Samman, Emma et al.

Research Report
SDG progress: Fragility, crisis and leaving no one behind

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SDG progress
Fragility, crisis and leaving no one behind
Emma Samman, Paula Lucci, Jessica Hagen-Zanker, Tanvi Bhatkal, Amanda Telias Simunovic, Susan Nicolai, Elizabeth Stuart and Charlotte Caron
September 2018
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Cover photo: Syria. Elderly returnee couple repairing their home in rural east Aleppo. Taha and his wife started to repair their home by themselves after it was damaged by the conflict. Al Dreisiyeh village, located 15 km south of Al Kahfesh in rural east Aleppo, has witnessed the return of 90 families (according to local residence). UNHCR is providing 13,250 returnee families from rural east Aleppo with non-food items such as solar lamps, plastic sheets, mattresses, blankets and winter clothes. These kits will be a great support to those who have returned with no personal belongings or source of income. © UNHCR/Hameed Maarouf. All rights reserved.
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<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CAR</td>
<td>Central African Republic</td>
</tr>
<tr>
<td>CRED</td>
<td>Centre for Research on the Epidemiology of Disasters</td>
</tr>
<tr>
<td>DAC</td>
<td>Development Assistance Committee</td>
</tr>
<tr>
<td>DRC</td>
<td>Democratic Republic of Congo</td>
</tr>
<tr>
<td>FCAS</td>
<td>fragile and conflict-affected states</td>
</tr>
<tr>
<td>GBV</td>
<td>gender-based violence</td>
</tr>
<tr>
<td>GDP</td>
<td>gross domestic product</td>
</tr>
<tr>
<td>GNI</td>
<td>gross national income</td>
</tr>
<tr>
<td>GPSDD</td>
<td>Global Partnership for Sustainable Development Data</td>
</tr>
<tr>
<td>GHGs</td>
<td>greenhouse gases</td>
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<tr>
<td>HIC</td>
<td>high-income country</td>
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<tr>
<td>HLPF</td>
<td>High-level Political Forum</td>
</tr>
<tr>
<td>IDP</td>
<td>internally displaced person</td>
</tr>
<tr>
<td>IEAG-SDGs</td>
<td>Inter-Agency and Expert Group on SDG Indicators</td>
</tr>
<tr>
<td>IPCC</td>
<td>Intergovernmental Panel on Climate Change</td>
</tr>
<tr>
<td>IPV</td>
<td>intimate partner violence</td>
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<tr>
<td>IRC</td>
<td>International Rescue Committee</td>
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<tr>
<td>LDC</td>
<td>least developed country</td>
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<td>LIC</td>
<td>low-income country</td>
</tr>
<tr>
<td>MDGs</td>
<td>Millennium Development Goals</td>
</tr>
<tr>
<td>MIC</td>
<td>middle-income country</td>
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<tr>
<td>ODA</td>
<td>official development assistance</td>
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<tr>
<td>ODI</td>
<td>Overseas Development Institute</td>
</tr>
<tr>
<td>OECD</td>
<td>Organisation for Economic Co-operation and Development</td>
</tr>
<tr>
<td>PPP</td>
<td>purchasing power parity</td>
</tr>
<tr>
<td>SDGs</td>
<td>Sustainable Development Goals</td>
</tr>
<tr>
<td>UHC</td>
<td>universal health care</td>
</tr>
<tr>
<td>UIS</td>
<td>UNESCO Institute for Statistics</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
<tr>
<td>UNESCO</td>
<td>United Nations Educational, Scientific and Cultural Organization</td>
</tr>
<tr>
<td>UNGA</td>
<td>United Nations General Assembly</td>
</tr>
<tr>
<td>UNHCR</td>
<td>United Nations High Commissioner for Refugees</td>
</tr>
<tr>
<td>UNOCHA</td>
<td>Office for the Coordination of Humanitarian Affairs</td>
</tr>
<tr>
<td>VNR</td>
<td>Voluntary National Reviews</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
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</tbody>
</table>
Executive summary

A nation should not be judged by how it treats its highest citizens, but its lowest ones
(Nelson Mandela, 1995)

As they signed the Sustainable Development Goals (SDGs), all countries pledged to reach and deliver progress for those who are furthest behind first. This commitment to ‘leave no one behind’ is at the heart of the SDGs: not only is it morally unacceptable to keep vast swathes of people structurally locked out of progress but delivering on it is a prerequisite for achieving Agenda 2030.

This report highlights one left-behind group that has received too little attention: people caught in crisis. These people – those living in conflict, and those who are displaced within their own countries or across borders – often fall through the cracks of different authorities’ responsibilities or are explicitly excluded by governments in their national and sectoral plans (IRC, 2018a). Without the concerted efforts of the international community to address the needs of people caught in crisis and to measure the impact of this support, we will not achieve the SDGs for all, and the gap between this marginalised group and the rest of the world will grow.

Many vulnerable refugees and internally displaced people (IDPs) are hosted in fragile and conflict-affected states. And there are most likely many more that the data doesn’t capture. With the number of violent conflicts doubling since 2000 and displacement on an upward trend, these populations could continue to grow. However, there is limited accountability for meeting these populations’ needs and ensuring that they are not left behind.

In September 2019, heads of state will for the first time attend the High-level Political Forum (HLPF) meeting where progress on the SDGs is monitored and reviewed. This will be a pivotal moment for the international community to prioritise leaving no one behind – a part of the 2030 Agenda that actors are still not addressing with sufficient urgency. Increased action, based on understanding of current gaps, challenges and opportunities, is needed to catalyse updated or new commitments from all stakeholders at this critical meeting.

This report aims to prepare the ground in the lead up to the September 2019 HLPF – also known as the SDG Summit. It identifies the gaps in SDG progress for fragile and conflict-affected states, highlights the challenges and opportunities for meeting the SDGs for people caught in crisis and makes recommendations for further action – both in terms of preparation ahead of the September 2019 HLPF meeting and commitments to be made at the meeting itself. The recommendations focus on accelerating progress for all marginalised groups and people living in poverty generally – the step change needed across the entire agenda – as well as on specific steps needed to deliver progress for people caught in crisis.

Key findings

• Limited progress against targets. On average, 35% of low- and middle-income countries (LICs and MICs) are ‘on track’ to meet selected SDG targets (those relating to meeting basic needs). Just 18% of fragile states are ‘on track’. This means 82% are either off track or lack the data for an assessment of progress.

• Deprivation increasingly concentrated in fragile and conflict-affected states (FCAS). Across the goal areas, on current trend, we forecast unmet basic needs in 2030 to be increasingly concentrated in fragile states. We estimate that FCAS will be home to nearly one-third of the population of LICs and
MICs in 2030 but will house disproportionate shares of people lacking electricity (96%) and people who are extremely poor (85%), among other deprivations. This finding indicates that people caught in crisis risk being even more excluded from progress in 2030 than they are now.

- **Rising numbers of people facing deprivations.** Our projections suggest that, on trend, the absolute number of people in FCAS facing certain key deprivations will rise significantly – the number of undernourished people will rise by 84.5 million, the number lacking improved sanitation by 45 million, and the number living in slums by at least 106 million. This means that, as of 2030, a larger number of people in crisis, most of whom live in fragile states, are likely to face these unmet basic needs.

- **Left behind by national plans and data.** Our study shows that refugees, IDPs and other people caught in crisis are not systematically included in countries’ SDG progress reports (Voluntary National Reviews, VNRs), national surveys to determine socioeconomic status and needs, or national development and sectoral plans (IRC, 2018a). This makes it extremely difficult to track progress, much less intervene in ways that will make it possible for these marginalised groups to meet the goals.

## Recommendations

We recommend the following necessary preparations in advance of the September 2019 HLPF:

1. **Establish a high-level panel to drive further commitment and action on leave no one behind.** The panel, consisting of former or present heads of state and global leaders, would highlight what action is needed for all left-behind groups, including people caught in crisis. The United Nations (UN) Secretary General should appoint this panel by the end of 2018 to ensure its recommendations for left-behind groups are reflected in the outcome declaration of the first head-of-state-level meeting of the HLPF in September 2019.

2. **Ensure governments and donors have a formal process to track, review and debate progress towards achieving the leave no behind agenda.** The UN Secretary-General should require each member state to submit plans and report on progress for leaving no one behind. This should consider people caught in crisis; for example, including refugees and IDPs in national development and sectoral planning. In the case of fragile settings, governments and partners should work together to create explicit targets for displaced populations and a mechanism for tracking and reviewing progress on leave no one behind for people caught in crisis (e.g. in the case of refugees through the Global Compact for Refugees).

We recommend that the following are considered for **action at the September 2019 HLPF:**

1. **National governments and development partners should prioritise policies and actions that meet the needs of the groups most at risk of being left behind.** Examples include improving access to basic services, labour market participation, and institutional and legal reforms to protect rights and promote freedom from violence and discrimination (Stuart et al., 2016). Donors, FCAS and countries hosting large numbers of refugees should scale up interventions and partnerships that drive incentives for policy changes that will unlock progress towards the SDGs among people caught in crisis. These could include compact agreements and private sector partnerships. The UN should also take a lead role in institutionalising greater coordination and coherence between humanitarian and development approaches to meet the challenge of protracted crises.

2. **National governments and donors should orient financing towards left-behind groups.** Half of all overseas development assistance should be spent in least developed countries (LDCs) (Manuel et al., 2018a), 95% of whose population are in FCAS. At the national level, governments should scale up financing for social protection and commit to allocating public spending according to need. Development partners and governments should prioritise overseas development assistance for
people caught in crisis, and to FCAS and LICs that host large numbers of refugees. This may require additional financial incentives, such as no-interest-rate loans or more grants, and non-aid incentives such as trade concessions.

3. **National governments, international organisations, civil society and the private sector should support efforts to improve data collection.** All relevant stakeholders should sign up to the Global Partnership for Sustainable Development Data’s (GPSDD) Inclusive Data Charter, and National Statistics Offices and international actors should be encouraged to experiment with new technologies to fill data gaps for marginalised groups, including people caught in crisis, who are often excluded from traditional means of data collection.

Many governments waited 10 years before they started the serious work of implementing the precursor to the SDGs, the Millennium Development Goals (MDGs) (Binat Sarwar, 2015). But the longer countries take to start delivering on leave no one behind, the more expensive it will be to do so (Stuart et al., 2016). It is vital, then, that within the next 12 months, governments and the international community prioritise and fast-track global and national action in pursuit of this agenda if the world is to achieve the SDGs by 2030.
1 Introduction

1.1 A window of opportunity in 2019

We are now 1,000 days into the SDGs. Unless significant progress is made in reaching the poorest and most marginalised people, including those who live in fragile settings and are affected by conflict or disaster, the SDGs and their underlying commitment to ‘leave no one behind’ will not be met.

2019 is a pivotal year for the 2030 Agenda for sustainable development and the leave no one behind commitment. In addition to the annual HLPF that takes place in July, there will also be, for the first time, an HLPF summit in September attended by heads of state. This summit was conceived as a critical juncture to reflect on the first four years of Agenda 2030 implementation and to allow for adjustments to priorities and course corrections. It represents a key window of opportunity to inject urgency and catalyse updated or new commitments from all stakeholders – all of which will be necessary if leave no one behind and Agenda 2030 are to be achieved.

Box 1 Key definitions used in this report

People caught in crisis. Refugees and internally displaced persons (IDPs) – due to conflict or disaster – and people living in conflict-affected areas.

Refugees. According to the United Nations High Commissioner for Refugees (UNHCR), a ‘refugee is someone who has been forced to flee his or her country because of persecution, war or violence. A refugee has a well-founded fear of persecution for reasons of race, religion, nationality, political opinion or membership in a particular social group. Most likely, they cannot return home or are afraid to do so.’

Internally displaced person. Someone who has been forced to flee their home but does not cross an international border. These individuals are displaced due to internal strife and natural disasters.

Fragile and conflict-affected states. There is no officially accepted measure of fragility, and many competing definitions are in circulation – which stress, to a varying degree, state capacity, legitimacy and authority (Wagner and Sattelberger, 2017).* In this report, we use the Organisation for Economic Co-operation and Development (OECD, 2018) definition of fragile states: ‘Fragility is defined as the combination of exposure to risk and insufficient coping capacity of the state, system and/or communities to manage, absorb or mitigate those risks. Fragility can lead to negative outcomes including violence, the breakdown of institutions, displacement, humanitarian crises or other emergencies’. Indeed, 25 of the 27 countries designated as fragile by the OECD currently have humanitarian appeals by the UN Office for the Coordination of Humanitarian Affairs (OCHA). Further, many refugees and IDPs reside in these settings. For a full list of countries included under the OECD FCAS definition, see Annex 1: Table A1.

*Among these, the three most widely used are: (1) the World Bank’s Harmonized List of Fragile Situations (36 countries in FY18, which corresponds to 2016); (2) the Fund for Peace’s Fragile States Index (38 countries in 2015); and (3) the OECD fragile states list (58 countries per 2018 list). We opted for the OECD definition as it is the broadest, and therefore results in the most comprehensive list of countries.

Source: UNHCR (n.d) and OECD (2018).
To make the most of this window of political opportunity, urgent preparatory work will be crucial. This report aims to prepare the ground in the lead up to 2019, highlighting how much more effort will be needed to reach the SDGs and their commitment to leave no one behind, with a particular focus on people caught in crisis – that is, refugees, IDPs, and those living in areas of conflict (Box 1) – and the FCAS where most of them live.

### 1.2 The leave no one behind commitment and people caught in crisis

In the opening declaration of Agenda 2030, world leaders said:

> As we embark on this great collective journey, we pledge that no one will be left behind. Recognizing that the dignity of the human person is fundamental, we wish to see the Goals and targets met for all nations and peoples and for all segments of society. And we will endeavor to reach the furthest behind first (UN, 2016)

The leave no one behind commitment aims to address several, interrelated concerns: ending absolute poverty – in all its forms, and ensuring that those who have been left behind (in either relative or absolute terms) can ‘catch up’ with those who have experienced greater progress. It also means stopping the group-based discrimination that has resulted in unequal outcomes for some disadvantaged or marginalised populations. And, as the United Nations General Assembly (UNGA) resolution sets out, key to the implementation of Agenda 2030 is the prioritisation and fast-tracking of action for the furthest behind (Stuart and Samman, 2017; UN, 2015).

People caught in crisis are one group at risk of being left behind. Many of these vulnerable populations are doubly marginalised. For example, 12 of the top 15 refugee-hosting countries are themselves considered fragile (Figure 1). Moreover, all but two of these 15 top refugee-hosting countries are classified low- and middle-income, meaning they shoulder the burden of addressing deprivations among both host and refugee communities.

Around the world, the number of violent conflicts has more than doubled since 2000 and displacement is also on an upward trajectory (Box 2), suggesting the situation for these populations

**Figure 1** Major refugee-hosting countries and share of refugees they host, by fragility status

<table>
<thead>
<tr>
<th>Country</th>
<th>Share of refugees in population (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lebanon</td>
<td>16.6</td>
</tr>
<tr>
<td>Jordan</td>
<td>7.3</td>
</tr>
<tr>
<td>Chad</td>
<td>2.8</td>
</tr>
<tr>
<td>Sweden</td>
<td>2.4</td>
</tr>
<tr>
<td>South Sudan</td>
<td>2.3</td>
</tr>
<tr>
<td>Sudan</td>
<td>2.3</td>
</tr>
<tr>
<td>Cameroon</td>
<td>1.4</td>
</tr>
<tr>
<td>Iran</td>
<td>1.2</td>
</tr>
<tr>
<td>Germany</td>
<td>1.2</td>
</tr>
<tr>
<td>Yemen</td>
<td>1.0</td>
</tr>
<tr>
<td>Kenya</td>
<td>0.9</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>0.9</td>
</tr>
<tr>
<td>Iraq</td>
<td>0.8</td>
</tr>
<tr>
<td>Democratic Rep. of Congo</td>
<td>0.7</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>0.6</td>
</tr>
</tbody>
</table>

Source: data on shares of refugees hosted in Huang and Graham (2018).
may worsen. And as people caught in crisis often fall through the cracks of different authorities’ responsibilities or are explicitly excluded by governments, progress for this group will largely depend on the concerted efforts of the international community.

