-training, we are not able to see the outcomes of it. For us to look at it beyond training, beyond funding cycles, to look at non-financial support, that even donors can think of considering and supporting. Again, looking at this expense not as an expense or a cost but an investment in the frontline workers who are risking their lives almost every day to deliver life-saving aid.

Q32 Noah Law: Thank you, that is very clear. Perhaps, Mr Novakovich, you could very briefly speak to some of those allocative decisions around how the cost of insurance, for example, influences your members' deployment.

Jon Novakovic: Yes, absolutely. Insurance is one of those necessary evils in life, but it can also be an enabling function. I think that the insurance question is one of the most black and white examples of how nationally-employed staff are treated differently from internationally-employed staff. Even the employees of INGOs who are nationally



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employed will not necessarily receive the same level of insurance coverage that international staff will receive. This is a market problem, an economic problem.

I know the UK Government's position is that they want to use more market-based initiatives. You can do that not just to drive change. You can also use that to drive a better enabling environment. I think that that partnership between the NGO sector, the private sector and Government to create the opportunity for appropriate level of insurance coverage, which is then available for national NGOs and nationally-employed staff of INGOs, would be an absolute game changer in how the duty of care is delivered to aid workers.

That is just one of the potential improvements that the UK—there is a space at the moment that the US was occupying for the UK to emerge as leaders in aid worker safety and security, without a doubt. It is one of those great wins where it is a low investment, high exposure, high impact situation. Scaling improvements like insurance, support to enabling structures—these are the co-ordination forums that have been referenced—do not cost very much money, yet they are the pathway to the efficiencies that everyone is looking for now. Everyone is saying, "How do we do more with less?" Yes, people are a bit sad about some of the current decisions, but the UK Government have a lot of reputation still and would be a trusted figure to get behind on some of these new initiatives.

Q33 Sam Rushworth: What effect, if any, is the increase in aid worker casualties having on the willingness of staff, local or international, to be deployed in insecure environments? That is to either of you, but we will start with Mr Novakovic.

Jon Novakovic: Risks are not new. There are specific environments—the occupied Palestinian territories, Sudan, for example. It is generally places where the main risks are coming from member states that, to be honest, NGOs are very careful in how they operate there anyway. Tarini will probably have a very good insight and Imogen, who speaks to aid workers. I will defer to them on that question.

Imogen Wall: I think that there is another way to look at it, which is that people in the aid sector are extremely motivated, as Steve said. Speaking personally as someone who has deployed into very extreme environments, being there and seeing what you are a part of is hugely rewarding. There is quite a complex understanding of what is a risk environment is also a very rewarding environment to be working in. I personally went through burnout, for example, after a year in Haiti, but Haiti was a fascinating context in 2010. I really enjoyed my time in the country. What did it for me was the office was 50% understaffed the whole time I was there, so we were working outside our area of competence.

To be a field worker often is hugely rewarding. You see one of the most significant stresses, according to the research available, after organisational mismanagement or difficulties in the workforce is the sense of being unable to assist, being somewhere where it is your job to



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help but being unable to deliver that assistance for political, financial, geographical reasons.

I do not think you will ever have a shortage of people who are interested in deploying or wanting to be part of it, but a big part of the analysis to me is: is somebody going to have my back? That is where the feeling that no one is standing up for you in the public or policy arena, that aid is fair game, and that aid workers—Steve drew the analogy with the military very clearly, that soldiers who go into danger are lauded, given awards, spoken of in Parliament, and everybody is very proud of their work, whereas, we had a Prime Minister in this country who described the aid department as a cashpoint in the sky. Those attitudes to the sense is, “Does somebody have my back? Does someone understand what risks I am taking here, why I am going, what I am going for?” that part of the analysis does matter. Having people stand up for you is a big part of why you would go in.

For national staff, you have had very eloquent speakers and I am not going to speak on their behalf, but the level of commitment and personal satisfaction they get from involvement in their work also is remarkable, especially when they are up against what they are up against in their own lives.

