

Colombia

Confinements

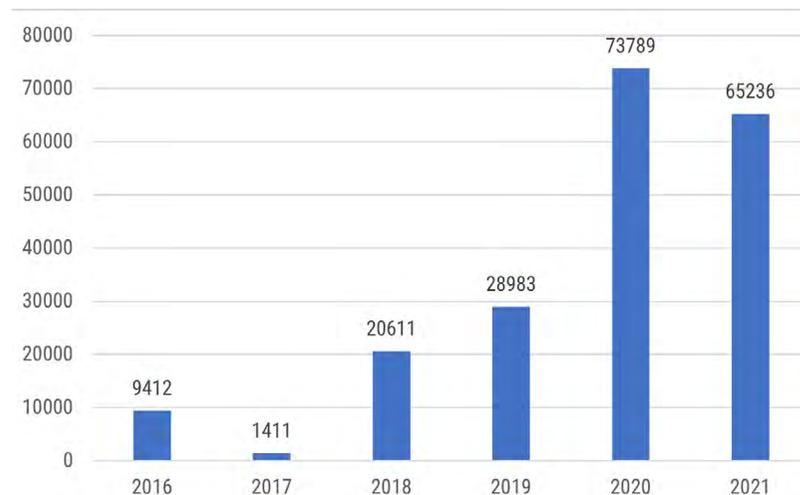
Forced confinements are conflict-related situations of isolation and severely reduced mobility of communities that affect access to livelihoods, basic services, and goods. In Colombia, confinements are recurrent and systematically affect the same municipalities over the years. The most affected departments are Antioquia, Chocó, Nariño, Norte de Santander, and Valle del Cauca. Confinements have considerably increased since 2017 as non-state armed groups seek control of rural areas. Confinement especially affects Afro-descendant and indigenous communities because they live in strategically important areas for armed groups.

In 2022, confinements are likely to continue and increase because of the presence of non-state armed groups in rural areas and current disputes over territorial control. The most affected areas will likely be those along the Pacific Coast and Antioquia. Confinements will likely affect an increasing number of communities in other departments as well, including regions that have not registered confinements in recent years. Indigenous and Afro-Colombian communities will likely remain the most affected population groups.

Key messages

- **Confinement is often a result of fighting** near communities and the presence of anti-personnel mines (APMs). It is often imposed by armed groups or communities are forced to self-impose it out of fear of getting caught in crossfire
- During confinement, communities often have **limited access to food, healthcare, and education**, and their livelihoods and cultural practices are interrupted. Communities' access to protection services is disrupted, and they are often at risk of forced recruitment and gender-based violence (GBV).
- Many cases of confinement are likely not registered because of **significant underreporting**, reducing the visibility of the issue and access to humanitarian assistance for affected people.

Total number of people confined between 2016–2021*



Source: OCHA (accessed 07/01/2022).

*2020 figures include over 30,000 people confined in Norte de Santander due to an 'armed strike'

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Methodology: this report is based on a review of secondary sources, such as UN and NGO reports, constitutional court rulings, OCHA Monitor data, and media articles. Interviews with key informants provided additional information.

About this report: this document analyses forced confinement in Colombia, identifying the types of confinement, trends in various departments, and the most affected populations. It also shows the impact of confinements on communities, including the sociocultural impact.

INTRODUCTION

In Colombia, confinement has been a form of violence in the context of the armed conflict. Confinements are conflict-induced situations of (sometimes voluntary) isolation of communities (CODHES 09/2008), resulting in limited access to basic services and goods such as food, education, healthcare, water, and sanitation. By forcing communities and individuals to remain in a specific area, confinements impede livelihood activities, free movement, the social use of spaces, and cultural practices (OCHA 27/04/2015; Centro Nacional de Memoria Histórica 2013; Ibarra 2016). Confinements are caused by intimidation, violence, and threats (Universidad Externado de Colombia 25/06/2020).

Despite the signing of the Peace Agreement between the Revolutionary Armed Forces of Colombia (FARC-EP) and the Colombian Government in 2016, confinements have considerably increased because of the presence and expansion of non-state armed groups, particularly in areas previously dominated by the FARC-EP. These groups have established themselves in rural areas and use confinement as a form of control. Armed groups include non-signatories of the Peace Agreement, FARC dissident groups, the National Liberation Army (ELN), and Gaitanist Self-Defence Forces of Colombia (AGC) (TNH 25/11/2021; ICG 30/11/2021; OCHA 30/12/2021; Caracol Radio 15/12/2021).

DEFINITIONS OF CONFINEMENT

International law: there is no established definition, concept, or protocol on ‘forced confinement’ in international law, and it is not studied much in humanitarian crises (TNH 25/11/2021; CODHES 09/2008). The lack of conceptual clarity makes it difficult to identify the cases in which confinement may occur. Severe movement restrictions affecting Rohingya and Kaman Muslims in Myanmar, people in Donbas, Ukraine, and Palestinians in some areas of Gaza could potentially be described as forced confinement (HRW 08/10/2020; FUPAD 27/06/2019; FUPAD 27/06/2019; OHCHR 14/10/2015).

Forced confinement directly violates Article No. 12 of the International Covenant on Civil and Political Rights, which states that all legal residents have the right to move freely through a state’s territory (ICCPR 16/12/1966). It violates Articles No. 53, 54, 55, and 56 of the Additional Protocol to the Geneva Conventions, which specify that communities must be guaranteed access to foodstuff, medicine, and humanitarian aid (CICR 08/06/1977 and 10/2007). Lastly, it violates people’s freedom of movement as stipulated in Article No. 13 of the Universal Declaration of Human Rights (UNGA 10/12/1948).