People caught in crisis are explicitly referenced in Agenda 2030:

- People who are vulnerable must be empowered. Those whose needs are reflected in the Agenda include all children, youth, persons with disabilities, people living with HIV/AIDS, older persons, indigenous peoples, refugees and internally displaced people and migrants (UN, 2015; authors’ emphasis)

Moreover, in the synthesis report on the 2030 Agenda, then-UN Secretary-General Ban Ki-moon clearly stated that the Agenda ‘must not exclude migrants, refugees, displaced persons or persons affected by conflict and occupation’ (UN, 2014).
However, these groups are often overlooked in practice. Of 43 countries, 25 mentioned refugees or migrants as a left-behind group in their SDG progress reviews presented at the UN in 2017 (VNRs; CDP Subgroup on Voluntary National Reviews, 2018). But consideration of refugees and IDPs (and their SDG outcomes) in VNRs is inconsistent. This makes it difficult to track progress, much less intervene in ways that will enable these marginalised groups to meet the goals. Furthermore, a cursory analysis of VNRs for six major refugee-hosting countries – Ethiopia, Germany, Jordan, Kenya, Lebanon and Sweden – shows SDG outcomes for refugees are rarely reported or explicitly related to leave no one behind commitments.

In fact, more generally, references to leave no one behind in country VNRs appear mostly rhetorical: while 39 out of 43 countries mention the term ‘leave no one behind’ in their 2017 VNRs, only 16 refer to explicit strategies to put this principle into action or to put the interests of those furthest behind first (ibid.).

1.3 Structure of this report

This report pieces together the latest available data to show the level of effort required to achieve the SDGs for places and people in crisis.

* Chapter 2 presents new estimates on the extent to which FCAS are on and off track to reach an illustrative set of SDG targets by 2030, drawing on ODI’s *Projecting Progress* series (Nicolai et al., 2015).
* Chapter 3 narrows the focus presenting the latest available evidence on selected SDG outcomes for people caught in crisis specifically. In doing so, it also highlights examples of existing interventions that show that progress in these areas is possible even in the most challenging situations.
* Chapter 4 addresses the challenge of intervening in FCAS. It discusses three key areas to deliver on the commitment to leave no one behind, including for people caught in crisis – policy, finance and data (Manuel et al., 2018b) – and identifies remaining gaps.
* Chapter 5 concludes setting out five pre-conditions to accelerate action to leave no one behind and to ensure that people caught in crisis, alongside other left-behind groups, are prioritised in SDG implementation.
2 How much further behind are fragile states than the rest of the world in SDG attainment?

This chapter considers the progress of FCAS – which currently house one in five people globally – against the SDGs, relative to the world. As outlined, focusing efforts on this uniquely vulnerable group of countries is critical to achieving Agenda 2030 and the leave no one behind commitment, but it also provides an important backdrop to our analysis of people caught in crisis, given that most of these populations are situated in fragile states.

Goal-by-goal, we show the extent to which countries1 are on or off track to reach an illustrative set of SDG targets, singling out the experiences of FCAS. We emphasise FCAS’ current share of deprivation and, on current trend, what this is likely to be in 2030, as well as the absolute numbers of people still likely to face deprivation.

For each target, where applicable, we identify countries that are ‘on track’ and ‘off track’ given their recent progress (typically over the most recent decade, see Annex 2: Table A2), and the amount of further progress needed among off-track countries to achieve it. We also look at the population share that each category of country represents.2 While ODI’s earlier Projecting progress reports (Nicolai et al., 2015, 2016a–2016d; Lucci et al., 2016) focused on global, regional and sub-regional progress, this report looks at country-level progress – not least so we can identify the distinct trajectories of FCAS. We use the following categorisations, based on Nicolai et al. (2015):

- **Achieved/on track**: countries have met or are on course to meet the target on current trend.
- **Reform**: countries are on course to get more than halfway towards the target by 2030 on current trend.
- **Revolution**: countries are making progress towards targets but, based on their current trend, will not get more than halfway there.
- **Reversal**: countries in which current trends would need to be completely reversed to have any chance of meeting targets by 2030.

---

1 For Goals 1–7 and 11, LICs and MICs. For Goals 10, 12–16, all countries. For Goals 8 and 9, LDCs. For Goal 17, all donors of official development assistance as listed by the OECD Development Assistance Committee (‘DAC countries’).

2 UNICEF (2018a) and Kharas et al. (forthcoming) adopt a similar approach in assessing country progress toward selected targets – our approach is distinctive in our focus on all goals and on FCAS.
2.1 Highlights of the analysis

Our analysis uncovers three key findings.

- **Limited progress against targets.** On average, 35% of LICs and MICs are on track to meet selected SDG targets (under Goals 1–7 and 11, Figure 3). This is almost double the share of fragile states (18%). This means that to have any chance of meeting the targets, progress needs to be ramped up dramatically – on average – for fragile states. For people in crisis – who are amongst the most marginalised within these countries – even greater efforts will be needed.

- **Deprivation increasingly concentrated in FCAS.** Across the goal areas, on current trend, we forecast unmet basic needs in 2030 to be increasingly concentrated in fragile states. We estimate that FCAS will be home to nearly one-third of the population of LICs and MICs in 2030 but will house disproportionate shares of people lacking electricity (96%) and people who are extremely poor (85%), among other deprivations (Figure 4). This finding indicates that people caught in crisis risk being even more excluded from progress in 2030 than they are now.

- **Rising numbers of people facing deprivations.** Our projections suggest that the absolute number of people in FCAS facing certain key deprivations will rise significantly – the number of undernourished people will rise by 84.5 million, the number lacking improved sanitation by 45 million, and the number living in slums by at least 106 million (Figure 5). This means that, as of 2030, a larger number of people in crisis, most of whom live in fragile states, are likely to face these unmet basic needs.

Figure 3  Share of all countries and fragile states that have achieved or are on track to meet selected SDG targets

<table>
<thead>
<tr>
<th>SDG</th>
<th>OECD fragile states</th>
<th>All countries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to energy</td>
<td>50</td>
<td>71</td>
</tr>
<tr>
<td>Reduce child mortality</td>
<td>29</td>
<td>60</td>
</tr>
<tr>
<td>End extreme poverty</td>
<td>22</td>
<td>53</td>
</tr>
<tr>
<td>Universal access to sanitation</td>
<td>12</td>
<td>27</td>
</tr>
<tr>
<td>Reduce income inequality</td>
<td>16</td>
<td>17*</td>
</tr>
<tr>
<td>End hunger</td>
<td>7</td>
<td>21</td>
</tr>
<tr>
<td>End child marriage</td>
<td>9</td>
<td>18</td>
</tr>
<tr>
<td>Completed lower secondary education</td>
<td>7</td>
<td>20</td>
</tr>
<tr>
<td>Reduce slum dwellers</td>
<td>5</td>
<td>12</td>
</tr>
<tr>
<td>Reduce violent deaths</td>
<td>9</td>
<td>6*</td>
</tr>
</tbody>
</table>

*The relevant comparator for Goals 10 and 16 is the world (whereas the relevant comparator for Goals 1–7 is LICs and MICs).*
Figure 4  Share of deprivations in LICs and MICs that are concentrated in FCAS in 2015 and projections for 2030 by SDG target

Figure 5  Change in the number of people who will be deprived in FCAS across selected targets (2015 and projections for 2030)
Our analysis presents the best-case scenario in terms of available data, but is nonetheless revealing of the types of gaps that constrain the ability to measure, monitor and advance the SDG agenda (see Annex 1: Figure A1). Not only good data is needed to guide and target polices to address the SDGs, but it is also a pre-requisite to holding governments and international actors to account. For some indicators, data is missing for most countries while for other ‘modelled’ indicators (i.e. child mortality, electricity access), there are virtually no gaps. However, what is striking is a significant lack of data for several of the indicators across all countries considered in this report, rather than gaps only in data for FCAS. For left-behind groups, these gaps are ever more pressing, a theme we revisit in Chapter 3.

2.2 Tracking country progress

SDG 1, target 1.1: end extreme poverty

On current trend, extreme poverty is predicted to fall from 13% of the population of LICs and MICs in 2013 to 5.5% by 2030. But, using the World Bank’s interpretation, eliminating extreme poverty means reaching a level of 3% or less. This places these countries in the ‘reform’ category for this target: though they will get more than halfway to eliminating extreme poverty, additional efforts are needed (Nicolai et al., 2015).

In FCAS, the picture is different. In 2013, 27% of people in these states were living in extreme poverty, and by 2030, this share is projected to fall only to 14%.

At country level, more than half of LICs and MICs (53%) have already eliminated poverty or are on track to do so, covering around three-quarters of their total population. This is compared to just 23% of FCAS. For about a third of FCAS, either revolutionary changes or – as is the case for Central

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3 Authors’ estimates based on PovcalNet and World Poverty Clock data as of mid-2018. See Manuel et al. (2018a).

4 See World Bank (2013), and for a justification, World Bank (2015: 6–7). Along similar lines, for all targets that have a 100% ceiling or 0% floor, we use targets of 97% and 3% respectively to designate the target being met, to accommodate measurement issues.
African Republic, Comoros, Côte d’Ivoire, Guatemala, Malawi and Nigeria – outright reversal will be needed to achieve target 1.1.\footnote{There is significant consensus between this and other projections in terms of identifying those countries most likely to be off track to meet SDG 1.1. Manuel et al. (2018a) identify 20 countries that different studies concur will have poverty rates exceeding 20% in 2030 – all but three (Benin, Lesotho, Togo) are fragile states according to the OECD designation, and half are on the list of the 27 countries for which OCHA currently has a humanitarian appeal. See https://interactive.unocha.org/publication/globalhumanitarianoverview.}

FCAS house 57% of extreme poor people in today’s LICs and MICs. In 2030, our projections suggest they will house around 85% of the extreme poor – some 342 million people.

**SDG 2, target 2.1: end hunger**

The number of people who are hungry is set to fall from around 12% of the population of LICs and MICs in 2015 to 8% in 2030, placing these countries in the ‘revolution’ category (Nicolai et al., 2015: 26). But in FCAS, on current trend, undernourishment is predicted to fall only slightly – from 19% in 2015 to 17% in 2030.

Nearly 40% of LICs and MICs have either met or are on track to meet the target of zero hunger, or to get more than halfway there – together covering two-thirds of their total population. However, the picture is not entirely promising: in 25 countries (18%) undernourishment is increasing. Among FCAS, no country has met the end-hunger target. Only 4 of the 58 FCAS (7%) are on track to do so, with a further seven (12%) able to get more than halfway there. This means that 60% of FCAS (35 countries) will need either major efforts (24 countries), or to change course entirely (11 countries). For 12 fragile states (21%), no trend data is available at all, which is, in itself, a worrisome sign.

Currently 44% of undernourished people in LICs and MICs live in FCAS. As of 2030, we estimate that this share will rise to 61% – an estimated 412 million people.

![Figure 7](image)
SDG 3, target 3.2: reduce child mortality

Child mortality is the main driver of mortality in conflict settings (CRED, 2013) and highly correlated with other aspects of human development (Ranis et al., 2006). In LICs and MICs, 4.4% of children die before their fifth birthday, while in FCAS, the share is 6.7%. Projections suggest that, by 2030, these shares will be 2.5% and 4.0%, respectively.

Most LICs and MICs (82 or 60%) have either met the target of ending preventable child deaths or are projected to do so by 2030 – together accounting for over three-quarters of their population. By contrast, in FCAS only 17 countries (30%) have met or are on track to meet the target – representing one-third of the FCAS population. Some 33 fragile states (57%) should get more than halfway there while eight (14% of the total) require much more effort.

Presently 64% of child deaths in LICs and MICs occur in fragile settings. As of 2030, an estimated 70% of under-five deaths – 2.4 million children – are forecast to occur in FCAS.

Figure 8  Projected country trajectories for meeting target on under-five mortality by 2030

Source: see Annex 1.

SDG 4, target 4.1: completed lower secondary education

For this target, we use a proxy indicator: the share of 20- to 24-year-olds with completed lower secondary level education. In LICs and MICs, Nicolai et al. forecast lower secondary school completion to increase from 76% in 2015 to 85% by 2030, placing them in the ‘revolution’ category for this target (2015: 25). In FCAS, the corresponding rates are 50% and 63%, respectively. But diverse country performance underlies these aggregates: of all the LICs and MICs, 13 (9%) have met the target of all its young adults having completed a lower secondary education, and a further quarter of these countries are favourably positioned: 14 (10%) are set to reach the target by 2030, while another 21 (15%) are set to get more than halfway there (Figure 9).

Source: see Annex 1.

As the target relates to universal secondary school completion by 2030, the focus of the projections is on educational attainment for 20- to 24-year-olds in 2035. This cohort should have completed lower secondary school if the target is met.
FCAS face a rockier trajectory. Just four – Egypt, Kenya, Tajikistan and Zimbabwe – are currently slated to achieve universal lower secondary completion by 2030, while nine (16%) should get more than halfway there. But in 32 countries (covering 60% of the FCAS population) major improvement is required. This finding is corroborated by other analyses of education in fragile contexts, which have found that 75 million children in 35 FCAS need educational support (Nicolai et al., 2016c), and that more than half of all out-of-school children are located in FCAS (UNICEF, 2016).

FCAS currently are home to 49% of people in LICs and MICs without a lower secondary education. By 2030, our estimates suggest that this share will rise to 58%.

Figure 9  Projected country trajectories for meeting target on universal lower secondary education by 2030

Source: see Annex 1.

SDG 5, target 5.3: end child marriage
Globally, the share of girls who marry before age 18 has dropped from one in four to approximately one in five. Nonetheless, some 12 million girls marry each year (UNICEF, 2018b). Nicolai et al. (2015) placed LICs and MICs in the ‘revolution’ category for this target. In FCAS meanwhile, one-third of young women are married before the age of 18 (average data for 2010 to 2017). This is predicted to drop marginally to 31% in 2030.

Overall, some 25 LICs and MICs (19%) have ended child marriage or are on track to do so (Figure 10). India and Indonesia are among those that are more than halfway there. But 51 countries (37%) will need to make major improvements, and 23 countries (17%) have experienced reversals. Although these figures signal significant challenges, they are overshadowed by the FCAS trajectory. Just five fragile states (9%) have achieved or are on track to end child marriage – including Rwanda – with another two getting more than halfway there. More than half of all fragile states (31 countries) fall into the ‘revolution’ category, meaning that significant efforts will be needed. And in 11 countries (19%) – nine of which are in sub-Saharan Africa, including Nigeria – the share of girls marrying is projected to rise.

Currently 50% of young women who marry before age 18 in LICs and MICs are in FCAS. As of 2030, this share is estimated to rise to 70% – some 3.2 million young women.
SDG 6, target 6.2: universal access to sanitation

Access to an improved sanitation facility, an MDG measure that is now included under SDG 1.4,\(^7\) is forecast to increase from 68% of the global population in 2015 to 76% by 2030, placing it within the ‘revolution’ category (Nicolai et al., 2015). By this metric, one in four people will still lack access to any improved service by 2030.

In FCAS, the share of people with access to improved sanitation is forecast to rise from 46% of the population in 2015 to 58% in 2030. This means that in 2030 more than 4 in 10 people are projected to lack access.

Around one-quarter of countries are performing relatively well. Six (4%) have achieved the target of universal access, while 31 countries (23%) – mostly smaller MICs – are on track to do so. An additional 19 countries (14%) are projected to be more than halfway there, and because this group includes China and India, this covers 52% of the population in LICs and MICs. However, close to half of LICs and MICs (63 or 46%) need major improvements to reach the target, and progress in 13 countries (9%) has gone backwards in recent years. Among FCAS, some 35 countries (60%) need major progress to reach the target, and six countries (10%) – Equatorial Guinea, Gambia, Myanmar, Nigeria, Somalia, Zimbabwe – need to reverse course.\(^8\)

Some 40% of people in LICs and MICs without access to improved sanitation live in FCAS. As of 2030, this share is expected to rise to 66% – representing an estimated 984 million people.

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\(^7\) The focus on improved sanitation predates the SDG target, which focuses on access to ‘safely managed sanitation’ and requires, in addition, the safe treatment of excreta (WHO, n.d.). Access to ‘safely managed’ sanitation was estimated at about 40% globally in 2015 (ibid.) but because data gaps are massive – missing for 108 LICs and MICs (79%) and for 51 FCAS (88%) – we focus here on access to an improved sanitation facility, for which data are widely available.

\(^8\) Turning to safely managed sanitation access (bearing in mind the huge data gaps), only China is on track to meet this target while three countries are more than halfway there. Meanwhile 21 countries (15%) need major reforms to achieve the target. Most of those countries with data, in LICs and MICs and in FCAS, fall into the ‘revolution’ category. The full results of our analysis are not shown here but are available from the authors on request.
Some 84% of the world had access to electricity in 2015, a share that is projected to reach 88% by 2030, placing it in the ‘revolution’ category (Nicolai et al., 2015). The majority of LICs and MICs (97 or 71%) have already met the target or are on track to do so (Figure 12). Greater progress is needed in 40 countries – in 26 countries (19%), at multiples of current rates, while in two countries a complete change of course is required. Half of FCAS have met or are on track to meet the target but 22 countries (38%) need ‘revolutionary’ reforms. One fragile state – Djibouti – has experienced a reversal in progress.

