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AN EVALUATION OF ORGANIZATIONS SERVICING INTERNALLY DISPLACED PERSONS IN THE REPUBLIC OF AZERBAIJAN

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ABSTRACT

This research examines the situation with the delivery of humanitarian services to the internally displaced persons in the Republic of Azerbaijan. It explores the ways in which relief assistance could be delivered more efficiently. The study concentrates on several major approaches to service delivery: 1) delivery of assistance in an integrated fashion (addressing multiple issues at a time), 2) delivery of assistance in a segmented fashion (addressing one issue at a time), 3) delivery of assistance with participation of the Government of Azerbaijan, and 4) delivery of assistance without the Government’s participation.

The research focuses on five main issues which have been identified as the most urgent ones: food aid, shelter, health, employment/income generation, and education. For each of these issues, the research tests the effectiveness of the above approaches to service delivery.

The study concludes by establishing that integrated approaches to service delivery tend to yield longer-term results, but they can be complex and consume many more resources and much more time than segmented approaches. Segmented projects, generally, tend to be simpler, and reach far more beneficiaries. However, they are more likely not to eradicate root causes of problems addressed. And finally, collaboration and coordination of efforts with the government and other organizations involved are crucial to avoid overlapping and duplication of activities in both integrated and segmented projects.
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1. INTRODUCTION

This research focuses on the issue of delivery of humanitarian assistance to the internally displaced persons (IDPs) in the Republic of Azerbaijan. Currently, Azerbaijan has more than 600,000 IDPs living in deplorable conditions. This number is quite significant for the country with the population of close to eight million people. Both the government and NGOs (non-governmental organizations) assist IDPs to resolve their plight. The research describes how humanitarian service is delivered and who the main actors are. It explains that at the present time some actors consolidate their expertise and resources, and deliver their services in an integrated way, whereas other actors prefer to deliver services without integrating their activities and coordinating their efforts with other organizations, which leads to the delivery of assistance in a segmented way. In the meantime, depending on its expressed and/or implied priorities, the government comes to the stage as either an active or passive participant (delivery of assistance with or without the government), which leads to various outcomes. Therefore, the main purpose of this study is to explore what combination of the assistance delivery approaches works best, when, and how.

1.1. Background on the Conflict over Karabakh

The ethnically Armenian Daglig-Karabakh (Mountainous Karabakh, and also widely known as Nagorno-Karabakh) Autonomous Oblast occupies about 1,700 square miles of mountainous territory in southwestern Azerbaijan. It is inside the international borders of Azerbaijan and shares no border with Armenia (Human Rights Watch/Helsinki 1994, XIII).
The dispute over Karabakh is a long-standing one, however, the genesis of the recent war dates back to February 1988, when Armenians in Khankendi (Stepanakert), the capital of Karabakh, held demonstrations demanding Karabakh’s incorporation into Armenia. This demand was taken up by the Daglig-Karabakh Oblast Soviet, which voted to appeal to the USSR Supreme Soviet for incorporation into the Republic of Armenia (Human Rights Watch/Helsinki 1994, 1). Demonstrations by Armenians in Yerevan, the capital of Armenia, in support of their ethnic brethren, continued rallies in Khankendi (Stepanakert) as well as violence in the border regions between Armenia and Azerbaijan triggered the declaration of a state of emergency by Soviet authorities and the deployment of 17,000 troops of the USSR Ministry of Interior to enforce it (Human Rights Watch/Helsinki 1993, 3-4). Waves of deportation of Armenians from Azerbaijan and Azeris from Armenia followed in ensuing years (Human Rights Watch/Helsinki 1994, 1).

The collapse of the Soviet Union in December 1991 was one of the major factors escalating the conflict. With the withdrawal of Soviet Internal Ministry troops from Karabakh, both Armenia and Azerbaijan formed and deployed their own armies. By early 1992, Karabakh erupted in full-scale war as Soviet Army weapons, heavy artillery, and missile systems were distributed to Armenia and Azerbaijan as part of the break-up of the Soviet military (Human Rights Watch/Helsinki 1993, 3-4).

As the war escalated, Armenian forces not only gained control of Karabakh but also occupied almost 20 percent of Azerbaijani territory (Cohen and Deng 1998, 50). The leaders of Karabakh declared independence, although this status has not been
recognized by any state. The fighting between Azeris and Armenians left more than 15,000 dead (Carley 1998, V).

Though the worst of the fighting ended in 1993, the conflict still remains stalemated after the warring parties signed a cease-fire agreement in 1994. Both Azeris and Armenians claim absolute historic ownership of the region and are confident of fighting for a just cause (Carley 1998, V). Armenia supports the aspirations for independence of the predominantly ethnic Armenian enclave of Karabakh. Azerbaijan seeks to preserve its national and territorial integrity, particularly since Karabakh’s armed forces have not only fortified their region, but have also occupied seven provinces surrounding it (see Figure 1). As should be obvious, the inherently contradictory concepts from international law—the sanctity of self-determination and of territorial integrity—seem to complicate the conflict (Graves 2000, 18).

Since 1992, a group of members of the Organization for Security and Cooperation in Europe (OSCE), called the Minsk Group, has been the primary mediator between Armenia and Azerbaijan. Unfortunately, little progress has been made by the OSCE, as each side has insisted on conditions that the other will not accept. The Armenians will not discuss the withdrawal of their troops from Azeri territories until Karabakh is recognized as independent; Azerbaijan insists on its complete territorial integrity and demands the withdrawal of Armenian troops before it will discuss any other matters (Carley 1998, V).
Civilians have been the main victims (Human Rights Watch/Helsinki 1993, 2).

The conflict has created a chaotic and bloody exchange of populations among Armenia and Azerbaijan. The rules of war, however, forbid the forced transfer or displacement of civilians. There are only two exceptions to the prohibition on displacement of civilians: their security or imperative military reasons. None of the displacement meets these rigid criteria (Human Rights Watch/Helsinki 1994, 58).
An estimated 350,000 Armenians fled Azerbaijan in two waves in 1988 and 1990. Between 1988 and 1994 an estimated 750,000 – 900,000 Azeris were forced out of Karabakh, Armenia, and seven other Azeri provinces completely occupied by Armenian armed forces. The predominant majority of the pre-war population of these provinces was composed of ethnic Azeris (Human Rights Watch/Helsinki 1994, 58).

Table 1. Refugees and IDPs of the Azerbaijan Republic, 1988-1994

<table>
<thead>
<tr>
<th>Category</th>
<th>Families</th>
<th>Persons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refugees deported from Armenia (1988-1989)</td>
<td>50,149</td>
<td>243,682</td>
</tr>
<tr>
<td>Mehseti Turks deported from Central Asia (1989-1990)</td>
<td>9,463</td>
<td>49,239</td>
</tr>
<tr>
<td>Internally Displaced Persons</td>
<td>146,455</td>
<td>611,239</td>
</tr>
<tr>
<td>Total number of refugees and IDPs</td>
<td>206,067</td>
<td>904,214</td>
</tr>
</tbody>
</table>

Source: Graves 2000, 47.

The biggest wave of displaced persons came in 1993, as Karabakh Armenian troops (often with the support of forces from the Republic of Armenia) captured Azerbaijani provinces surrounding Karabakh—the rest of Lachin province, Kelbajar, Agdam, Fizuli, Jebrayil, Qubatli, and Zangelan provinces—and forced out the Azeri civilian population (see Figure 2) (Human Rights Watch/Helsinki 1994, 58).
Figure 2. The Occupied Territories of Azerbaijan and the Line of Contact, 2000

Source: Organization for Security and Cooperation in Europe (www.osce.org)

The burden of providing for the overwhelming Azeri displaced population has fallen on the Azerbaijan Government and the international community (Human Rights Watch/Helsinki 1994, 61).
1.2. U.S. Sanctions

The delivery of humanitarian assistance to IDPs has been complicated by internal and external factors. Internal factors are mainly related to the local and national government. The government had to adjust to the idea that some other (sometimes powerful) organizations (donor agencies and non-profit organizations) would be operating back to back with it, and working with the local population. The government was expected to make a big change in its governing structures, attitudes, and philosophy inherited from the Soviet regime.

External factors are mainly related to the place of Azerbaijan in the international arena, and the willingness of donor agencies to invest. In this regard, sanctions imposed by the U.S. Congress have negatively impacted the delivery of humanitarian assistance and especially its integration and coordination (Hampton 1998, 168). To be more precise, it is Section 907 of the Freedom Support Act of 1992 that prohibits direct U.S. assistance to Azerbaijan unless the President of the United States certifies to Congress that Azerbaijan is “taking demonstrable steps to cease all blockades and other offensive uses of force against Armenia and Nagorno-Karabakh” (the Embassy of Azerbaijan to the U.S.).

The sanctions were imposed before the 1994 cease-fire agreement when Azerbaijan refused to conduct commercial transactions with Armenia, which had committed military aggression against Azerbaijan. It is true that Azerbaijan and Armenia have ceased all commercial exchanges, but this is to be expected as the two countries still remain at war. Currently, the Azerbaijani Government has no access to Karabakh
and the rest of Azerbaijani territories under Armenian occupation (the Embassy of Azerbaijan to the U.S.).

In 2001, some efforts were undertaken by the U.S. government officials to repeal the Section. In October, the United States lifted portions of the ban that inhibited the construction of the oil pipeline but upheld restrictions on military and economic aid to Azerbaijan (the Embassy of Azerbaijan to the U.S.).

Although Section 907 did not apply directly to humanitarian aid, NGOs say the ban prevents local NGOs from providing a full range of humanitarian services to Azerbaijan’s refugees and IDPs, especially in health care, which is completely state-run (U.S. Committee for Refugees Country Report 2001).

1.3. Problem Statement

Azerbaijan, like other countries of the former Soviet Union, was unprepared to deal with the problems of its uprooted population. The situation worsened even more with the collapse of the Soviet Union, causing the economy of Azerbaijan to plummet drastically. Grassroots, community-based and other assistance-rendering organizations had yet to be established.

Beginning in the early 1990s, with the help of the international community, a host of international donor and non-profit organizations has been operating in the country. As a result of their activities, numerous local NGOs have been initiated, which, together with their international counterparts, deliver humanitarian assistance to alleviate the plight of the displaced persons (IDPs and refugees). In general, they have concentrated
their efforts to provide food aid, medical supplies, temporary housing/shelter, employment, educational assistance, community development services, and so on.

This research identifies two principal approaches to the delivery of humanitarian assistance in Azerbaijan: integrated (addressing multiple issues at a time) and segmented (addressing one issue at a time). Each dimension consists of the following models of service delivery: integrated with the government, integrated without the government, integrated with other organizations, and integrated without other organizations. ¹ In the same manner, the segmented dimension includes: segmented with the government, segmented without the government, segmented with other organizations, and segmented without other organizations. ²

So far, no academic research has been undertaken to find out under which circumstances the assistance will be delivered more effectively. In general, the approaches and models mentioned above have both negative and positive sides:

1. Integrated approach—this approach can be very effective as it targets root causes of addressed issues. However, it is also very difficult to use since it requires coordination among many agencies, which can be very cumbersome and, at times, impractical.

2. Segmented approach—this approach may be effective during the emergency phases when it is necessary to meet immediate urgencies first. After the emergency phase has passed, this approach may not be very fruitful.

3. Cooperation with the government—in general, cooperation with the government tends to facilitate the work of aid agencies.

¹ This model of assistance delivery exists theoretically, but it did not occur in reality.
² As in the case with the model “integrated without other organizations,” this model of service delivery did not occur in reality as well.
4. Coordination with other organizations—this approach may help to consolidate resources and expertise of many organizations. But in the meantime, such coordination may be difficult to achieve.

Taking into account all of the above, the study seeks to answer the research questions of what model of assistance delivery works best and under what circumstances/situations.

1.4. Definitions of Terms

The term “internally displaced persons” is most central in this research. The study employs an operational definition that defines IDPs as “persons or groups of persons who have been forced to flee or obliged to flee or to leave their homes or places of habitual residence, in particular as a result of, or in order to avoid, the effects of armed conflict, situations of generalized violence, or violation of human rights, or natural or human-made disasters, and who have not crossed an internationally recognized border” (Phuong 2000, 216).

To distinguish IDPs from refugees, the research employs the following definition: “A refugee is a person who…owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside of the country of his nationality, and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country” (Phuong 2000, 217; UNHCR 1997).
“Coordination” means addressing the problems of IDPs through an inter-agency process in order to ensure the quick and effective provision of humanitarian assistance (Kleine-Ahlbrandt 1996, 66-67).

A “segmented” (or sectoral) approach means that humanitarian assistance targets one problem at a time. The services can still be delivered in coordination with other agencies involved.

The definition of “integrated” approach is borrowed from that of integrated rural development, with some adjustments. An “integrated” approach is understood to be a multi-sectoral, multifunctional initiative. Integration is a response to the judgment that the problems of displaced populations require a package of coordinated responses—from health services to education to income generation and the re-building of houses (Honadle and VanSant 1985, 3; Abasiekong 1982, 20).

According to Abasiekong, who refers to Christoffersen, an example of an integrated project would be an agricultural scheme for smallholders that is only one component of a larger rural development program incorporating plans and programs in other sectors, such as education, adult training, village water supply, rural health, village industries, and feeder roads (Abasiekong 1982, 20).

1.5. Assumptions

The study assumes that the effective delivery of humanitarian assistance (either through integrated or segmented approaches) is contingent upon:

1. existing infrastructure—finding out if the country is capable of receiving humanitarian aid cargoes, and has an up-to-date network of roads and facilities to physically deliver aid to intended recipients;
2. the legacy and performance of NGOs—what problems are associated with the work of NGOs in the world and in Azerbaijan, how long they have been in the country, what constraints they face, and how they perform;

3. planning institutions—what planning institutions exist that plan for the displaced population and coordinate humanitarian efforts; and

4. the legacy and performance of the government—how the government treats the displaced populations.

1.5.1. Existing Infrastructure

In light of problems Azerbaijani IDPs face, learning about the country’s infrastructure may become a helpful guide to understand the conditions in which IDPs live, and under which they are serviced by NGOs.

Azerbaijan (see Figure 3) was one of the prosperous republics of the former Soviet Union, largely, thanks to its tremendous oil reserves and heavy (chemical) industries. Unlike many nations of the developing world, the country inherited a well-developed infrastructure. However, the collapse of Soviet Union resulted in the loss of traditional markets, and breaking up of economic ties, which made the country very susceptible to external pressures of the world economy. Presently, Azerbaijan is a country in transition shifting from a command to a market economy (Energy Information Administration, Department of Energy).

Most of Azerbaijan’s infrastructure is in poor condition as a result of little public investment and maintenance since as far back as independence in 1991 (Energy Information Administration, Department of Energy).
The power generation and distribution system is deteriorating, and gas, water, electricity, and oil product shortages are common in the capital of Baku as well as in many regions and cities where IDPs have settled (Energy Information Administration, Department of Energy). Soviet-era residential and public buildings have become sub-standard (Strategis: Canada’s Business and Consumer Site).

Azerbaijan does not have American-style highways, although paved roads capable of handling truck traffic extend north to Russia and south to Iran along the Caspian coast. Heavy truck traffic passes along two paved roads running east-west between Baku and Tbilisi, Georgia. The increased amount of trade with Turkey and Iran
has worsened the condition of the paved roads (Strategis: Canada’s Business and Consumer Site).