Colombian law: in Colombia, Resolution No. 0171 of 2016 defines confinement as “a situation of violation of fundamental rights, in which communities, despite remaining in a part of their territory, lose mobility as a result of the presence and actions of illegal armed groups. This restriction implies the impossibility of accessing goods indispensable for survival derived from the military, economic, political, cultural, and social control exercised by illegal armed groups in the framework of the internal armed conflict” (Victims’ Unit 29/02/2016).

The Constitutional Court of Colombia prohibits practices that “imply a coercion to the displacement of people, or their confinement in places from which they cannot leave freely” (CCC 22/01/2004). Within Colombian law, displacement and confinement are closely related since conflict and violence can lead to displacement in some cases and confinement in others. Both situations may occur simultaneously, consecutively, or alternately (CODHES 09/2008).

OCHA: forced confinement is understood as the limitation of the mobility of the population and their access to at least three basic services or goods (such as food, education, health, water and sanitation, and livelihoods) for at least one week (OCHA 27/04/2015). Restrictions that last for less than one week are considered a restriction on mobility.

OCHA’s definition of forced confinement is more detailed than the one used by the Colombian Government because it specifies the confinement duration, but it does not limit it as an action only imposed by non-state armed groups. The Colombian law notes that only “illegal armed groups” impose confinements.

For the purposes of this document, ACAPS uses OCHA’s definition.

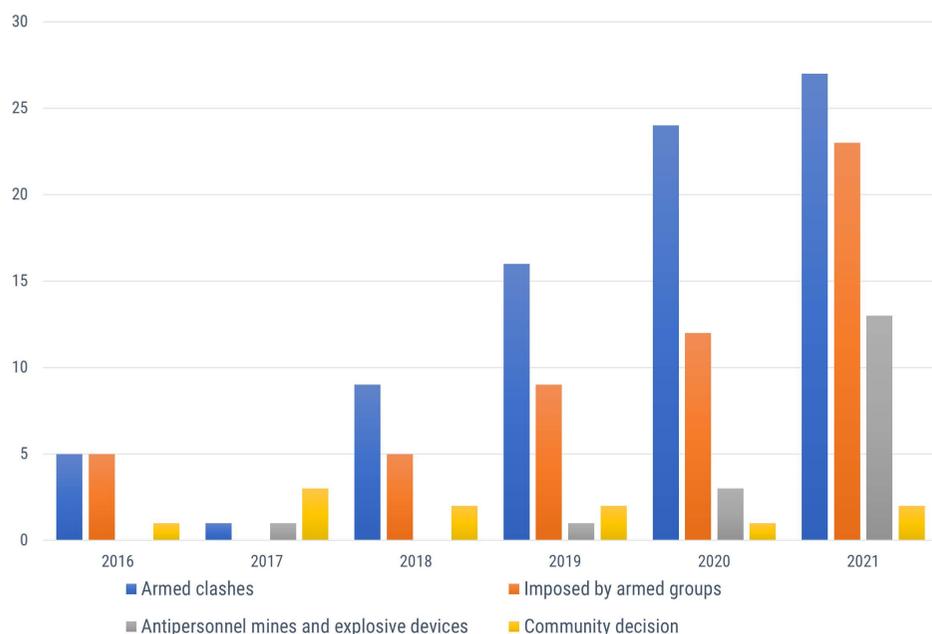
TYPES OF FORCED CONFINEMENT

ACAPS identified these categories from a review of secondary sources, analysis of media, and interviews with key informants. There might be more types than listed, and several types might simultaneously occur in one community. This typology includes confinements directly imposed by external actors or the community itself or indirectly generated by the conflict situation.

- 1. Imposed by armed groups:** confinement is imposed by armed groups to establish control over a geographic area and its population (Ombudsman’s Office 07/2018). They exercise control through intimidation and threats to the population, for instance by pressuring people not to report violence to authorities and institutions such as the Ombudsman’s Office (ICG 30/11/2021). Armed groups impose confinements both in areas where they are the only non-state armed group present and in disputed areas. Armed groups sometimes impose so-called ‘armed strikes’ to demonstrate their territorial power, forcing people to cease their commercial activities and establishing control over roads, rivers, and strategic zones (El Espectador 14/02/2020). ‘Armed strikes’ can lead to confinement since they restrict the mobility of communities and prevent the entry of basic goods (CODHES 09/2008). In 2021, armed groups imposed 36% of confinements (OCHA accessed 24/01/2022; El Espectador 03/02/2021; Caracol Radio 15/12/2021). Armed groups impose confinements through a series of movement restrictions in the form of curfews (for example after 6 p.m.), on movement in or access to certain areas, or on trade (by charging exactions to communities in exchange for the access of traders) (Pacifista 15/07/2021 a and 15/07/2021 b; OCHA 15/04/2021).
- 2. The use of APMs, unexploded ordnance, and improvised explosive devices:** armed groups use explosive devices for territorial control, especially to limit access to illicit crops (TNH 25/11/2021; Banco de Datos 23/09/2021). The presence of mines restricts mobility and can contribute to and cause confinement as it affects access to community roads and cultivation areas often in close proximity to towns and communities (Ombudsman’s Office 07/2018). It disrupts all activities by inducing fear of getting injured or killed by the mines, affecting livelihoods and education (KII 24/01/2022). In 2021, 20% of reported confinements were associated with APM and unexploded ordnance contamination (OCHA accessed 24/01/2022).
- 3. Armed clashes:** clashes between non-state armed groups and with government forces can cause confinements. Being told about or noticing fighting and clashes between armed groups (through the sound of crossfire) forces them to confine (KII 24/01/2022). Clashes between organised armed groups caused 83% of confinements in 2020 (OCHA 26/01/2021) and 41% in 2021 (OCHA accessed 24/01/2022).

