

Aid Security Monthly Incident Statistics

Humanitarian responses to insecurity with impact on the delivery of aid - Part Two

April 2016

12 Month Trend Reporting

April 2015 to March 2016

12-month trends based on open source reported measures to protect humanitarian programmes, staff and assets.

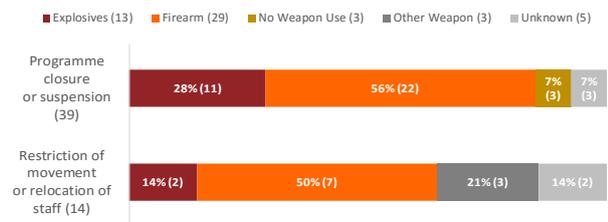
When security deteriorates overall, when fellow humanitarian organisations experience a security incident or when an agency was directly affected, humanitarian organisations may introduce staff protection measures or they may decide to suspend or closure programmes. Such measures affect the delivery of aid. This document is part of a two month's series that shows open source information on **programme suspension and closures** as well as **staff protection measures (March 2016 - Part One)**.

Weapons involved that triggered both programme closure or suspension and staff protection measures, as reported in open sources (53 events)

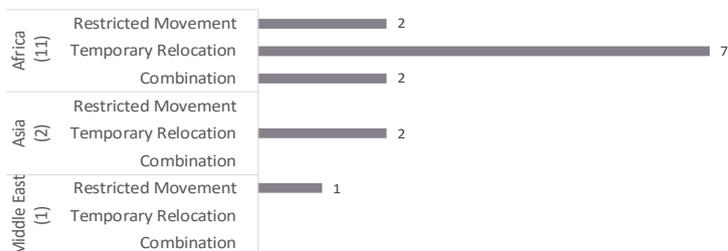
Firearms were the most frequently reported weapon involved in events that triggered programme suspension or closure and staff protection measures (29 events). Programmes in South Sudan and staff in CAR were most affected by firearm use (7 and 3 respectively). On one occasion, Trócaire reported suspended activities in Upper Nile State due to fighting between government and rebel forces (South Sudan).

The use of explosives, by State and Non-State Actors, triggered more reported programme closures or suspension than staff protection measures. Programmes in Syria (3), Afghanistan, South Sudan and Yemen (2 each) were most affected by security measures. An MSF-supported hospital in Sa'ada Governorate sustained damages from a nearby double-tap air strike. Health staff and patients were subsequently evacuated (Yemen).

The Red Cross withdrew workers after **arson attacks** on Ebola facilities (Boké Region, Guinea). Two out of three no weapon use events were reported from Greece.



Measures reported in open sources related to staff protection measures, by region and category of measure taken (14 events)



In Africa and Asia, temporary staff relocation was the most frequently openly reported security measure (9/14).

In Africa, 43% of temporary staff relocation were reported from CAR (3/7). On one occasion, two ICRC team members were injured during an evacuation. In Asia, the Japanese aid agency JICA temporarily withdrew its 35-40 volunteers working in rural areas after one of its staff was killed.

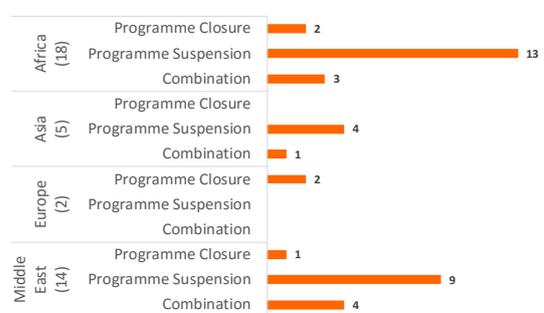
In the Middle East, Maram Foundation openly reported introducing travel restriction for truck drivers in Latkia due to Russian air strikes (Syria).

Measures reported in open sources related to programme closure or suspension, by region and category of measure taken (39 events).

In Africa, Asia and the Middle East programme suspension by humanitarian agencies was more frequently reported than programme closure (26/37).

In Africa, over half of all programme suspensions were reported from South Sudan (7/13). On one occasion, WFP suspended its food aid deliveries following the disappearance of its convoy staff (Upper Nile State). In Asia, three out of the four reported programme suspensions were in response to the killing or kidnapping of staff in Afghanistan. In the Middle East, programme suspension accounted for 72% of the reported agency security measures (10/14). In Syria and Yemen, suspension of activities was openly reported on eight occasions (four each).

From Europe, programme closures were reported from Greece. MSF and NRC closed programmes in response to the EU-Turkey immigration agreement.



Type of programme affected by openly reported humanitarian security measures, by source type (39 events).

Health programmes were the most specified programme type reportedly affected by security measures (17/39).

Of the 17 events affecting health services, programme suspension was the most reported measure (12/17), however, activities were closed in DRC (2), Greece and Syria (1 each). Seven out of the 12 suspensions were in response to active fighting. Health programmes were most affected in DRC, South Sudan and Yemen (3 events each).

It is unclear whether it is simply more common to openly report suspension or closure of medical programmes than other programme categories or whether health programmes are more prone to closure or suspension.

One contributing factor to the prominence of health programmes in open sources maybe explained by the frequency of MSF (9) and ICRC (2) press releases among all openly reported security measures that affected the delivery of aid. MSF openly reported programme suspension on six occasions in Afghanistan and South Sudan (2 each), Kenya and Yemen (1 each) and programme closure three times (DRC, Greece and Yemen (1 each)). In January, MSF closed health clinics programme in Mweso, (North Kivu Province, DRC) in response to the kidnapping of staff in mid-December following a temporary suspension immediately announced following the kidnapping. In Greece, MSF closed the programme in protest to a political decision. The ICRC suspended health programmes in South Sudan and Yemen (1 each).

It is possible that the visibility in open sources of how security impacts on health programmes is partly the result of the ICRC and MSF's **Health Care in Danger** campaign, which includes informing the public when insecurity affects the delivery of healthcare. If this is true, this would be an interesting example of how campaigns can influence data and ultimately public perception of who or what it most at risk.



This document is part of the Aid in Danger project, by Insecurity Insight.

It summarises main findings from our **Aid Security Monthly News Briefs** which are based on media report monitoring.

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