



The New World Disorder: Rethinking Aid in an Era of Scarcity

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Surging needs and dwindling resources are fueling a fundamental shift in the new world disorder

Conflicts are multiplying. Climate shocks are intensifying. Needs are rising fast and extreme poverty is increasingly concentrated in fragile and conflict-affected settings—just as global support is contracting. But this is not simply a gap between needs and resources, rather it is symptomatic of a broken system.

Our annual [Watchlist 2026](#) report argued that surging crises and shrinking support coinciding is not simply a generalized disorder. It is the direct consequence of geopolitical shifts that are redefining how states relate to one another — what we call the New World Disorder. A world of intensifying geopolitical competition, in which short-term transactional partnerships displace long-term alliances, and unpredictability has become the defining feature of international relations. What emerges is an historic retrenchment of foreign assistance and growing restrictions on the delivery of humanitarian aid, creating the central, alarming divergence that defines the New World Disorder's human cost.

The OECD estimates that ODA in 2025 from Development Assistance Committee donors may have decreased by as much as \$50 billion – representing a projected decline of 23% in humanitarian and development aid levels from 2024, and one that has life-and-death consequences for the most vulnerable. Today, 239 million people are in humanitarian need and 831 million people live in extreme poverty. The gap between needs and available resources has never been wider. Yet only 25% of the remaining aid budget is directed to fragile and conflict-affected states — countries that are home to 89% of people in humanitarian need and 50% of those living in extreme poverty.

For millions of people stuck in crises and conflicts across the world, humanitarian assistance, provided based on need, is a lifeline. Civil society organizations (CSOs) including national and international humanitarian actors have a proven track record of delivering in the most difficult contexts. In contrast, a government-centric approach to providing aid risks neglecting crisis-affected communities in contexts where governments are unable or unwilling to provide services, resulting in lost access to lifesaving assistance and support for essential services and resilient livelihoods.

Compounding crises

The wars in Iran and Lebanon are rapidly accelerating needs in an already over-stretched humanitarian system. The conflicts are characterized by dynamics that IRC teams see in Sudan, Gaza and Myanmar: conflicts endure and repeat, forced displacement is sustained and exceptionally high, and civilian casualties are significant with long-term effects impacting neighbouring states. The reverberations of the Middle East conflict will have long-lasting impacts, including rising food, fertilizer, and energy prices, and increasing costs of production and transport

In this already challenging space, the evidence indicates that cuts to aid not only reduce access to food, healthcare, and protection, and sever livelihoods and governance support that is critical to maintaining stability, thereby increasing the risk of conflict, particularly in fragile settings. Unaddressed, the current dynamic is not just failing crisis-affected communities, it is accelerating risks.

The level of disruption, disorder and need serve as a galvanizing call to action for participants of the Spring Meetings of the World Bank and International Monetary Fund (IMF). The Spring Meetings represent vital fora to develop an adequate response that can save lives and address suffering by focusing on areas where needs are greatest, engaging the community for short- and long-term interventions, prioritizing access, deploying innovative tools, and using cost-effectiveness measures to drive donor investment.

“The future of international aid should be driven by the imperative to save lives, alleviate suffering and preserve dignity. That means a focus on the conflict-affected populations that constitute the majority of the extreme poor, and a focus too on proven, cost-effective programs. A fraction of the sums being committed to conflict, when invested in high quality programs, would help mitigate the trends towards a cycle of disorder. Aid agencies, we need to make the money go further. The donors need to put clients front and center. The new frontiers of the technological revolution must be harnessed in service of those who need it most, not just those who pay the highest price. We need innovation not only in what we deliver, but in how we deliver it.”

-David Miliband, President & CEO, IRC

Crisis-affected communities suffer while cost-effective, CSO-led solutions are ignored

In a world of complex emergencies and hard-to-reach populations, government-first approaches drive a deadly divergence. Delivery models conflate country ownership with government delivery, while the reach and results offered by CSOs are overlooked. As a result, the impact that could be achieved via cost-effective, evidence-based and scalable interventions, that can sustain and strengthen essential services and improve local capacity and resilience to shocks are untapped.