4. **Community decision:** communities can decide to enter confinement to protect themselves or a member of the community (ACAPS 22/12/2021; Infobae 20/11/2021). This protection strategy is also called self-confinement (CODHES 09/2008; Béndiksen Gutiérrez 2018). It often occurs after a community member is killed by an armed group, which increases fear among the population and leads them to choose to confine themselves, or it can be caused by the presence of armed groups near communities (OCHA accessed 24/01/2022; KII 24/01/2022; KII 25/01/2022; KII 13/12/2021; KII 02/12/2021). In 2021, 3% of confinements were self-confinements (OCHA accessed 24/01/2022).

Types of forced confinement 2016-2021*



*Some confinement events belong to more than one category.

Source: OCHA (accessed 24/01/2022).

Additional concepts

Mobility restrictions: OCHA classifies an event as a mobility restriction if its duration is less than one week or affects less than three basic goods and services (OCHA 27/04/2015). Mobility restrictions can culminate in confinement.

Protests and demonstrations can be considered restrictions on mobility (for example, when protests lead to road blockades). Following OCHA's definition, if these restrictions last more than a week and affect access to three or more basic services or goods, they could be considered confinement. In May 2021, the so-called 'National Strike' – a national protest wave – lasted more than a month, with incoming and outgoing transport interrupted in cities such as Cali. The protests caused supply shortages and mobility restrictions (ICG 02/07/2021; El Tiempo 12/06/2021; SWI 12/05/2021; France 24 05/05/2022).

Resistance consists of a mechanism of communities that resist forced displacement, even upon receiving intimidation or threats by armed groups. It is considered independent of but can sometimes lead to confinement (CODHES 09/2008). Resistance is especially important for indigenous communities, who prefer to remain in their territories because of a strong connection to their places of origin and often a lack of means to relocate (KII 24/01/2022). Resistance tends to be non-violent and supported by indigenous institutions such as the indigenous guard (Guardia Indígena), which is formed by community members and aims to offer security without the use of violence (El Espectador 06/11/2020). For example, the indigenous communities in Urabá, Antioquia, and Bojayá, Chocó, confined themselves and remained in their territories in 2021 to resist displacement despite the presence of and intimidation by non-state armed groups (Caracol Radio 03/03/2021; El Colombiano 02/03/2021).

INVISIBLE CONFINEMENT

Data collection on confinements

Existing data on confinement is collected by international and national organisations, such as OCHA, the Victims' Unit (a governmental institution), the Ombudsman's Office (an independent state institution), and NGOs such as the Centre for Research and Popular Education. Some of the data on confinements is collected through reports by affected communities, social leaders, local mayors, and humanitarian organisations.

Figures can vary significantly: the Victims' Unit lists less than 90,000 people as victims of confinement between 1985–2021, compared to over 190,000 affected people recorded by OCHA between 2016–2021 alone, which suggests that the share of affected people who are recognised as victims under the Victims' Law is low.

Underreporting

While some data on confinements exists, the significant underreporting of cases and people affected reduces the visibility of the issue and creates a barrier to access to humanitarian assistance. It is likely that the number of people affected by confinement is higher than reported figures.

Main reasons for the underreporting of confinements

Threats: to prevent confined people from reporting a case to local authorities or humanitarian organisations, armed groups threaten and intimidate communities (OCHA 14/02/2022).

Lack of communication: significant barriers, including scarce or precarious communication signals and access to the internet in remote territories, prevent some communities from reporting their confinement to local authorities. Armed groups also sometimes restrict the use of cell phones (KII 24/01/2022; OCHA 14/02/2022).

Normalisation: many communities frequently affected by confinements tend to not report these events because movement restrictions and curfews have become the norm. Other times, confined people do not consider that they live in conditions of confinement because of their unfamiliarity with the term (KII 24/01/2022; KII 25/01/2022).

Unregistered cases: in places affected by conflict, some people may be displaced while armed groups confine the remaining families, with these confinements not being registered (OCHA 01/09/2021). Government institutions also do not always have up-to-date data. Reasons include barriers to collecting information, the lack of conceptual clarity about confinements, and the little follow-up and importance given to the issue (KII 25/01/2022).

Differences in definitions: differences in the definitions used by organisations regarding confinements can affect reported numbers. For example, unlike OCHA's, the definition set by Colombian law does not consider temporality and restrictions to the access of basic goods and services and explicitly connects restrictions to non-state armed groups.

Other uses of 'confinement': the term has been recurrently used during the COVID-19 pandemic, overshadowing confinements that result from armed conflict and making information more difficult to access.

IMPACT OF CONFINEMENT

Food security and livelihoods

Confinements often occur in the context of pre-existing food insecurity. At the national level, 26% of people in need of food and nutrition assistance belong to the departments most affected by confinement (Antioquia, Chocó, Nariño, and Valle del Cauca) (IMMAP 28/12/2021 accessed 24/01/2021).

Armed groups restricting community access (such as to crops and food through checkpoints) and livelihood activities (such as fishing and hunting) worsen food insecurity by making it difficult for community members to feed themselves (Ombudsman's Office 04/10/2021; OCHA 09/11/2021, 07/2021, 08/09/2021, and 27/03/2020). Some rely on food stocks they have at home, which is sometimes not enough for all family members and does not provide adequate nutrients for children and adolescents (El Espectador 21/08/2021; El Tiempo 26/03/2016), who consequently risk becoming malnourished (OCHA 30/11/2021; Pacifista 03/04/2021).

One coping mechanism is the reduction in the number of meals, especially for adults who skip meals to feed their children (TNH 25/11/2021; OCHA 04/11/2021).

