

Think Tank for for Aid Workers

AFTER Michael J. VanRooyen finished his residency in emergency medicine in 1991, he went to Somalia. Eager to see how his medical training would translate into the context of a poor nation torn by civil war, VanRooyen concluded very quickly that it didn't. His training had focused on maladies a doctor would expect to encounter in the developed world; instead he was dealing with malnourishment and malaria. During the next decade, he traveled to some of the world's most dangerous and disaster-riven places: Sudan, Bosnia,

Afghanistan, Albania, Angola, Kosovo, Somalia, and Darfur, among other places—and also saw opportunities for greater efficiency. Too often in humanitarian work, Leaning says, “the din of work drives out creative thinking and strategic planning.”

In 2005, Leaning and VanRooyen founded the Harvard Humanitarian Initiative (HHI) as a place where such thinking and planning could occur. An interdisciplinary center with affiliated faculty from Harvard's schools of law, government, and business, as well as medicine and public health, HHI brought leaders from major humanitarian organizations to Cambridge in September for

domized mortality survey, conducted by the International Rescue Committee (IRC) in 2000, found that the war and its byproducts—crippled infrastructure, food shortages, and the like—had caused 2.8 million deaths. The findings dwarfed previous estimates, which had been in the low six figures, and prompted a drastic increase in aid to the conflict area. (The war continues, and the last IRC survey, in 2006, put the death toll at 3.9 million.)

Although a scientific, statistical approach has proven instructive in other contexts, as well (see “Counting the War Dead,” opposite), by and large, says VanRooyen, “we operate anecdotally.”

Obtaining copious data also carries a hazard: workers in the field can spend all their time gathering information, rather than helping people. Leaning warns that monitoring organizations need to be ruthless in identifying the minimum data needed to evaluate a program; asking about the incidence of water-borne diseases would be essential in Bangladesh, for example, but a waste of time in Ethiopia, where drought is a more likely cause of malnutrition and death. “There are somewhere on the order of five to 10—maybe, if you really push it, 15—global health indicators that need to be gathered all the time,” Leaning says. “Now we need to figure out what they are.” (Working groups at both HHI annual conferences have considered how to define this list and coordinate data collection.)

Meanwhile, HHI is taking a leading role in one of the proposals from last year's conference: creating a consortium of humanitarian organizations that share information to avoid duplicating each other's efforts or repeating each other's mistakes. (As the final conference paper put it: “Instead of having 20 years of experience, we have one year of experience 20 times.”) Proposals included a Web-based forum and a 24-hour telephone hotline offering technical support.

On another front crucial for the field's future, human-resource development, HHI has already seen results. HMS has begun to offer a certificate in humanitarian studies as an option for medical residents. HHI itself offers training programs

Rwanda, Croatia, North Korea, Haiti. Those experiences convinced him that the field of humanitarian aid is “150 years behind medicine” in terms of evaluating need and using evidence-based practices to respond.

VanRooyen is now assistant professor of medicine at Harvard Medical School (HMS) and an associate professor in the department of population and international health at the Harvard School of Public Health (HSPH). He arrived from Johns Hopkins in 2004 to work with Jennifer Leaning, associate professor of medicine at HMS and professor of the practice of international health at HSPH. She, too, has copious field experience—in

the second annual Humanitarian Health Conference. In all, 123 representatives from 68 organizations—including UNICEF, the office of the UN High Commissioner for Refugees, the International Committee of the Red Cross, Oxfam America, the U.S. Agency for International Development, the World Bank, Catholic Relief Services, and Mercy Corps—attended.

Much of this year's conference focused on the need for better, more rigorously gathered data from crisis zones. As an example of the impact such data might have, VanRooyen points to results in the Democratic Republic of Congo, which has been embroiled in civil war since 1996. A ran-



In wars or natural disasters, it is hard to get agreement on even the most basic data—for example, military and civilian deaths. Shown here, the aftermath of a suicide bombing in Iraq in early 2004, where “about 50” people were killed.

for active-duty humanitarian-aid workers and human-rights investigators, and hopes to draw on the Business School's expertise in executive education to create programs that train field workers to become managers in their organizations.