Presently 71% of people in LICs and MICs who lack access to electricity are in FCAS. As of 2030, this share is projected to rise to 96% – some 407 million people.

Source: see Annex 1.
SDG 10, target 10.1: reduce income inequality

Among its many impacts, inequality is closely aligned with poverty: for a given rate of growth, greater equality will translate into fewer people living in poverty. Globally, 80% of the world’s population are living in countries that are becoming more unequal (Hoy and Samman, 2015) – placing the world into the ‘reversal’ category (Nicolai et al., 2015).

We have recent data for only 91 countries – covering just 59% of the world’s people and 45% of the FCAS population. Our results are therefore, at best, illustrative of broader trends. They show that some 39 countries globally (17%) are becoming more equal (Figure 13) – in other words, the incomes of the bottom 40% of their populations are growing at least 0.5 percentage points more than average incomes. These countries, which include Brazil, China and Russian Federation, represent 33% of the world’s population.

In many more countries, inequality is stagnant or rising. Some 31 countries (13%) need improvement – that is, the incomes of the bottom 40% of their populations are growing at least half a percentage point (in either direction) of average incomes. And 21 countries (9% of the total) are becoming significantly more unequal – that is, average incomes are growing at least 0.5 percentage points more than those of the bottom 40%.

Fragile states face greater challenges still. While nine (16%) are on track to meet the target, three (5%) need some improvement and five countries (9%) need more dramatic change as they are moving in the wrong direction. It is worth noting, however, that the three countries in need of improvement include Bangladesh and Pakistan and as such cover 18% of the total FCAS population. The countries which need to reverse course are Ethiopia, Madagascar, Mozambique, Tajikistan and Zambia.
SDG 11, target 11.1: reduce slum populations

Nearly four billion people (54% of the global population) live in cities, a number that is projected to reach five billion by 2030. By that date, it is estimated that one-quarter of all people in the world (or 40% of urban dwellers) will live in slums. As such, Nicolai et al. (2015) conclude the world is firmly

Source: see Annex 1.

Figure 13  Projected country trajectories for meeting target on inequality in all countries

Source: see Annex 1.

Figure 14  Projected country trajectories for meeting target on share of slum dwellers

Source: see Annex 1.


in the ‘reversal’ category for SDG 11.1; a change in direction is vitally needed. In FCAS, the share of the urban population in slums is predicted to remain relatively stable, at 19% in 2014 and 18% in 2030. However, the number of people living in slums generally is predicted to increase by 106 million in FCAS – a figure that is likely an underestimate given that the rate of urbanisation is predicted to increase faster for FCAS moving forwards than it did over the 2005–2015 period.

Following Nicolai et al. (2015) we interpret the target conservatively as a reduction in the number of slum dwellers by 2030. On track to reduce their numbers of people living in slums are 16 LICs and MICs (12%) (Figure 14), while in 62 countries (45%), the number is due to increase. Just three fragile states (Egypt, Lao PDR and Rwanda) are currently on track to reduce their number of slum dwellers. Instead, for two-thirds of FCAS, there has been an increase (with the remainder lacking data).

Presently an estimated 40% of slum dwellers in LICs and MICs are in FCAS. As of 2030, this share is projected to rise to 50% of slum dwellers – some 427 million people.

**SDG 12, target 12.2: promote sustainable resource use**

Decoupling economic growth from resource use is the main goal of sustainable development, given finite natural resources and the environmental impacts of their extraction (Wiedmann et al., 2013). The material footprint measures the amount of raw materials needed to sustain economic growth, taking into account their trade. A threshold of 3 to 6 tonnes per capita has been suggested (Bringezu, 2015; UNEP, 2015), which is well below the current high-income country (HIC) average of around 25 tonnes per capita. Through to 2030, the largest growth is expected in upper-middle-income countries (UMICs), which are projected to reach 35 tonnes per capita, driven by China. The footprint in FCAS currently stands at 3 tonnes per capita and is projected to rise to 4 tonnes in 2030, which is within sustainability thresholds (Figure 15). The danger is that these countries could suffer the harmful effects of the overuse of natural resources in richer countries.

**SDG 13, target 13.2: combat climate change**

Greenhouse gases (GHGs) are already at levels that the Intergovernmental Panel on Climate Change (IPCC) considers too high for the world to effectively address climate change. Although this target does not refer to a quantifiable indicator, we use reduction of GHG emissions as a proxy because it is vital in combating climate change (per Nicolai et al., 2015). Because GHGs would need to stabilise for the world to get close to being on track to reach this target, it falls into the ‘reversal’ category.

In FCAS, levels of GHG emissions are three times lower than those in non-fragile settings, and are due to increase only negligibly by 2030 (Figure 16) – placing the onus for reduction on the rest of the world. However, it is people in FCAS that are likely to bear the brunt of climate change – not least extreme floods and droughts, and the resultant effects on food security.

**Figure 15 Material footprint in fragile and non-fragile states**

Source: see Annex 1.
**SDG 14, target 14.2: protect marine environments**

Support for livelihood practices such as agriculture, fishing and pastoralism has the potential to ‘help a broader segment of the population of fragile states because so many people rely on these occupations for their livelihoods’ (AfDB, 2016: 38). As such, the preservation of marine environments may be particularly important for people in FCAS. The target on protecting marine environments is global in nature: although some countries have more coastline than others, it is not the preserve of any one. Previous work in this area has highlighted severe challenges. Nicolai et al. (2015) estimate that 90% of coral reefs could be threatened by 2030 and places the world into the ‘reversal’ category for this target. Figure 17, showing a marked rise in the proportion of overexploited fish stocks globally, reflects this grim prognosis.

**Figure 16 Per capita greenhouse gas emissions in fragile and non-fragile states**

Source: see Annex 1.

**Figure 17 Proportion of overexploited fish stocks globally**

Source: see Annex 1.
**SDG 15, target 15.2: halt deforestation**

Deforestation has a host of pernicious effects that are experienced disproportionately in poor and fragile settings – not least the effects of flooding and soil erosion for economies reliant on agriculture, and a dependence on fuel wood in the absence of alternative energy sources. Previous work has identified a relatively positive trend in forest cover: Nicolai et al. (2015) place the world in the ‘reform’ category for this target, observing that the share of forested land is set to start increasing as of 2020 and that the world would likely come close to reaching the target of halting deforestation in this year (relative to a 2010 baseline). Our projections based on the 2005 to 2015 trend through to 2020, indicate virtually no change in this short period (Figure 18).

**SDG 16, target 16.1: reduce violent deaths**

Fragile and conflict settings are associated with a higher likelihood of all types of violence. Following Nicolai et al. (2015), we interpret the call for a ‘significant’ reduction in violent deaths as a reduction by half (or attaining a very low level, in line with the world’s third percentile). Globally, about 1.4 million people died from violent causes in 2016. This includes self-harm, interpersonal violence, conflict and terrorism and executions and police conflict (all causes of death reported in the World Health Organization’s (WHO) Global Burden of Disease, see Table A2). On trend, the figure will fall for the world in coming years but rise in FCAS.

A small number of countries have met or are on track to reach target 16.1: 5% of all countries and 9% of FCAS, while a few more are on track to get more than halfway there (10% of all countries, 9% of fragile

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*Figure 18  Share of forested land area in fragile and non-fragile states*

*Figure 19  Projected country trajectories for meeting target to reduce violent deaths*

*Source: see Annex 1.*
Box 4  SDG 17, target 17.2: boost overseas development assistance

We focus on the call for HICs to achieve the target of 0.7% of gross national income (GNI) for official development assistance (ODA), notably members of the OECD DAC.* Presently, on average, the 29 DAC countries contribute 3.8% of their gross national income to ODA and this figure is expected to grow slightly to 4.3% by 2030. As of 2017, five of the DAC countries had met this target – Sweden, Luxembourg, Norway, Denmark and the United Kingdom – as had Turkey and United Arab Emirates. Our projections suggest that, by 2030, Germany will also achieve the target. However, the majority of countries will need either to make major improvement (45%) or reverse course entirely (28%). Clearly, the DAC has considerable ground to make up to reach their ODA commitments.

Figure 20  Projected DAC country trajectories for meeting target on 0.7% of ODA as a share of GNI

*Data is lacking for HICs who are not DAC members; trend data is available for just nine. Source: see Annex 1.

states). But the largest share – just over 40% of all countries and of FCAS – need ‘revolutionary’ rates of change. And in around 27% of all countries, and 41% of FCAS, the rate of violent deaths is increasing.

Our analysis highlights the range of challenges that FCAS face across multiple SDG areas. Not only are current levels of deprivation in fragile states typically higher than in the relevant comparison countries – either all LICs and MICs or the world as a whole – but much slower rates of progress are anticipated. The consequence is that, on average, only a small minority of FCAS are on track to meet most of the selected targets, and 2030 is likely to see considerable and persistent deprivation – as well as a growing gulf between these countries and the rest of the world. The amount of deprivation concentrated in FCAS will grow between 2015 and 2030, while population trends suggest that the absolute number of people in fragile states facing certain deprivations will be larger than it is now. All this carries stark implications for people caught in crisis within these countries, who often represent large shares of their population.
3 The circumstances of people caught in crisis

Although national commitments and plans are now in place to pursue the SDGs, people caught in crisis are being left behind. So far, we have shown the greatest deprivation across multiple SDG areas will be concentrated in fragile states in 2030, and that conflict and displacement are trending upwards. The evidence is sparse and inconsistent (an issue in and of itself) but what data there is points to large deficits across many SDG outcome areas faced by people caught in conflict – deficits that should be of urgent concern to the international community. But to achieve Agenda 2030 for people caught in crisis and the rest of the world, we need to better understand the circumstances of this left-behind group – many of whom live in fragile states and are therefore doubly marginalised.

In this Chapter, we highlight the unique challenges and risks that people in crisis face as well as the opportunities that targeting them could offer for SDG delivery – focusing on people in crisis both as a vulnerable group but also as a potential driver of SDG progress (see also Annex 1: Table A3). For example, looking at health and education – two areas where gaps in access to quality services are acutely experienced – with immediate and long-lasting effects that amplify poor outcomes for people caught in crisis; often, learning is put on hold and death rates are higher. This can also have knock-on effects on refugee-hosting communities – for example, where refugees cannot access quality health services, this can lead to outbreaks of communicable disease, while investing in refugee health (e.g. through universal vaccination) can directly benefit host populations because of herd immunity. Supporting education among refugee children is similarly important: not only in ensuring learning outcomes but in contributing to social cohesion. And the humanitarian provision of education to children living in camps has also been shown to expand access for host communities too.

To look at these vulnerabilities and opportunities, we examine selected outcomes for people in crisis under particular goal areas, selected because they are among the most critical to enhancing self-reliance among refugees (see, for example, IRC 2018a). They are not intended to be exhaustive but rather to provide illustrative examples of how key SDG areas matter to, and what is needed to accelerate progress for people in crisis. We focus on:

- accessible and available services (SDG 3 on health and SDG 4 on education)
- freedom from violence, with an emphasis on violence against women and girls and (SDG 5 on gender)
- economic inclusion and empowerment (SDG 1 on poverty and SDG 8 on livelihoods).

These goal areas also broadly align with several priority policies identified in focus groups with various left-behind groups and in other analyses of the leave no one behind agenda (see Stuart et al., 2016). While the list is necessarily selective, it is not intended to diminish the importance of other goals, where deficits are also compelling and in need of urgent attention – for example, that across the world’s 10 most acute humanitarian crises, some 56 million people lack access to safe water,11 and that

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11 Author calculation of data from OCHA reports.
90% of refugees in camps lack electricity (Lahn and Grafham, 2015). Where possible, we stress the interconnected nature of the SDGs.

### 3.1 SDG 3: ensure healthy lives and promote well-being for all

Crisis has manifold impacts that can jeopardise health, leading to a reversal in outcomes. Beyond direct impacts such as deaths and injuries sustained in conflict, crises also magnify hazard exposure, create or increase hunger (which depletes immunity), erode health service capacity and supplies, limit people’s movements, and can worsen water and sanitation access. These factors typically result in higher death rates from preventable causes, outbreaks of infectious disease, and in some cases, the re-emergence of diseases that had been eradicated. In conflict settings, the so-called ‘secondary toll’ often exceeds conflict-related fatalities. Mental distress among those living in crisis and those who have sought refuge elsewhere is also common. We know, too, that the effects of war on health outcomes can last a lifetime.\(^{12}\) All these consequences of crisis not only challenge the attainment of SDG 3, focused on health, but they also stand to jeopardise the other goals for which health is a prerequisite – not least education, livelihoods and freedom from poverty.

#### 3.1.1 The effects of lacking infrastructure

A pervasive lack of basic health infrastructure is a key feature of crisis. Health facilities can be decimated in conflict, or simply non-functional. The share of health facilities that are operational, for the crises for which this indicator is available, ranges from just over 22% (South Sudan) to 83% (Mali) (Figure 21). Health workers are often also subject to direct attacks (WHO, 2018a) and face an \(^{12}\)See, for example, Kesternich et al. (2012), who show that the experience of the Second World War increased the probability of suffering from heart disease, diabetes and depression in older age.

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**Figure 21 Share of health facilities that are operational across crisis contexts**

<table>
<thead>
<tr>
<th>Country</th>
<th>Operational Share</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mali</td>
<td>83</td>
</tr>
<tr>
<td>Pool, Republic of the Congo</td>
<td>65</td>
</tr>
<tr>
<td>Sudan</td>
<td>62</td>
</tr>
<tr>
<td>Afghanistan</td>
<td>50</td>
</tr>
<tr>
<td>Syria*</td>
<td>50</td>
</tr>
<tr>
<td>Yemen</td>
<td>45</td>
</tr>
<tr>
<td>Borno State, Nigeria</td>
<td>30</td>
</tr>
<tr>
<td>South Sudan</td>
<td>22</td>
</tr>
</tbody>
</table>

\(\text{‘up to half’}.\)

*Source: OCHA reports for all but Republic of the Congo, which is ACAPS (2017). For Yemen, the 45% figure is cited in ACAPS (2017) and World Bank (2018a), 50% is cited in OCHA reporting.*
immense array of other challenges (Namakula and Witter, 2014). In the context of Yemen’s cholera epidemic of 2016–2018 – ‘the largest documented cholera epidemic of modern times’ (Camacho et al., 2018) – WHO and UNICEF reported that the 30,000 local health workers who were pivotal in ending the outbreak had not received a salary in nearly 10 months (UNICEF Yemen, 2018).

Take Syria, for example. In conflict-affected areas of Aleppo, 80% of hospitals have been destroyed or are only partially functional and only 35 doctors remain for 250,000 people (WHO, 2016). In besieged parts of the country more broadly, only 3% of the population received health assistance in 2015 (Save the Children, 2016). The evidence indicates that more people may have been killed from a breakdown of the health system than directly from fighting (Baker, 2014, cited in World Bank, 2017a). Baker reports that people are dying of chronic diseases that three years previously would have been completely manageable. As of early 2014, some 200,000 people were believed to have died because they could not access routine medical care (e.g. in childbirth, following a heart attack or owing to diabetes-related complications) (ibid.).

A clear impact of the destruction (or closure) of health facilities is a reduction in immunisation and, spurred by other effects of conflict, increased outbreaks of communicable diseases. Polio has re-emerged in Syria (Sparrow, 2014, cited in World Bank, 2017a), as have diphtheria and malaria in Venezuela (ACAPS, 2017), all of which had previously been eradicated. Research with Syrian refugees living outside camps in Jordan and Syria found that only 24.5% of those in Jordan and 12.5% in Lebanon were fully immunised, while 33.5% of respondents in Jordan and 40% of those in Lebanon reported difficulties in obtaining child vaccinations (Roberton and Weiss, 2017). Devarajan and Mottaghi (2017: 18) point to a re-emergence of ‘previously well-controlled communicable diseases including measles, tuberculosis, and leishmaniosis’. In 2012, the first year of significant refugee inflows, reports of tuberculosis in Lebanon rose by 27% (ibid.).

3.1.2 How crisis affects health outcomes

From 2000 through 2012, the Centre for Research on the Epidemiology of Disasters (CRED) assembled comprehensive data on key health outcomes for people in crisis (IDPs, refugees, people in conflict-affected areas) that can be compared across 24 complex emergency situations, alongside national averages for these countries. From this data, CRED reported that IDPs were less than half as likely as refugees and others in crisis settings to be immunised against measles (2013). However, it also found that in most countries it studied, measles-containing vaccine coverage was higher among people in crisis than nationally. This shows that the humanitarian sector is taking these issues seriously, although coverage is not yet universal. Broader efforts are needed to ensure that this basic immunisation – which stood at 85% globally in 2017 (WHO, 2018b) – reaches the recommended 90% threshold, and reinforces the need to work across the humanitarian nexus to strengthen health systems and health outcomes for both displaced and host communities.