The rail system faces increased demands but has not acquired new rolling stock since the 1980s. A railroad operates between Georgia and Azerbaijan to bring in heavy cargoes of humanitarian assistance and oil-related equipment. Although the railroad north from Baku to the Russian federation (which runs through Chechnya) is officially open to freight traffic (but not passengers), substantial delays have been reported along this route. In Soviet times, this railroad and the Volga-Don canal system via Russian ports on the Caspian were Azerbaijan’s main and the lowest cost import routes. Caspian port and off-loading facilities now require major upgrades. Extensive docking facilities with excess capacity exist, but loading and storage facilities do not comply with international standards (Strategis: Canada’s Business and Consumer Site).

With the growing interest of investors in Azerbaijan’s oil and natural gas reserves, there have been some projects directed at improving the country’s infrastructure. Investments have been made in the railway system, Baku’s sea and air ports, and in the water distribution network (Energy Information Administration, Department of Energy). But overall, the situation remains the same.

1.5.2. NGO Legacy

NGOs in Azerbaijan are relatively new organizations, the emergence of which is directly related to the demise of the Soviet Union and the problems of displaced persons. In the Soviet era, the existence of such organizations was simply impossible due to the totalitarian nature of Soviet power. Besides, the Soviet leadership was very
suspicious even of such organizations as the United Nations High Commissioner for Refugees (UNHCR) regarding them as instruments of the Cold War (State of the World’s Refugees 2000, 4).

More than sixty NGOs actively assist IDPs in Azerbaijan. Many of them are shifting from emergency assistance to development-related activities, trying at the same time to be sensitive to the government concerns that their programs do not imply permanency for the IDPs’ status (Greene 1998, 267).

Humanitarian organizations working with IDPs face many constraints in Azerbaijan. Specifically, the legal and administrative environment in which NGOs operate impedes their effective functioning and the fulfillment of their full potential (Global IDP Database; UN Commission on Human Rights 25 January 1999, para. 55). NGOs are subject to a mandatory registration process, which is cumbersome and lacks transparency, and to a high level of taxation. As part of the follow-up process to the CIS Migration Conference, UNHCR (in cooperation with the Open Society Institute and the Washington-based International Centre for Not for Profit Law) has been assisting the government of Azerbaijan in drafting a new law regarding NGO activity in order to conform with commonly accepted principles and practices in the world (Global IDP Database). “The law is expected to delineate the types of associations and foundations eligible for classification as charitable, set out the procedures for registration and regulation of charitable activities, and define the responsibilities of the government towards NGOs” (Global IDP Database; UN Commission on Human Rights 25 January 1999, para. 55).
Some constraints are experienced directly in the fields in which NGOs deliver assistance. One of them is employment/income-generating activities. In general, the government welcomes income-generating projects for the displaced, but local NGOs sponsoring micro-credit programs are constrained from doing so by national legislation requiring that an institution must have the equivalent of US $5 million in order to engage in lending activity (Global IDP Database; UN Commission on Human Rights 25 January 1999, para. 95).

In addition to all said above, projects of many NGOs aim at changing people’s attitudes and mentalities. While these are long-term undertakings, most donors tend to fund projects with a maximum duration of two years (from personal phone conversations).

Another problem would be finding qualified staff. Most qualified individuals live in urban areas, mainly Baku, and are not necessarily willing to live in rural areas, where many NGOs have field offices. There is also competition between international and local NGOs and donor agencies for the best staff and since the latter pay higher salaries, it is hard for NGOs to always find the best staff (from personal phone conversations).

Unethical behavior also slows down many processes, leads to squandering of project resources, and impedes the transfer of much of responsibility to local personnel (from personal phone conversations).

1.5.3. The Government of Azerbaijan

The government of Azerbaijan has been caught in a complex situation. On the one hand, apart from coping with the difficulties of the transition to a market economy, it
is responsible for building new institutions (economic, social, planning, and so on), establishing new governing mechanisms, and developing new legislation. On the other hand, the government is justifiably pressured from part of the population to quicken the resolution of the conflict over Karabakh and to meet the needs of the displaced.

Azerbaijan presently does not have the kind of planning institutions familiar to experts and scholars from the U.S. and other Western countries. The term “planning” is to some extent prejudicial and misunderstood, which is hardly surprising, as it evokes the times of the Soviet Union when planning was the prerogative of the central administration. However, as elsewhere in the world, the government has had to engage in the institution-building process to satisfy the population’s growing needs for public services. This especially concerns IDPs and refugees as they are one of the most vulnerable social groups in the country today. The focal points for these groups are the State Committee for Refugees and Internally Displaced Persons, and the Department on Refugees and Internally Displaced Persons under the Cabinet of Ministers, the primary state agencies charged with responsibility to coordinate humanitarian efforts in the republic (Cohen and Deng 1998, 54).

In Azerbaijan, there is a strong sense of solidarity between the government and the displaced. This stems from the nature of the conflict and the ethnic kinship existing between the national authorities and the overwhelming majority of IDPs. As a result, and unlike other countries, the authorities do not associate IDPs with the “enemy” (UN Commission on Human Rights 25 January 1999, para. 2, 4; Cohen and Deng 1998, 53-54).
The sense of solidarity between the government and the internally displaced also extends to the search for durable solutions. In hopes of some day regaining its occupied territories, Azerbaijan’s government continues promoting “sustainable return” as the preferred durable solution for the displaced. However, at the same time, policies founded on these hopes keep the displaced, some of whom have been displaced for almost a decade, from finding employment and permanent housing in many host regions (USCR Country Report 1999).

On July 6, 1999, Azerbaijan’s State Committee for Refugees and Internally Displaced announced plans to create a state commission to implement a strategy for returning displaced persons to their home regions “once a settlement with Armenia and Karabakh is reached” (USCR Country Report 1999).

In May 1999, the government passed a law on the “social protection of forcibly displaced persons and persons equated to them” which formally grants refugees, internally displaced persons, and formerly deported Meskhetian Turks free health care, primary and secondary education, and many social services. However, in practice, refugees and displaced persons report that they have had to pay for many social services that were supposed to be free under the law. Despite the law’s inconsistent implementation, groups working on behalf of Azerbaijan’s large uprooted population said it represents a major step toward helping the displaced to integrate locally (USCR Country Report 1999).

In February 1999, Azerbaijan signed an agreement with UNHCR, UNDP (UN Development Program), and the World Bank designed to “promote self-reliance and local settlement for the displaced without prejudice to...eventual return when conditions
allow. “The agreement enabled the agencies, in conjunction with the government, to set up income-generation projects, shelter assistance, job training, and social services to help displaced persons integrate locally and assist those trying to return to areas bordering the occupied territories to rebuild their war-damaged homes (USCR Country Report 2001).

To improve the durability of returns and local integration, the government set up a fund for the development of internally displaced persons based on a $10 million loan agreement with the World Bank. By the end of 2001, the government had approved several projects to provide sustainable development assistance to the displaced (USCR Country Report 1999).

Despite the national government’s reluctance to promote local integration, Azerbaijan’s regional governments and UNHCR implemented projects to foster local resettlement for the displaced and to strengthen public service delivery in host regions. Most of the projects focused on housing, education, and income-generation. The Azerbaijan Reconstruction and Rehabilitation Agency (ARRA), a government agency established in 1997 to promote sustainable returns, provided additional support to displaced families during 1999 (USCR Country Report 1999).

Among other problems, economic factors such as the slow pace of agricultural land privatization, the collapse of the industrial sector, high unemployment, the lack of a political resolution to the conflict over Karabakh, and mine contamination prevent any large-scale return of IDPs to their former homes (Hampton 1998, 169). With low agricultural production of basic foodstuffs and steadily increasing prices, most IDPs will continue to depend on emergency food aid. The Azerbaijani Government has been slow
to dismantle state control of urban grain distribution and pricing. This further reduces the
domestic food supplies already limited by constraints on farmers producing and selling
at market rates (Hampton 1998, 169).

There have also been no effective improvements in the state-run health-care
system, which is failing to deliver basic services. Humanitarian medical assistance has
filled some gaps in public health care, especially with service to vulnerable IDPs in
areas such as vaccine-preventable diseases and women’s reproductive health
(Hampton 1998, 169).

1.6. Summary

This chapter has discussed the conflict over Karabakh, the research problem, the
ways humanitarian assistance is delivered in Azerbaijan, the country’s infrastructure,
the legacy of the government and NGOs. It accentuated that internal displacement in
Azerbaijan resulted from the ethnic conflict over the disputed territory of Karabakh
between the republics of Armenia and Azerbaijan. The influx of hundreds of thousands
of IDPs (and refugees) into the towns and regions of Azerbaijan has negatively
impacted the overall development of the country, and put much burden on the social
services. The infrastructure of Azerbaijan, which may still be better than that of many
developing countries, is in poor condition and in much need of investment and
maintenance. This has had a harmful effect on the livelihoods of IDPs many of whom
have been housed in substandard public buildings with poor access to public services.

The NGOs sector is young in Azerbaijan, and experiences many constraints.
Those range from the government’s mandatory requirement to register a new NGO, a
high level of taxation, problems with finding qualified staff willing to work in rural areas,
problems with unethical behavior leading to squandering of project resources, and reluctance of donor agencies to fund projects with duration of more than two years.

The chapter also sheds light on how complicated the situation of the Azerbaijani Government is. The collapse of the Soviet Union left the government with very few resources and almost no techniques to work under new conditions. Recuperation from the loss of former markets, building new institutions, and dealing with the huge population of uprooted people are all among the issues the government has to concentrate upon. Yet, what is important is that, unlike many other countries, the Government of Azerbaijan is not hostile to its displaced population, and is eager to help resolve their plight.
2. LITERATURE REVIEW

2.1. Displacement as a Phenomenon

The twentieth century witnessed an enormous growth in the numbers of IDPs and of countries suffering from internal displacement. Today, there are nearly 20-25 million IDPs in some 40 countries. This figure already exceeds the 13 million refugees falling within the mandate of the UNHCR (Korn 1999, 3). The acuteness of the problem of internal displacement and a myriad of its consequences in different spheres such as political, economic, and social, to name a few, have secured this phenomenon a central place among issues facing the international community. Many scholars agree that internal displacement puts a heavy burden on the government and population of countries, complicates and hinders their further development, and intensifies the struggle for scarce resources. Because of the scope and depth, finding solutions to the problems of IDPs requires pooling significant efforts and financial means.

Despite the fact that internal displacement has always existed, it has become a concern for the international community only since the end of the 1980s (Phuong 2000, 215). Until recently, it was considered part of the refugee problem. However, with the recent shift in the perception of the problem, it has been acknowledged that internal displacement has to be handled separately from refugees (Phuong 2000, 216).

The UN, as one of the world’s lead agencies, has emphasized both the humanitarian and human rights aspects of the problem. The General Assembly also started to look at the matter, and first mentioned explicitly internally displaced persons in a resolution of 1992 concerning the activities of the UNHCR (Phuong 2000, 218).
Apart from internal displacement, several other types of displacement also exist that have been characteristic of the countries of the Commonwealth of Independent States (CIS). Those are primarily products of the Soviet Union and of its disintegration into independent states (UNHCR). As constituents of the phenomenon of displacement, these types of displacement are worthy of particular note.

In 1991, the total number of people living outside their “home” republics or autonomous regions is estimated to have been between 54 and 65 million, or one-fifth of the total population of the Soviet Union. Of these, 34 million were Russians, Ukrainians and Belarusians living in other republics. For them, “home” had been the Soviet Union, which suddenly no longer existed (UNHCR).

The republics where they resided suddenly seemed less secure places to live because of the rise of nationalism. In some countries, new language and citizenship laws placed them at a disadvantage (UNHCR).

When relations between official Baku and Yerevan exploded into a conflict, and major civil wars also broke out throughout the Caucasus and Tajikistan, the Slavs started to go “home” in large numbers, particularly from Central Asia (Refugee Magazine).

Another type of movement in the CIS countries is the direct result of a policy adopted and executed by Stalin (1879-1953), a Soviet dictator. Between 1936 and 1952, more than 3 million people were forcibly removed from their homes and relocated thousands of kilometers away in Siberia and Central Asia under what was known as “the special settlers’ regime.” Among them were eight entire ethnic nations, totaling some 1.4 million people (UNHCR).
One of these groups, the Meskhetian Turks, became involved in ethnic conflict in Uzbekistan in 1989 and had to be evacuated by Soviet troops. Close to 50,000 of them found refuge in Azerbaijan (USCR Country Report 2001; UNHCR).

Another Soviet legacy causing displacement in the CIS countries is related to the U.S.S.R.’s nuclear, industrial, and agricultural installations and practices, which have led to the flight of at least 700,000 ecological migrants. The three worst-hit areas, in terms of displacement, are 1) the Aral Sea basin, 2) the Chernobyl district, the Ukraine, and 3) the area around the former nuclear test site at Semipalatinsk in Kazakhstan. Hundreds of other areas in the CIS countries have been affected by severe air pollution and chronic chemical and nuclear emissions, leakages, and waste (UNHCR).

2.2. The Soviet and Post-Soviet Context

The Soviet Union was a land of ethnically heterogeneous population. Realizing the complexity of this situation itself, and of having to deal with it, the Soviet leadership sought to forge individuals, peoples, and society in accordance with its communist ideology. Thus, the voluntary and/or involuntary transfer and mixing of peoples were a standard means to a utopian end (The State of the World’s Refugees 2000).

The dissolution of the Soviet Union in December 1991 unleashed massive population movements in the countries that later became the Commonwealth of Independent States, which comprises 12 of the 15 independent states (UNHCR).

The second half of the 1980s was most remarkable largely because of the gradual relaxation of political controls; however, in the meantime, the ethnic and
nationalist tensions that had been suppressed in the Soviet Union were released (The State of the World’s Refugees 2000).

In the first half of the 1990s, hundreds of thousands of people were uprooted by inter-ethnic and separatist conflicts in the South Caucasus. The struggle between Armenia and Azerbaijan over the disputed territory of Karabakh was only one of several conflicts that escalated into war soon after the dismantling of the Soviet Union. In addition, it was one of the early indications of Moscow’s declining control (The State of the World’s Refugees 2000).

In Georgia, where the autonomous territory of South Ossetia was demanding independence, the armed conflict began in 1989 and lasted until a ceasefire agreement was signed in May 1992. Within weeks of this, another conflict broke out in Georgia—in the autonomous territory of Abkhazia (The State of the World’s Refugees 2000).

The North Caucasus also witnessed large-scale forced displacement. In 1992, tens of thousands of Ingush were expelled from North Ossetia to neighboring Ingushetia. Consequently, there was large-scale displacement in and around Chechnya, first in 1994–95 and then again in September 1999 (Refugee Magazine).

Moldova and Tajikistan have also experienced major conflicts, both of which broke out in 1992. In Moldova, brief fighting broke out in early 1992 between Moldovan forces and those of the self-proclaimed “Transdniestra Republic”. Almost all of the 100,000 displaced from the Transdniestra region of Moldova to other parts of the country and the Ukraine have now returned. There has also been some success in Tajikistan where a major international relief operation has assisted almost all of the
600,000 people displaced inside the country, as well as 43,000 of the 60,000 refugees who fled to Afghanistan, to return home (UNCHR).