CSO-led programs work. Immunization campaigns protect lifelong health. Treatment for acute malnutrition prevents irreversible physical and cognitive damage. Primary healthcare, cash assistance, and basic education preserve human capital and stabilize communities. CSOs are embedded in communities and play a critical role in addressing malnutrition in fragile and humanitarian contexts. CSOs strengthen local ecosystems by training local health workers; engage at the national level, with government and donor agencies, and lead international research and advocacy efforts. For example, in addition to directly serving communities, IRC has contributed significantly to the international research demonstrating that the optimized treatment protocol – one system and one product for treating both moderate and severe acute malnutrition – drives cost effectiveness and is at least as effective as traditional approaches.

For example, standard immunization programming is not designed for fragile contexts, where donors often assume immunization is too costly, too complex, or only feasible through disease-specific campaigns. The IRC-led REACH consortium – funded by Gavi and powered by a robust network of local partners – has proven these assumptions false. Since 2022, REACH has administered over 28 million vaccine doses and put nearly 2 million children on the path to full immunization, including 750,000 zero dose children. The program delivers over 1 million doses monthly, and as it scaled, the average cost per dose fell to less than \$1 in 2025. This shows that immunizations are both feasible and cost-effective, even in the most fragile environments – thanks to CSO-led delivery.

IRC's collaborations in education and health system strengthening in Iraq and Nigeria demonstrate the long-term benefits when operational agencies with the right skills, access and relationships provide sustained essential service support alongside local authorities and governments. Further, these partnerships mean governments can tap CSO research and innovation expertise, then take those learnings to scale.

Despite the strong evidence of impact, frequently the humanitarian characterization of these interventions and contexts limits the activities to qualify for short-term funding only. Assistance would go further and offer improved value for the investment, if donors doubled down on interventions in fewer places of higher need, supported with multi-year funding.

Five Steps to Contain the Current Crisis

Responding to this moment requires more than shifting resources. It requires rethinking how aid is funded, delivered and by who. The following steps would meaningfully support efforts to ensure the right assistance reaches those that need it most and yields results.

1. Target aid where needs are greatest

With resources constrained, aid allocation must be responsive to and prioritise need. IRC analysis demonstrates that fragile and conflict-affected states should receive at least 60% of official development assistance (ODA), more than double the share they received in 2023 (29%), with Watchlist countries receiving at least 30%. These are places with a growing concentration of extreme poverty where aid makes a difference and can yield stability returns as well as long term outcomes.

2. Partner with CSOs who can sustain and strengthen essential services for crisis affected communities

In conflict-affected settings, delivering support to essential services via Governments does not guarantee meeting needs or the inclusion of crisis affected communities. In many cases CSOs are the only option for maintaining services and sustaining systems over time. Donors and multilateral institutions should expand partnerships with CSOs capable of operating in hard-to-reach areas, maintaining continuity of services, and strengthening national systems even during crisis.

3. Prioritize increased access as a prerequisite for both aid and development

Humanitarian assistance and efforts to boost community resilience need sustained access to succeed. Strengthening the ability of frontline organizations to negotiate and sustain access into crisis-affected areas is one of the most effective ways to ensure continuity of services that underpin both immediate survival and long-term stability.

4. Invest in the next generation of cost-effective, scalable, innovative aid solutions.

Evidence indicates what works in crisis settings, while advances in AI, low-cost hardware, and scalable software create opportunities to deliver more impact at lower cost. In a world of shrinking aid budgets and rising conflict, implementors should bring effective innovations from outside the sector into aid work, adapting elements for the realities of last-mile crisis contexts. This approach supports agile and swift movement toward solutions for all actors and pairs those solutions with new sources of financing, including the private sector and multilateral institutions, to scale faster.

5. Use cost effectiveness to drive how donors spend

Donors can ensure the highest impact per dollar spent by weighing cost evidence when evaluating project proposals and awarding grants. Where evidence on cost-effectiveness does not exist, programs should include funding for research and evidence-generation that can be shared to build a global understanding and accounting of what mechanisms work. Multiyear funding has been shown to improve costs gains, particularly in complex settings that offer chances to learn, refine and scale.

Concluding Thoughts

The New World Disorder represents a new operating environment, not a temporary dynamic. Human lives will be lost and previous program successes reversed until the system and actors adjust.

Continuing to overlook the role that humanitarian actors can play in support of basic service delivery during conflict is both inefficient and fundamentally at odds with how progress occurs in the world's most fragile settings. Bridging the humanitarian and development divide by prioritizing local civil-society organizations that deliver critical programs in fragile contexts can reverse the current dynamic that ensures that essential services remain nascent, gains repeatedly lost, and crises deepen over time. This moment—and the millions of human lives dependent on effective, focused, and sustained assistance requires that transformation today.