Policy Framework for CARE International's Relations with Military Forces



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Introduction

The increase in military involvement in the context of humanitarian aid has been a major concern since the 1990s. Since the conflict in Somalia or in the Balkans, several humanitarian crises have occurred in which the military has been directly involved and in which several issues have developed in cooperation between the armed forces and aid or development organisations.

International responses to complex emergencies have increasingly called on peacekeeping and military-led missions, alongside the more traditional and standardized military responses to natural disasters. The members of the CARE confederation often find themselves working in proximity to a range of military actors, state forces and international operations.

This issue became particularly stringent in 2001 after the US-led operations in Afghanistan where humanitarian aid was perceived as a strategic element in "the war on terror".

CARE has very soon realized the importance of the various humanitarian challenges represented by the integration of humanitarian response into an overall military and security concept. Inappropriate interactions or the perception of blurred lines¹ between humanitarian and military actors may undermine aid agencies' acceptance among local populations and parties to the conflict as well as increase the level of insecurity.

CARE also recognises that military forces have obligations related to humanitarian assistance and protection of civilian populations, as established by international humanitarian law and customary law². Under certain circumstances, the military may provide assistance or support relief operations. In such contexts, military involvement in relief operations should always respect the principle of distinction between military and humanitarian operations.

The humanitarian and military actors have fundamentally different institutional thinking and cultures, and the two groups have different mandates, competencies objectives and modus operandi, which should not be confused.

¹ Confusion between humanitarian action, principles and mandates and political action.

² E.g.: Protocol Additional to the Geneva Conventions of 12 August 1949, and relating to the Protection of Victims of International Armed Conflicts (Protocol I), 8 June 1977, Part IV, Art. 51 "Protection of the Civilian Population", Art. 70 "Relief actions in favour of the civilian population", Art. 81 IV "Activities of the Red Cross and other humanitarian organizations".

A POLICY FRAMEWORK FOR CARE INTERNATIONAL'S³ RELATIONS WITH MILITARY FORCES

Policy Statement: Executive Summary

In the past decade international responses to complex emergencies have increasingly called on peacekeeping and military-led missions, alongside the more traditional and standardized military responses to natural disasters. Increased interventionism on the part of the UN, regional organizations and the major Western powers in response to internal conflicts has led to new challenges to military and humanitarian interaction. In both natural disasters and conflict, the members of the CARE confederation often find themselves working in proximity to a range of military actors, state forces and international operations.

The humanitarian and military actors have fundamentally different institutional thinking and cultures, and the two groups have different mandates, competencies objectives and modus operandi, which should not be confused.

CARE's decisions about how it interacts with the military should always be consistent with its principles and obligations. There are *five organisational principles* that are central in defining CARE as a non-governmental organisation engaged in humanitarian action.

- Distinction
- Humanitarian imperative
- Safety and security of staff
- Impartiality
- Consultation

Humanitarian principles constitute the core basis for CARE's ability to work safely and effectively in conflict. While the threats confronting aid agencies are manifold, the safety and security of CARE's staff, programmes and beneficiaries is contingent on CARE's neutrality, impartiality and independence from military operations. Inappropriate interactions or the perception of blurred lines⁴ between humanitarian and military actors can undermine aid agencies' acceptance among local populations and parties to the conflict as well as increase the level of insecurity. The unintended negative consequences of associations between aid programmes and military forces can outweigh any short-term benefits.

CARE also recognises that military forces have obligations related to humanitarian assistance and protection of civilian populations, as established by international humanitarian law and customary law⁵. Under certain circumstances, the military may provide assistance or support relief operations. In such contexts, military involvement in relief operations should always respect the principle of distinction between military and humanitarian operations.

³ CARE International (CARE) comprises all CARE International Confederation members.

⁴ Confusion between humanitarian action, principles and mandates and political action.

⁵ E.g.: Protocol Additional to the Geneva Conventions of 12 August 1949, and relating to the Protection of Victims of International Armed Conflicts (Protocol I), 8 June 1977, Part IV, Art. 51 "Protection of the Civilian Population", Art. 70 "Relief actions in favour of the civilian population", Art. 81 IV "Activities of the Red Cross and other humanitarian organizations".

CARE will strive to develop joint approaches with other aid agencies to civil-military relations.