In addition to the conflict in Tajikistan, there have been two serious inter-ethnic fights in Central Asia, both in the Ferghana Valley which stretches from Uzbekistan into Kyrgyzstan. The first involved the Meskhetians in 1989, and the second took place a year later on the Kyrgyzstan side of the border (UNHCR).

A cumulative outcome of all these conflicts was a dramatically increased population of the world’s refugees and IDPs. More than that, political settlements have not been achieved in many of those conflicts, and most of the uprooted have remained in the territories to which they fled (The State of the World’s Refugees 2000).

### 2.3. Displacement in Azerbaijan

As far as Azerbaijan is concerned, since the early 1990s, there has been a continuous movement of forcibly displaced people in this country and a large influx of refugees from Armenia and Uzbekistan. It is currently estimated that 11 percent of Azerbaijan’s population are either IDPs or refugees, although no international organization has ever collected formal countrywide information on their numbers (Hampton 1998, 167).

At the end of 2000, 248,783 persons were living in refugee-like circumstances in Azerbaijan. These included 196,847 ethnic Azeris (most of whom fled Armenia between 1988 and 1991) and 51,649 formerly deported Meskhetian Turks who fled ethnic violence in the Ferghana Valley region of Uzbekistan in 1988 (USCR Country Report 2001; UNCHR).
Although these 248,783 persons are registered with the government as refugees, they have largely integrated into Azerbaijan, are eligible for citizenship, and face no threat of forced repatriation or expulsion from Azerbaijan. However, many still live in “temporary” accommodations and struggle to subsist.

According to the USCR, UNHCR reported, “ethnic Azeri refugees have integrated well into the urban areas of Azerbaijan (mainly Baku and Sumgait) and generally no longer receive assistance from UNHCR” (USCR Country Report 21).

The more than 600,000 internally displaced Azerbaijanis constitute the largest group of IDPs in the Caucasus. The displaced include the entire Azeri population of Karabakh and a wide area surrounding it (Global IDP Database). They comprise a broad range of professionals, farmers, and workers and include men, women, and children of all ages. Because of the ethnic basis of displacement in Azerbaijan, the IDPs there are virtually all Azeri peoples (Greene 1998, 254). However, about 4,000 Kurds from the Lachin and Kelbadjar regions and several hundred ethnic Russians also live among the displaced (USCR Country Report 2001).

The internally displaced population had reached a peak in 1993 with 778,000 persons, while the total internally displaced population in January 2001 was about 575,000 persons (figures from the State Committee for Statistics, Baku, Azerbaijan, 2001).
Table 2. Total number of IDPs in Azerbaijan, 2001

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<tr>
<td>Families</td>
<td>145,826</td>
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<tr>
<td>Persons</td>
<td>575,268</td>
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<td><strong>Residing in</strong></td>
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<tr>
<td>Urban areas</td>
<td>310,892</td>
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<tr>
<td>Rural areas</td>
<td>264,376</td>
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The USCR reports that at the end of 1999 almost 75 percent of displaced Azeris continued to live in temporary accommodations. Of these, almost 30 percent lived in public buildings such as schools, kindergartens, and hospitals. Another 16 percent resided in makeshift dwellings, such as tents and prefabricated buildings. Others were living in abandoned railroad cars (7 percent), partially constructed buildings (7 percent), subterranean earthen dugouts (6 percent), or in illegally occupied apartments (6 percent). Hampton provides analogous information in her *Internally Displaced People: A Global Survey*.

About 50 percent of displaced Azeris lived in urban centers such as Ganja, Ali-Bayramli, Sumgait, Mingechevir, and Baku, which hosted almost 25 percent of the displaced population (see Figure 4). Their circumstances burdened Azerbaijan’s already overtaxed social services, education, and health care systems, and hindered economic development in areas struggling to accommodate them (USCR Country Report 1999).

The displaced people in Azerbaijan are one of the most vulnerable demographic groups in the country. IDPs face specific problems associated with long-term displacement, including chronic food shortages, lack of potable water and adequate sanitation, deteriorating public health conditions, high rates of malnutrition,
psychological problems, inadequate shelter, and criminality (Hampton 1998, 168).

Moreover, the emergency conditions in which IDPs and refugees live are exacerbated by an economic crisis that has left the government with few resources to assist displaced people (Hampton 1998, 165).

Figure 4. Refugee Camps and Places of Settlement, 1994-1998
2.4. Integrated Approach to Service Delivery

In this study, the analysis of approaches to service delivery rests on the discussion of the concept of integrated rural development (IRD). This concept embraces the idea of using multisectoral initiatives and coordinated package responses to address the problems of the rural poor, and to eradicate poverty (Honadle and VanSant 1985, 3; Abasiekong 1982, 20). This research has resorted to the concept of IRD as there is no literature directly related to the studied topic. This is the primary reason why the research assumes that IRD is a valuable tool with which to address the issues of service delivery. Let us note, however, that as a development strategy, IRD has been widely discussed and criticized; it has been implemented in numerous developing countries. Hence, its successes and failures are well known to the international development community. It is believed that using IRD as a basis for analysis will help to arrive at coherent conclusions.

The history of integrated approaches to rural development begins in the 1950s with such social mobilization strategies as community development (Gsanger 1994, 10). Community development spread to over 60 countries, but did not deliver as much as it promised (Gsanger 1994, 11).

While it is difficult to say precisely when and where IRD came into being, the concept came into being at the international level in the early 1970s (Gsanger 1994, 21).

In the early stages of its development, the integrated approach was characterized by a lack of conceptual clarity and operationality. Its constituents are a multisectoral approach, orientation towards poor (rural) target groups (e.g., the landless,
farm workers, marginalized farmers, women, the handicapped), social mobilization and active involvement of the beneficiaries (participation), and a regional bias (e.g., to a district, province or watershed) (Gsanger 1994, 22).

2.4.1. The Concept of Integrated Rural Development

The term “integrated” has been used in the past to differentiate development activities with several elements from “sectoral” projects which concentrate on one major activity only.

The World Bank provides the following definition of IRD:

1. Integration means the coordinated provision of the package programs or minimum package programs;

2. Measures to promote agricultural production are integrated into socio-economically oriented projects (e.g., community development, rural public works programs, basic education and skill development);

3. Agricultural and non-agricultural activities are combined in a comprehensive development program [comprehensive approach: a) Coordinated National Programs; b) Area Development Schemes] (Gsanger 1994, 23).

The U.S. Agency for International Development (USAID) defines its IRD projects as having a) a limited, clearly defined geographical mandate, b) a multi-sectoral mandate, c) a coordinated approach to the provision of goods and services for the local population, and d) a certain degree of participation by the beneficiaries (Gsanger 1994, 28).
The basic principle of IRD lies in the recognition of the fact that a consistent and harmonious set of policies and programs have a much better chance of delivering better results than costly but isolated programs (Siwar and Mustapha 1989, 8).

In its essence, the integrated strategy is designed to attack the causes and consequences of a problem in a comprehensive manner. Basic physical and economic infrastructure and social amenities, such as irrigation, drainage, rural roads, health, schools, water, rural electrification and agricultural-supporting services, are provided in a coordinated and integrated manner by various development agencies. To obtain economies of scale, integrated plans are multidisciplinary and multi-sectoral in nature (Siwar and Mustapha 1989, 72).

2.4.2. Integrated Rural Development as a Project Approach

The rationale for undertaking integrated pilot projects was based on the fact that an increasing number of developing countries had begun to recognize that uncoordinated efforts (in developing agriculture) had comparatively little impact (Zurek 1985, 312).

There was wide agreement that an integrated approach to rural development was required, but it was also realized that the comprehensiveness of this approach would place heavy demands on resources. Thus, before more substantial inputs were committed, it was considered necessary to experiment in a limited geographical area (Zurek 1985, 313).
Projects of this type were carried out in Chad, Congo, Ecuador, India, Nigeria, Pakistan, and Turkey with varying scope, emphasis, duration, and results (Zurek 1985, 312-313).

2.4.3. Characteristics of Integrated Rural Development

As the development literature indicates, integrated projects have specific characteristics, which, among others, include that:

1. They are administratively complex, and impose heavy requirements for coordination on project staff which may have little or no leverage over line government agencies whose cooperation is critical.

2. Implementation of integrated projects has a strong political dimension. Willingness to maintain a road, availability of funds to cover recurrent costs, adoption of appropriate technologies, and desirability of giving resources and power to subnational bodies all reflect political priorities (Honadle and VanSant 1985, 3).

2.4.4. Critique of Integrated Rural Development

Integrated approaches have been widely used in many countries, but there is hardly any consensus on the concept. The approaches have suffered from the absence of conclusive answers to the question: what and who should be integrated into programs and/or projects, for what purpose and how? IRD has been subjected to a wide variety of interpretations, with some describing it as a set of goals, some as a strategy,
some as a consistent and coherent set of rural development programs, and some as an ideology (Gsanger 1994, 8, 23; Siwar and Mustapha 1989, 7).

Since the mid-1980s, IRD has been increasingly regarded as a failure. Besides its radical opponents, a group of reform-minded critics disapprove of integrated approaches because their structural effectiveness has been extremely disappointing (Gsanger 1994, 33).

In the view of many authors, IRD as a strategy has both positive and negative features. This is one of the reasons that the debate between proponents and opponents of integrated approaches has not lost steam yet. However, the criticism of integrated approaches has not been uniform. Different authors have, over time, critiqued different aspects of integrated approaches, which necessitates the classification of critique into several schools of thought.

One of the schools, represented by Gsanger, narrows down the most important arguments advanced in the international debate on IRD to the following two:

1. Multisectoral projects are too complex, too large and too cumbersome. Moreover, the project structures that emerge are usually top-heavy and absorb excessive manpower and financial resources for costly planning and coordination processes.

2. Integrated projects have so far neither had a wide impact nor been sustainable, i.e. they have achieved neither the declared aim of effectively alleviating or eliminating rural poverty and impoverishment processes nor the sustained mobilization of human, organizational, and natural resources. Most projects have
in fact suffered because the improvement in the capacity for self-help has been
very slight, and the barriers to access to necessary services (markets, extension,
credit, means of production) have been overcome only in isolated instances
(Gsanger 1994, 34).

Gsanger further points out the difficulties related to the conceptual weaknesses
in implementation as well as unfavorable social and political conditions in the projects’
environment (Gsanger 1994, 34).

Since they pursue a wide range of goals, the constant danger with IRD projects
is that the formulation of objectives, the assignment of objectives, and implementing
methods, and the sequencing of targets, methods and progress reviews may be vague
and unrealistic (Gsanger 1994, 35).

If multiple objectives are to be achieved, coordinated action (policy cohesion)
across sectoral boundaries is needed. Being inadequately coordinated horizontally,
sectorally structured and usually inefficient, the administrations of the developing
countries are generally incapable of meeting this need.

Critics represented by Zurek provide the following points of criticism. They think
that IRD is false in theory, because:

1. “It stabilizes the existing economic dualism in developing countries and does not
   help structural change.”

2. “It neglects crucial dependencies of developing countries on world markets and
   the structural links between centers and peripherals in the world economy
   inherited from colonial times” (Zurek 1985, 8).
The same group of critics believes that IRD is correct in theory, but:

1. “It remains ‘wishful thinking’, because a complex development process cannot be planned and guided through programs and projects.”

2. “It is not manageable in practice; projects suffer from high overhead costs, depend mainly on foreign experts, and have very often established alien project authorities, competing with the normal regional administration.”

3. “It is superfluous, because sectoral projects have trickle down effects which lead to the same results, and are easier to manage.”

Siwar and Mustapha critique integrated approached in slightly bolder and more elaborate terms. Apart from critiquing IRD, they have also identified its successes. Siwar and Mustapha argue that “the shortcomings depend on the degree of commitment of the governments in pushing through appropriately designed IRD programs, the socio-economic circumstances shaping the program course and contents, the level of receptivity of the local people in taking delivery of the benefits of IRD, and the coordination among various sectors which are supposed to work cohesively in attaining the IRD goals” (Siwar and Mustapha 1989, 55-56).

One of the major shortcomings as identified in many countries (e.g., Bangladesh, Nepal, Thailand, Sri Lanka) is the role of donor agencies in shaping the course of IRD programs. In many cases, different donor agencies choose different areas as their domain of operation and experiment with their particular brand of IRD (Siwar and Mustapha 1989, 55-56).
Another major problem is the absence of any proper planning mechanism at the local level. Too often IRD programs are undertaken with the assumption that such capabilities exist at the local level, but in almost all such cases the expectations do not materialize (Siwar and Mustapha 1989, 55-56).

It has been stated clearly that IRD has achieved major successes; the successes have been more in countries where IRD has been given considerable emphasis and has been carried to its logical end. These successes had a more lasting impact where the economic gains have been consolidated by required services and improvements in the education and health sectors. India provides an example where IRD has led to considerable economic gains in terms of poverty reduction (Siwar and Mustapha 1989, 53-55).

The second major gain is the more egalitarian distribution of benefits. “IRD, by often promoting small scale labor-intensive projects, group formation, wider adoption and diffusion of improved technology, by making available growth generating inputs to even small farmers, and by guaranteeing employment and ‘minimum needs’, has had positive impact on the distribution of developmental benefits” (Siwar and Mustapha 1989, 53-55).

The third important gain of IRD has been the formation and the strengthening of organizations of the poor (cooperatives, farmer’s organizations, etc.) and the consequent increase of awareness about their rights and capabilities. Moreover, the cooperatives and their different tiers have been able to promote group savings and investments in productive activities (Siwar and Mustapha 1989, 53-55).
IRD programs in almost all countries have led to considerable improvements in physical infrastructure (roads, bridges, embankments, electrification, communication network and rural markets) (Siwar and Mustapha 1989, 53-55).

Employment generation for women has been one of the major benefits derived from IRD programs in some countries, especially India, Bangladesh and Nepal (Siwar and Mustapha 1989, 53-55).

IRD is also considered to have promoted resource development, improved the supply of skilled manpower, initiated local planning, forged greater interlinkages with different sectors, especially between the agricultural and the industrial sectors, and between the government and various NGOs (Siwar and Mustapha 1989, 53-55).

Honadle and VanSant have united to express a view that integrated projects throughout the developing world have found themselves held hostage to administrative and logistical trivia, including:

1. Donor or host government pre-audit practices that handicap implementers and introduce unnecessary delays;

2. Chaotic filing systems that render retrieval of vital information difficult or even impossible;

3. Conflict over the assignment, deployment, and maintenance of project vehicles;

4. Diversion of project resources (human and financial) to other uses; and

5. Commodity procurement characterized by inappropriate materials, no follow-up on orders, and delays, sometimes exceeding two years (Honadle and VanSant 1985, 27).
And finally, Abasiekong adds to this debate by saying that the pragmatists overemphasize the difficulties encountered in implementation of IRD, whereas the theoreticians are challenged because of unrealistic expectations regarding the political flexibility of the governments and not seeing the administrative, technical, and human obstacles impeding the implementation of comprehensive programs (Abasiekong 1982, 23).