Protection

Confinements and mobility restrictions imposed by armed groups increase the protection needs of affected communities. Some of the main needs include protection from the forced recruitment of minors and GBV and the protection of social leaders and FARC-EP ex-combatants (OCHA 01/09/2021, 07/2021, 08/09/2021, 18/11/2021, and 27/03/2020).

Many of the affected people were previously displaced by armed groups. For example, armed groups displaced the Embera and Wounaan indigenous communities in Chocó and Valle del Cauca from their territories in Litoral del San Juan (Chocó) then confined them in Puerto Pizarro (Valle del Cauca) (OCHA 24/08/2021). Similar situations have occurred in Nariño in the municipalities of Olaya Herrera and El Charco (Nariño Government 29/03/2021; OCHA 14/04/2020) and Antioquia in Ituango and Dabeiba municipalities (OCHA 28/07/2021 and 29/11/2021).

Gender-based violence: there have been reports of women being sexually abused by armed groups during confinements (Béndixen Gutiérrez 2018; CODHES 09/2008; El Espectador 04/09/2017), and the presence of armed groups increases fear of suffering GBV (MIRE 11/10/2021). There are significant information gaps regarding GBV in situations of confinement.

Forced recruitment: armed groups take advantage of mobility restrictions and their social and territorial control to recruit children and adolescents. The closure of schools in the context of confinement is a key factor contributing to the forced recruitment of children and adolescents (MIRE 01/12/2021 and 15/11/2021).

Anti-personnel mines: in communities affected by the presence of APMs or unexploded ordnance, mine risk education is critical to prevent casualties (OCHA 20/10/2021 and 04/11/2021).

Health

Physical health

Confinements and mobility restrictions imposed by armed groups pose a barrier to accessing health services as they prevent people from leaving their homes. This situation makes emergencies (such as childbirth and physical accidents) and non-emergency health needs (such as diseases like acute respiratory infection, acute diarrhoeal disease, and skin disorders) even more difficult to address (OCHA 06/01/2021; TNH 25/11/2021; MIRE 31/03/2021).

The COVID-19 pandemic has also affected healthcare access in confined communities, as priority assistance has been given to the areas most affected by COVID-19 (OCHA 26/04/2021; TNH 25/11/2021).

Mental health

The conditions of confinement impact the mental health of affected people. There have been reports of people, including minors, attempting to commit suicide as a result of the conflict, including while living in confinement or being affected by movement restrictions (Cerosetenta 18/08/2021; El Espectador 31/07/2021; OCHA 15/12/2021). Confinement and violent actions of armed groups create conditions of living in fear, stress, anxiety, and sleeping difficulties, also among children (MIRE 01/12/2021; OCHA 25/04/2021, 15/12/2021, 01/09/2021, 24/08/2021, 06/08/2021, and 07/2021; Cerosetenta 18/08/2021; AA 28/07/2021). Fear of GBV has been reported by women affected by confinement (MIRE 01/12/2021).

Some communities gather to talk about their feelings as a coping mechanism, especially as needs remain, given the lack of provision of psychological care (KII 25/01/2021).

Education

Confinements and mobility restrictions affect the access to education of children and adolescents. Many communities prefer to keep their children at home to prevent exposure to mines and forced recruitment (OCHA 04/11/2021; MIRE 01/12/2021). Some schools have also suspended their face-to-face activities because of mobility restrictions (MIRE 01/12/2021). This situation is compounded by cases in which teachers do not have the materials, methodologies, and internet access to continue doing classes online (MIRE 15/11/2021 and 11/10/2021).

Among the resulting main needs is the strengthening of recreational activities and pedagogical processes for children and adolescents given the interruption in their academic training and other psychosocial impacts (OCHA 14/04/2021; MIRE 01/12/2021).

WASH

11.5% of the population in Colombia has WASH needs. 25% of these people are in the departments with the highest number of confinements in 2021 (Antioquia, Chocó, Nariño, and Valle del Cauca). People living in rural areas are the most in need. People with WASH needs in rural areas make up 52% of people in Chocó, 82% in Nariño, 84% in Antioquia, and 72% in Valle del Cauca (WASH Cluster accessed 15/01/2022).

Confinement and mobility restrictions increase WASH needs as people cannot access sources of drinking water, especially communities living far from these sources (MIRE 15/11/2021 and 01/12/2021; OCHA 20/10/2021 and 18/11/2021). This situation is aggravated when confined communities collect water from rivers and rainwater that are not treated for consumption (OCHA 04/11/2021; MIRE 01/12/2021). Confinement has also limited the purchase of critical hygiene products such as soap (MIRE 11/10/2021; OCHA 24/08/2021).

Shelter

Housing needs that arise from confinements and mobility restrictions caused by armed groups are related to the lack of access to shelter materials, overcrowding, and the exposure of houses to clashes between armed groups and with government forces. Common materials for homes are wood and zinc (MIRE 11/10/2021; El Espectador 21/08/2021). When these and other materials are scarce, families are unable to make improvements to or repair their houses, leading to the deterioration of their homes (KII 24/01/2022).

Confinements can lead to overcrowding. Some families gather in a single house or school to feel safer and protect themselves from threats and confrontations of armed groups (OCHA 30/09/2021; El Nuevo Siglo 23/09/2019; KII 24/01/2021). The proximity of their houses to clashes can also be a risk (MIRE 11/10/2021; El Colombiano 21/07/2020; ONIC 02/09/2019).