Definition

"Civil-military relations" (CIVMIL) is the term used by humanitarian agencies to describe the essential dialogue and interaction between civilian and military actors in humanitarian emergencies that is necessary to protect and promote humanitarian principles and to clearly spell out respective competencies and responsibilities.

Purpose

This document provides a policy framework to guide CARE managers' decisions about managing interactions with military forces and their police components. It provides a framework to promote consistency with CARE's values and mission, as well as best practice and principles identified by the wider humanitarian community. The proposed framework establishes a common policy for use across the CARE Confederation and is intended to ensure that CARE's position on relations with military forces is clear to internal and external stakeholders.

Scope

In both natural disasters and conflict, NGOs often find themselves working with or near military forces. This policy is primarily focused on CARE's relations with national and international forces. CARE is present in countries in which foreign national, multilateral and coalition forces operate; including peace-keeping, peace enforcement, integrated missions, and combat operations. While decisions on relations with military forces are informed by circumstances and change over time, this paper provides an over-arching framework and guidance for staff on the ground.

This CARE policy is structured around the following levels of potential action related to civil-military relations:

- Context Analysis and Emergency Preparedness
- Dialogue
- Coordination and Cooperation

Rationale

Civilian leadership is essential to ensure the primacy of humanitarian action, based on needs, over military objectives derived from political strategic goals. The interaction between military forces and CARE is characterized by the need of coordination between all actors in the field and the necessity to preserve humanitarian space.

Normative and Legal framework

Humanitarian principles constitute the core basis for CARE's ability to work safely and effectively in conflict. CARE's decisions about how it interacts with the military should always be consistent with CARE's values and obligations.

Organisational principles

CARE's interactions with the military should be informed by *five organisational principles*. Their consistent application in CARE's operations is central to the ability to work successfully and sustainably in complex and often dangerous environments. Cooperation with military actors must also be considered in terms of short-term and long-term impact and must take into account possible evolution of the political context.

Distinction

CARE must ensure that its identity and activities are, and are perceived to be, distinct from military aims and operations. Policies and operations that blur the lines between military and aid operations may undermine CARE's humanitarian space — eroding CARE's acceptance among local communities

and stakeholders, and thereby turning CARE, its staff, local partners, programmes and beneficiaries into parties to the conflict and therefore into potential targets. For these reasons, CARE should always ensure that any interactions with military forces do not compromise – or appear to compromise – its identity as an independent organisation committed to the humanitarian imperative and not to a political agenda.

Humanitarian imperative

The humanitarian imperative obliges CARE to acknowledge the absolute right to assistance of all victims of disaster, and, constrained only by its own capacity, to respond to humanitarian need whenever it can. This imperative is at the heart of all CARE's humanitarian operations.

Safety and security of staff

The safety and security of personnel is an overriding consideration in all that CARE does. It is all the more pressing in the often dangerous environments in which emergencies occur.

Impartiality

CARE seeks to pursue the provision of humanitarian assistance in an indiscriminate way. Any decision to cooperate with the military on humanitarian response must not compromise, or create the impression of compromising, this principle of impartiality. It should ensure that CARE has non-discriminatory access to all victims.

• Appropriate Consultation

Effective civil-military relations should be centred on appropriate and effective dialogue with the military. Consultation and communication with military actors should be clearly distinguished from, and should not be mistaken for, collaboration or cooperation. Active consultation and communication with other key actors such as the UN, NGOs and INGOs engaged in civil-military contexts is an essential supplement for dialogue with the military.

Levels of civil-military interaction

This policy identifies the three levels of potential action related to civil-military relations: Context Analysis and Emergency Preparedness; Dialogue; Coordination and Cooperation. While context analysis and emergency preparedness should always take into consideration CIVMIL issues, any dialogue or coordination and/or cooperation will only be taken forward once consideration is given to the above organisational obligations.

LEVEL ONE: Context Analysis and Emergency Preparedness

Given the possible role assumed by military forces in response to natural and man-made disasters, civil-military relations should also be figured into all CARE Country Office emergency preparedness plans (EPPs). As such, context analysis and preparedness planning on CIVMIL should be taken forward alongside efforts related to risk management, conflict sensitivity and staff safety and security (as per Country Office Safety and Security Management Plans).

Responsibility for managing civil-military relations resides with CO senior management (e.g. policy and decision making). However, there is also a need for the delegation of responsibility for developing the relevant analysis and support of management decision-making to a relevant member of staff (e.g. Safety and Security Officer or Conflict Advisor).