2.5. NGOs and Development

The formation of the NGO sector is often attributed to the fact that the public sector has not been able to deliver development to beneficiaries. In this regard, much of the literature defending the NGO sector emphasizes only state failure (Zaidi 1999, 261). Many view NGOs “as more efficient and cost-effective service providers than governments, especially in reaching poor people” (Edwards and Hulme 1996, 961 in Zaidi 1999, 262). As Edwards and Hulme argue, “NGOs and GROs (grassroot organizations) are awarded a key role in the democratization process by bilateral and multilateral agencies” (Edwards and Hulme 1996, 961-2 in Zaidi 1999, 262). They are seen as an integral component of a civil society and as an essential counterweight to state power (Bebbington and Riddell 1995, 880 in Zaidi 1999, 262).

There is a strong belief among international donor agencies that NGOs have a number of comparative advantages over governments (Alan Fowler 1991 in Zaidi 1999, 262). NGOs are thought to be “more cost-effective in service delivery, to have a greater ability to target poor and vulnerable groups of the population, to demonstrate a capacity to develop community-based institutions and to be better able to promote the public
involvement needed for sustainability of benefits” (Fowler, 1991, 56 in Zaidi 1999, 262). Moreover, NGOs are considered as institutions that can change the structures of governance “in favor of democratization and institutional accountability” (Fowler 1991, 56 in Zaidi 1999, 262).

The World Bank identifies the following strengths of NGOs: “strong grassroots links; field based development expertise; the ability to innovate and adapt; a process-oriented approach to development; participatory methodologies and tools; long term commitment and emphasis on sustainability; and cost-effectiveness (World Bank 1995, 15 in Zaidi 1999, 262).” Compared with the institutions of the state, NGOs are seen to be “locally rooted and environmentally sensitive, flexible, low-cost and honest” (Sethi 1993, 80 in Zaidi 1999, 262).

A number of observers of the NGO phenomenon have argued that the NGO mushrooming in recent years is entirely donor-driven (Edwards and Hulme 1995, 1996; Bratton 1989; Fowler 1991 in Zaidi 1999, 263). Alan Fowler (1991) has supported this argument by saying that “the growth of NGOs has essentially been a resource-led process which has resulted from greater official aid for them” (Zaidi 1999, 263).

Adil Najam (1996) argues that due to the large amounts of funds made available to NGOs, “the intellectual undertaking of NGO enquiry remains predominantly donor driven” (Najam 1996, 342 in Zaidi 1995, 264), creating patron-client relationship between NGOs and donors. Donors assert “financial control by seeking accountability for the designated purpose. Funds are provided to serve policy goals and where it can be demonstrated that donors’ policy goals will be pursued” (Najam 1996, 342 in Zaidi 1995, 264).
Jessica Vivian (1994) and Carrie Meyer (1995) raise the issue of NGO staff who are expected to demonstrate success if they want to receive funds. This results in NGOs trying to present project outcomes in the best light, and sometimes overstating their impact (Vivian 1994, 189 in Zaidi 1995, 264).

In addition, in order to continue receiving funding, it is not uncommon for consultants and NGOs to “fudge” data to suit the client's needs (Zaidi, 1995, 264).

The claim that NGOs are more cost-effective than the public sector has also been questioned by a number of scholars. Edwards and Hulme (1996) acknowledge that, indeed, a handful of NGOs have had cost advantages compared with alternative sectors. However, “NGOs are not automatically more cost-effective than other sectors” and “there is no empirical study that demonstrates the general case that NGO provision is ‘cheaper’ than public provision” (Edwards and Hulme 1996, 963 in Zaidi 1995, 266-267).

2.6. Summary

This chapter has presented the views of contemporary scholars on the issues of displacement, integrated service delivery, and the formation and activities of NGOs. The chapter begins with the discussion of the phenomenon of displacement. It explains that the world community has been concerned about displacement of large number of people since the end 1980s, although displacement has always existed. The issue has gained more importance after the total number of internally displaced people exceeded the number of the world’s refugees. Various examples of displacement have also been presented and their root causes explained.
Further, the discussion has examined the patterns of displacement existing during and after the Soviet Union. These two historical periods of time significantly differ from each other: under the Soviet regime, displacing ethnicities was an internal policy tool directed toward suppressing national aspirations of people, whereas after the demise of the Soviet Union, internal displacement of people was an outcome of numerous ethnic conflicts that broke out in the newly independent states.

The concept of integrated rural development has been presented as a basis to substantiate advantages and disadvantages of using integrated approaches to service delivery. This concept has been widely used in many developing countries and has been criticized for not delivering what it promises, for being administratively too complex, and sometimes, for wasting resources. Yet, in the countries where integrated rural development projects were carried out to the end, they were able to bring about positive changes as well.

The Literature Review concludes with describing the thoughts and viewpoints of contemporary scholars on the formation and performance of NGOs. This has been done to link the discussion of internal displacement and integrated service delivery as NGOs are one of the major players in the field of delivery of service to internally displaced populations. The chapter has examined how conventional wisdom and donor agencies perceive NGOs nowadays, and how this is different from reality.
3. METHODOLOGY

3.1. Data Collection

This research intends to measure successfulness of organizations delivering humanitarian assistance in Azerbaijan. Initially, it was proposed to evaluate success in seven sectors: food aid, education, employment/income-generation, gender, health, protection and safety, and shelter. The careful examination of the current knowledge and data on the problems of IDPs in Azerbaijan has suggested that the aforementioned issues are the ones in which IDPs experience the most hardships. However, it became apparent in the course of the research that the available data would not allow analysis of two issues: gender, and protection and safety. It was decided, therefore, to present short information on those issues in the form of an appendix (see Appendix A).

The remaining five issues have varying degrees of importance. For example, employment/income generating activities could not be started before the uprooted people had been housed and fed. In the same manner, medical needs of IDPs were much more urgent than educational ones. Besides, the world community considers access to food and potable water, basic shelter and housing, appropriate clothing, and essential medical services and sanitation as the most urgent needs of all uprooted people all over the world (UN Commission on Human Rights 25 January 1999, para. 59-60; Global IDP Database). That is why it was thought that the following order would best reflect the urgency of issues: food aid, housing/shelter, health, employment/income-generation, and education.

As has been mentioned earlier, the study aims to find out in which way the delivery of humanitarian assistance will be more efficient. For that purpose, the projects
implemented by aid organizations (non-profit organizations, donor and governmental agencies) at various times in Azerbaijan have been chosen as units of analysis.

First, a list of all organizations (see Appendix B) providing relief assistance in Azerbaijan was compiled using the internet source “Azerweb—Social Research for Participatory Community Development,” which is one of the most comprehensive databases for Azerbaijan. Only those organizations for which program and projects descriptions were available were further selected.

The main body of the collected data consists of descriptions of only major projects that the selected NGOs implemented at different points in time. This created some gaps in the data that were unfeasible to fill in due to the remoteness of the country of study. Those data were scrutinized for patterns using the evaluation criteria described in the Evaluation Criteria subsection.

Within each studied sector, the organizations were tabulated by what approaches (integrated or segmented) they use and coordination of activities. The tables below show which organizations deliver services in integrated and segmented fashions, and if they collaborate with the government and among each other.

Personal phone conversations were used to confirm the truthfulness of certain facts and some parts of data.
Table 3. Organizations providing food aid

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<th>Coordinated</th>
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<th>Without Government</th>
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</table>

3 Please, note that the numbering of organizations in all tables corresponds with their numbers in the Appendix B.
Table 4. Organizations providing shelter and temporary housing

<table>
<thead>
<tr>
<th>Approach</th>
<th>Coordinated</th>
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<th>Without Government</th>
<th>With Other Organizations</th>
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<td>24. EU EXAP &amp; REHAB</td>
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# Table 5. Organizations involved in health care

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<td>12. AzRC</td>
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<td></td>
<td>44. MSF/Belgium</td>
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<td>51. RI</td>
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<td>21. DIAKONIE</td>
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<td></td>
<td>45. MSF/France</td>
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<td>46. MSF/Holland</td>
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### Table 6. Organizations generating employment/income

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<th>With Other Organizations</th>
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<td>2. ACDI/VOCA</td>
<td>2. ACDI/VOCA</td>
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Table 7. Organizations providing educational assistance

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</table>

Several patterns can be observed in the above tables. What is common is that the majority of organizations implements projects cooperatively with the government and each other and prefers to address multiple issues at a time (integrated approach). Also, it seems that the segmented approach has ceased to be attractive since the emergency phase has passed and the organizations are now more concerned with the longevity of the results of their projects. Another pattern is that, sometimes, some organizations avoid working with the government. For the most part, this is happening because those organizations are either implementing partners of USAID or use its funds. To receive funds, those organizations have to make sure that their projects comply with the USAID’s policy objectives, which are influenced by the sanctions of Section 907 banning aid to the government. And finally, same organizations resorted to
both integrated and segmented approaches, and cooperated with the government or avoided it—all of this depending on the nature of a project, the time when it was implemented (during the emergency or development phase), and donors’ requirements.

### 3.2. Evaluation Criteria

Having identified and grouped the organizations involved, it is critical to develop a set of evaluation criteria in order to measure success. Initially, the research intended to draw upon the following evaluation criteria proposed by Thomas F. Carroll in *Intermediary NGOs: The Supporting Link in Grassroots Development* (Carroll 1992, 27-34):

1) **Development Services:**
   
   i. **Service Delivery** – looking for evidence that the services have enabled the recipients to improve their living conditions.
   
   ii. **Outreach** – how many people have benefited from the services provided.

2) **Participation and Empowerment:**
   
   i. **Responsiveness/Accountability** – finding out to what extent the organizations involved have helped beneficiaries to become more skillful at addressing their needs in an operational way.
   
   ii. **Reinforcing Base Capacity⁴** – whether the organizations involved have reinforced the capacity of beneficiaries to manage their own resources and operate enterprises.

---

⁴ For each sector of activity, this concept will be defined in more detail in the Research Findings chapter.
3) Wider Impact:

i. Innovation – answering the questions: To what extent have the organizations designed and tested new technical and institutional approaches or systems for solving specific problems? Have such systems or processes become widely shared and diffused?

The reality, however, proved to be different. Based on the data gathered so far, it is possible to evaluate success only using two out of five criteria—outreach and reinforcing base capacity. As for the remaining criteria, currently, no data exist to answer the questions posed by the criteria of service delivery and responsiveness/accountability. By the same token, the wider impact criterion can be applied only to a very few organizations as not much is said in the website about the innovative strategies they have developed and/or applied. From the phone conversations with several NGO leaders it was determined that such organizations as Save the Children, International Rescue Committee, and World Vision International have successfully applied different participatory methods—Participatory Rural Appraisal, Participatory Learning and Action, and Community Participatory Assessment.

CHF has been testing new approaches in providing business development services while in primary health care, International Medical Corps, ADRA, International Rescue Committee and Pathfinder are regarded as using new approaches.

IRC is currently implementing three pilot projects testing a new approach to small and medium enterprise development in rural areas. Under the so-called SEED (Sustainable Economic Enterprise Development) project IRC works with community-
based agricultural processing associations and invests up to $25,000 for the establishment of agricultural processing enterprises (cheese, dairy products, dried meat, dried fruit, preserves, etc.).

Relief International gives preference to cross-sectoral and integrated community-based program methodology.

It is believed that a more in-depth, in-country study would be required to gather the data that would support the above mentioned three criteria.

3.3. Summary

This chapter described how the data were collected and treated, what were they collected for, what organizations were selected for the study, and how. The chapter explained that five sectors—food aid, housing/shelter, health care, employment/income-generation, and education—were chosen as the main fields in which the performance of NGOs would be evaluated. It was highlighted that two sectors (gender, and protection and safety) were dropped in the course of the research due to the lack of data. The research uses projects implemented by selected NGOs as units of analysis.

The Methodology chapter contains five tables (one per sector) showing which organizations tend to apply either integrated or segmented approaches to service delivery, and which ones coordinate their activities with the government and other NGOs.

The evaluation of the NGOs performance is based on specific evaluation criteria borrowed from the work of Thomas F. Carroll *Intermediary NGOs: The Supporting Link*
in Grassroots Development. However, the problems with data did not let apply all initially chosen five criteria, which resulted in using only two of them.

The chapter concludes with a suggestion that an in-country study would be better able to collect the required data.
4. RESEARCH FINDINGS

4.1. Provision of Food Aid

Food aid is an important component of assistance to IDPs because of their low incomes and inability to earn money. This was confirmed by the 1996 survey of IDPs commissioned by UNHCR (Global IDP Database).

World Food Program (WFP) defines a household as “food secure” when “it has access, at all times, through home production or purchasing power, to food, in adequate quantity, safety and acceptability, needed to provide a healthy life for all its members.”

Ten years after being displaced, many internally displaced households continue to experience food shortages and still rely on assistance (Global IDP Database). Expensive inputs for cultivation, limited job opportunities and lack of expertise to run private businesses are the principal factors hindering self-sufficiency at the household level (WFP 1999; Global IDP Database). Moreover, in rural areas, the lands to which IDPs have access tend not to be of good soil quality to enable self-sufficiency. In the meantime, the food assistance delivered by NGOs is designed to cover 50 percent of nutritional needs, providing items such as flour, oil and seeds, with the beneficiaries attempting to supplement this with vegetables and meat, and by means of the bread subsidy provided by the government. However, the high rates of malnutrition are reported, especially among children and the elderly, which indicates that food assistance needs of IDPs are not met (UN Commission on Human Rights 25 January 1999, para. 61-62).

A 1998 survey conducted by WFP among its beneficiaries showed that half of them were not able to meet their basic food needs and that they relied on four sources
of revenue in different proportions: the government (43 percent)—in the form of salaries/pensions and allowances; the household (27 percent) deriving mainly from keeping livestock, cultivation, casual labor, and small business; WFP (24 percent); and the NGOs (6 percent) through micro-credit schemes (Global IDP Database).

Food aid projects in Azerbaijan have been carried out by numerous organizations, mainly in the form of food distribution. After the emergency phase was over, it was evident that the further random provision of assistance would lead to overlapping and duplication of activities. To avoid that, the organizations were united by WFP, which assumed the role of a coordinator. Coordination among the agencies is achieved via monthly held Food Aid Coordination Group meetings chaired by WFP and attended by all agencies involved in the sector; setting up of a Steering Committee, composed of representatives of funding agencies, such as ECHO, Save the Children, IFRC and WFP to settle misunderstandings among the various food agencies; assistance to organizations in identifying new areas of intervention; the principle of “regionalization” of food aid activities, according to which each food aid agency is assigned to a certain area of operation; and the adoption of minimum standards of food basket (Azerweb—Social Research for Participatory Community Development).

Prior to describing research findings in the food as well as the other sectors, it is important to define what the concepts “integrated,” “segmented,” and “reinforcing base capacity” mean in their respective contexts. Using integrated approaches in the food sector would mean combining several activities within one project: distribution of food rations and agricultural inputs, provision of training in improved food preservation, processing, and marketing techniques, organizing such training through community-
based groups and so on (Azerweb—Social Research for Participatory Community Development). In contrary to this, segmented approaches would mostly embrace only such activities as distribution of food.