Sociocultural impact on indigenous and Afro-Colombian communities

Confinement of indigenous and Afro-descendant communities can cause significant cultural damage as it restricts their cultural practices (CNMH 2013). It affects the collective work and cultural and social structures of indigenous and Afro-Colombian communities, impeding their rights to autonomy, identity, and territory, for example by restricting access to culturally significant sites (CCC 26/01/2009 a and 26/01/2009 b; AA 28/07/2021).

Risk of displacement

The presence of armed groups, military operations by government forces, and clashes between these groups put confined communities at risk of displacement (OCHA 18/06/2021), as communities that have been confined for some time by armed groups may decide to flee the conflict to protect their families (Ombudsman's Office 26/08/2021; OCHA 26/01/2021 and 23/03/2021). Some events that intensify the fear of communities include the increase of clashes and the murder of civilians (KII 24/01/2022).

The lack of access to food and health services can also lead confined communities to relocate to seek humanitarian assistance (OCHA 26/01/2021; KII 25/01/2022). In some cases, armed groups prevent people from displacing (KII 25/01/2022).

AFFECTED POPULATION

Indigenous communities

In 2021, 70% of the people affected by confinement (over 45,000 people) were indigenous (OCHA 28/01/2022). Indigenous communities often prefer to remain in their territories despite the threat to their lives, as they have a relationship of rootedness and connection with the land (KII 02/12/2021; KII 25/01/2022).

In March 2021, clashes between armed groups confined approximately 2,425 indigenous people in the municipality of Bojayá (El Colombiano 02/03/2021). That same month, members of the Embera Eyábida community in Murindó municipality, Antioquia, received threats from the ELN. Despite the risk, the community refused to leave their territory and remained in confinement (Caracol Radio 03/03/2021). Some indigenous communities, such as in Dabeiba and Frontino, Antioquia, have been repeatedly confined over long periods of time (KII 24/01/2022; KII 25/01/2022; El Colombiano 30/09/2021; OCHA 15/04/2021).

Armed groups have prevented the Tawá communities confined in Chocó from fishing, planting, and hunting (Cerosetenta 18/08/2021), restricting their livelihoods. The indigenous communities Emberá Katío, Emberá Dóbida, Wounaan, and Tule, located near Panama (Acandí, Juradó, Ríosucio, and Unguía), denounced being confined by both regular and irregular armed groups (CINEP 09/10/2020).

Afro-Colombians, Raizales, and Palenqueros

In 2021, 17% (11,000 people) of the people confined were Afro-Colombian (OCHA 28/01/2022). The departments most affected by the confinements are those on the Pacific Coast, where confined Afro-Colombian communities have had their access to rivers, food, and livelihoods restricted (WOLA 31/01/2022; OCHA 30/11/2021). The municipality of Bojayá is the most affected by confinement throughout the country, with 15 confinement events since 2016. Bojayá is followed by Alto Baudó, with 14 forced confinements (OCHA accessed 11/01/2022). In these municipalities, the ethnic population is 50% Afro-descendant, followed by the indigenous population (DANE 25/11/2019).

Women

According to data from the Victims' Unit, over 30,000 women have been affected by confinement from 1985–2021, though data disaggregated by gender is often missing (UARIV accessed 05/01/2022). During confinements, some women experience sexual violence (Verdad Abierta 06/02/2019; El Espectador 04/07/2017; Béndiksen Gutiérrez 2018).

The mental health of women is also affected. For example, confined women in Bojayá, Chocó, have reported feeling depressed when they cannot provide food for their family and fearing sexual violence (MIRA 25/07/2021).

Children and adolescents

Confinements directly affected more than 1,300 children in 2021, although the number is likely higher because of missing disaggregated data and underreporting (OCHA 28/01/2022). Confinements prevent children from attending school, increasing non-attendance and dropouts. Children often also do not have access to activities to occupy their free time, which puts them at risk of forced recruitment (OCHA 25/07/2021; Béndiksen Gutiérrez 2018).

During confinement, the risk of child malnutrition increases, and diseases also increase because of the lack of access to medical centres (OCHA 30/11/2021; Béndiksen Gutiérrez 2018).

Adolescents in confinement are at high risk of forced recruitment, which affects their life projects and mental health. Approximately 22 young people from indigenous reservations committed suicide during confinement in 2021. Among the main causes were suffering from forced confinements, the risk of forced recruitment, and the violation of human rights by armed groups (Cerosetenta 18/08/2021; El Espectador 31/07/2021; AA 28/07/2021).

Farmers and merchants

Because of mobility restrictions, farmers and traders cannot transport or market their products. For example, in areas such as Alto Cachicamo, Puerto Cachicamo, and Nuevo Milenio, Guaviare, farmers and traders have had to request authorisation from armed groups to transport their products and reported fear of armed groups stealing their goods (OCHA 30/12/2021 and 18/11/2021).

HUMANITARIAN ACCESS AND RESPONSE

Insecurity, the distances at which people are located, the poor conditions of roads, difficulties of riverine transport, and logistical challenges limit humanitarian access to confined communities. Clashes by armed groups also hinder humanitarian access as they necessitate adequate security conditions for responders (ELC 23/03/2021 and 05/05/2021). 'Armed strikes' and the installation of APMs also result in mobility restrictions, making it difficult for organisations to assist confined people (OCHA 25/07/2021; OCHA 07/04/2021).

Confinements usually affect rural areas, many of which are difficult to access (OCHA 09/11/2021, 15/04/2021, and 25/10/2020), because of the presence of armed groups (TNH 25/11/2021; Banco de Datos 23/09/2021). Humanitarian access to confined communities located far from urban areas can be lengthy because of poor road conditions and the lack of communication roads particularly in places where only riverine access is possible (MIRE 15/12/2021, 15/11/2021, and 22/11/2021). Some communities take several days to access (Victims' Unit 29/03/2021).