LEVEL TWO: Dialogue

Effective civil-military relations should be centred on appropriate and effective dialogue with military. CARE's communication with military (and paramilitary) forces should serve

to clarify CARE's vision, mission, values and operational practices. As such, dialogue with military organisations, both in the field and at headquarter levels shall serve to advance mutual understanding. It can help to prevent dangerous misunderstandings in the field. However, CARE should resist attempts by the military to promote shared roles that do not advance CARE's core humanitarian mission. Consultation mechanisms and communication channels should be clearly distinguished from an integration process and/or operational collaboration Forms of communication that blur the lines between military and humanitarian operations should be avoided.

In situations where military forces and paramilitary forces are playing an active role, CARE shall liaise with the military chain of command. Dialogue with the military is an essential element in order to promote agency security and humanitarian access. The objectives of such dialogue are:

- To ensure CARE's overall activity is consistent with the five organisational principles set forth above;
- To communicate on operations and programmes as well as ensuring that CARE can operate freely and independently;
- To voice concerns about policies or actions which may undermine the situation of the civilian population;
- To be informed of any military development, plans or operation that can hamper CARE operations or endanger CARE's staff and/or CARE's beneficiaries;
- To make representations in cases of breaches of international humanitarian and/or human rights law.

LEVEL THREE: Coordination and Cooperation

In exceptional circumstances and as a last resort measure CARE may decide to coordinate or cooperate with military forces on humanitarian affairs, or seek assistance from them. In case of deciding to operate under level three, the request shall be submitted for a formal decision from the respective Lead Member and CI Secretariat.

Potential areas for coordination and cooperation include inter alia:

- Logistical support;
- Securing access to beneficiaries;
- Evacuation and protection of staff or beneficiaries.

Any decisions to work with military forces should be informed by a careful analysis of potential impacts on CARE's obligations as a humanitarian agency. Evaluations have shown that aid can do harm as well as good. There are increased sensitivities and potential risks when the delivery of aid involves assistance of military forces⁶. For this reason, CARE is obliged to account for any medium- or longer-term impacts of its actions.

Adequate information and consideration of the following issues should always inform the decision:

⁶ See also: Mary B. Anderson. *Do no Harm: How Aid Can Support Peace – or War*. Lynne Rienner Publishers Inc., US: 1999.

- All non-military alternatives have been explored and it is determined that support from the military is essential in order to fulfil CARE's mission.
- Short-term and long-term impact on local perceptions and humanitarian access has been thoroughly assessed: Interactions with the military may affect perceptions of CARE and other aid agencies amongst the local population, parties to the conflict, and local authorities. These perceptions will have consequences for CARE's level of humanitarian access to beneficiary communities.
- Potential negative consequences for safety and security of staff, partners and beneficiaries have been considered: Interactions with military forces have implications for staff safety and security, as well as the protection of local partners and beneficiary communities.
- Scale and urgency of humanitarian needs are confirmed.
- Cooperation with military forces does not lead to CARE being associated with violations of international humanitarian or human rights law.
- CARE's commitment to independence and distinction between humanitarian and military operations will not be compromised. Core aspects of independence include: freedom of movement for humanitarian staff; freedom to conduct independent assessments; freedom of selection of staff; freedom to identify beneficiaries on the basis of need; and the free flow of information between humanitarian agencies.

Any decision to work with the military will be uniquely informed by prevailing exceptional circumstances. Managers should continuously re-assess the basis of decisions to engage with military forces in any given operation. As events unfold, new analysis may indicate a higher level of engagement, a modified and more conditional approach to military cooperation, or, as civilian options emerge, a termination of any operational interaction. As the situation returns to normal CARE should revert to its traditional operation mode as soon as possible.

Once coordination and/or cooperation with military forces has been initiated, CARE must always be open to all parties about the nature of its relations with military forces. To this end, when the decision has been made to work with the military in a given emergency, CARE will sensitively communicate its principles on military relations to the military, civil authorities and beneficiaries. CARE will also distinguish itself from those forces at all times. Engagement with military forces should not be considered if this transparency, independence and distinction cannot be maintained.

Promotion of normative approach

CARE shall continue to address the need to strengthen, safeguard and implement international and country-specific CIVMIL rules and guidelines. Aid activities including communication plans and advocacy campaigns shall be informed under the appropriate form by CARE's CIVMIL policy and in particular promote a clear distinction between military operations and humanitarian assistance/development work.