Base capacities are considered reinforced if the beneficiaries have been provided simultaneously with the kinds of assistance enumerated above, and have been involved in the process of aid provision (such as through participation of community-based organizations).

The fact that coordination exists in the food sector can be observed from Table 8. According to the table, in the food sector, most of the studied organizations apply integrated approaches, collaborate with the government and each other (see Table 8). However, there are relatively more organizations (as compared, for example, to the housing sector in Table 4 or 12) that conducted some of their projects in a segmented way, but still in cooperation with each other and the government (see Table 8).

This finding becomes meaningful if one draws a parallel between Tables 8 and 9, and Tables 8 and 10. Table 9 shows if the beneficiaries’ base capacity was reinforced, whereas Table 10 shows how many beneficiaries each organization was able to reach. The numbers (which are approximate in all tables), however, represent only the beneficiaries reached by organizations within the framework of several, but not all, of their projects, and at different times. Yet, it is still possible to make generalized observations and conclusions.
Table 8. Organizations using integrated and segmented approaches in the food sector

<table>
<thead>
<tr>
<th>Approach</th>
<th>Coordinated</th>
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<tbody>
<tr>
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<td>With Government</td>
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<tr>
<td>Integrated</td>
<td>2. ACDI/VOCA</td>
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<td>63. WFP</td>
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<td>66. WVI</td>
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</tbody>
</table>

ADRA, BIF, CARE, DIAKONIE, World Vision, and WFP are the organizations that have implemented segmented projects (see Table 8). Because of that, they did not succeed in building local capacities, or at a minimum, they might have not included capacity building programs into their projects (see Table 9). But at the same time, they were able to reach significant numbers of beneficiaries (see Table 10).

During the data analysis, it was found that two organizations implemented some of their projects without or with very little participation of the government. Both organizations—Mercy Corps and ACDI/VOCA—received funds from USAID under Azerbaijan Humanitarian Assistance Program, and thus had to avoid getting in very close contact with the government agencies (Azerweb—Social Research for Participatory Community Development) (see Table 11). Even though this was the case,
their projects were successful at reinforcing base capacities of beneficiaries, as they addressed multiple issues (see Table 9).

Table 9. Reinforcing base capacity in the food sector

<table>
<thead>
<tr>
<th>Organization</th>
<th>Base Capacity Reinforced?</th>
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<tbody>
<tr>
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<tr>
<td>4. ADRA</td>
<td>No</td>
</tr>
<tr>
<td>14. BIF</td>
<td>No</td>
</tr>
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<td>17. CARE</td>
<td>No</td>
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<td>21. DIAKONIE</td>
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</tr>
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<td>23. ECHO</td>
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<td>26. GTZ</td>
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<td>42. MERCY CORPS</td>
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<tr>
<td>63. WFP</td>
<td>No</td>
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<tr>
<td>66. WVI</td>
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</tbody>
</table>

A major conclusion is such: those food agencies, which have delivered their services in a segmented fashion, have not been able to build local capacities. However, using segmented approaches and coordinating activities with the government and other agencies help reach hundreds of thousands of IDPs, which could be impractical if the organizations worked separately.
Table 10. Number of beneficiaries reached in the food sector

<table>
<thead>
<tr>
<th>Organization</th>
<th>Total Beneficiaries Reached</th>
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<tbody>
<tr>
<td>2. ACDI/VOCA</td>
<td>10,000 persons</td>
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<td>4. ADRA</td>
<td>250,000 persons</td>
</tr>
<tr>
<td>14. BIF</td>
<td>unknown</td>
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<tr>
<td>17. CARE</td>
<td>347,000 persons</td>
</tr>
<tr>
<td>21. DIAKONIE</td>
<td>unknown</td>
</tr>
<tr>
<td>23. ECHO</td>
<td>unknown</td>
</tr>
<tr>
<td>26. GTZ</td>
<td>unknown</td>
</tr>
<tr>
<td>29. IFRC</td>
<td>64,000 persons</td>
</tr>
<tr>
<td>42. MERCY CORPS</td>
<td>unknown</td>
</tr>
<tr>
<td>63. WFP</td>
<td>450,000 persons</td>
</tr>
<tr>
<td>66. WVI</td>
<td>234,447 persons</td>
</tr>
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</table>

Table 11. Organizations working without the government in the food sector

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<thead>
<tr>
<th>Approach</th>
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<tr>
<td>Integrated</td>
<td>2. ACDI/VOCA</td>
</tr>
<tr>
<td></td>
<td>41. MERCY CORPS</td>
</tr>
</tbody>
</table>

4.2. Provision of Shelter and Temporary Housing

Housing has been one of the urgent issues that IDPs have faced from the very first minutes of displacement. According to UNHRC, more than 50 percent of the IDPs are accommodated in public buildings (such as schools and dormitories) and some
90,000 are living in 15 IDP settlements (UNHCR September 1999). The government reports that about one-quarter of the internally displaced lives with friends and relatives, while the remainder lives in tent camps, public buildings, unfinished buildings, tourist and health care facilities, railway cars, dugouts, and other temporary settlements.

Housing has been a central issue also because most of the internally displaced have remained in temporary shelters since the early 1990s (UN Commission on Human Rights 25 January 1999, para. 66). In a recent survey of its beneficiaries, which include the majority of IDPs living in rural areas, WFP found that about two-thirds of households live in one-room shelters, 70 percent do not have kitchens, and 40 percent share toilets with other families. Another survey, sponsored by the World Bank, found that the majority of the surveyed IDP households in both urban and rural areas lives in one-room shelters, and 18 percent do not have access to water inside or even nearby their residences (UNDP 1999, pp. 49-50; Global IDP Database).

This research has found that the predominant majority of organizations prefer to use an integrated approach and collaborate with the government, which is true for the housing sector as well (see Table 12). Integrated projects in the housing sector, generally, cover such combinations of activities as building and/or rehabilitating houses, encouraging beneficiaries’ participation in planning and implementation of projects, building community service centers, providing access to basic utilities, generating employment opportunities, providing health care services, and many others. Segmented projects would provide only one kind of aid: either construction of buildings, or repair works, or provision of construction materials. The housing/shelter projects are considered to have reinforced/built local capacities when they have addressed several
issues falling within the scope of integrated approaches, in particular, rehabilitation of houses combined with income-generation activities and involvement of beneficiaries.

Table 12. Integrated service delivery in the housing/shelter sector

<table>
<thead>
<tr>
<th>Approach</th>
<th>Coordinated</th>
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</thead>
<tbody>
<tr>
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<td>With Government</td>
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</tr>
<tr>
<td></td>
<td>49. OXFAM</td>
</tr>
<tr>
<td></td>
<td>51. RI</td>
</tr>
<tr>
<td></td>
<td>52. SC</td>
</tr>
<tr>
<td></td>
<td>57. UNDP</td>
</tr>
<tr>
<td></td>
<td>59. UNHCR</td>
</tr>
<tr>
<td></td>
<td>62. World Bank</td>
</tr>
<tr>
<td></td>
<td>66. WVI</td>
</tr>
<tr>
<td>Segmented</td>
<td>20. COUNTERPART INTERNATIONAL</td>
</tr>
</tbody>
</table>

The reason for integration lies in the following: the whole process of provision of relief assistance in Azerbaijan needs to be divided into two phases—emergency and development. While the emergency phase was mostly characterized by meeting immediate needs of the displaced people, the development phase requires looking for longer-term solutions. Since the country has already overcome the emergency phase, today, many relief organizations are switching to the next phase. This means that if, in the early years, the organizations were concerned with urgently providing temporary housing (segmented approach), in the present conditions, just providing shelter will not be enough. The following is a good example: during 2001, Azerbaijan Rehabilitation and
Reconstruction Agency (ARRA) (the government agency) and International Federation of Red Cross (IFRC) rehabilitated 486 houses for returnees in war-damaged areas (Global IDP Database). However, many returnees could not earn a living and left in search of work after rebuilding their homes. Obviously, building and/or rehabilitating houses have to be complemented with the programs like employment/income-generation, education, and health care to ensure better results (USCR Country Report 2001).

Table 12 further shows the degree of importance of collaboration with the government. This has to do with the fact that humanitarian efforts in housing have been led primarily by the government and large international donor organizations such as UNDP, World Bank, UNHCR, USAID, and the European Community Humanitarian Office (ECHO) (USCR Country Report 1999). It must be mentioned that success of most humanitarian projects in Azerbaijan depends on the degree of cooperation with the government for several reasons which are applicable to all five sectors. First of all, the government is the official body charged with the ultimate responsibility for the future of its displaced people. Second of all, the government coordinates all humanitarian relief assistance in Azerbaijan. Third of all, although the government may not provide any material contribution, the fact that NGOs work in a legal environment regulated by the government makes it important to get the latter’s approval to conduct projects (from personal phone conversations). And finally, it is not less important to know that many facilities and enterprises are still run by the state. For instance, IDPs are housed in public buildings run by the state, or are under the responsibility of the local government, or are settled on the land allocated by the government. That is why the organizations
realize that any humanitarian effort bypassing the government would have few chances to yield long-term results.

Applying the two evaluation criteria has produced Tables 13 and 14. The first observation would be that all but two organizations incorporated capacity building programs into their projects (see Table 13). This resulted in many beneficiaries being not only provided with shelter, but also involved in the construction of houses, provided with employment/income-generation opportunities, agricultural inputs, being taught new skills, and so on. In this regard, it can be said that the performance of all those organizations was quite successful.

Using the other criterion reveals a different situation (see Table 14). UNHCR is leading with 140,000 beneficiaries reached. Then follow the World Bank (31,000), Care (19,000 persons and 7 villages), and Norwegian Refugee Council with 12,600 persons and 4 settlements. The third tier of organizations includes HAYAT (17,500), Counterpart International (10,750), World Vision (10,500), and Relief International (5,600 persons and 36 settlements). To determine the number of beneficiaries reached by the remaining organizations was not possible (see Table 14).

The research findings clearly indicate that, in the provision of shelter, the services were delivered mostly in an integrated fashion and in cooperation with the government and other organizations (see Table 12). Table 14 supports these findings by showing that the beneficiaries' base capacities were reinforced or built. The number of people reached is in tens of thousands. However, integrated projects in this sector did not reach as many beneficiaries as segmented projects in the food sector (see Tables 13 and 14).
<table>
<thead>
<tr>
<th>Organization</th>
<th>Base Capacity Reinforced?</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. ARRA</td>
<td>Yes</td>
</tr>
<tr>
<td>17. CARE</td>
<td>Yes</td>
</tr>
<tr>
<td>20. COUNTERPART INTERNATIONAL</td>
<td>No</td>
</tr>
<tr>
<td>23. ECHO</td>
<td>No</td>
</tr>
<tr>
<td>27. HAYAT</td>
<td>Yes</td>
</tr>
<tr>
<td>29. IFRC</td>
<td>Yes</td>
</tr>
<tr>
<td>35. IRC</td>
<td>Yes</td>
</tr>
<tr>
<td>42. MERCY CORPS</td>
<td>Yes</td>
</tr>
<tr>
<td>48. NRC</td>
<td>Yes</td>
</tr>
<tr>
<td>51. RI</td>
<td>Yes</td>
</tr>
<tr>
<td>57. UNDP</td>
<td>Yes</td>
</tr>
<tr>
<td>59. UNHCR</td>
<td>Yes</td>
</tr>
<tr>
<td>61. USAID</td>
<td>Yes</td>
</tr>
<tr>
<td>62. World Bank</td>
<td>Yes</td>
</tr>
<tr>
<td>66. WVI</td>
<td>Yes</td>
</tr>
</tbody>
</table>
### Table 14. Number of beneficiaries reached in the housing/shelter sector

<table>
<thead>
<tr>
<th>Organization</th>
<th>Total Beneficiaries Reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. ARRA</td>
<td>unknown</td>
</tr>
<tr>
<td>17. CARE</td>
<td>19,000 persons</td>
</tr>
<tr>
<td>20. COUNTERPART INTERNATIONAL</td>
<td>10,750 persons</td>
</tr>
<tr>
<td>23. ECHO</td>
<td>unknown</td>
</tr>
<tr>
<td>27. HAYAT</td>
<td>17,500 persons</td>
</tr>
<tr>
<td>29. IFRC</td>
<td>unknown</td>
</tr>
<tr>
<td>35. IRC</td>
<td>unknown</td>
</tr>
<tr>
<td>42. MERCY CORPS</td>
<td>unknown</td>
</tr>
<tr>
<td>48. NRC</td>
<td>12,600 persons</td>
</tr>
<tr>
<td>51. RI</td>
<td>5,600 persons</td>
</tr>
<tr>
<td>57. UNDP</td>
<td>unknown</td>
</tr>
<tr>
<td>59. UNHCR</td>
<td>140,000 persons</td>
</tr>
<tr>
<td>61. USAID</td>
<td>unknown</td>
</tr>
<tr>
<td>62. World Bank</td>
<td>31,000 persons</td>
</tr>
<tr>
<td>66. WVI</td>
<td>10,500 persons</td>
</tr>
</tbody>
</table>

#### 4.3. Provision of Health Services

Internally displaced persons in Azerbaijan have suffered deterioration in their health since their displacement. A nationwide health and nutrition survey undertaken in 1996 reported elevated rates of chronic malnutrition among children and the elderly,
and high levels of anemia and iodine deficiency. Scabies, especially among children, and other skin infections, respiratory illnesses, malaria, diarrhea and vitamin A deficiency are also prevalent health problems in most camps due to the lack of bathing facilities (UN Commission on Human Rights 25 January 1999, para. 76; Global IDP Database; Greene 1998, 264).

Special attention to the health needs of women, including in the area of reproductive health, and to the prevention of contagious and infectious diseases, such as HIV/AIDS, is also needed. In Azerbaijan, internally displaced men and women request contraceptives, particularly for the purposes of family planning. At the same time, there are organizations that provide health education and services specific to the needs of women in the areas of gynecological health, safe motherhood and breastfeeding (UN Commission on Human Rights 25 January 1999, para. 78, 79; Global IDP Database).

Poor sanitation is a main factor contributing to the health problems of IDPs. The sanitation infrastructure is particularly poorly developed or maintained in internally displaced persons’ shelters and settlements owing to overcrowding and their perceived “temporary” nature. Moreover, inadequate garbage collection is another major problem (UN Commission on Human Rights 25 January 1999, para. 84-85; Global IDP Database).

Humanitarian assistance in health care is provided by all categories of organizations studied, that is the government, international and local NGOs, and donor agencies. These services have continued to be significant even after the emergency phase. This, in part, is due to the fact that the health care system in Azerbaijan is still
run by the state. Faced with budgetary constraints, the government has so far been unable to bring the health care system to an up-to-date condition by either investing in it, or privatizing. At the present time, for the most part, the government relies on the international community, as obtaining the necessary medical supplies and equipment is quite costly. That is why the main burden of provision of health assistance has fallen on NGOs. Their integrated projects include raising awareness of disease prevention and healthy lifestyles, distribution of medical aid and food, supplying medical equipment to local clinics, training of local medical personnel, creating mobile health units, improving vaccination practices, increasing accessibility of IDPs to basic and reproductive health care, and revitalizing local primary health care facilities (Azerweb—Social Research for Participatory Community Development). Segmented projects would be represented by one type of activity such as tuberculosis control, or vaccination. Base capacities would be reinforced if the projects attempted to deliver any combination of packaged aid: providing medicine complemented with training of local nurses, and building/rehabilitating local primary health care facilities, or increasing access to such facilities.