In 2021, humanitarian organisations responded to 58% of confinements reported, with mobility restrictions imposed by armed groups posing one of the difficulties in accessing affected areas (OCHA 28/01/2022). Other impediments to assisting confined communities in a timely manner are the underreporting of confinement cases and threats from armed groups preventing people from leaving (Radio Nacional 25/08/2021; Victims' Unit 29/03/2021; OCHA 08/09/2021).

REGIONAL TRENDS

Between 2016–2021, according to the OCHA definition, the overall number of people confined by armed conflict in Colombia increased by 593%. The number of confinement events increased by 427% (OCHA accessed 07/01/2022).

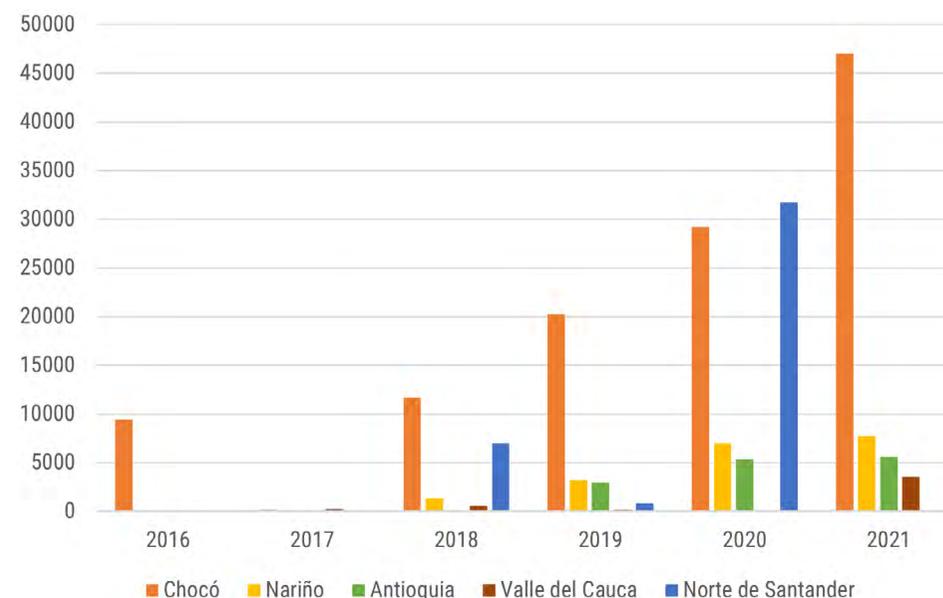
In 2017, the total number of confined people decreased by 85% compared to 2016, following the signing of the Peace Agreement between the Government and the FARC-EP and the latter's subsequent demobilisation (OCHA accessed 07/01/2022; ICG 30/11/2021; El Pais 18/04/2018). Since 2018, the overall trend of confinements has been increasing.

In 2020, the number of people confined increased by 155% compared to 2019 (OCHA accessed 07/01/2022). In 2020, the COVID-19 pandemic contributed to the expansion of armed groups' territorial control as they imposed measures restricting the mobility of communities to contain the disease (Human Rights Watch 15/07/2020). Armed groups used violence and threats to force people to comply with the restrictions (BBC 22/05/2020; UN 14/07/2020 and 24/04/2020).

The departments most affected by confinements between 2016–2021 were Antioquia, Chocó, Nariño, Norte de Santander, and Valle del Cauca. In 2021, about 98% of confinements were registered in Antioquia, Chocó, Nariño, and Valle del Cauca (OCHA accessed 07/01/2022).

Norte de Santander did not register any new confinements in 2021, after having reported a high number of affected people in 2020 when armed groups engaged in an 'armed strike'.

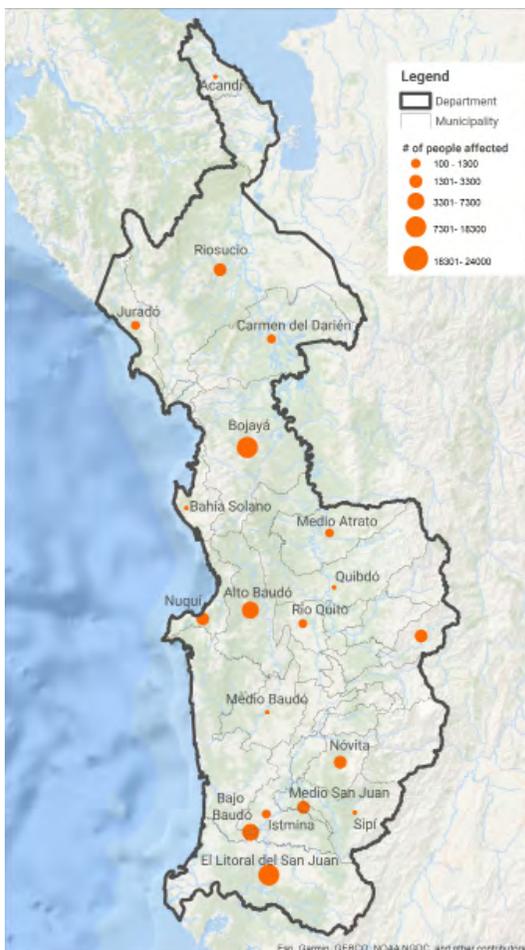
Departments with the highest number of people affected by confinement 2016–2021



Source: OCHA (accessed 07/01/2022).

Chocó

Colombia: Areas most affected by confinements in Chocó between 2016-2021



Source: ACAPS using data from OCHA (accessed 07/01/2022).