Monitoring

Through its presence in the field, CARE shall monitor within its own sphere of operations the degree of implementation of the above-mentioned rules and guidelines. CARE will take the necessary steps to intervene in case of serious breach of CIVMIL principles, or launch advocacy campaigns to counter initiatives aimed at weakening the capacity of NGOs to act independently.

Mainstreaming

CARE shall introduce effective and appropriate CIVMIL coordination mechanisms and processes at field and international/HQ levels and should as appropriate negotiate with donors to cover the costs of such coordination mechanisms in project budgets.

Funding and relief goods associated with military forces and objectives

Donor governments use their aid budgets to pursue their wider national security or foreign policies. For this reason, CARE needs to exercise caution in relation to funding or other relief goods that are associated with military or security institutions or objectives. In general, CARE members and country offices should not accept funding from ministry of defence institutions or funding streams, or from military operations deployed at the field level, unless authorization to do so has been received by the appropriate lead member in consultation with the CI Secretariat. This policy encompasses defence agency budgets associated with civil-military relations and assistance-related tasks. It also applies to the budgets allocated to specific military forces for quick-impact projects and other forms of assistance. Military forces also occasionally offer military goods, including food and non-food items, to be used as part of a humanitarian response. In general, CARE needs to adopt a cautious approach; balancing the humanitarian needs of crisisaffected populations with the potential consequences of using such items. In such contexts, CARE should advocate for and seek funding from aid channelled through civilian institutions, such as bilateral or multilateral donor agencies. In all cases, CARE should emphasise the importance of civilian control over humanitarian, recovery or development aid funding.

Conclusion

Although CARE steadfastly believes that humanitarian assistance be delivered through civilian channels, the involvement of armed contingents in aid operations is probably an irreversible trend at least for the next decade. Cooptation of humanitarian operations by military actors represents therefore a serious challenge for aid organisations in term of image, perception by local communities and staff security. Finding appropriate ways to preserve humanitarian space and maintain a constructive dialogue with military forces on the ground is a challenging but mandatory exercise if aid organizations want to continue to operate safely and according to proven operating principles of non-political and independent humanitarian action. CARE has developed these guidelines to help field leadership develop and maintain appropriate interaction with military actors and generate consistent operational and programme strategies, taking into account the sensitivity of their working environment.

ANNEX - References

Primary references

Annex-1: Code of Conduct for the International Red Cross and Red

Crescent Movement and NGOs in Disaster Relief

Annex-2: Oslo Guidelines on: The Use of Military and Civil Defence

Assets in Disaster Relief, 2006 (covering natural,

technological and environmental emergencies)

(Source: United Nations Office for the Coordination of

Humanitarian Affairs (OCHA), view the whole document at

http://www.reliefweb.int/rw/lib.nsf/db900SID/AMMF-

6VXJVG?OpenDocument)

Annex-3: UN and IASC Civil Military Guidelines & Reference for

Complex Emergencies, 2008

(Source: United Nations Office for the Coordination of

Humanitarian Affairs (OCHA), view the whole document at

http://www.reliefweb.int/rw/lib.nsf/db900SID/ASIN-

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Secondary references

Annex-4: Guidelines on the domestic facilitation and regulation of

international disaster relief and initial recovery assistance (IDRL

Guidelines 2007), Art. 11, at

http://www.ifrc.org/what/disasters/idrl/resources/guidelines.asp

Annex-5: Guidelines on the use of military and civil defence assets (MCDA)

to support United Nations humanitarian activities in complex

emergencies, 2003, at

http://coe-dmha.org/Media/Guidance/3MCDAGuidelines.pdf

Annex-6: UN guidelines on Use of military or armed escorts for

humanitarian convoys, 2001, at

http://www.who.int/hac/network/interagency/GuidelinesonArmed

Escorts_Sept2001.pdf

Annex-7: Guidelines for UN and other Humanitarian Organizations on

Interacting with Military, Non-State Armed Actors and Other

Security Actors in Iraq, 2008, at

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Annex-8: Security Council Resolutions 1511 (2003), 1546 (2004) and 1770

(2007), at

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Annex-9: Humanitarian Negotiations with Armed Groups: A Manual for

Practitioners, 2006 at

http://ochaonline.un.org/humanitariannegotiations/Documents/M

anual.pdf