The government runs health care in Azerbaijan. Under these circumstances, collaboration with the state is simply inevitable, and highly desired. In fact, the government itself is very receptive of the assistance provided by NGOs, and is keenly interested in securing a continuous flow of humanitarian assistance into the country. That is one of the reasons explaining why the predominant majority of NGOs cooperates with the state (see Table 5).
In three instances—International Rescue Committee, Mercy Corps and World Vision International—the organizations implemented integrated projects with other NGOs using USAID’s funds, which, once again, means they had to minimize their contact with the government agencies. In four cases—Caspian Project, DIAKONIE, MSF/France, and MSF/Holland—segmented projects coordinated with the government and other organizations were undertaken (see Table 15). These were primarily related to either the distribution of medical supplies, or the provision of reproductive health services, or vaccination.

Table 15. Integrated and segmented service delivery in the health sector

<table>
<thead>
<tr>
<th>Approach</th>
<th>Coordinated</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>With Government</td>
</tr>
<tr>
<td>Integrated</td>
<td>35. IRC 42. MERCY CORPS 66. WVI</td>
</tr>
<tr>
<td>Segmented</td>
<td>18. CASPIAN PROJECT 21. DIAKONIE 45. MSF/France 46. MSF/Holland</td>
</tr>
</tbody>
</table>

Note: This table does not include organizations delivering integrated services with the government.

As in the food sector, an almost similar pattern has been observed in the health sector. Three out of four agencies—DIAKONIE, Caspian Project, and MSF/France—could not build additional local capacities (see Table 16). However, it is also unknown how many beneficiaries they were able to reach through their projects (see Table 17).
### Table 16. Reinforcing base capacity in the health sector

<table>
<thead>
<tr>
<th>Organization</th>
<th>Base Capacity Reinforced?</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. ADRA</td>
<td>Yes</td>
</tr>
<tr>
<td>18. CASPIAN PROJECT</td>
<td>No</td>
</tr>
<tr>
<td>20. COUNTERPART INTERNATIONAL</td>
<td>Yes</td>
</tr>
<tr>
<td>21. DIAKONIE</td>
<td>No</td>
</tr>
<tr>
<td>23. ECHO</td>
<td>Yes</td>
</tr>
<tr>
<td>28. ICRC</td>
<td>Yes</td>
</tr>
<tr>
<td>29. IFRC</td>
<td>Yes</td>
</tr>
<tr>
<td>35. IRC</td>
<td>Yes</td>
</tr>
<tr>
<td>36. IRD</td>
<td>Yes</td>
</tr>
<tr>
<td>42. MERCY CORPS</td>
<td>Yes</td>
</tr>
<tr>
<td>44. MSF/Belgium</td>
<td>Yes</td>
</tr>
<tr>
<td>45. MSF/France</td>
<td>No</td>
</tr>
<tr>
<td>46. MSF/Holland</td>
<td>Yes</td>
</tr>
<tr>
<td>51. RI</td>
<td>Yes</td>
</tr>
<tr>
<td>52. SC</td>
<td>Yes</td>
</tr>
<tr>
<td>55. UMCOR</td>
<td>Yes</td>
</tr>
<tr>
<td>60. UNICEF</td>
<td>Yes</td>
</tr>
<tr>
<td>66. WVI</td>
<td>Yes</td>
</tr>
</tbody>
</table>
## Table 17. Number of beneficiaries reached in the health sector

<table>
<thead>
<tr>
<th>Organization</th>
<th>Total Beneficiaries Reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. ADRA</td>
<td>130,000 persons</td>
</tr>
<tr>
<td>18. CASPIAN PROJECT</td>
<td>unknown</td>
</tr>
<tr>
<td>20. COUNTERPART INTERNATIONAL</td>
<td>20 medical facilities and hospitals</td>
</tr>
<tr>
<td>21. DIAKONIE</td>
<td>unknown</td>
</tr>
<tr>
<td>23. ECHO</td>
<td>unknown</td>
</tr>
<tr>
<td>28. ICRC</td>
<td>unknown</td>
</tr>
<tr>
<td>29. IFRC</td>
<td>34,000 persons</td>
</tr>
<tr>
<td>35. IRC</td>
<td>109,000 persons</td>
</tr>
<tr>
<td>36. IRD</td>
<td>250,000 persons</td>
</tr>
<tr>
<td>42. MERCY CORPS</td>
<td>unknown</td>
</tr>
<tr>
<td>44. MSF/Belgium</td>
<td>unknown</td>
</tr>
<tr>
<td>45. MSF/France</td>
<td>unknown</td>
</tr>
<tr>
<td>46. MSF/Holland</td>
<td>129,008 persons</td>
</tr>
<tr>
<td>51. RI</td>
<td>250,000 persons</td>
</tr>
<tr>
<td>52. SC</td>
<td>7,664 persons</td>
</tr>
<tr>
<td>55. UMCOR</td>
<td>14 medical stations, 5 medical centers, 40 state health facilities and local NGO, 108,678 persons</td>
</tr>
<tr>
<td>60. UNICEF</td>
<td>unknown</td>
</tr>
<tr>
<td>66. WVI</td>
<td>169,721 persons</td>
</tr>
</tbody>
</table>
Regarding the complexity of the current circumstances (i.e., problems with data), one needs to exercise caution reaching certain conclusions. However, as a general rule, it can be said that, in the health sector, segmented approaches rarely enable the agencies to build sufficient, if any, capacities. It is assumed, from the example of the food sector, that segmented projects may not, always, be able to reinforce base capacities, which in turn makes IDPs more dependent on external aid. On the other hand, integrated health projects tend to be better able to build capacities since, usually, they are carried out by many organizations and have many more resources. However, findings in the health sector show that integrated projects reached substantial numbers of beneficiaries as well.

### 4.4. Employment/Income-Generation Activities

Most IDPs have been displaced for eight to ten years, and as a result, their employment opportunities have been severely limited. According to the government statistics, only one-third of the IDPs who are able to work are employed. Thirty-six percent of the IDPs interviewed in the World Bank-sponsored survey considered themselves formally unemployed. WFP estimates that about two-thirds of the country's rural IDPs are unable to meet their minimal food and non-food requirements (Global IDP Database).

At least 80 percent of IDPs have agricultural backgrounds, but most of them live in circumstances that prevent them from working in agriculture. They are excluded from owning land because Azerbaijani citizens are eligible to participate in land privatization only in their home regions. WFP's survey showed that only 10 percent of its rural IDP
beneficiaries have access to land for cultivation and that financial constraints prevent one-third of them from cultivating that land (Global IDP Database).

Azerbaijani IDPs experience a tremendous need for skills development, retraining, and income-generation. A number of international organizations and NGOs have responded to this need by providing small loans and training to IDPs wishing to establish small business. Such programs develop micro-enterprises in a number of ways: vocational and business training; small business grants or loans to individuals for the purchase of needed equipment and materials; loans to groups of IDPs organizing small business cooperatives, such as in leather tanning, car repair, metal fabrication and carpentry, bakeries and wheat mills; and the establishment and support of women’s co-operatives (Global IDP Database). Despite these efforts, micro-credit and micro-enterprise programs have been weak, largely because of the absence of clear regulations on credit programs outside the banking sector. Another reason is that, initially, the government was reluctant to allow such efforts fearing that they would interfere with the overriding goal of the return of IDPs. Nonetheless, international and local NGOs report that, in recent years, the government has come to welcome income-generating projects. A recent Presidential Decree on Internally Displaced Persons and Refugees gave support to the expansion of micro-credit programs, raising hopes that the regulatory gap in this area will be addressed in the near future (Global IDP Database). Yet, owing to the present state of the country’s economy, the self-reliance of the internally displaced will take some time to cultivate, and the need for humanitarian assistance will remain for some time to come (UN Commission on Human Rights 25 January 1999, para. 117).
Let us now turn to the findings in the employment/income-generation sector. This sector’s projects delivered packaged aid through business training, teaching new skills, providing small grants and loans to promising enterprises, and agricultural inputs, encouraging local production, and so on. Segmented projects have been difficult to locate, and are even more difficult to define. But, as a general rule, they concentrate only on one type of activity such as provision of loans. The research considers that local capacities have been reinforced or built when, for instance, teaching new skills and organizing training workshops have been accompanied with the provision of loans and grants, when IDPs manpower and resources have been used instead of importing relief commodities, and when IDPs have been able to initiate local production.

Table 18. Integrated and coordinated service delivery in the employment/income-generation sector

<table>
<thead>
<tr>
<th>Approach</th>
<th>Coordination</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>With Government</td>
</tr>
<tr>
<td>Integrated</td>
<td>2. ACDI/VOCA</td>
</tr>
<tr>
<td></td>
<td>22. DRC</td>
</tr>
<tr>
<td></td>
<td>23. ECHO</td>
</tr>
<tr>
<td></td>
<td>34. IOM</td>
</tr>
<tr>
<td></td>
<td>35. IRC</td>
</tr>
<tr>
<td></td>
<td>42. MERCY CORPS</td>
</tr>
<tr>
<td></td>
<td>48. NRC</td>
</tr>
<tr>
<td></td>
<td>50. OXFAM</td>
</tr>
<tr>
<td></td>
<td>51. RI</td>
</tr>
<tr>
<td></td>
<td>52. SC</td>
</tr>
<tr>
<td></td>
<td>56. UMID HSSC</td>
</tr>
<tr>
<td></td>
<td>59. UNHCR</td>
</tr>
<tr>
<td></td>
<td>60. UNICEF</td>
</tr>
<tr>
<td></td>
<td>66. WVI</td>
</tr>
</tbody>
</table>

The patterns observed in Table 18 suggest that all organizations implemented integrated projects with the government’s support, and in coordination with other NGOs.
This is to be expected as income generation activities are quite complicated (provision of vocational training, teaching new skills, etc.) and require more financial back up (start-up grants and loans), which does not necessarily mean that other sectors are easy to deal with. This finding also makes the changes of political attitudes in the country more visible.

Further, a distinctively higher number of organizations (five as opposed to two or three) managed to implement some of the projects without the government’s participation (see Table 19).

**Table 19. Integrated service delivery without the government in the employment/income-generation sector**

<table>
<thead>
<tr>
<th>Approach</th>
<th>Without Government</th>
<th>Coordinated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Integrated</td>
<td>2. ACDI/VOCA</td>
<td>2. ACDI/VOCA</td>
</tr>
<tr>
<td></td>
<td>42. MERCY CORPS</td>
<td>42. MERCY CORPS</td>
</tr>
<tr>
<td></td>
<td>52. SC</td>
<td>52. SC</td>
</tr>
<tr>
<td></td>
<td>61. USAID</td>
<td>61. USAID</td>
</tr>
</tbody>
</table>

This might have happened under several circumstances: 1) funds were provided by USAID, and 2) regarding the nature of the political environment in Azerbaijan (reluctance of the government to promote income generation activities) at some period of time, it is legitimate to assume that those organizations might have not been able to cooperate with the state. Let us note that the same organizations also carried out integrated projects with the government’s involvement, which is evidence of the government adjusting its policy to the realities of the present situation.

Tables 20 and 21 present some interesting findings. First, all organizations involved reinforced the capacities of their beneficiaries (see Table 20). And second, the
number of beneficiaries reached is not as high as in, let us say, the food sector (see Table 21).

**Table 20. Reinforcing base capacity in the employment/income-generation sector**

<table>
<thead>
<tr>
<th>Organization</th>
<th>Base Capacity Reinforced?</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. ACDI/VOCA</td>
<td>Yes</td>
</tr>
<tr>
<td>12. AzRC</td>
<td>Yes</td>
</tr>
<tr>
<td>22. DRC</td>
<td>Yes</td>
</tr>
<tr>
<td>23. ECHO</td>
<td>Yes</td>
</tr>
<tr>
<td>34. IOM</td>
<td>Yes</td>
</tr>
<tr>
<td>35. IRC</td>
<td>Yes</td>
</tr>
<tr>
<td>48. NRC</td>
<td>Yes</td>
</tr>
<tr>
<td>50. OXFAM</td>
<td>Yes</td>
</tr>
<tr>
<td>51. RI</td>
<td>Yes</td>
</tr>
<tr>
<td>52. SC</td>
<td>Yes</td>
</tr>
<tr>
<td>56. UMID HSSC</td>
<td>Yes</td>
</tr>
<tr>
<td>60. UNICEF</td>
<td>Yes</td>
</tr>
<tr>
<td>61. USAID</td>
<td>Yes</td>
</tr>
<tr>
<td>66. WVI</td>
<td>Yes</td>
</tr>
</tbody>
</table>

As a result, several major conclusions follow: 1) due to their nature, income-generation projects tend to build capacities, 2) income-generation projects tend to require integration of activities (teaching skills combined with providing micro-credit) and coordination among parties concerned, 3) such projects are apt for a relatively smaller
number of beneficiaries to increase the quality of activities performed, and 4) the organizations working in Azerbaijan might have figured out that applying segmented approaches in the income-generation sector might be a waste of resources, which are always limited.

**Table 21. Number of beneficiaries reached in the employment/income generation sector**

<table>
<thead>
<tr>
<th>Organization</th>
<th>Total Beneficiaries Reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. ACDI/VOCA</td>
<td>10,000 persons</td>
</tr>
<tr>
<td>12. AzRC</td>
<td>36,800 persons</td>
</tr>
<tr>
<td>22. DRC</td>
<td>unknown</td>
</tr>
<tr>
<td>23. ECHO</td>
<td>unknown</td>
</tr>
<tr>
<td>34. IOM</td>
<td>unknown</td>
</tr>
<tr>
<td>35. IRC</td>
<td>68 settlements</td>
</tr>
<tr>
<td>48. NRC</td>
<td>unknown</td>
</tr>
<tr>
<td>50. OXFAM</td>
<td>20,000 persons</td>
</tr>
<tr>
<td>51. RI</td>
<td>unknown</td>
</tr>
<tr>
<td>52. SC</td>
<td>2,000 persons</td>
</tr>
<tr>
<td>56. UMID HSSC</td>
<td>unknown</td>
</tr>
<tr>
<td>60. UNICEF</td>
<td>unknown</td>
</tr>
<tr>
<td>61. USAID</td>
<td>unknown</td>
</tr>
<tr>
<td>66. WVI</td>
<td>6 villages 3,200 persons</td>
</tr>
</tbody>
</table>
4.5. Provision of Educational Assistance

The impact of internal displacement on education has been tremendous. After so many years of living in temporary shelters, and having little access to schooling, illiteracy has become a threat for a whole generation of people (UN Commission on Human Rights 25 January 1999, para. 90; Global IDP Database). A 1996 UNHCR survey indicates that “many IDP children did not attend school at all or attend irregularly” (Greene 1998, 264).

Soviet Union made education free, mandatory, and accessible to all members of the society. But today, Azerbaijan, which once was proud of having one of the highest literacy rates, is faced with a challenge of educating its displaced people. The influx of large numbers of displaced and refugee populations into the cities and regions of Azerbaijan added much more burden on the already struggling education system than it could handle.