Another clear impact of conflict is increased rates of acute malnutrition. 2017 was the worst year on record for acute malnutrition, with one declared famine in South Sudan, and Yemen, northeast Nigeria and Somalia on the brink of famine (Flowers, 2017). Not coincidentally, all four contexts are impacted by conflict, and the combination of disrupted food supply, population displacement, and destroyed and disrupted health service provision frequently turns deadly. Of the 24 countries experiencing acute

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13 ‘Effects on health workers’ security and health included abduction, ambush, injury and death. Conflict-related challenges ... included disconnection from social and professional support systems, displacement, limited supplies and equipment, increased workload and long working days, and lack of pay: Breakdown in transportation and dangerous roads led to their physical, professional and social isolation’ (Namakula and Witter, 2014:iii).

14 See also IRC (2018b) on Libya, where many vulnerable migrants do not access health services for fear of being detained.

15 Due to funding constraints, CRED is no longer compiling this data from health and nutrition field surveys in fragile countries, so updated data is not available. See http://cedat.be.
malnutrition rates above 10% (IFPRI, 2016), 19 are FCAS. Acute malnutrition is deeply dangerous to children especially, with children who have acute malnutrition between three and nine times more likely to die than those who are not malnourished (Young and Marshack, 2018).

Ultimately, the impact of crisis on health is revealed in its impact upon mortality. CRED data shows that death rates (total and for under-fives) among people affected by crisis were substantially above national averages in most crises (CRED, 2013; Heudtlass et al., 2016). At the median, excess mortality for IDPs was twice as high as baseline mortality, whereas for conflict-affected residents, it was 1.5 times as high. Mortality in refugees, in turn, was not dissimilar from the host-country baseline (Heudtlass et al., 2016). The main driver of mortality in conflict-affected areas is mortality in children under five years old, who die mostly from preventable causes including pneumonia, diarrhea and malaria (CRED, 2013). Overall, child mortality among people in crisis declined between 2000 and 2012, with relative successes including Niger and Uganda. However, in most countries, it exceeded national averages considerably: it was over twice as high in Bangladesh and nearly four times as high in Yemen (ibid.).

3.1.3 Deterioration of mental health

The deterioration of mental health among people living in crisis – and the lack of accessible services – goes against SDG 3.4 to ‘promote mental health and well-being’. In humanitarian crises, WHO concluded that the prevalence of mild and moderate mental disorders could increase from a baseline of 10% to an estimated 15% to 20%, and the prevalence of severe mental disorders, from 2%–3% to 3%–4% (WHO, 2012: 1). Meanwhile, the Centers for Disease Control and Prevention estimate that between 30% and 70% of people who have lived in war zones experience symptoms of post-traumatic stress disorder and depression (Mollica et al., 2004, cited in Centers for Disease Control and Protection, 2014). Mugisha et al. (2015) report, reviewing the evidence, that exposure to ‘chronic civil conflict that is characterized by widespread human suffering and massive displacement’ is associated with rates of major depressive disorder ranging from 39% to 97%.

Case studies reinforce this general conclusion:

- In Haute Kotto, Central African Republic, between March 2017 and February 2018, the four most common diagnoses (together accounting for 91% of new diagnoses) included depression, epilepsy, psychosis and post-traumatic stress disorder (Mbeya et al., 2018).
- In Syria, World Bank (2017a) reports that an entire generation of children shows signs of ‘toxic stress’. Some 70% of children that were surveyed reported bed wetting, a sign of post-traumatic stress disorder (Save the Children, 2017), which is perhaps unsurprising given that two-thirds of children were said to have lost a loved one, had their house bombed or shelled, or suffered conflict-related injuries (World Bank, 2017a).
- 40% of asylum seekers in Italy and 70% of those in Greece exhibited severe symptoms of anxiety and depression which could have been precipitated by war and violence in their countries of origin, as well as violence during transit and uncertainty during the asylum application (World Bank, 2018b).

Though data for IDPs is relatively lacking, studies also report social marginalisation and psychosocial stress for this group. For instance, in Azerbaijan, IDPs expressed ‘despondency and anxiety, likely a result of their uncertain situation’ over 20 years after the experience of displacement (World Bank, 2011: 9).

Treatment of mental illness is lacking. In Iraq, while it is estimated that some 20% of the population suffer from mental illness or will do so at some point in their life (Alhasnawi et al., 2009; EPIC, 2014), only 6% can access treatment (Alhasnawi et al., 2009). WHO statistics suggest that there are fewer than four psychiatrists for every million people in the country and fewer than two nurses working in mental health per 100,000 people (WHO, 2015).

16 ‘Excess mortality’ is defined here as the ratio of crude death rates in emergency assessments over the baseline crude death rate as reported in World Development Indicators (Heudtlass et. al., 2016: 1).
3.1.4 What this means for SDG attainment

The unmet needs of refugees for primary health care are compromising SDG attainment in host countries too. Important examples of this are Lebanon and Jordan, where refugees comprise 17% and 7% of the population respectively (Huang and Graham, 2018) and are likely to be in poorer health than the national population. For instance, in 2015, UNHCR noted that 16% of Syrian refugees reported a pre-existing medical condition that had a ‘negative effect on the daily life of a family member’ (UNHCR 2015, cited in Abu Hamad et al., 2017). In Lebanon, Devarajan and Mottaghi find that ‘displacement has stalled, and in some cases reversed, important health gains’ (2017: 18).

For example, they report a 68% increase in maternal mortality between 2012 and 2017, from 12.7 to 21.3 deaths per 100,000 live births, a rate that was nearly double that of the native population.

A recent six-year research programme focused on building the evidence base for strengthening health systems to promote universal healthcare (UHC) in countries emerging from crisis (see Box 5). In host countries too, refugee inflows have challenged this important ambition. Lebanon’s plan to expand insurance coverage, particularly for vulnerable groups, stalled following the influx of 1.3 million Syrian refugees in need of health services (World Bank, 2017b, cited in Devarajan and Mottaghi, 2017). And with Jordan’s introduction of a co-payment for refugees in 2014, Syrian refugees’ use of health services fell nearly 60%, with a recent survey finding that more than half could not afford their medication, and half of pregnant women could not afford transportation to antenatal care appointments (ibid.; see also Abu Hamad et al., 2017).

3.2 SDG 4: ensure inclusive and equitable quality education

Crisis undermines the educational opportunities of children caught in crisis, whether they stay in areas of conflict or flee for their survival. Inadequate educational opportunities, in turn, not only deprive young people of their right to and the benefits of an education, but also raise exposure to early marriage, forced recruitment and survival sex (UNHCR, 2017), and can have long-term effects on health, labour productivity and economic development (Justino, 2011; Islam et al., 2015). Schools themselves may be destroyed, rendered unsafe or overwhelmed, while reduced spending, limited mobility and the health and psychosocial impacts of crisis also compromise learning.

3.2.1 Effects on school infrastructure, educators and students

The most visible effects of conflict are the destruction or closure of schools and targeting of educators and students. In war-torn areas, with increasing frequency worldwide,17 schools are attacked, and students and educators are individually targeted. In Yemen, for example, as of March 2018, 2,500 schools were out of use – 66% had been damaged by heavy violence, 27% had closed down and 7% were being used to shelter displaced people or the military (UNICEF, 2018c). Students and educators, in turn, were targeted most frequently in Afghanistan, Israel–Palestine, Nigeria and the Philippines (GCPEA, 2018). In Nigeria, conflict between the government and Boko Haram insurgency (currently in its ninth year) has led to the death of some 2,295 teachers and the destruction of more than 1,400 schools (Tukur, 2017; Onuoha et al., 2018).

3.2.2 Impact of crisis on enrolment

Although the details may differ, conflict typically disrupts access to schooling, and reduces equity in terms of access to education and quality – with long-term implications for learning outcomes. Children living in conflict-affected countries are three times more likely to be out of school than children in LICs (Aber et al., 2017). Conflict directly depresses school enrolment, evidenced in multiple studies in Latin America and the Caribbean, Eastern and Central Asia, and sub-Saharan Africa (see Omoeva et al., 2018,

17 Violence directed at students, educations and institutions increased between 2009–2013 and 2013–2017 according to GCPEA (2018).
for a review), and in cross-national analysis. In Côte d'Ivoire, for example, students who were likely to be in high school during the conflict ‘lost’ nearly two years of education (Ouili, 2017). Lai and Thyne (2007) concluded that in an ‘average’ conflict-affected country, conflict led to the loss of 64,000 students, while analysis of 100 countries over a 50-year period found that, on average, conflict lowered mean attainment and gender parity while raising educational inequality (Omoeva et al., 2018).

In 2015 and 2016, an estimated 24 million refugees and IDPs were children under 18 (Nicolai et al., 2018) – that’s 60% more than all the children in the United Kingdom. The available data suggests that refugee children and adolescents remain among the most marginalised groups in education, as is evident in levels of school attendance that are well below global averages:

- One half of school-age refugee children (3.7 million in 2016) are not receiving an education at all and refugee children are five times more likely to be out of school than their non-refugee peers

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**Box 5  Case study: rebuilding health systems in countries emerging from crisis**

A key concern for countries emerging from crisis is how to rebuild health infrastructure and bolster health outcomes, given that crisis often causes their steep deterioration. The ReBUILD consortium, which undertook six years of research in Sierra Leone, Zimbabwe, northern Uganda and Cambodia, identified three core aspects of the process to rebuild health systems in countries emerging from conflict or crisis:

**Human resources.** Health workers are the backbone of any health system and are ‘arguably the most critical factors affecting the performance of a health system’ (Martineau et al., 2017: 4). Health workers, and especially community health workers, are essential to providing care during and after conflict, and need to be supported through adequate training and supervision, and with the supplies and resources necessary to provide care.

**Communities.** Health financing policies need to be matched to the distinctive needs of communities emerging from crisis, e.g. policies that seek to reduce the cost of health care at the household level – as in Cambodia, where health equity funds and community-based insurance schemes have helped bolster access, especially among the poor.

**Institutions.** Conflict can debilitate institutions while governance challenges are multiplied – not least by the proliferation of external actors and aid. One result has been that policies have often focused on short-term objectives – as in northern Uganda where ReBUILD found a greater emphasis on the ‘hardware’ of health infrastructure (e.g. building clinics) and less of the ‘software’ (e.g. ensuring vulnerable groups could access care).

The priorities ReBUILD identify include: support to community providers – often ‘the first port of call for health seeking for impoverished and often traumatized communities’ (ibid.: 5); developing mechanisms to identify and support vulnerable households emerging from crisis as well as appropriate financing schemes; and strengthening district-level institutions and local governance to reinforce ownership and coordination of health systems.

*Source: Martineau et al., 2017*

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1 This is reflected in IRC research (Kozuki et al., 2018) in South Sudan which found that community health workers, who frequently serve their communities of origin, moved with their communities during conflict, continuing to provide care as long as they could access essential medical supplies.

18 Putting this in context, one of the most ambitious school building programmes in history (in Indonesia, 1974–1978) yielded gains of 0.38 of a year for the affected cohort (Merrouche, 2006: 16, cited in Jones and Naylor, 2014: 35).
This is drawn into relief through studies of particular settings – for instance, in Chad, where secondary enrolment levels are already extremely low at 33%, enrolment for refugee children was just 8% (Zubairi and Rose, 2016).

- Only 6 in 10 refugee children attend primary school (fewer than 50% of those in LICs) compared with 91% of children globally (UNHCR, 2017).
- Just 23% of refugee adolescents attend secondary school (9% of those in LICs), compared with 84% of adolescents globally (ibid.).
- Just 1% of refugees are enrolled in education at a tertiary level, compared with global enrolment of 36% (ibid.).

These low attendance levels mean first that refugee children and adolescents are lagging well behind the target set in SDG 4.1 – that ‘all girls and boys complete free, equitable and quality primary and secondary education’ – and, consequently, that huge rises in coming years will be needed to meet the target (Figure 22). Globally, progress of 0.63% yearly at a primary level and 3.30% yearly at a secondary level would see all primary- and secondary-age children in school by 2030. For refugee children, the comparable figures are 3.6% and 11.4%, respectively, while for refugee children in LICs, they are 5.0% and 19.0%. The situation can be worse for girls than boys in crisis areas and in refugee communities. Girls are 2.5 times more likely to be out of school if they live in a conflict-affected country, and 90% more likely to be out of secondary school than those living elsewhere (UNESCO, 2015). In Eastern Africa and the Horn, only five refugee girls are enrolled for every 10 boys – although elsewhere, when easier for them to access paid work than girls, it is boys who are more frequently pulled out of school (Pereznieto et al., 2017).

Host countries often lack the capacity to provide education to all children, systems become overwhelmed, and quality also suffers. The situation is especially acute for LICs, which host the most refugees; some 86% of refugees settle at least temporarily in a neighbouring LIC with a weak education system (UNICEF, 2016).

Figure 22  Share of refugee children currently attending primary school and secondary school, and annual change needed to reach full enrolment by 2030, compared with global averages

Source: data on attendance rates is from UNHCR (2017) for 2015 (global) and 2016 (refugees), data on rates of change needed to achieve universal attendance are author computations using compound growth rates.
3.2.3 How crisis affects learning outcomes
Evidence on learning outcomes for children affected by conflict and displacement is scant but suggests very poor results:

- In Democratic Republic of Congo (DRC), 91% of primary school children (Grades 2 to 4) could not answer a single reading comprehension question on the Early Grade Reading Assessment test (Torrente et al., 2011).
- In Syria, a 2016 assessment concluded that 35% of 13-year-old children could not read a 60-word story, while 46% could not solve a basic subtraction problem (IRC, 2017a).
- Among Syrian refugee children aged 5–14 years and enrolled in community-based education in informal settlements in Lebanon, 70% could not read a letter of Arabic at baseline (IRC, 2014 cited in Aber et al., 2017).
- Among Eritrean refugees in Ethiopia, fewer than 6% of refugee children had reached the benchmark reading fluency by Grade 4 (Dryden-Peterson, 2011, cited in Zubairi and Rose, 2016).

Finally, crisis affects not only the education of refugees and IDPs, but of host communities too. For instance, while the Ugandan government welcomes all child refugees in its public school system, this contributes to the fact that most schools exceed the maximum ratio of 1 teacher for 45 students. Yagani, a small primary school near the South Sudanese border, has opened its doors to 5,000 students and only has 38 teachers – a ratio of 138 children per teacher – and in the classrooms, 18 children study using one lesson book (UNHCR, 2016). In places like Lebanon and Jordan, overcrowding has been addressed through introduction of a double- and triple-shift system. While largely welcomed as a practical solution, the separate classrooms also risk entrenching difference between Syrian and host-community children (Dryden-Peterson, 2016) and can increase discrimination and harassment of Syrian refugee children (Hagen-Zanker et al., 2017). However, our evidence review also points to promising steps the international community is taking to bolster the education of children in crisis situations.

3.2.4 Accelerating progress in education
Asked what they need most, time and time again children and young people in crisis settings mention continuing their education. In a meta-analysis of studies consulting 8,749 children in 17 different crises – including conflict, disasters and protracted crises – 99% reported education as a priority (Save the Children, 2015). This desire to learn has increasingly been matched through policy commitments and programmatic responses, with the global community increasingly committed to developing new mechanisms to channel increased finance where it is most needed.

Over the last decade, the global Inter-Agency Network on Education in Emergencies has been key to better policy and sharing best practice on this issue. Members of this group advocated for the creation of Education Cannot Wait, a global partnership focused on increasing political will and finance for education in emergencies (Nicolai et al., 2016c). Bringing together multiple donors both globally and in country, in its first year of operations the fund invested $81 million in 14 countries affected by conflict, displacement and natural disasters (ECW, 2018). Among these, their support for the recent nationally led Education Response Plan for Refugees and Host Communities in Uganda (2018–2021), which targeted refugee settlements and covered 30% of the host community, is an example of a comprehensive and innovative approach (Government of Uganda, 2018). Along similar lines, commitments in the Djibouti Declaration have created momentum in East Africa to make quality education accessible for refugees, returnees and IDPs in the region (IGAD, 2017), while in 2016, the World Bank and partners launched a fund to provide concessional financing to MICs hosting large numbers of refugees, raising $370 million in its first year to support resilience-building projects in Lebanon and Jordan.