What's needed to develop the next generation of humanitarian workers, professionals agree, is an established course of study with a standardized, clearly defined set of requirements. HHI already provides support for one program along

these lines: the Humanitarian Studies Initiative, a joint graduate program of HSPH, MIT, and Tufts University's Friedman School of Nutrition Science and Fletcher School of Law and Diplomacy. With humanitarian-aid tracks at all medical schools—and even, perhaps, at the undergraduate level—humanitarian workers of the future would not have to feel as unprepared as VanRooyen did upon landing in Somalia.

The need for coordination and strategic

planning is so great because the field has changed so rapidly in the last 15 years, VanRooyen says. Aid had been used as a political tool and limited by political concerns, but with the Cold War over and the world no longer divided into spheres of influence, the field of humanitarian aid blew wide open. Almost overnight, organizations gained unprecedented access to formerly inaccessible regions. There was little coordination among them, and almost no control over how they operated. The prevailing

Counting the War Dead

How lethal are modern methods of warfare? Political scientists affiliated with the International Peace Research Institute (PRIO)—the Oslo-based organization that produces the most commonly cited estimates of war deaths worldwide, in collaboration with Uppsala University in Sweden—wrote in a 2006 journal article that the second half of the twentieth century was marked by “a historically unprecedented network of peaceful ties among the most powerful states” and “a remarkable decline in the numbers of combat deaths worldwide.” The idea that war doesn't kill all that many people anymore has gained some currency, but at the Humanitarian Health Conference held in Cambridge in September, Ziad Obermeyer '01, now in his final year at Harvard Medical School, presented data that challenge the PRIO scientists' conclusions and suggest their estimates undercount war deaths by about 75 percent.

Obermeyer and his colleagues used data from the 2002 World Health Survey (based on representative samples of the populations of 75 countries), which asked respondents whether any of their siblings had died as the result of war, and if yes, in what year.

Starting with that data, the researchers performed three crucial corrections: in “sampling bias”—related to original family size (as deaths in a given family increased, its probable inclusion in the sample decreased, tending to make the number of overall deaths appear lower); in “recall bias”—the notion that elderly respondents may not remember the total number of their siblings, particularly if some siblings died very young; and in “censoring”—the natural limiting effect of the age range of the respondents and their siblings. (One might expect the survey data to represent quite accurately the deaths of people who were young in 1955—the first year for which the United Nations publishes total mortality estimates by country—because most of their siblings were still alive in 2002. Those who were elderly in 1955, however, were less likely to have surviving siblings who could report on their deaths. Similarly, because the survey did not include children, respondents were unlikely to have very young siblings, and thus the results could be expected to underreport war deaths of the very young, at least for the most recent years.)

Obermeyer suggests that the PRIO estimates, which rely on eyewitness and media reports, also entail serious undercounting because of the difficulties inherent in assembling reliable calculations in a war zone. He notes that his group's estimates were closer to the PRIO numbers for countries with larger conflicts in their histories—Vietnam, for instance—than for countries where the overall death toll was lower, such as Bosnia-Herzegovina.

An innate limitation of using the World Health Survey data, he acknowledges, is that it yields results mainly for places that have settled down. Most nations facing volatile situations today—the Democratic Republic of Congo, for instance, or Iraq—did not respond to the survey for understandable reasons. After removing those countries that polled selectively rather than nationwide, or skipped the questions about sibling mortality, or had no war deaths to report, the researchers were left with only 13 countries suitable for their analysis.

Nevertheless, if these new methods debunk current notions that conflicts are less bloody in modern times, the effects could reverberate in contexts from public-health planning to providing moral and political justification for warfare. If governments and humanitarian groups begin to assume, as a matter of course, that media estimates of casualties are low, they may respond by amplifying the amount of aid they provide. Furthermore, even long after the fact, mortality estimates can be used in the prosecution of war crimes. And, adds Obermeyer, an accurate reckoning is “important for the historical and cultural record of a country's history.”