In general, the literacy level among IDPs is not low: 71 percent have some, if not full, high school education, 10 percent have higher education and another 10 percent—technical education. The occupational background of 40 percent of the displaced is agriculture, 6.1 percent—education, 5.4 percent—health care, 4.8 percent—construction, and 11.4 percent—various other professions, while one third are without any formal profession (UN Commission on Human Rights 25 January 1999, para. 31; Global IDP Database). Regarding this, the long-range problems now are to educate the younger generation and to teach adults to help them get employment.

The schools for the internally displaced operate under difficult circumstances. In some camps, students need to replenish the supply of school materials, including
desks, chairs, blackboards, and notebooks. Contrasts exist among IDP camps serviced by various NGOs as well. Some camps are serviced only by mobile school and library units. The education facilities to which IDPs have access are in poor conditions, overcrowded, and lack heat during the winter months (UN Commission on Human Rights 25 January 1999, para. 89; Global IDP Database). Humanitarian assistance in this sector consists of building/rehabilitating schools, providing school supplies, using mobile library units to reach IDPs in remote areas, developing a sense of community, training teachers, providing training in different spheres, teaching new skills and knowledge, and so on.

The analysis of the data on the education sector has yielded almost similar results as in the case with the income-generation sector. Projects of all organizations concerned were designed to build and/or to strengthen the capacities of target populations (see Table 22).

**Table 22. Reinforcing base capacity in the education sector**

<table>
<thead>
<tr>
<th>Organization</th>
<th>Base Capacity Reinforced?</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. ADRA</td>
<td>Yes</td>
</tr>
<tr>
<td>15. BUTA</td>
<td>Yes</td>
</tr>
<tr>
<td>22. DRC</td>
<td>Yes</td>
</tr>
<tr>
<td>50. OXFAM</td>
<td>Yes</td>
</tr>
<tr>
<td>51. RI</td>
<td>Yes</td>
</tr>
<tr>
<td>60. UNICEF</td>
<td>Yes</td>
</tr>
<tr>
<td>66. WVI</td>
<td>Yes</td>
</tr>
</tbody>
</table>
In the prevailing number of cases, services were delivered in an integrated fashion through working with the government and other NGOs (see Table 23). Using integrated approaches in the education sector allowed the agencies to merge under one umbrella such services as training in agricultural school and vocational centers, building and/or rehabilitating schools, equipping and managing them, providing school supplies and non-formal education (socio-cultural and recreational activities), improving and developing skills among IDPs, constructing classrooms, providing schools with the base for income-generation activities, establishing education centers run by IDPs, and so on. Segmented projects, however, concentrated either on rehabilitation of schools, or provision of school supplies, or of non-formal education. The projects are considered to have reinforced base capacities in the cases when provision of school supplies has been accompanied with rehabilitation and construction of local schools, training local teachers, and helping IDPs form community-based groups, or when teaching new skills and knowledge has been complemented with income-generation activities, and so on.

Table 23. Integrated and coordinated service delivery in the education sector

<table>
<thead>
<tr>
<th>Approach</th>
<th>Coordinated</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>With Government</td>
</tr>
<tr>
<td>Integrated</td>
<td>4. ADRA</td>
</tr>
<tr>
<td></td>
<td>15. BUTA</td>
</tr>
<tr>
<td></td>
<td>23. ECHO</td>
</tr>
<tr>
<td></td>
<td>48. NRC</td>
</tr>
<tr>
<td></td>
<td>50. OXFAM</td>
</tr>
<tr>
<td></td>
<td>51. RI</td>
</tr>
<tr>
<td></td>
<td>59. UNHCR</td>
</tr>
<tr>
<td></td>
<td>60. UNICEF</td>
</tr>
<tr>
<td>Segmented</td>
<td>22. DRC</td>
</tr>
<tr>
<td></td>
<td>66. WVI</td>
</tr>
</tbody>
</table>
Like the health sector, education is also run by the state (though there are a number of private schools as well), which means it is in the best interest of all organizations and agencies to coordinate their efforts with the government.

Two NGOs—Danish Refugee Council and World Vision—carried out several segmented projects (such as only teaching new skills). Regardless of their segmented nature, the projects were coordinated with the NGOs working in the same field (see Table 23).

**Table 24. Number of beneficiaries reached in the education sector**

<table>
<thead>
<tr>
<th>Organization</th>
<th>Total Beneficiaries Reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. ADRA</td>
<td>unknown</td>
</tr>
<tr>
<td>15. BUTA</td>
<td>1,400 persons</td>
</tr>
<tr>
<td>22. DRC</td>
<td>unknown</td>
</tr>
<tr>
<td>50. OXFAM</td>
<td>unknown</td>
</tr>
<tr>
<td>51. RI</td>
<td>25,000 persons</td>
</tr>
<tr>
<td>60. UNICEF</td>
<td>unknown</td>
</tr>
<tr>
<td>66. WVI</td>
<td>unknown</td>
</tr>
</tbody>
</table>

As for the number of beneficiaries reached, the situation here is rather complicated. The research could determine exact numbers for only two organizations (see Table 24). That is why it is more difficult to reach a conclusion using this evaluation criterion. Nevertheless, the available numbers show that the coverage of projects was not as wide as in the food and health sectors.
Based on the above findings, the following conclusions can be made: 1) in the education sector, no matter how many issues are addressed, cooperation with the government is a necessity as the education system in Azerbaijan is regulated by the state, and 2) supposedly, integrated projects in the education sector tend to target relatively smaller number of IDPs, while segmented projects may succeed by addressing one issue but in many more settlements, villages, or IDP camps.

4.6. Summary

This chapter has presented the major research findings. All findings have been cross-analyzed using two evaluation criteria (outreach and reinforcing base capacity) and the ways services are delivered (integrated, segmented, with the government, without the government, with NGOs, and without them).

As obvious from the findings, organizations in Azerbaijan prefer to use integrated approaches, and coordinate their projects with other agencies. In all five sectors, the number of integrated projects coordinated with the government and other agencies prevails over other models of service delivery. However, if one compares the ratio of segmented projects among sectors, he/she may observe that many more segmented projects have been carried out in the food and health care sectors than in the other ones.

Besides, in very few instances, several organizations implemented projects without the government’s participation, but still in cooperation with other NGOs.
5. CONCLUSION

5.1. Conclusions Based on the Findings

This research has examined the patterns of the delivery of humanitarian assistance to IDPs in Azerbaijan. Several models of service delivery have been cross-analyzed with two evaluation criteria.

The lack of data influenced the methodology and analysis. So, three out of five evaluation criteria, and two out of seven sectors were dropped. Yet, it is believed that the content of the research did not suffer much.

Having analyzed the data on all five sectors, and by two evaluation criteria on the example of Azerbaijan, certain general conclusions can now be made. The first set of conclusions applies to the use of integrated approaches. As has been seen above, the majority of organizations working in Azerbaijan have implemented integrated projects in all five sectors. Today, one of the main concerns of those NGOs is to switch to development-related projects in order to help IDPs rely on themselves, not external aid. From this standpoint, integrated projects are viewed as the only workable tool to achieve sustainability. This may be understandable. However, usefulness of a segmented manner of project implementation should not be undermined as well. The quality of service delivered, professional efficiency, and relative simplicity of project management may be lost within a complex web of integration.

Coordination with the government and securing its approval for projects are vital for aid agencies operating in Azerbaijan to achieve longer-term results. This has to do with the legal, administrative, and political environment in which they operate. The government is still a principal player in many spheres of the country’s life (such as in
health and education), and one needs to take account of that. Although, in comparison with many other governments, the Azerbaijani officials welcome humanitarian aid projects and the work of relief organizations, this favorable attitude seems not to apply to all local NGOs. In the course of the research, local NGOs appeared to be insufficiently represented, and their program and project descriptions were more difficult to locate than those of international NGOs.

Coordination among organizations is another important factor helping to address multiple issues at a time. It is not known, however, how such coordination is effective in reality and to what extent NGOs are able to coordinate their projects. But a general trend towards coordination of activities has been observed.

Two major conclusions about integrated approaches implemented in Azerbaijan immediately follow from the findings of this research: integrated and coordinated projects are better equipped to build local capacities of beneficiaries, as they address several issues, and tend to have more resources, manpower, and expertise consolidated under the umbrella of one project. The other conclusion is that such projects have not been able to reach wide masses of beneficiaries. This may, on the one hand, be connected to the existence of coordination, which may be very cumbersome and not well thought-out at such an early stage of development of NGOs in Azerbaijan. On the other hand, this might be due to the complicated nature of projects.

Implementation of integrated projects without the government’s involvement but in cooperation with other NGOs has been observed in several cases. Those are primarily the projects funded by USAID whose policy objectives have discouraged
closer collaboration with the government under the sanctions of Section 907. Overall, such projects have succeeded in building local capacities and reaching substantial numbers of IDPs. However, in the meantime, they have led to the duplication of some activities in such sectors as health care when analogous services were delivered by the state agencies (from the personal phone conversations). In other cases, relief agencies have not been able to deliver a full range of services because of the restrictions.

Another set of conclusions applies to the use of segmented projects. They were implemented in fewer instances than integrated ones. Nonetheless, they, too, were coordinated with the state and other NGOs. The research found that the implementation of segmented projects in Azerbaijan did not lead to reinforcing base capacities of beneficiaries in the sectors where such approaches were applied. However, unlike integrated projects, these were effective in reaching many more beneficiaries.

As far as models of completely independent integrated and segmented service delivery (without any coordination with the government and/or other NGOs) are concerned, no such instances have been found. It implies that aid organizations may have witnessed the futility of independent service delivery in Azerbaijan.

5.2. Conclusions Based on the Literature

The research has found that there is no common strategy to be suggested to any country, including Azerbaijan as well. Moreover, the current literature acknowledges that such a strategy would not be desirable because different countries have different resources, problems, capabilities, and so on (Abasiekong 1982, 49).

Any country dealing with IDP and refugee populations has to formulate its own policies and programs that best suit its individual requirements, taking into account its
resources, existing political environment, institutions, and most pressing needs (Abasiekong 1982, 50).

In general, it is proposed to apply the combination of integrated and segmented approaches. Using only an integrated manner of service delivery has been criticized for being too complex and not manageable, whereas sectoral implementation of projects has been given credit for being able to avoid the establishment of project authorities to manage activities from one office headquarters (Richter 1976a, p. 23-24; Richter 1976b, p. 414-437 in Zurek 1985, 314).

Using those two approaches has to be complemented with the establishment of a coordination mechanism. Such a mechanism will be responsible for ensuring that the work of all agencies concerned is coordinated and beneficiaries are involved in the process of service delivery (Gsanger 1994, 36-37).

5.3. Implications

Findings drawn from the example of Azerbaijan do not necessarily suggest that the observed patterns of service delivery work best under any circumstances. For instance, integrated projects have been widely applied without any regard to their criticism. In addition to that, one needs to take into account the fact that service delivery in Azerbaijan has been complicated by many internal and external factors discussed in the main body of this research.

Not only Azerbaijan has found itself trapped with the problems of IDPs and refugees. There are numerous countries around the world having huge populations of
uprooted people, and knowing what approaches work better and under what circumstances would help deliver limited humanitarian assistance more effectively.

Under ideal circumstances, to deliver humanitarian assistance effectively, there would be no issue of government hostility whatsoever, no obstacles hampering service delivery in any way, and NGOs would be more self-sufficient and depend less on donor agencies (since donors may withdraw from projects and/or dictate their own conditions). It is assumed that in such an ideal environment, one of the best ways to deal with problems of displacement would be to start with segmented projects which can be effective by reaching hundreds of thousands beneficiaries in desperate need for assistance. Further, the next stage of service delivery would require building local capacities to enable beneficiaries to sustain themselves. That is when integrated projects may prove useful by virtue of their ability to address multiple issues at a time. They may also be useful as they have potential for establishing a solid foundation. And finally, service delivery would be logically concluded by using segmented approaches to locate and resolve problems that beneficiaries experience. This may be crucial since it is important to avoid constant comprehensive intervention (which creates even greater dependencies) into beneficiaries’ communities and let them manage themselves after the necessary mechanisms have been built.

5.4. Recommendations for Further Research

Data collection was the major problem for this study. First, they was difficult to locate, and second, the located data were not systematic. In general, data about humanitarian efforts in Azerbaijan are available, but they can be found mostly in the internet. The research was not able to locate any academic works evaluating
performance of NGOs in Azerbaijan. Most of the data about the NGOs performance is in the form of reports and project descriptions. All of this may cast doubt on the reliability of data.

This research proposes to conduct a more in-depth in-country study. It is believed that via using a structured (or semi-structured) questionnaire, meeting and conducting interviews with NGO staff and leaders, and making field trips research would be able to collect very valuable data on the NGO sector in Azerbaijan. Possessing such data would definitely produce more accurate results and increase their reliability.

5.5. Summary

This chapter has presented conclusions and recommendations proposed by the study. It has discussed the research findings and provided explanations of those.

The main conclusions have covered advantages and disadvantages of integrated and segmented approaches applied in Azerbaijan. Conclusions have also been made about the cases when the government was and was not involved in project implementation.

Conclusions based on the literature mainly suggest that there is no uniform pattern of service delivery, and that each country must develop its own policies and strategies.

The chapter discussed the weaknesses of the research as a whole, and proposed which changes would be ideal to make.
BIBLIOGRAPHY


Energy Information Administration, Department of Energy; http://www.eia.doe.gov/emeu/cabs/azerbjan2.html; Internet; accessed 10 April 2002.

Global IDP Database; www.idpproject.org; Internet; accessed 15 December 2001.


Strategis: Canada’s Business and Consumer Site; http://strategis.ic.gc.ca/SSG/da90087e.html; Internet; accessed 10 April 2002.


APPENDIX A

The information contained in this appendix concerns the two sectors (gender, and protection and safety) which were dropped because of the lack of data.

Gender

Displacement of people in Azerbaijan has affected gender roles too. It has required many internally displaced women to assume new or at least increased responsibilities for financially supporting the family because of the death, disablement or unemployment of the men in the family (UN Commission on Human Rights 25 January 1999, para. 38; Global IDP Database).

The changes in gender roles are noticeable between the internally displaced populations living in urban and rural areas. In urban areas, both men and women are active in communicating the community's concerns. By contrast, in rural areas men are more active and assemble in public places while the women remain close to their homes. Even when gatherings of camp populations are mixed, the men and women tend to be clustered separately (UN Commission on Human Rights 25 January 1999, para. 39; Global IDP Database).

Protection and Safety

Internally displaced persons require and are entitled to protection and assistance. In Azerbaijan, unlike in many other countries, the sense of solidarity that exists between the internally displaced and the authorities means that the displaced are not viewed as the “enemy” and are not subjected to attacks by the authorities (UN Commission on
Protection, however, also encompasses the broad range of economic, social, cultural, civil and political rights provided for under international human rights law (Cohen and Deng 1998, 254-255). For instance, the rights to food, shelter, health care, education and employment also fall within the meaning of protection. In Azerbaijan, both national and local government officials acknowledge that significant needs remain in these various areas (Global IDP Database).