In addition, education response is broadening to better cover full learning cycles; while primary schooling has traditionally been the focus of education in emergencies, this is beginning to shift. Greater attention to the early years is notable through the John D. and Catherine T. MacArthur Foundation’s award of $100
million to the Sesame Workshop and IRC to create the largest early childhood development initiative in the history of humanitarian response (Miliband et al., 2018). At the other end of the spectrum, a key advocate for secondary education has been Malala Yousafai, who promotes 12 years of quality primary and secondary education for all and emphasises its particular importance for girls and refugees (Malala Fund, n.d.).

### 3.3 SDG 5: ensure freedom from violence for women and girls

Women and girls caught in crisis are at greater risk of gender inequalities, trafficking and violence and abuse. These are not only critical protection risks but also significantly impede women’s ability to participate in decision-making to support recovery, transition and development. Sexual violence is a common tactic of war, conflict and displacement can exacerbate existing discriminatory practices (e.g. early and forced marriage), and experiences of crisis put pressure on both men and women that in turn increase the vulnerability of women and girls (Domingo et al. 2013; O’Neil et al., 2016). Moreover, in times of crisis, states are less able to protect women and provide adequate services (O’Neil et al. 2016), and prevention and response services for gender-based violence (GBV) are a low priority in emergency response. This has direct consequences for the achievement of SDG 5 for women and girls in crisis and indirect consequences for several other goals, not least those relating to health, education, employment and growth, and women’s leadership and political representation (SDGs 3, 4, 8, 9 and 16).

#### 3.3.1 Violence against women and girls

The statistics on ‘rape as a weapon of war’ make for bleak reading, but it is also notable that rates of intimate partner violence (IPV) during crises tend to be much higher than most rates of wartime rape and sexual violence perpetrated outside the home (Stark and Ager, 2011). Crisis settings can provoke ‘systematic sexual and gender-based violence’ (Davies and True, 2015: 495), particularly in contexts where national accountability mechanisms are absent or severely weakened, giving way to a climate of impunity, and deliberate strategies aim at targeting civilians, particularly the sexuality and reproductive capacity of women (Steiner et al., 2009). Both rape and IPV are under-reported in most settings (Ellsberg et al., 2001; True, 2018) but the available evidence suggests very high levels.

- In conflict zones in South Sudan, up to 65% of women and girls have experienced physical and/or sexual violence in their lifetimes (Murphy et al., 2017a). (This is nearly twice as high as the García-Moreno et al. (2013) estimate that 35% of women globally experience such violence at some point in their lives.) The same study finds that perpetrators are not just armed actors – IPV was the most common form of violence reported.
- In conflict and post-conflict sub-Saharan Africa, recent demographic health surveys and other household surveys suggest high levels of IPV among partnered or ever-partnered females: 57% for any IPV – physical, sexual and/or psychological – in DRC; 20% for physical IPV in Sudan; 38% for any IPV in Liberia; and 60% for any IPV in Uganda (cited in Kiyanda et al., 2016).
- In an urban setting in Côte d’Ivoire, nearly 3 in 10 women (29%) reported the experience of physical or sexual violence within the previous year (IRC, 2015).
- Among former child soldiers in Sierra Leone, 44% of females had experienced sexual violence (Betancourt et al., 2011).
- In Thailand, among Burmese refugees, UNHCR reports that two-thirds of suicides are women compared to a national average in Thailand of three males to every female; and most suicides involved victims of rape or domestic violence (UNHCR, 2006).

19 See UN Security Council Resolutions on women, peace and security, especially SCR 1325 and SCR 1820 (UN Women, 2013).

20 Considerable research has focused on estimating the sizeable impacts of IPV on economies worldwide – with one estimate suggesting IPV cost the global economy over 5% of world GDP (Fearon and Hoeffler, 2014).
• Approximately 1 in 5 women who are refugees or displaced by an emergency experience sexual violence (Vu et al., 2014), though the study recognises that this violence is often under-reported.
• In DRC and in refugee camps in Ethiopia, more than half of conflict-affected adolescent girls (aged 13–19) reported the experience of physical, sexual or emotional violence, in most cases perpetrated by intimate partners and/or other family members (Stark et al., 2017).

Often rape and sexual violence are compounded by other elements of crisis – for example, a lack of electricity. Lahn and Grafham (2015) report that only 4% of women and girls would go out after dark in the Goudoubo camp in Burkina Faso, due to a lack of street lights.

3.3.2 What this means for other SDG outcome areas
SDG 5 encompasses three core, interlinked, elements: GBV, economic empowerment and participation. As such, violence against women and girls not only limits progress towards specific targets linked to this, but other aspects of SDG 5 and other goals. GBV has knock-on effects on development outcomes such as health (including mental health) and the ability to pursue a livelihood and assume leadership positions, with long-term development consequences. It can cause injuries that lead to both acute and chronic illness, while the effects on sexual health include unwanted pregnancies, complications from unsafe abortions, and sexually transmitted infections (UN Women, 2013).

Violence against women has been used as a tool of economic disempowerment in crises – as in Uganda, where women, who do the majority of agricultural work, were targeted during conflict, to cut off food supplies (Turshen, 2000, cited in True, 2018). Conversely, when women who are more economically empowered (e.g., through favourable land and property regimes), they are more able to protect themselves from violence (True, 2018). And violence against women and girls who speak up in public, or seek political office is common, especially in conflict-affected countries (UNDP, 2012; True et al., 2013, cited in True, 2018). This has an impact on the fulfilment of SDG 16, requiring states to build on the mandate of UN Security Council Resolution 1325 on women, peace and security to promote the integration of programmes addressing violence against women and community-level violence with long-term peace-building. Ensuring that UN sanctions address sexual violence against women in conflict settings has recently been proposed as one potential mechanism to take this forwards (Huvé, 2018).

3.3.3 Lack of resources dedicated to violence against women and girls
While effective responses to GBV have been identified (Box 6), resources are typically limited. More than 60 stakeholders have now signed the road map of the 2013 Call to Action on Protection from Gender-Based Violence in Emergencies,21 which sets out steps to drive change and foster accountability from the humanitarian system to address GBV. But more funding, capacity-building and Southern partner involvement is needed (IRC, 2017b). Funding should be longer-term and not just focused on crisis response, to address deeper, long-standing attitudes, behaviours and norms that underpin violence against women and girls (Murphy et al., 2017b). Sustaining the momentum needed to ensure durable solutions are enacted is vital – given that some development partners have begun to assign less priority to issues around violence against women and girls, both through gender-neutral language, which arguably leads to relatively less support of women’s needs, and through the underfunding of programmes aimed at combating such violence. Indeed, GBV programming receives only 0.5% of all humanitarian funding.22 There are also relatively few resources to support progressive laws and policies, and their implementation.

21 https://reliefweb.int/sites/reliefweb.int/files/resources/Call-to-Action-Roadmap.pdf
Prevention and response services for GBV tend to be low priority in emergency response, with other needs seen as more ‘urgent’. Where programmes are in place, they have often focused on conflict-related, non-partner violence, with little support given to women and girls affected by IPV, despite the fact that this is even more widespread in emergency situations (Murphy et al., 2016; Murphy et al., 2017b).

There is an urgent need for multilateral, targeted and long-term responses to address violence against women and girls in development and humanitarian settings. Beyond such measures, in order to achieve the SDGs and protect, support and empower women and girls in conflict and humanitarian crises, donors, policy-makers and UN agencies need to better understand the drivers of GBV; design and resource interventions to address the specific needs of different groups affected by GBV; and strengthen multi-stakeholder partnerships between local and international groups to facilitate strategies that work across the humanitarian–peacebuilding–development nexus.

The evidence suggest certain elements are key to successful responses – these include supporting the physical and mental health of survivors, providing safe spaces, community outreach and awareness-raising, reducing the risk of violence, establishing referral mechanisms and coordinating responses across sectors (see FN21). Such services need to be not only available in name but implemented appropriately. For example, in Bangladesh, while women’s safe spaces are vital for service delivery, reports suggest a common lack of understanding of best practice, with examples of men working in centres and the visible identification of survivors of sexual violence (IRC, 2018c). And while integrated approaches are essential, interventions often miss the mark owing to sectoral siloes.

A recent review by Murphy et al. (2016) – of the few rigorous assessments of interventions that are available – shows the most successful programmes:

- **are multifaceted**, including both response services for survivors and prevention initiatives to curb violence against women and girls (e.g. awareness-raising, engaging community groups, strengthening leadership)
- **address underlying risk factors and drivers of GBV**, with a particular focus on changing attitudes and gendered norms that condone GBV as a means of correction and control (see Samuels et al., 2017)
- **actively engage all community members**, not only survivors and/or perpetrators.

While some challenges are unique to conflict, not least the mobility of people in crisis situations, Murphy et al. (2016) also report that successful approaches from non-conflict settings could be adapted to crisis contexts – for example, ‘one-stop-shop’ crisis centres that offer multifaceted, multisectoral support for survivors. Models of comprehensive case management are now being adapted to refugee contexts too. For example, in Dadaab refugee camp in Kenya, initial evaluations are showing some promising outcomes such as improved mental health (Hossain et al., 2018).

The needs of certain groups who experience considerable violence, such as adolescent girls, are often overlooked by current programming approaches (Murphy et al., 2017b). To reach them, new efforts are needed to identify entryways and innovative pathways … including targeting teen mothers accessing health services during pregnancy, creating adolescent spaces in women-safe space programming, and using technology to develop different ways of delivering programming, e.g. mobile services (ibid.: 4).
3.4 SDGs 1 and 8: promote economic inclusion and empowerment

Poorer countries are more prone to crisis, while crisis and escape from conflict can deepen poverty in distinctive ways. Over half of the 27 countries for which OCHA has launched appeals are presently LICs – with Syria falling into this category in 2018 after several years of conflict – and more than 90% of LICs are considered fragile. Among refugees, the average duration of exile stood at 10 years at the end of 2017 (Devictor and Do, 2018), highlighting the need for longer-term solutions that go beyond meeting short-term humanitarian needs.

Ensuring people’s livelihoods is therefore an important mitigating strategy. Often, the perception is that forcibly displaced persons compete with the poorest members of host communities, increasing their poverty. However, where the investment climate is sound, the presence of IDPs and refugees can increase demand and create jobs to the benefit of host communities (World Bank, 2017c). It is incumbent on policy to harness these potentially valuable effects to improve the circumstances of both displaced people and other economically insecure community members so that both benefit.

3.4.1 SDG 1: end poverty in all its forms everywhere

Extreme poverty itself causes conflict (Stewart, 2002; Braithwaite et al., 2016) while conflict can push people further into acute and chronic poverty through a collapse of trade and investment, the destruction of infrastructure, assets losses and the weakening of institutional capacity (World Bank, 2011, cited in World Bank, 2017c). Among people caught in crisis, poverty tends to rise dramatically, due to the destruction or crisis-driven sale of assets, lost production and income-generation opportunities, and because households often react to crisis by cutting visible investment – for instance, leaving land fallow and retreating from markets (ibid.). For IDPs and refugees, often this poverty persists amid protracted periods of displacement where assets are depleted, prospects for labour market integration are limited and social networks are lacking.

People in need in crisis situations

In crisis-affected countries, the share of the population in need of humanitarian assistance can provide some insights into poverty, broadly defined. Across the world’s 26 major crises for which OCHA reports this data, on average some one in three people are ‘in need’, constituting a total of around 152 million people – which is almost equal to the populations of Republic of Korea and Viet Nam combined. In some countries, this is a relatively small share of the national population (e.g. around 4% to 5% in Burkina Faso and Senegal), whereas at the other extreme, in Yemen and Syria, it is in excess of 70% (Figure 23).

Income poverty in crisis situations

This broadly comparable metric can be complemented by data on the extent to which income poverty is evident in specific conflict settings, as well as among forcibly displaced communities. In the world’s major active conflicts, the available evidence (often based on indirect estimations, given difficulties in

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23 All but Benin, Senegal and Togo.

24 This was proposed by Manuel et al. (2018a). People in need ‘refers to people whose physical security, basic rights, dignity, living conditions or livelihoods are threatened or have been disrupted, and whose current level of access to basic services, goods and protection is inadequate to re-establish normal living conditions within their accustomed means without assistance’ (UN OCHA, 2017a: 6).

25 This indicator is available for all the OCHA crisis countries excluding Pakistan. Note that UN OCHA (2017b) gives an aggregate figure of 135.7 million people in need but this does not include people in need in those countries that are outside the UN OCHA-led response planning process (namely Bangladesh, Burkina Faso, Democratic People’s Republic of Korea (DPRK), Mauritania and Senegal).
Figure 23  Proportion of people in need in major crisis settings, 2017

Sources: UN OCHA (2017b) on people in need and World Bank (2018) on population, except for Myanmar, Nigeria and Bangladesh. The population of Kachin, Kayin, Shan and Rakhine states, Myanmar is from UN OCHA (2017c). The population of Northeast Nigeria is from UN OCHA (2017d). The population of Cox’s Bazar is from the Bangladesh Bureau of Statistics, however, because official statistics are unlikely to include refugees, the 905,000 refugees recently estimated by UN OCHA (n.d.) are added to the census count. The methodology used to identify people in need differs by country, so the comparison is intended to be illustrative rather than indicative.
collecting data, see section 4.2.3) suggests a sharp rise in poverty leaving most people unable to fulfil their basic needs.

- In Syria, around 6 in 10 people are estimated to be extremely poor – that is, those people ‘whose per capita expenditure is less than the cost of food plus expenditure on absolute-minimum essential non-food goods’ (World Bank, 2017a: 11).26 This figure is roughly five times the pre-conflict poverty level.
- In Yemen, 83% of the population were estimated to be below the extreme poverty line ($1.90 PPP) in 2017, up from 50% in 2015, soon after conflict began (World Bank, 2018a). Some 40% of households in the country are reported to have lost their primary income source (Gallup World Poll data, cited in ibid.).
- In South Sudan, poverty ($1.90 PPP) was reported at 47% in 2011 and at 66% in 2015, the latest year for which estimates are available (World Bank, 2017d).

These figures refer to the share of people living below the poverty line. By measuring how far below the poverty line poor people’s average incomes are, we can see what it might cost to alleviate their poverty, information that can be used to design social protection programmes. Where an effective government is absent, an alternative to social protection programmes are cash transfers, which have proved effective in various crisis settings including reaching ex-combatants in DRC and conflict-affected people in Somalıa (Development Initiatives, 2015, cited in Manuel et al., 2018a).

**Poverty amongst refugees and IDPs**

IDP and refugee communities also experience high poverty rates relative to their own countries pre-conflict. This is particularly the case where they cannot compete in formal labour markets. This may be because the economic climate is unfavourable, host-country policies preclude their working or their own relative skill levels render them uncompetitive.

- In Uganda, IDP households experienced a 28% to 35% decrease in consumption and a significant decline in the value of their assets, compared with non-displaced households, effects that were still in evidence two years later (World Bank, 2017c).
- In Colombia, IDP household consumption and income plummeted by 53% and 28% respectively, pushing the majority below the extreme poverty line (Ibáñez and Moya, 2006, cited in ibid.).
- More than two-thirds (68%) of Syrian refugees live in poverty – double the share of poor people in Syria pre-conflict (Figure 24).27 Over 99% of Syrian refugees presently reside in Middle East and North Africa countries (UNHCR, 2018a), where they face poverty levels that are between 18 and 62 percentage points higher than the national average (UNHCR, 2018b).
- In Uganda, a survey of refugee and host-community children found that the former were more deprived of socially perceived necessities – with a gap of between 8% and 32%, depending on the item (Cardiff University and UNICEF Uganda, 2018).
- Relatively high poverty is also evident among those few refugee households able to settle in HICs. In the Netherlands in 2016, for example, more than half of households with people from refugee countries had an income below the low-income threshold, compared with 8% of the national population. The figure was as high as 83% among households of Eritrean origin (Statistics Netherlands, 2018).

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26 Various scenarios are outlined which make different assumptions about how growth and inequality measured from 2004 to 2007 will carry forward.

27 68% is a population-weighted average of poverty levels across the five countries in Figure 24, excluding the relatively small number of Syrian refugees residing in camps in Jordan and Turkey – about 10% of the total – for whom poverty data is not available.
3.4.2 SDG 8: ensure decent work

Opportunities for work that is decent – that is, characterised by fair remuneration, safe working conditions and job security – are limited by crisis. People in crisis mostly lack access to a secure livelihood, may experience de-skilling through their participation in mismatched, low-skilled employment and are disproportionately affected by violations of employment rights. Refugees are often barred from formal employment altogether. Women are particularly vulnerable to discrimination, exploitation, violence and abuse. Though in some cases, refugees may compete for work with host communities, policies that aim to create livelihood opportunities for refugees and IDPs can also lead to more jobs and economic development for the host population (see Box 7). With displacement increasingly protracted (Crawford et al., 2015) access to work is crucial, and can be a means of bridging the transition from humanitarian support to fostering longer-term development.