He and his coauthors—Christopher J.L. Murray '83, M.D. '91, and Emmanuela Gakidou '95, Ph.D. '01, both of the Institute for Health Metrics and Evaluation at the University of Washington, where Obermeyer is currently on a one-year research fellowship—are preparing to submit their findings, which are bound to be controversial, for publication. “Whether the data are irrefutable is not necessarily the point,” says Michael VanRooyen, co-director of the Harvard Humanitarian Initiative, which hosted the conference. The new research “looks at the way we've measured mortality in a different light, which is entirely what the field needs.” Without such questioning and dissent, VanRooyen notes, “myths and figures from one bad study get perpetuated into being fact.”

logic was that delivering some aid—even if it failed to meet needs fully, or the people delivering it lacked experience and training—was better than doing nothing. But, says VanRooyen, “Sometimes it’s actually worse than nothing.” He gives the example of how a cholera epidemic swept refugee camps in Zaire in 1994, killing 30,000 people who had fled genocide in Rwanda only to die in the place that was supposed to keep them safe.

One outgrowth of such unintended consequences is the Sphere Project, a set

of minimum standards for humanitarian-aid operations first issued in 1997 and most recently revised in 2004. But because compliance is optional, minimum standards have become another area of interest for HHI.

Though some may voice frustration at the slow pace of change, Leaning draws a parallel to the field of public health. “It’s taken decades,” she says, for the Centers for Disease Control “to come up with its routine measures of what it’s watching over the years. It’s a really hard problem.”

to a school like this. There’s really no point in coming if you have nothing to say. If you’re just purely a facilitator, then I think it’s really not interesting.”

The Iranian-born Mostafavi received his professional training at the prestigious Architectural Association School of Architecture in London, to which he returned as head from 1995 until 2004. He operates a private practice with his wife, Homa Fardjadi, who is a professor of the practice of architecture at the University of Pennsylvania. This will be his second stint at Harvard; he directed a master’s program in architecture at the GSD from 1992 to 1995. Now he will be the school’s seventh dean since its founding in 1936.

He succeeds Alan Altshuler, whom former University president Lawrence H. Summers appointed in February 2005. Altshuler, who holds a joint appointment in urban policy and planning through the GSD and the Kennedy School of Government, had been one of three members of the Allston Client Group, which acted on the president’s behalf as the day-to-day point of contact for Allston’s planners. For his part, when asked about the school’s role in planning Allston in general, Mostafavi said he is “more than willing to provide any advice that’s requested”—either personally or through the expertise of others at the GSD.

Under Peter G. Rowe, who preceded Altshuler and spent 12 years as dean, the student body grew by 15 percent and the size of the faculty increased by 40 percent. Mostafavi does not envision additional growth, but says the GSD needs more space to accommodate the increased use of prototyping—both actual-size and more conventional scale models—and other new technologies. “I think the appropriate thing would be to be open...and not really leave out any possible option,” Mostafavi says. “[But] my gut reaction...is that it might be more advisable for us to really think more closely about what facilities we have, and what other spaces might be available nearby,” rather than joining the march to Allston.

IF MOSTAFAVI BELIEVES the GSD’s atmosphere is as important as substantive matters of teaching and research, the same can be said of his approach to architect-



Mohsen Mostafavi

favi—the current dean of the College of Architecture, Art, and Planning at Cornell University—asked GSD faculty members and students to greet him with “a certain level of suspension of judgment.”

He seeks to create an environment in which there are no sacred cows, in which people, including himself, feel comfortable questioning long-standing assumptions and making suggestions without committing to their adoption—discussing for the sake of discussion. At least publicly, he has thus far refrained from floating specific ideas,

but he has hinted that will change when he arrives in January. “It’s really important, I think, to have a position, if only to put forward that position, if only to incorporate disagreement with others, and be influenced and affected by the argumentation of others,” he said during an interview the day of his visit. “I do have a certain set of opinions and beliefs, and I think that’s an important part of coming

A New Dean Designs without Borders

EXPECT BOLD IDEAS from Mohsen Mostafavi when he begins his term as dean of the Graduate School of Design (GSD). On a late September visit to Harvard, Mostafavi