One of the problems posing obstacles to the return of some displaced populations is the mine contamination in the occupied territories and areas bordering them. The actual extent of mine contamination is not known. To begin to address this problem, in 1998 UNDP commissioned a mine survey in Fizuli region, selected as the priority area to be surveyed in connection with the reconstruction program under way there. Further funding is required to extend the survey to other areas of Azerbaijan, where return is currently taking place or might be anticipated in the future. There is also a need to establish a national institutional body to manage mine action. Important steps towards this end have been taken by the government, with a draft decree for the establishment of the Azerbaijan National Agency for Demining (ANAD) and the purchase by Azerbaijan Reconstruction and Rehabilitation Agency of basic mine-clearance equipment. However, there remains a lack of national capacity and a need for training of local personnel in humanitarian mine clearance (UN Commission on Human Rights 25 January 1999, para. 107; Global IDP Database).
APPENDIX B

ORGANIZATIONS DELIVERING HUMANITARIAN ASSISTANCE TO IDPs AND REFUGEES IN AZERBAIJAN

1. ACBL (Azerbaijan Campaign to Ban Landmines)
   Program:
   1. Monitor all the explosives on the whole territory of Azerbaijan
   2. Analyze the causes of landmines and other explosives usage and the ways to overcome them
   3. Carry out social-psychological survey
   4. Hold seminars and training courses

2. ACDI/VOCA (Agriculture Cooperative Development International)
   1. Program:
   2. Technical assistance to private agriculture and agribusiness in Azerbaijan and technical assistance to IDPs and refugees through international humanitarian organizations
   3. Food Preservation and Processing

3. ACO (Azerbaijan Child Organization)
   Program:
   1. Providing assistance to the most vulnerable groups of children
   2. Developing a strategy for national policy for child development
   3. Cultural and charitable events for refugee and displaced children and orphans
4. **ADRA** (Adventist Developments and Relief Agency)
   **Program:**
   1. Vocational training (UNHCR)
   2. Primary health care (USAID/USDA)
   3. Agricultural training and inputs (USDA)
   4. Agricultural micro-enterprise (USAID)
   5. National Reproductive Survey (USAID/UNFPA/UNHCR/CDC)

5. **ANAMA** (Azerbaijan National Agency for Mine Action)
   **Program:**
   Implementing Agency for Azerbaijan Mine Action Program

6. **ARRA** (Azerbaijan Reconstruction and Rehabilitation Agency)
   **Program:**
   Reconstruction and Rehabilitation of the War-torn areas of Azerbaijan

7. **AWDC** (Azerbaijan “Women and Development” Center)
   **Program:**
   1. Education
   2. Training research
   3. Monitoring on Reproductive Health and Family Planning, Safety motherhood and breast-feeding
   4. Food and non-food distribution
   5. Psychosocial rehabilitation
   6. Income generation for IDPs and local vulnerable groups in the urban and rural districts
   7. Peace culture and peace making activities
8. **Azerbaijan Child Organization**

9. **Azerbaijan Psychologists Association**

10. **Azerbaijan Refugees Society**
    **Program:**
    1. Defense of refugee’s rights
    2. Humanitarian aid

11. **Azerbaijan Women’s Society**
    **Program:**
    1. Women’s rights defense
    2. Humanitarian aid to victims of war families, refugees, IDPs, orphans

12. **AzRC (Azerbaijan Red Crescent Society)**
    **Program:**
    1. Relief Program
    2. Medical Program
    3. Dissemination of International Humanitarian Law
    4. Tracing Program
    5. Population Movement Program
    6. Institutional Development Program
    7. First Aid Program
    8. Income Generation
    9. International Relations and Information
13. Baku Association of Azerbaijan Women
   Program:
   1. Women’s rights defense
   2. Women and family
   3. Children health
   4. Social-economic defense of impoverished and many children families

14. BIF (Benevolence International Foundation)
   Program:
   1. Food and Non-food Distribution
   2. Computer training center
   3. Relief program

15. BUTA—Children’s Humanitarian Foundation
   Program: Non-food relief aid

16. Cabinet of Ministers (Cabinet of Ministers - Department for Problems of Refugees and IDPs, migration and work with international humanitarian organizations.)
   Program:
   1. Coordinating activities of humanitarian organizations
   2. Repatriation
   3. Shelter construction and repair

17. CARE (CARE International)
   Program:
   1. Community Development
   2. Agricultural Income Generation
18. **CP** (Caspian Project)

**Program:**
1. Education
2. Health
3. Health care services
4. Health education

19. **CHF** (full name not available)

**Program:**
5. Community Employment and Economic Opportunities Program (CEEOP)
6. Business Association Development
7. Training and Technical Consultation for Small to Medium-sized Entrepreneurs (IDPs/ refugees and traditional villagers)
8. Referral of Clients to Credit Institutions
9. Dissemination of Market Information to Businessmen and Women
10. NGO Capacity Building
11. Social Investment Initiative (SII): Grant management mechanisms and training interventions for established community groups that rehabilitate local infrastructure and social services, and expand local economic opportunities

20. **Counterpart** (Counterpart International)

**Program:**
1. Health Program
2. Clothing Program
21. **DIAKONIE** *(Diakonie Emergency Aid)*

**Program:**
Agriculture extension projects for IDP’s and refugees

22. **DRC** *(Danish Refugee Council)*

**Program:**
1. Capacity building
2. Income generation
3. Skills development/vocational training

23. **ECHO** *(European Community Humanitarian Office)*

**Program:**
Coordination of ECHO funded humanitarian aid to Azerbaijan

24. **EU EXAP & REHAB** *(European Union Exceptional Assistance and Rehabilitation Programmes)*

**Program:**
1. Exceptional Financial Assistance Programme
2. Rehabilitation Programme

25. **Eurasia Foundation**

**Program:**
1. Capacity building
2. Micro-enterprise development
3. Community development
4. Agriculture
26. **GTZ** (Gezellschaft fur Technische Zusammenarbeit)

**Program:** Agriculture

27. **HAYAT**

**Program:**
1. NGO Migration Sector Development Project funded by IOM
2. Sheep distribution funded by UNHCR Community Development (UNHCR)
3. Community Development Program and Establishment of Rural Business Centers Project (World Bank/IFAD)
4. Training to refugees and IDPs on Legal awareness (ISAR)
5. Training to refugees and IDPs on conflict Prevention (Know - How Fund)

28. **ICRC** (International Committee of the Red Cross)

**Program:**
1. Protection and assistance to prisoners in connection with the Karabakh conflict, and to people deprived of their freedom
2. Tracing of the missing persons due to the conflict;
3. Tuberculosis program for prisoners, in co-operation with the Ministry of Justice;
4. Orthopedic center for lower limbs amputees, in co-operation with the Ministry of Labor and Social Protection of Population;
5. Dissemination, promotion and programs on international humanitarian law to the armed forces, schools, universities, local authorities
29. IFRC (International Federation of Red Cross and Red Crescent Societies)

Program:
1. Health Promotion and Health Education Programme
2. Community Development Programme
3. Organizational Development Programme
4. Fizuli Repatriation and Rehabilitation Programme
5. Disaster Preparedness Programme
6. Promotion of Humanitarian Values

30. IIRO (International Islamic Relief Organization)

Program:
1. Distribution of food and provision of medical care in three IIRO camps
2. Medical and sanitation programs in 6 clinics attached to these camps,
3. Drugs supply policlinic in Agdash and some in Baku
4. Countrywide work with orphans
5. Non-food items distribution
6. Vegetable farming

31. IMC (International Medical Corps)

Program:
1. Community Based Primary Health Care Development Program (CBPHCDP) under AHAP 2
2. Community Mobilization campaigns through health related IEC activities
3. The creation of Community Health Management Committees (CHMC), and rural social workers
4. Training and re-orientation of local doctors and nurses in General Practice Medicine, Preventive care and PHC
5. Rehabilitation of PHC facilities
6. Provision of medical supplies and pharmaceuticals
7. Community Based Health Financing Mechanisms

32. INSAN—Social and Charitable Center

Program:
1. Education
2. Food aid
3. Health
4. Non-food relief aid

33. Intibah Foundation—Revival and Development of Democracy

Program: Political Questions

34. IOM (International Organization for Migration)

Program:
1. Capacity building support for the government and for local NGOs in the migration sector
2. Research and data collection
3. Humanitarian travel assistance program
4. Microcredit project
5. Community Building

35. IRC (International Rescue Committee)

Program:
2. Community Health: Promote improved primary and reproductive health care services; enhance community involvement and awareness of
family and reproductive health issues; improve quality and utilization of health services.

3. Credit: Promote economic self-sufficiency through provision of micro-credit and training in business, agriculture and vocational skills.

4. Agriculture: Promote the development of the agricultural sector through sustainable farming systems, market/association development, agro-processing and young agriculturalists mentoring.

5. IDP Resettlement: Promote the integration of IDPs, refugees and vulnerable local populations through mobilization of IDP and neighboring communities; capacity building; provision of services; support of sustainable health and educational development and income generation opportunities

36. IRD (International Relief and Development)

Program:

1. Providing humanitarian assistance by distributing medicines and medical supplies
2. Rational drug use training
3. Community health education

37. ISAR (Initiative for Social Action and Renewal in Eurasia)

Program:

1. Capacity building
2. Education
3. Local NGO development
4. Community development
38. JWOA (Jewish Women’s Organization of Azerbaijan)

Program:
1. Socio-economic conditions
2. Poverty

39. LCC (Leonard Cheshire Department University College London)

Program:
1. Health
2. Health care services
3. Health education

40. LINKS – The London Information Network on Conflicts and State-Building (Caucasus Links)

Program:
1. Project on National Minorities, refugees and Internally Displaced Persons in the Caucasus
2. Conflict Resolution
3. Democratic State-Building & Civil Society
4. NGO Capacity Building

41. MIR (Medical International Relief)

Program:
1. Medical assistance to IDPs, Refugees and other vulnerable groups of population
2. Surgical interventions (and further treatment) with International specialists from US and Europe
3. Medicine supply
4. Vaccination
42. MCI (Mercy Corps International)

Program: AHAP/USAID

1. Mercy Corps exists to alleviate suffering, poverty, and oppression by helping people build secure, productive, and just communities
2. Azerbaijan Humanitarian Assistance Program: To provide Community Development, Primary Health Care, Micro finance & Business Development Services, and Social Investment Initiatives to IDPs and conflict affected people within Azerbaijan (USAID funded)
3. Child Survival Program: To reduce infant, child and maternal mortality and morbidity through community-based preventive actions coupled with improvement in the quality and utilization of primary health care in the targeted area (USAID funded)

43. MDM-Greece (no data available)

44. Medecins Sans Frontieres—Belgium (Doctors Without Frontiers) (MSF/Belgium)

45. Medecins Sans Frontieres—France (Doctors Without Frontiers) (MSF/France)

46. Medecins Sans Frontieres—Holland (Doctors Without Frontiers) (MSF/Holland)

47. Medecins Sans Frontieres—Switzerland (Doctors Without Frontiers) (MSF/CH)

Program:

1. Health
2. Health care services
3. Health education
4. Repatriation
48. **NRC** (Norwegian Refugee Council)

**Program:**
1. Integrated Local Settlement of IDPs in Azerbaijan
2. Public Building Rehabilitation
3. Income Generation
4. Human Rights Education (in primary and secondary schools)
5. Rehabilitation of Shelter and Community Infrastructure

49. **Operation Mercy** (International NGO)

**Program:**
1. Provision of Dental Services for Refugees and IDPs
2. Education in the message that “Dental Disease is Preventable”
3. Training of Dental Personnel

50. **OXFAM** (Oxford Committee for Famine and Relief)

**Program:**
1. Linking and Capacity Building
2. Community Development
3. Primary Health Care
4. Disability Awareness
5. Supporting Civil Society Organizations
6. People’s access to microcredit

51. **RI** (Relief International)

**Program:**
Limestone shelters for IDPs and sustainable community development (with UNHCR)
52. SC (Save the Children)

**Program:**

1. Central Area Community Development Program. This program strengthens the capacity of communities in mobilizing their human and natural resources and in linking up with NGO’s, private sectors & local authorities for improvement of social and economic conditions.

2. The Central Area Economic Opportunities Development Program consists of Facts for Economic Life, an introductory business training program targeting very small micro-enterprises and Community Based Lending and Savings, a microfinance program targeting IDP’s and conflict affected micro-entrepreneurs.

3. Integrated Community Development Program (ICDP)

53. SFDI (Social Fund for Development of Internally Displaced Persons)

**Program:**

1. Community Micro-projects
2. Income Generation
3. Microfinance

54. TACIS (Technical Assistance to the Commonwealth of Independent States), the European Union’s program

**Program:**

1. Environment
2. Community development

55. UMCOR (United Methodist Committee on Relief)

**Program:**

1. Primary Health Care
2. ECHO Camps Medical Support (7 camps)
3. Health Education/Training of trainers
4. Emergency Medical Assistance
5. Community/Leadership Development
6. Agriculture Inputs
7. NGO Development
8. Children`s activities
9. Reproductive Health;
10. Education Services
11. Legal Assistance
12. Economic Opportunities
13. Community Infrastructure Rehabilitation

56. UMID HSSC (UMID-Humanitarian and Social Support Centre)
   Program:
   1. Income Generation
   2. Education Program
   3. Vocational Training
   4. Community Development

57. UNDP (United Nations Development Program)
   Program:
   1. Poverty eradication
   2. Governance
   3. Gender
   4. Environment
   5. Consequences of conflict

58. UNDP/UNDESA (no data available)
59. **UNHCR** (United Nations High Commissioner for Refugees)

**Program:**
1. IDP Shelter Construction and Distribution of Shelter materials and household items
2. Financial support to NGOs for providing medical services, medicine and medical supplies
3. Support income generating, community services, crop production
4. Legal Protection Activities

60. **UNICEF** (UN Children’s Emergency Fund)

**Program:**
1. Monitoring the impact of economic transition on the Social Dimension
2. Maternal and Child Health
3. Community financing of primary education
4. Special Education for children in institutions
5. Primary Health Care Reform
6. Psycho-social rehabilitation for R/D children
7. Children Rights advocacy

61. **USAID** (U.S. Agency for International Development, Azerbaijan)

**Program:**
Coordination of USAID funded assistance program to Azerbaijan

62. **WB** (World Bank)

**Program:**
1. Long-term investment projects
2. Petroleum tech assistance;
3. Baku water supply;
4. Institutional building;
5. Rehabilitation credit;
6. Gas rehabilitation;
7. Farm privatization;
8. Reconstruction of occupied territories;
9. Procurement grant;
10. Irrigation and drainage;
11. Structural adjustment credit
12. Education
13. Cultural Heritage
14. Assistance to IDPs

63. WFP (World Food Programme)

Program:
1. Delivery of food commodities and distribution amongst displaced persons and other vulnerable groups
2. Implementing food distribution in the southern regions

64. WHIA (World Hope International, Azerbaijan)

Program:
1. Computer training
2. Non-food items distribution
3. Health education
4. Community development
5. Rehabilitation

65. WHO (World Health Organization)

Program: Health sector - medium term program with Ministry of Health
66. WVI (World Vision International)

Program:

1. Food assistance with WFP
2. Income generation/microcredit
3. Agricultural credit
4. Food security and nutritional monitoring
5. Non-food relief items distribution
6. Educational support programme
7. Community Development.