Accessing work is key for refugees’ livelihoods, self-reliance and psychosocial well-being. As such, it can affect the delivery of SDG 8, and others including SDG 1 (ending poverty) and SDG 3 (good health), while also potentially having positive impacts on host-country economies (d’Albis et al., 2018, drawing on 30 years of data across 15 countries).

Labour market access for refugees

A recent Global Knowledge Partnership on Migration and Development (KNOMAD) study considered the right to work and actual labour market access in 20 major refugee-hosting countries (which together house about 70% of the global refugee population). It finds that, while theoretically refugees in 17 of the 20 countries are eligible for formal employment (Zetter and Ruaudel, 2016), in practice labour market access is often restricted. For instance, only 12 countries allow refugees the full freedom of movement needed to enforce this right. Further explanations include high fees, complex

Figure 24 Latest estimates of poverty among Syrian refugees and host countries

Note: data on Syrian refugees in Turkey and Jordan refers to those living outside camps; in Egypt, poverty is described as the share of the refugee population that is ‘highly or severely vulnerable, meaning they cannot afford the minimum requirements for a dignified life’ (UNHCR, 2018b: 7).
Source: data on Syrian refugees is for 2017, from UNHCR (2018b). Country headcounts (latest year available) are based on national poverty lines and are from World Bank country poverty and equity portals, except Syria, pre-conflict, which is UNDP (2011) cited in World Bank (2017a).
administrative processes or outright obstructions, other policies and practices that place restrictions on refugees and mediating factors (e.g. refugees’ lack of social networks, the small size of the formal economy) (ibid.).

In reality, the vast majority of refugees – regardless of status – find work in the informal economy (ibid.). One example is Ethiopia, where Eritrean refugees can leave camps through the out-of-camp policy, though they are still denied the right to work. This means that many Eritreans are forced into insecure, precarious and illegal economic arrangements (Mallett et al., 2017). The extent to which such work is beneficial for refugees, depends on whether informal work is tolerated or penalised (see e.g. Bellamy et al., 2017, on differences in outcomes for Syrian refugees in Turkey, where informal employment is tolerated, compared to Jordan, where irregular workers are at risk of being returned to camps). Informal work in most cases is characterised by insecurity, poor working conditions, low pay and exploitation (Zetter and Ruaudel, 2016), which has direct implications for SDG delivery – for instance, SDG 8.8, which calls for promoting ‘safe and secure working environments of all workers, including migrant workers’.

Opportunities in urban areas
Refugees and IDPs in urban settings are generally better off given broader possibilities for accessing employment (World Bank, 2017c). Some 60% of the world’s 22.5 million refugees with known locations reside in cities, with substantial proportions of them living in the most major and largest urban areas (Huang and Graham, 2018). The number of IDPs is likely to be higher still. Precise data on displaced people in these settings is hard to obtain, given these populations may have little reason to identify themselves as such, that governments may not be disposed to monitor their conditions, and counting people in informal settlements is notoriously challenging (Carr-Hill, 2013).

The explosive growth of a number of cities around the world – from Bogotá to Khartoum, Karachi to Monrovia – is significantly driven by influxes of refugees, returnees and/or IDPs (Crisp et al., 2012). And massive refugee influxes can pose sizeable challenges for humanitarian actors and for city authorities in terms of providing public service access, ensuring the safety of these new inhabitants and fostering social cohesion (IRC, 2018d).

But the available evidence suggests that refugees can enhance urban development if coordinated responses recognise their presence as an ‘opportunity to identify and realise pathways to sustainable and inclusive growth’ (ibid.: 33). One example is the Greater Amman Municipality, which has adopted several initiatives aimed to support displaced and marginalised residents including the promotion of refugee-owned and registered businesses, particularly those owned by women, and supporting civil society organisations to meet needs of vulnerable women and youth (ibid.).
Box 7  Policy and programmatic responses to improve livelihoods for refugees

A plethora of livelihood interventions targeted at refugees (mostly in LICs and MICs, many within refugee camps) aims to ensure the economic and social integration of long-term refugees (Jacobsen and Fratzke, 2016), with varying levels of success (ibid.; Mallett et al., 2017). The gig economy – in which mobile platforms bring together workers and purchasers – has also been put forward as one potential avenue. In Jordan, for example, both ‘crowd work’ (which is not tied to a particular location) and on-demand work (which may be home-based) may present new economic opportunities for Syrian refugee women, not least as their mobility and ability to participate in the workforce may be circumscribed by cultural and domestic factors (Hunt et al., 2017). Hunt et al. caution, however, that ‘any attempt to support refugees’ entry into the gig economy should also try to improve the conditions of that work itself’ (2017: 27), including through appropriate legislation and robust employment protection. More broadly, to ensure that programming both meets economic needs and aspirations for work, as well as protection needs (e.g. around discrimination and marginalisation of refugee workers), an integrated livelihoods and protection approach is important (Barbelet and Wake, 2017). Bermudez outlines 10 principles that should be considered – from addressing risks related to documentation and inclusive livelihoods development, to promoting joint economic ventures between the host and refugee communities (2017). Understanding the perspectives and experiences of refugees, their aspirations, the types of work they do and the risks and constraints they face is fundamental (Barbelet and Wake, 2017).

More recently, focus has shifted to policy models that benefit host economies – many of which struggle with high un/underemployment and stagnating, slow-growing or uneven economic development – as well as refugee flows. Such models focus on these inflows as an opportunity for sustainable development in host countries, with potential positive impacts on SDG delivery. An example of this are refugee compacts, agreements between host government and donors that combine grants, concessional loans and other ‘beyond aid’ incentives, in order to support both refugees and host communities (Huang, 2018). The Jordan Compact is the only example of such an experiment on a considerable scale (while the compacts in Lebanon and Ethiopia are lagging). But, while significant progress has been made in Jordan, challenges remain in ensuring widespread access to quality education and sustainable livelihood opportunities and in securing tangible improvements in the daily lives of Syrian refugees (Barbelet et al., 2018; IRC, 2018e). This is unsurprising given the speed with which the Compact was designed and rolled out.
4 Addressing the needs of people caught in crisis

4.1 The challenge of intervening in fragile and conflict-affected states

Intervening in fragile states and crisis situations, and addressing the needs of people escaping from these settings, is difficult. Delivering on the commitment to leave no one behind – that is, to fast-track and prioritise action for the most vulnerable (Stuart and Samman, 2017) – can be challenging under any circumstances. In fragile states and in crisis situations, it is commensurately more challenging. In fact, international institutions have been under considerable scrutiny for their poor track record in fragile settings, leading to a number of recent reports on lessons learnt and growing consensus on the need to address fragility more effectively.

A new paradigm to address fragility needs to be much more focused on building an inclusive political consensus, working with governments on the priorities that countries set for themselves and developing their institutions (Manuel, 2018). Lindborg (2018) put together a list of shared lessons across a series of recent landmark reports and initiatives (e.g. Commission on State Fragility, Growth and Development, 2018; UN and World Bank, 2017; World Bank, 2018 IDA Replenishment; IMF and Fragile States Evaluation Report of 2018). Lindborg (2018) summarises key principles in common, which include the following:

- Success requires local ownership and inclusive political settlements.
- Commitment to sustained and realistic long-term timelines, as change can take decades, and therefore requires an appetite for risk and patience.
- Identifying early wins, alongside long-term commitment to build confidence on all sides (governments and donors) that change is possible.
- Prioritising and executing with flexibility, and without predetermined or earmarked requirements.
- Provision of incentives for mutual accountability and risk-tolerance, building consensus on priorities among partners.
- Commitment to shared frameworks for coordinated actions, including greater cohesion among donors.
- Leveraging of the private sector, including initiatives to support local private sector development.
- Reduction in violence and provision of citizen security, as these are essential for supporting a successful transition of any fragile state.
- Keeping inclusive politics at the centre; solutions need to include marginalised groups in a specific country.

The need for inclusive economic growth is widespread in FCAS and requires changes in approach within fragile states as well as with donor partners. Organisations like the World Bank and the International Monetary Fund (IMF) are working to change policies and frameworks, so that they can be more effective in providing budget support and an enabling environment for private sector development and important domestic resource mobilisation. Given the reticence of most foreign
The private sector also has a key role to play in improving living conditions in fragile settings where most people caught in crisis live. Box 8 provides some examples of initiatives undertaken by large and small businesses to drive employment and entrepreneurship among refugees, including in fragile settings and other host economies.

4.2 Three key areas for action: identifying the gaps

This final section discusses key areas to deliver on the commitment to leave no one behind, including for people caught in crisis – policy, finance and data (Manuel et al., 2018b) and identifies remaining gaps.

4.2.1 Policy
Devising concrete polices and priorities to leave no one behind will be context-specific and depend on countries’ levels of development and institutional capacity to deliver. But there are three key policy
areas that are likely to improve the outcomes of all vulnerable groups: access to basic services, anti-

discrimination (including in the labour market), and institutional and legal reforms (Stuart et al., 2016).

Within service delivery, improving the inclusivity and quality of UHC, enabling previously excluded

to attend school (including pre-school), and implementing social protection pilots to scale to

national systems were identified as critical pathways to leave no one behind in countries with low starting

points. Public information campaigns to change opinions or reduce discrimination and exclusion, and

piloting policies and programmes for marginalised groups to access labour markets and entrepreneurial

opportunities were highlighted among key anti-discrimination policies, while ensuring balanced

representation in key institutions featured as a priority for institutional and legal reforms (ibid.).

By definition, conflict-affected states have weak institutions and limited capacity to deliver these type

of policies, with governments often themselves part of the problem in the marginalisation of certain

groups. In the case of refugees, a large number flee to neighbouring states that may themselves be fragile,
or to countries with few resources to cope with large refugee inflows. International solidarity in support

of fragile states and those hosting large numbers of refugees is therefore paramount to implement the

policies needed to leave no one behind for people caught in crisis.

However, in practice, the existing development and humanitarian architecture is not delivering for

these vulnerable populations. As mentioned, there is increasing consensus that development efforts in

crisis settings are not working (Commission on State Fragility, Growth and Development, 2018). In

the case of humanitarian efforts, these focus on short-term relief, and even in situations where these

have stretched to cover areas related to long-term development (as the ones mentioned above), it

puts a strain on humanitarian funding and represents a mismatch with its core mandate and delivery

mechanisms (Bennett et al., 2016).

These failings of the aid architecture have long been recognised: since the mid-1990s, governments,
policy-makers, donors and aid agencies have been pushing for greater coherence and closer links

to humanitarian and development, security and political objectives (ibid.). More recently, increasing

engagement between humanitarian and development actors was agreed as one of the

2016 World Humanitarian Summit’s Grand Bargain goals (Metcalfe-Hough et al., 2018). However,

limited progress has been made to improve coherence and coordination across the humanitarian–
development nexus, for example by implementing joint needs assessments, programme planning

and common reporting mechanisms (ibid.). Real reform requires the UN to play a more active

role in institutionalising collective outcomes between humanitarian and development agencies,
governments and the private sector, which define key improvements in health, economic well-being,
safety, education and power for people caught in crisis (Miliband, 2016). The increasingly protracted

nature of crisis and the long-term nature of displacement means that strengthening humanitarian–
development coherence is becoming all the more urgent. As a result, new models aiming to do that

are starting to emerge. In education, the recently created global partnership Education Cannot Wait

is focusing on increasing political will and finance for education in emergencies, including support of

both refugee settlements and deprived host communities, and nationally led initiatives. Though early

in their implementation, compact models for refugees also appear to hold promise. These compact

models are agreements between host governments and donors that combine grants, concessional

loans and other ‘beyond aid’ incentives, to support both refugees and host communities to access

livelihood opportunities. Partnerships, including with the private sector, which focus on seeing refugees

as an opportunity to fill businesses’ labour gaps, are also emerging as a means to facilitate long-term

economic and social integration.

Finally, in addition to ensuring that the right policies to reach those left behind – including people

caught in crisis – are in place, these need to be included in development and sectoral plans to signal the

urgency of action and reporting that is required.
4.2.2 Finance

Ensuring that finance is aligned towards left-behind groups is linked to political commitment to this agenda from development partners and governments. ODI research shows that, to eradicate extreme poverty and focus on those countries that are not able to afford a basic social compact (including health, education and social protection, sectors known for their poverty-reducing effects and intrinsically linked to leave no one behind policies), ODA to LDCs (many of them fragile states) should increase to reach half of all ODA (Manuel et al., 2018a).

In 2016, donors spent $68 billion of ODA in fragile states or 65% of earmarked funding (OECD, 2018). While ODA growth is concentrated in fragile contexts, as mentioned in section 4.1, these are some of the most challenging settings for donors to achieve results. Further, most of the recent ODA growth to fragile settings has been due to humanitarian assistance. Between 2015 and 2016 the latter increased by 38% while country programmable aid (development aid available for programming) did not change. This trend is even more acute in the case of 15 countries classified as extremely fragile contexts. This gives support to the claim that humanitarian aid, particularly in extremely fragile contexts, is overstretched, in part due to insufficient development aid (ibid.).

In addition, many fragile states (26 out 58) are severely financially challenged, meaning that they cannot afford even half of the costs of a basic social compact. With 45% of country programmable aid targeting countries that can fund their own costs, there is considerable potential to improve current targeting of aid to these severely financially challenged countries. If, on top of this, all OECD DAC donors delivered their commitment to spend 0.7% of GNI on aid this would generate the additional funding required to fill this funding gap for core social sectors (Manuel et al., 2018a).

Manuel et al. (2018a) also find that, despite the body of evidence showing the positive impacts of social protection on poverty reduction, countries continue to underspend on this sector. It currently receives less than half the level of aid that education and health do, relative to the size of the financing gaps (ibid). This is particularly damaging given its clear direct role in delivering progress across a range of SDGs.

Targeting left-behind groups also means ensuring that the geography of public spending allocations is positively associated with need – that is, the greater the degree of disadvantage, the higher the level of support provided. One way of doing this is for governments to estimate the financing gap facing each region/county/district in their country with respect to the provision of key basic services. That gap could figure as a needs-assessment component in national and devolved financing formulae (Watkins and Alemayehu, 2012). ODI’s leave no one behind stocktakes (e.g. Blampied et al., 2018; Bhatkal et al., 2016a and 2016b) reveal that public budgets for health in Nepal and road infrastructure in Kenya have not followed pro-poor allocative principles, or any discernible needs-based assessment. Instead, budgetary allocation has often followed historical trends, mark-ups on past budgets and political incentives.

In the case of financing for people caught in crisis, challenges relate more to the modalities of financing. While countries facing protracted crises receive development funding, this is often not aimed at people displaced by crisis, and the humanitarian funding targeting them is mostly short term (Bennett et al., 2016). The greatest proportion of humanitarian funding is issued on a 12-month cycle (Parker, 2016). In these contexts, it is essential that financing is multi-year, flexible, with less earmarking and adaptable to often changing contexts (Lindborg, 2018). Targeting finance towards greater long-term impact is vital and requires both public and private financing to be guided by mutually agreed goals between governments, civil society and financing institutions that promote collective outcomes for displaced populations.

Further, additional financial incentives, such as no-interest-rate loans or more concessional grants, and non-aid incentives such as trade concessions may also be required to catalyse action for crisis-affected populations within LICs and MICs. Compacts, such as the one agreed with Jordan in 2016, illustrate the potential for innovative approaches that support host populations and displaced people. While there remains room for improvement, in Jordan development financing was paired with opportunities to support both national economic growth and refugees’ access to legal employment by
securing European Union trade concessions to increase investment in special economic zones. Within these zones, companies benefit from enhanced trade terms – reduced quotas and relaxed rules of origin – if their workforce includes refugees.

4.2.3 Data
The analysis presented in this report shows the importance of data in helping us understand the extent to which people caught in crisis are left behind but also highlights the many limitations of the available evidence. The scale of the challenge is enormous, but good data is essential to better understand the specific situation of different vulnerable groups, guide better policies and hold governments and donors into account.

Together, administrative data and household surveys are the source of more than half of all SDG monitoring data (Espey et al., 2015). But for people living in conflict-affected areas, their very insecurity often precludes such traditional means of data collection. The collection of administrative data (33% of SDG data (ibid.)) is challenging in fragile states, where institutional capacity is likely to be limited, and people in crisis are more likely to be excluded from household surveys (26% of SDG monitoring data (ibid.)).