In my experience, when I have been managing staff, I get asked for support training in conflict management and negotiation, the kind of thing Anna was talking about. How do I handle difficult conversations? If we saw that as risk mitigation work or psychological risk mitigation work, you have an extra layer of win for investment in that training. To me, that is a mental health initiative but it is also a security initiative, a practical initiative. It will give you better outcomes as well and measurably improve your deliverability.

Looking for these things, I think, as Jon was saying, that deliver on multiple levels, certainly psychological risk management is not something to be taken and seen separately. Do not underestimate how powerful it is, when you are out doing frontline work, feeling that you are appreciated, whether it is by your manager or by your Government.

Q34 Sam Rushworth: If we turn that question around to the level of NGOs and agencies, we are seeing an increase in attacks on aid workers. I think there is a sense that sometimes there is something quite cynical behind that, which is that if you hurt a few aid workers you will get people to pull out of an area. We have also seen examples around the world where that does happen, where there are no-go areas for a lot of NGOs. Is that something that you are experiencing?

Jon Novakovic: This is a delicate but important topic. There is absolutely a number of incidents of deliberate targeting of aid workers by non-state armed groups, by member states. Healthcare bears the brunt of it, I would suggest. Very good submissions have been made, to that end, on the number of attacks on healthcare and healthcare workers.

The aid sector uses what we call humanitarian notification systems. These are basically a means of NGOs and UN agencies identifying our staff are



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here, or our staff will be here. Usually the UN, as an intermediary, will pass that on to militaries and to member states to say, "Do not attack these, it is under international humanitarian law. You should not attack these." Recently, in the last 12, 18 months, a number of NGOs are not engaging in those.

Q35 Sam Rushworth: They are not doing the de-confliction?

Jon Novakovic: They have a perception that there is even a situation where that information is being used for targeting. That comes back again to this is a tool that works fundamentally well but it can always be improved. The manner in which all actors approach the tool and whether they are using it in good faith comes back to that this is a political situation around the enforcement of compliance with international humanitarian law.

Q36 Sam Rushworth: Do you think we are reaching a point, though, in those situations where some NGOs and agencies are just saying, "Do you know what, we just can't function in this setting any more because we are a target"?

Jon Novakovic: It is becoming far more frequent, I would suggest, that NGOs are facing the question of: can we manage the risk sufficiently or do we not respond and leave communities in need? That is a question that will be asked more and more often. You may see that these are very mission-driven organisations and there will always be an NGO that has a very high-risk tolerance that will say, "Stuff it, we will do it". That is a real risk, that you have harder and harder to reach communities.

We saw in Afghanistan where you would have clusters of NGOs around Kandahar, around Helmand, and they would be around the airport within a radius, "Right, we are just going to work with these communities because we can safely access them, but we do not have the resources, the capability to get to the people in need further out". We talk about these hard-to-access areas. Those areas may expand and the areas within which we can safely operate may shrink.

This is a very big generalisation because every context is so complex and so unique, but if there are fewer resources, that will happen. If there is less compliance with IHL, that will happen. Ironically, a lot of western donors are saying, "We are going to cut our aid budget, but we are still going to respond to the most acute crises". Well, guess what, those are the ones that are hardest to access. That is when there is active conflict, when there are natural disasters, and NGOs are not necessarily going to have the capacity in reserve to be able to respond to those.

Q37 Chair: To bring our proceedings to a close, is there anything further that you would like to say, Ms Ross?

Tarini Ross: Thank you very much. To add on the last point, we are seeing a lot of INGO counterparts have had to withdraw and close or at least temporarily pause, but we are still seeing active community groups, community-based organisations that will continue their work. As Imogen said, it is purely based on passion and service to affected communities that will continue. Of course, now they will be taking more risks because



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they have to also deal with withdrawal of their INGO counterparts, but with or without funding, community response continues. That is what I would like to emphasise.

Chair: Thank you very much, Ms Ross, for your contribution and to our witnesses here in the House of Commons this afternoon. I now draw this evidence session and the Committee meeting to a close.