Trend

In Chocó, the number of people affected by confinements because of the conflict in Colombia increased by about 400% between 2016–2021 (OCHA accessed 07/01/2022). Chocó was the only department in Colombia that reported confinement in 2016. Except in 2017, the increase in confinements was constant between 2016–2021, overall affecting over 117,000 people.

Conflict dynamics

Two dynamics characterise Chocó. The first involves territorial disputes over the control of strategic corridors that connect to the Pacific Ocean, which facilitates the transit of drugs abroad (Ombudsman’s Office 09/16/2021). There are clashes between armed groups, such as the AGC and the ELN, in the centre of the department (InSight Crime 24/10/2021 and 27/10/2020; Indepaz 13/09/2021). The second involves the consolidation of territorial control by the AGC and the ELN. The ELN maintains control over most municipalities in the south of the department, while the AGC consolidates territorial control in the north (ACAPS 22/12/2021; Ombudsman’s Office 06/03/2020 and 14/05/2020).

Most affected municipalities in 2021

In 2021, this department contained 72% of people confined nationwide. The most affected municipalities were:

MUNICIPALITY	# OF PEOPLE AFFECTED
Bajo Baudó	9,402
Litoral del San Juan	7,005
Bojayá	5,833
Alto Baudó	5,743
Medio San Juan	5,121
Bagadó	5,084
Nóvita	4,500
Nuquí	2,372
Istmina	1,530
Acandí	313
Quibdó	149
TOTAL	47,052

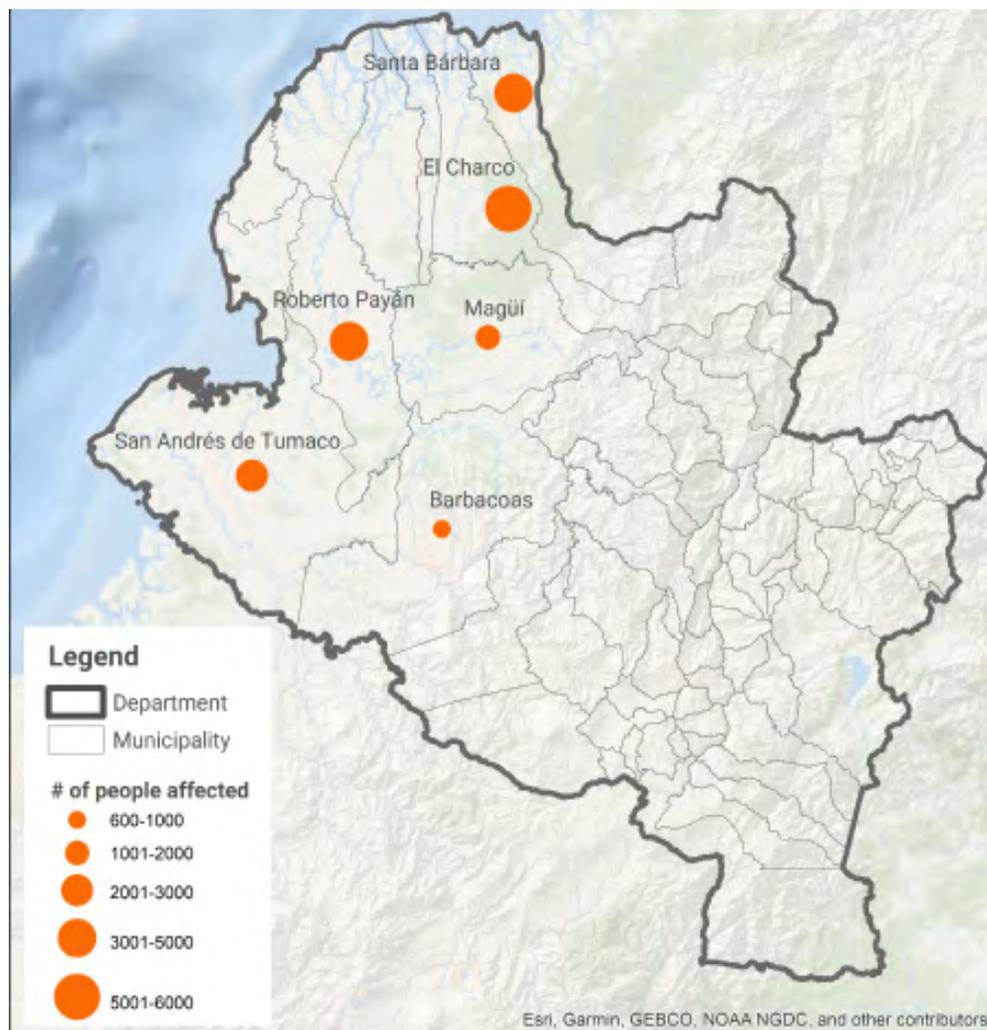
Source: OCHA (accessed 07/01/2022).

Drivers of confinement

Among the causes of confinement between 2016–2021 were clashes between armed groups, threats to communities, and the installation of APMs (OCHA accessed 07/01/2022; OCHA 28/07/2021; Victims’ Unit 17/11/2021; UNHCR 13/09/2021).

Nariño

Colombia: Areas most affected by confinements in Nariño between 2016-2021



Source: ACAPS using data from OCHA (accessed 07/01/2022).

Trend

Between 2018–2021, confinements in Nariño increased by about 470% as a result of disputes over territorial control (OCHA 03/05/2021, 15/12/2019, and 12/2018). Between 2016–2017, there were no reports of confinements as a result of the signing of the Peace Agreement in 2016 and the demobilisation of the FARC-EP in mid-2017, which reduced the overall level of violence (Instituto CAPAZ 11/2018; FIP 10/04/2018). At the end of 2017, the level of violence increased because of the consolidation and presence of dissident groups in areas previously controlled by the FARC-EP (Instituto CAPAZ 11/2018; FIP 10/04/2018; Indepaz 04/04/2020).