For refugees, household surveys ‘with rare exceptions’ typically omit people living outside traditional household settings, including those in refugee camps (Carr-Hill, 2013). Refugees living outside of camps, 75% of the total number of refugees (Barbelet and Wake, 2017) are also likely to be rendered invisible – they are not routinely counted in government population censuses because they are not considered part of a country’s population, and are therefore excluded from household survey sampling frames (Carr-Hill, 2013). Displaced people living in insecure situations may also be unlikely to opt to participate in a detailed survey, if approached. As a result, while there are dedicated data

<table>
<thead>
<tr>
<th>Box 9 Innovative data initiatives</th>
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<tr>
<td>Drawing on new technologies as well as traditional approaches, innovative methods are being used to document the circumstances of people caught in crisis. For example:</td>
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<tr>
<td>In Senegal in 2013, UN Global Pulse used anonymised mobile phone data to track the mobility patterns of populations, showing that ‘for vulnerable population groups, changes in mobility patterns could indicate changes in livelihoods, or coping strategies, or exposure to new shocks’ and the potential for such real-time monitoring to act as a ‘powerful humanitarian warning system’ (UN ESCAP, 2017: 41).</td>
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<td>Polaris, an non-governmental organisation that runs the United States Human Trafficking Resource Center collaborated with technology companies to produce a real-time map documenting trafficking across the country – over nine years, it identified 32,000 cases of human trafficking, and developed a typology that identified 25 distinct types, essential data for crafting effective interventions (Polaris, 2017).</td>
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<td>Alix-Garcia et al. (2018) combine satellite data collected over a 20-year period with official data and household survey data to document the impact of the concentration of refugees in Kenya’s Kakumu camp, which is home to 182,000 refugees. This data has enabled them to document that this camp has the effect of raising economic activity and household consumption in the immediate vicinity by 25%.</td>
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<tr>
<td>Women for Women administers baseline and endline surveys to women survivors of conflict who participate in its economic empowerment initiatives – because the indicators are crafted in relation to the SDGs, they provide a powerful tool to highlight both gaps and the potential effects of programming across several goal areas.</td>
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collection instruments focused on camps, there is often scant data on IDPs or refugees living outside of camps. Moreover, there is 'little comprehensive data on the socio-economic vulnerabilities and needs of displaced persons or on the social and economic impact of displacement on host communities’ (Sarzin, 2017), and therefore the data that is collected on forcibly displaced people is used primarily for targeting humanitarian aid rather than tracking outcomes and is not necessarily synthesised with SDG monitoring efforts (Obrecht, A., personal communication).

Various proposals have been made to improve this situation, among them for the international organisations coordinating the major international household surveys28 to mainstream forced displacement into these instruments (Sarzin, 2017). Further, the GPSDD – a global network bringing together governments, the private sector and civil society to improve data for SDG delivery – has launched an Inclusive Data Charter seeking to mobilise commitment to improve data to understand the needs of most marginalised groups (GPSDD, n.d.).

The World Bank and the UNHCR recently established a joint data centre on forced displacement, hosted in Copenhagen, which is expected to be an important step forwards. The data centre brings together two key development and humanitarian actors, thereby combining the Bank’s deep expertise with data and UNHCR’s credibility with refugee populations. The hope is that this shared effort will drive data collection and new socioeconomic analyses of populations caught in various types of crises.

Finally, there is also a need to strengthen linkages and partnerships with humanitarian data initiatives, which collect most of the existing data on people caught in crisis but often operate in silos. Key development actors responsible for tracking progress in the SDGs should create strategic partnerships with the Centre for Humanitarian Data and leading organisations working on displacement and crisis data. At a more granular level, several innovative initiatives have demonstrated the potential for new technologies to contribute (Box 9).

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28 i.e. Macro International’s Demographic Health Surveys, UNICEF’s Multiple Indicator Cluster Survey, the World Bank’s Living Standards Measurement Survey and Labour Force Surveys.
5 Conclusion and recommendations

Meeting Agenda 2030 requires a redoubling of efforts directed at fragile states, targeted to their specific circumstances and the people living in crisis within their borders. Three years into the agenda, now that planning and action are underway, we are at a critical juncture. Failing to deliver on the leave no one behind agenda will mean that people in crisis living in fragile states will continue to experience privation, that the gap between them and the rest of the world will grow, and that the SDGs remain unachieved.

The impetus is on the international community. FCAS are facing an unfair burden – one that is set to increase in both relative and absolute terms – and, by definition, have limited capacity to deliver (Wagner and Sattelberger, 2017). The international community must recognise this imperative, take action and share responsibility to focus efforts where these are needed more.

Implementing the commitment to leave no one behind in all countries and all contexts will require a step change in focus to prioritise actions for the most vulnerable groups. Few countries reporting on SDG progress at the UN in their VNRs have referred to explicit strategies towards implementing the principle to leave no one behind. And people caught in crisis as a specific group are often overlooked – rarely mentioned as a left-behind group in VNRs (CDP Subgroup on Voluntary National Reviews, 2018) and often excluded from national development and sectoral plans (IRC, 2018e). This is revealing of governments’ political commitment to advancing this agenda. The first HLPF at the level of heads of state in September 2019 and its outcome declaration provide a key opportunity for course-correction.

Drawing on the analysis presented in this report, we lay out five pre-conditions for delivering on the commitment to leave no one behind in the short term – ideally by 2020. We also look at additional, specific recommendations to advance rapidly people caught in crisis as a left-behind group. The first two recommendations speak to the specific political moment in 2019 while the last three reflect on the policy, finance and data required to deliver leave no one behind.

5.1 Recommendations in advance of the 2019 HLPF

Recommendation 1: establish a high-level panel to drive further commitment and action on leave no one behind

The panel, consisting of former or present heads of state and global leaders, would highlight what action is needed for all left-behind groups, including people caught in crisis. The UN Secretary-General should appoint this panel by the end of 2018 to ensure its recommendations for left-behind groups are reflected in the outcome declaration of the first head-of-state-level meeting of the HLPF in September 2019.

Recommendation 2: ensure governments and donors have a formal process to track, review and debate progress towards achieving the leave no behind agenda.

The UN Secretary-General should require each member state to submit plans and report on progress for achieving leave no one behind. This should include people caught in crisis, among other left-behind groups.
At the national level, these processes should involve parliaments/legislatures to broaden political support for leave no one behind within each member state. Further, left-behind groups should be incorporated in development and sectoral plans, including vulnerable groups such as refugees and displaced populations.

In the case of fragile states with weak institutions, relevant UN agencies (OCHA, UNHCR, UNDP), working in collaboration, should establish a formal mechanism to track and review progress on leave no one behind for people caught in crisis. Further, there is an emerging opportunity to include monitoring mechanisms for the Global Compact for Refugees that include key SDG-related indicators and targets for refugees.

5.2 Recommendations for action at the 2019 HLPF

**Recommendation 3: national governments and development partners prioritise policies and actions that meet the needs of the groups most at risk of being left behind**

Examples include improving access to basic services, labour market participation, and institutional and legal reforms to protect rights and promote freedom from violence and discrimination.

Donors, FCAS and countries hosting large numbers of refugees should scale up interventions and partnerships that drive incentives for policy changes that will unlock progress towards the SDGs among people caught in crisis. These could include compact agreements and private sector partnerships. The UN should also take a lead role in institutionalising greater coordination and coherence between humanitarian and development approaches to meet the challenge of protracted crises.

**Recommendation 4: national governments and donors orient financing towards left-behind groups**

This would require half of all overseas development assistance to be spent in LDCs, 95% of whose population are in FCAS, including large numbers of people in crisis, but lack domestic resources to afford a basic social compact (Manuel et al., 2018a).

In addition, governments should commit to scaling up financing for social protection, which currently receives less than half the level of aid that education and health do, relative to the size of the financing gaps (ibid.). This is particularly damaging given its clear direct role in delivering progress across a range of SDGs.

At the national level, governments should commit that the geography of public spending allocations is positively associated with need – that is, the greater the degree of disadvantage, the higher the level of support provided. For example, by 2020 governments could estimate the financing gap facing each region/county/district of their country with respect to the provision of key basic services (Watkins and Alemayehu, 2012).

Development partners and governments should prioritise overseas development assistance for people caught in crisis, and to FCAS and LICs that host large numbers of refugees. This may require additional financial incentives, such as greater concessionality of funds such as no-interest-rate loans or more grants, and non-aid incentives such as trade concessions. This financing should also incentivise governments to implement policy changes that can support displaced peoples’ access to critical services, like education and health, and to formal, safe and decent jobs. Funding needs to be multi-year and flexible.

**Recommendation 5: national governments, international organisations, civil society and the private sector support efforts to improve data collection**

All relevant stakeholders should sign up to the GPSDD’s Inclusive Data Charter.
As part of this commitment, National Statistics Offices and international actors should be supported and encouraged to experiment with new technologies to fill data gaps for marginalised groups, including people caught in crisis, who are often excluded from traditional means of data collection.

The new World Bank and UNHCR joint data centre on forced displacement will play a key role in developing indicators and tracking progress for people caught in crisis.

There is also a need to strengthen linkages and partnerships with humanitarian data initiatives, which collect most of the existing data on people caught in crisis. Key development actors responsible for tracking progress in the SDGs should create strategic partnerships with the Humanitarian Data Center and leading organisations working on displacement and crisis data.


AfDB – African Development Bank (2016) *From fragility to resilience managing natural resources in fragile situations in Africa*. Abidjan: AfDB


CRED – Centre for Research on the Epidemiology of Disasters (2013) People affected by country: humanitarian needs in numbers. Brussels: CRED at the School of Public Health, Université catholique de Louvain


Development Initiatives (2015) Getting poverty to zero: financing for social protection in least developed countries. Bristol: Development Initiatives


Flowers, K. (2017), ‘The four famines: Alarm bells are ringing, but who is listening?’ Washington DC: Center for Strategic and International Studies (www.csis.org/analysis/four-famines-alarm-bells-are-ringing-who-listening)


Malala Fund (n.d.) (www.malala.org)


Tent (n.d.) ‘About Tent’ (www.tent.org/about)


UNHCR – United Nations High Commissioner for Refugees (n.d) ‘What is a refugee?’ UNHCR website (www.unrefugees.org/refugee-facts/what-is-a-refugee)


UNICEF Yemen (2018) Statement from UNICEF Executive Director Anthony Lake and WHO Director-General Margaret Chan on the cholera outbreak in Yemen as suspected cases exceed 200,000. UNICEF Press Release (www.unicef.org/yemen/media_12062.html)


Annex 1 Methodology and limitations

It is not feasible to project how the world will look for all 169 targets spanning the 17 SDGs given that many are not readily quantifiable, and because of data gaps (Nicolai et al., 2015). Therefore, as in Projecting progress (ibid.), we focused on one target (and indicator) per SDG to obtain an illustrative picture of country performance.

Target selection criteria

A target should:

1. ‘broadly reflect the essence of the overarching goal’, although it will not reflect the goal in its entirety (ibid.: 16)
2. specify a quantifiable outcome (e.g. under-five mortality should fall to ‘at least as low as 25 deaths per 1,000 live births’)
3. wherever possible, it should be represented by a ‘Tier I’ indicator, to maximise country coverage.

We also chose indicators that appeared most relevant for marginalised and disadvantaged groups in FCAS. Table A2 summarises the targets and indicators selected, and our data sources.

For each goal, where applicable, we identify the share of countries that are ‘on track’ and ‘off track’ to meet a given target given their recent progress, and the extent of progress that would be needed among off-track countries to do so. We also look at the share of the world’s population that each category of countries represent. While the earlier Projecting progress reports focus on the progress of the world, and of regions (and sub-regions) towards the goals, this report looks at progress at the country level – not least so we can identify the distinct trajectories of FCAS.

Projections methodology

To project progress, we adopt the following methodology (see Nicolai et al., 2016a and 2016b; Nicolai et al., 2016d). First, we calculate current rates of progress based on recent trend – in most cases, the average annual change over the most recent 10 years (see Table A2). Second, we project 2030 achievement assuming the most recent rate of progress continues over the rest of the SDG period. Third, we determine how much additional progress would be needed (if any) to achieve each SDG target.

1 Of the 232 indicators selected to monitor the targets, the Inter-Agency and Expert Group on SDG Indicators has assigned a ‘Tier 1’ status – indicating that data are already regularly produced for at least 50% of relevant countries and regional populations – to 93 (40%) – meaning that for the majority, considerable efforts will be needed either to produce data regularly or to establish the standards and methods that underpin data production (see https://unstats.un.org/sdgs/iaeg-sdgs/tier-classification).

2 https://unstats.un.org/sdgs/metadata/
We follow Nicolai et al. (2015) in categorising the performance of countries which are ‘off track’ to meet particular goals into three groups as a way to understand further the level of transformation needed: these are ‘reform’, ‘reversal’ and ‘revolution’.

- **Reform.** Countries that are on course to get more than halfway towards the target by 2030 on current trend. For these countries, appropriate, targeted solutions will be needed to speed up progress and ensure that the SDG is met.

- **Revolution.** Countries that are making progress towards targets but on their current trend, will not get more than halfway there. More significant actions and innovations will be needed to accelerate progress.

- **Reversal.** Countries where current trends would need to be reversed completely to have any chance of being met by 2030. A broader rethink of approaches is likely to be needed.3

We replicate the calculations for all LICs and MICs, all countries or the LDCs, depending on the target. It should be noted that the goals are framed in global terms. Although we are well aware of the pitfalls of interpreting global goals at the national level for those countries with lower starting points, as was often done unreflectively in the MDG era (for a critique, see Easterly, 2009; Rodriguez Takeuchi and Samman, 2015), we nonetheless believe that there is value in both global and national projections. The aim is not to chastise countries that have relatively further to go but rather to highlight the gaps for people in crises who reside overwhelmingly in fragile settings, to identify exceptional cases of progress, and to rally national and international solidarity behind delivery of Agenda 2030 for everyone.

Finally, a note on data availability. We selected indicators for this updated assessment of progress with a careful view to country coverage – in each case, privileging targets that were quantifiable and indicators relating to those targets with the largest possible country coverage, even if this required seeking out proxy rather than official SDG indicators. Nonetheless data gaps are pervasive (Figure A1). Several of the indicators – such as child mortality and undernourishment – are based on models that synthesise data from multiple sources to overcome data gaps. Data often tends to be missing for small countries, such that the share of the population missing is lower than the share of countries – for example, 15% of LICs and MICs are missing data on undernourishment but these cover just 3% of their population.

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3 We identify ‘reversals’ as those countries that have reversed along a given indicator by more than 5%, a threshold which is arbitrary but enables accommodating measurement error as well as marginal fluctuations.
Figure A1  Share of countries that are missing data across selected SDG indicators (fragile states and relevant comparator)

*The relevant comparator for Goals 10, 12–13, 15–16 is the world (whereas the relevant comparator for Goals 1-9, 11 and 17 is LICs and MICs).

Note: Goal 14 is not included because the indicator we selected is measured at a global level rather than that of countries. Extreme poverty contains no missing data since poverty levels for countries without household surveys were imputed.

Source: Table A1
<table>
<thead>
<tr>
<th>Country</th>
<th>2015</th>
<th>2030</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afghanistan</td>
<td>33,736</td>
<td>46,700</td>
</tr>
<tr>
<td>Angola</td>
<td>27,859</td>
<td>44,712</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>161,201</td>
<td>185,585</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>18,111</td>
<td>27,382</td>
</tr>
<tr>
<td>Burundi</td>
<td>10,199</td>
<td>15,799</td>
</tr>
<tr>
<td>Cameroon</td>
<td>22,835</td>
<td>32,980</td>
</tr>
<tr>
<td>Central African Republic</td>
<td>4,546</td>
<td>6,124</td>
</tr>
<tr>
<td>Chad</td>
<td>14,009</td>
<td>21,460</td>
</tr>
<tr>
<td>Comoros</td>
<td>777</td>
<td>1,062</td>
</tr>
<tr>
<td>Congo</td>
<td>4,996</td>
<td>7,319</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>23,108</td>
<td>33,337</td>
</tr>
<tr>
<td>Democratic People’s Republic of Korea</td>
<td>25,244</td>
<td>26,744</td>
</tr>
<tr>
<td>Democratic Republic of the Congo</td>
<td>76,197</td>
<td>120,443</td>
</tr>
<tr>
<td>Djibouti</td>
<td>927</td>
<td>1,133</td>
</tr>
<tr>
<td>Egypt</td>
<td>93,778</td>
<td>119,746</td>
</tr>
<tr>
<td>Equatorial Guinea</td>
<td>1,175</td>
<td>1,871</td>
</tr>
<tr>
<td>Eritrea</td>
<td>4,847</td>
<td>6,718</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>99,873</td>
<td>139,620</td>
</tr>
<tr>
<td>Gambia</td>
<td>1,978</td>
<td>3,001</td>
</tr>
<tr>
<td>Guatemala</td>
<td>16,252</td>
<td>21,203</td>
</tr>
<tr>
<td>Guinea</td>
<td>12,092</td>
<td>17,631</td>
</tr>
<tr>
<td>Guinea-Bissau</td>
<td>1,771</td>
<td>2,493</td>
</tr>
<tr>
<td>Haiti</td>
<td>10,711</td>
<td>12,544</td>
</tr>
<tr>
<td>Honduras</td>
<td>8,961</td>
<td>11,147</td>
</tr>
<tr>
<td>Iran (Islamic Republic of)</td>
<td>79,360</td>
<td>88,863</td>
</tr>
<tr>
<td>Iraq</td>
<td>36,116</td>
<td>53,298</td>
</tr>
<tr>
<td>Kenya</td>
<td>47,236</td>
<td>66,960</td>
</tr>
<tr>
<td>Lao People’s Democratic Republic</td>
<td>6,664</td>
<td>8,049</td>
</tr>
<tr>
<td>Liberia</td>
<td>4,500</td>
<td>6,495</td>
</tr>
<tr>
<td>Libya</td>
<td>6,235</td>
<td>7,342</td>
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<tr>
<td>Madagascar</td>
<td>24,234</td>
<td>35,592</td>
</tr>
<tr>
<td>Malawi</td>
<td>17,574</td>
<td>26,578</td>
</tr>
<tr>
<td>Mali</td>
<td>17,468</td>
<td>27,057</td>
</tr>
<tr>
<td>Mauritania</td>
<td>4,182</td>
<td>6,077</td>
</tr>
<tr>
<td>Mozambique</td>
<td>28,011</td>
<td>42,439</td>
</tr>
<tr>
<td>Myanmar</td>
<td>52,404</td>
<td>58,916</td>
</tr>
<tr>
<td>Nepal</td>
<td>28,656</td>
<td>33,168</td>
</tr>
<tr>
<td>Country</td>
<td>Population (in thousands)</td>
<td></td>
</tr>
<tr>
<td>----------------------------------</td>
<td>----------------------------</td>
<td></td>
</tr>
<tr>
<td>Niger</td>
<td>19,897</td>
<td>34,994</td>
</tr>
<tr>
<td>Nigeria</td>
<td>181,182</td>
<td>264,068</td>
</tr>
<tr>
<td>Pakistan</td>
<td>189,381</td>
<td>244,248</td>
</tr>
<tr>
<td>Papua New Guinea</td>
<td>7,920</td>
<td>10,487</td>
</tr>
<tr>
<td>Rwanda</td>
<td>11,630</td>
<td>16,024</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>7,237</td>
<td>9,720</td>
</tr>
<tr>
<td>Solomon Islands</td>
<td>587</td>
<td>773</td>
</tr>
<tr>
<td>Somalia</td>
<td>13,908</td>
<td>21,535</td>
</tr>
<tr>
<td>South Sudan</td>
<td>11,882</td>
<td>17,254</td>
</tr>
<tr>
<td>Sudan</td>
<td>38,648</td>
<td>54,842</td>
</tr>
<tr>
<td>Swaziland</td>
<td>1,319</td>
<td>1,666</td>
</tr>
<tr>
<td>Syrian Arab Republic</td>
<td>18,735</td>
<td>26,608</td>
</tr>
<tr>
<td>Tajikistan</td>
<td>8,549</td>
<td>11,194</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>1,241</td>
<td>1,704</td>
</tr>
<tr>
<td>Uganda</td>
<td>40,145</td>
<td>63,842</td>
</tr>
<tr>
<td>United Republic of Tanzania</td>
<td>53,880</td>
<td>83,702</td>
</tr>
<tr>
<td>Venezuela (Bolivarian Republic of)</td>
<td>31,155</td>
<td>36,750</td>
</tr>
<tr>
<td>State of Palestine</td>
<td>4,663</td>
<td>6,739</td>
</tr>
<tr>
<td>Yemen</td>
<td>26,916</td>
<td>36,815</td>
</tr>
<tr>
<td>Zambia</td>
<td>16,101</td>
<td>24,859</td>
</tr>
<tr>
<td>Zimbabwe</td>
<td>15,777</td>
<td>21,527</td>
</tr>
<tr>
<td><strong>FCAS</strong></td>
<td><strong>1,728,575</strong></td>
<td><strong>2,356,939</strong></td>
</tr>
<tr>
<td><strong>World</strong></td>
<td><strong>23%</strong></td>
<td><strong>28%</strong></td>
</tr>
<tr>
<td><strong>LICs and MICs</strong></td>
<td><strong>28%</strong></td>
<td><strong>32%</strong></td>
</tr>
</tbody>
</table>

*Source: UN Population Prospects, based on the OECD FCAS definition*
### Table A2 Targets, indicators and data selected for the projections

<table>
<thead>
<tr>
<th>Goal</th>
<th>Theme</th>
<th>Target</th>
<th>Indicator</th>
<th>Country focus</th>
<th>Data source</th>
<th>Period used in projection</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Poverty</td>
<td>1.1</td>
<td>End extreme poverty</td>
<td>$1.90 a day poverty line</td>
<td>Developing</td>
<td>PovcalNet, World Poverty Clock, imputations (see Manuel 2018a)</td>
</tr>
<tr>
<td>2</td>
<td>Hunger</td>
<td>2.2</td>
<td>End hunger</td>
<td>Undernourishment</td>
<td>Developing</td>
<td>IEAG-SDGs database</td>
</tr>
<tr>
<td>3</td>
<td>Health</td>
<td>3.2</td>
<td>Reduce child mortality</td>
<td>Under-five mortality rate</td>
<td>Developing</td>
<td>IEAG-SDGs database</td>
</tr>
<tr>
<td>4</td>
<td>Education</td>
<td>4.1</td>
<td>Universal secondary education</td>
<td>Share of young adults (20 to 24 years) with at least completed lower secondary education*</td>
<td>Developing</td>
<td>UNESCO Institute for Statistics (UIS)</td>
</tr>
<tr>
<td>5</td>
<td>Gender</td>
<td>5.3</td>
<td>End child marriage</td>
<td>Share of young women (20 to 24 years) marrying before age 18</td>
<td>Developing</td>
<td>UNICEF global databases</td>
</tr>
<tr>
<td>6</td>
<td>Water/sanitation</td>
<td>6.1</td>
<td>Universal access to sanitation</td>
<td>a) Access to safely managed sanitation, b) improved sanitation*</td>
<td>Developing</td>
<td>a) IEAG-SDGs database, b) World Development Indicators</td>
</tr>
<tr>
<td>7</td>
<td>Energy</td>
<td>7.1</td>
<td>Universal access to energy</td>
<td>Access to electricity</td>
<td>Developing</td>
<td>IEAG-SDGs database</td>
</tr>
<tr>
<td>8</td>
<td>Growth</td>
<td>8.1</td>
<td>Economic growth in LDCs</td>
<td>Growth of real GDP</td>
<td>LDCs</td>
<td>World Development Indicators</td>
</tr>
<tr>
<td>9</td>
<td>Industrialisation</td>
<td>9.2</td>
<td>Industrialisation in LDCs</td>
<td>Industry share of employment in LDCs</td>
<td>LDCs</td>
<td>World Development Indicators</td>
</tr>
<tr>
<td>10</td>
<td>Inequality</td>
<td>10.1</td>
<td>Reduce income inequality</td>
<td>Income growth of bottom 40% of population relative to growth of mean</td>
<td>Global</td>
<td>World Bank Global Database of Shared Prosperity</td>
</tr>
<tr>
<td>11</td>
<td>Cities</td>
<td>11.1</td>
<td>Reduce slum populations</td>
<td>Number of urban residents living in slums</td>
<td>Developing</td>
<td>IEAG-SDGs database</td>
</tr>
<tr>
<td>12</td>
<td>Waste</td>
<td>12.5</td>
<td>Reduce consumption to sustainable levels</td>
<td>Per capita material footprint</td>
<td>Global</td>
<td>IEAG-SDGs database</td>
</tr>
<tr>
<td>14</td>
<td>Oceans</td>
<td>14.2</td>
<td>Protect marine environments</td>
<td>Share of fish stocks that are overexploited</td>
<td>Global</td>
<td>IEAG-SDGs database</td>
</tr>
<tr>
<td>15</td>
<td>Biodiversity</td>
<td>15.2</td>
<td>Halt deforestation</td>
<td>Forest area as share of land area</td>
<td>Global</td>
<td>World Development Indicators</td>
</tr>
<tr>
<td>17</td>
<td>Partnerships</td>
<td>17.1</td>
<td>Mobilise domestic resources</td>
<td>Net ODA as a share of GNI</td>
<td>Global</td>
<td>OECD Data</td>
</tr>
</tbody>
</table>

*Proxy indicators (i.e. these do not belong to the official list of SDG indicators but were selected either due to an absence of official data or because the available official data were not sufficiently comprehensive).*
Goal | Link with people in crisis
--- | ---
1 No poverty | People in crisis are a particularly vulnerable group and as such more likely to fall into (extreme) poverty. (SDG 1.1, SDG 1.2)
 | People in crisis lose access to any social protection programmes when displaced, and refugees (and in some cases IDPs) are often not eligible for host-country social protection. (SDG 1.3)
 | People in crisis often lose access to land and other assets when displaced, and often have worse access to services, though refugees may have improved service access, depending on the host country. (SDG 1.4)
2 Zero hunger | People in crisis are a particularly vulnerable group. They may suffer from hunger and malnutrition but not be reached by assistance programmes aimed at improving nutrition. (SDG 2.1, SDG 2.2)
3 Good health and well-being | Eligibility for health access is often tied to citizenship / residency status, with only some countries opening up (emergency) health care to all, regardless of status. (SDG 3.8)
 | People living in conflict-affected areas in particular have limited access to health services, with health facilities destroyed, and lacking supplies and staff. (SDG 3.8)
 | Failure to meet the water, sanitation and hygiene (WASH) needs of people in crisis can contribute to public health problems, particularly when large numbers of people are concentrated in temporary, informal or dilapidated areas. (SDG 3.3, SDG 6.3, SDG 11.1)
 | People in crisis are likely to have higher mortality and morbidity and mental health outcomes, particularly those in conflict-affected areas and refugees making risky journeys. (SDG 3.1, SDG 3.2, SDG 3.3, SDG 3.4)
 | Giving refugees access to health services can lead to improved health outcomes for the host population too (for instance, vaccinating refugee children). (SDG 3.3)
4 Quality education | Access to education plays an important role in social integration, economic mobility and learning outcomes for children in crisis. (SDG 4.1, SDG 4.2, SDG 4.5, SDG 10.2)
 | Eligibility for education can be tied to citizenship/residency status, which means that refugee/IDP children can be prevented from accessing education. In some cases, refugees are offered segregated education services, which may be of lower quality. (SDG 4.1, SDG 4.2)
 | In conflict-affected areas, education facilities may be destroyed or regular attendance can be hindered by fighting. (SDG 4.1, SDG 4.2)
5 Gender equality | Women and girls in crisis can experience violence at all stages of the displacement process, especially during transit (e.g. at refugee camps) or at their destination (e.g. by an employer). (SDG 5.2)
 | Girls living in crisis can be more at risk of harmful practices, such as female genital mutilation and child, early and forced marriage, which may be a coping strategy of families trying to make ends meet (SDG 5.3)
 | Poor facilities and service provision in host-countries could mean a heavy burden to women in particular and raise demands for caring for children in absence of schooling/other facilities. (SDG 5.4)
 | For refugee women and girls, displacement and subsequent evolution of social norms can be an opportunity to engage in paid work, where previously not possible. (SDG 5.5)
6 Clean water and sanitation | People in crisis can face significant barriers in accessing WASH services, particularly when they are in conflict-affected areas, transit or undocumented. (SDG 6.1, SDG 6.2)
 | Where people in crisis are not served with safely managed sanitation, open defecation, untreated wastewater discharge, and unsafe disposal of faecal sludge can contribute to pollution of surface and groundwaters, and impact on health and spread of diseases. (SDG 6.3, SDG 3.4, SDG 3.9)
 | Large and abrupt flows of refugees or IDPs, can pose specific problems to the coping capacity of service providers, particularly in places where challenges in water governance already exist. (SDG 6.4)
7 Affordable and clean energy | People in crisis are likely to have a lower level of energy access because of displacement, though refugees may have improved access depending on the destination country. Access to energy is also a challenge when in transit. (SDG 7.1)
 | Furthermore, people in crisis may only be able to access less energy-efficient, costly, unsafe and less-green energy sources (e.g. kerosene, generators), which could also affect their health. (SDG 7.2, SDG 3.9)
<table>
<thead>
<tr>
<th>Goal</th>
<th>Link with people in crisis</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>8 Decent work and economic growth</strong></td>
<td>Refugees, IDPs or people in conflict-affected areas mostly don’t access decent work (often only able to work in the informal economy), and can experience a process of de-skilling through their participation in mis-matched, low-skilled employment. They are disproportionately affected by violations of employment rights. (SDG 8.5, SDG 8.8)</td>
</tr>
<tr>
<td></td>
<td>The vulnerabilities experienced by people in crisis makes them more prone to experiencing forced labour, slavery or trafficking. (SDG 8.7)</td>
</tr>
<tr>
<td></td>
<td>Refugee women often have fewer livelihood opportunities than the host population and are more vulnerable to exploitation, violence and abuse. (SDG 8.7; SDG 8.8, SDG 5.2)</td>
</tr>
<tr>
<td></td>
<td>Policies targeted at creating livelihood opportunities for refugees can also lead to more jobs and economic development in host communities. (SDG 8.2, SDG 8.3)</td>
</tr>
<tr>
<td><strong>9 Industry, innovation and infrastructure</strong></td>
<td>Refugee inflows leads to greater diversity in host countries, and this can foster innovation. (SDG 9.5)</td>
</tr>
<tr>
<td></td>
<td>People in crisis (including those on the move) may lack access to information and communications technology due to a destruction of infrastructure, irregular legal status or lack of assets. (SDG 9.C)</td>
</tr>
<tr>
<td><strong>10 Reduced inequalities</strong></td>
<td>Removing legal barriers to accessing education – particularly for the children of refugee children – would boost enrolment rates, as would ensuring that all people have a legal identity and the necessary paperwork to allow them to enrol in school. (SDG 10.3)</td>
</tr>
<tr>
<td></td>
<td>Education can improve the social, economic and political inclusion of refugee children, particularly if they are better educated regarding their host country and able to speak the majority language. (SDG 10.2)</td>
</tr>
<tr>
<td><strong>11 Sustainable cities and communities</strong></td>
<td>People in crisis often don’t have access to adequate, safe and affordable housing and basic services, and are more likely to live in informal and unsafe areas. (SDG 11.1)</td>
</tr>
<tr>
<td><strong>13 Climate action</strong></td>
<td>Better consideration of internal displacement as a response to climate change – both extreme and slow-onset changes – and better financial planning are required to divert funds from adaptation to addressing a migration crisis. (SDG 13.1, SDG 13.A)</td>
</tr>
<tr>
<td><strong>16 Peace, justice and strong institutions</strong></td>
<td>Refugees and displaced people are at greater risk of violence, trafficking and exploitation. Refugee girls are more likely to be trafficked or experience sexual exploitation than boys. (SDG 16.2)</td>
</tr>
<tr>
<td></td>
<td>Refugees and IDPs may struggle to be accorded equal treatment within the justice system, or may be unable to access legal aid, while for people living in conflict-affected areas there may be limited adherence to the rule of law. (SDG 16.3).</td>
</tr>
<tr>
<td></td>
<td>Refugees and IDPs may be barred from political participation as non-citizens / non-residents. (SDG 16.7).</td>
</tr>
<tr>
<td></td>
<td>People in crisis are more likely to lack documents proving legal identity, with children born in situations of crisis often being officially registered. (SDG 16.9)</td>
</tr>
<tr>
<td><strong>17 Partnerships for the goals</strong></td>
<td>Data on people in crisis is very limited. Improving the evidence base is fundamental in order to better understand their needs. (SDG 17.8)</td>
</tr>
<tr>
<td></td>
<td>There are no international standardised approaches for monitoring variables relating to people in crisis. Development of data collection, monitoring and surveillance mechanisms is needed to understand their needs and develop appropriate programming. (SDG 17.18)</td>
</tr>
</tbody>
</table>

*Source: elaboration of Foresti and Hagen-Zanker (2017); Jobbins et al. (2018); Scott et al. (2018); Mallett (2018).*
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