Conflict dynamics

The main conflict dynamic in the department involves the Pacific Coast. There are territorial disputes between a FARC dissident group known as the Western Coordination Command and the AGC (Pares 19/08/2021; InSight Crime 01/11/2021). One driver of conflict is the dispute over the control of coca crops in the Telembí triangle (Barbacoas, Magüi Payán, and Roberto Payán), which concentrates about 53% of coca crops in the department (Colombia Drug Observatory accessed 25/01/2022). Another is that Nariño is a connection point for drug trafficking with Ecuador and the Pacific Coast (Indepaz 13/09/2021; ACAPS 29/09/2021). Armed groups are also present in the municipalities of the mountainous Cordillera (Vanguardia 20/11/2021).

Most affected municipalities in 2021

In 2021, Nariño contained about 12% of the national total of people affected by confinements. The most affected municipalities were:

MUNICIPALITY	PEOPLE AFFECTED
Roberto Payán	3,314
El Charco	2,470
Tumaco	1,640
Magüi Payán	310
TOTAL	7,734

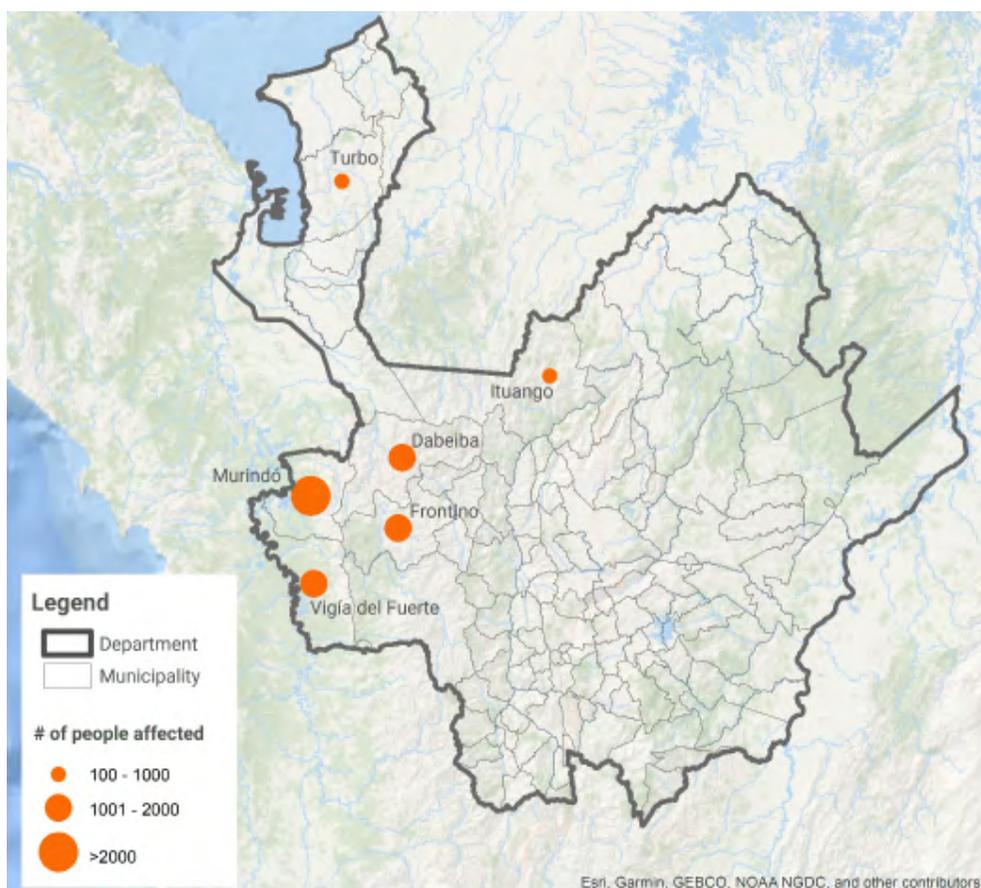
Source: OCHA (accessed 07/01/2022).

Drivers of confinement

Between 2018–2021, among the causes of confinement were threats from armed groups, clashes, and the installation of APMs (OCHA accessed 07/01/2022; International Crisis Group 30/11/2021; UNHCR 13/09/2021; OCHA 30/11/2021, 14/04/2020, and 28/07/2021).

Antioquia

Colombia: Areas most affected by confinements in Antioquia between 2016-2021



Source: ACAPS using data from OCHA (accessed 07/01/2022).

Trend

From 2019–2021, the number of people confined in Antioquia by the armed conflict increased by 90%. Between 2016–2018, there were no reports of confinements (OCHA accessed 07/01/2022).

Conflict dynamics

In the affected municipalities, there are disputes for territorial control between FARC dissident groups 18th and 36th Front, the AGC, and the ELN (Indepaz 13/09/2021; FIP 07/07/2021; InSight Crime 23/04/2021). These areas are strategic for armed groups given their connection to the centre of the country and their proximity to the Pacific, which facilitates the transit of drugs and illicit economies and consolidates incomes from illegal mining and drug trafficking (Pares 06/04/2020; El Colombiano 30/09/2021).

Most affected municipalities in 2021

In 2021, about 9% of people affected by confinements reported nationwide were in Antioquia.. The most affected municipalities were:

MUNICIPALITY	PEOPLE AFFECTED
Murindó	2,235
Frontino	1,500
Dabeiba	1,064
Vigía del Fuerte	528
Ituango	162
Turbo	106
TOTAL	5,595

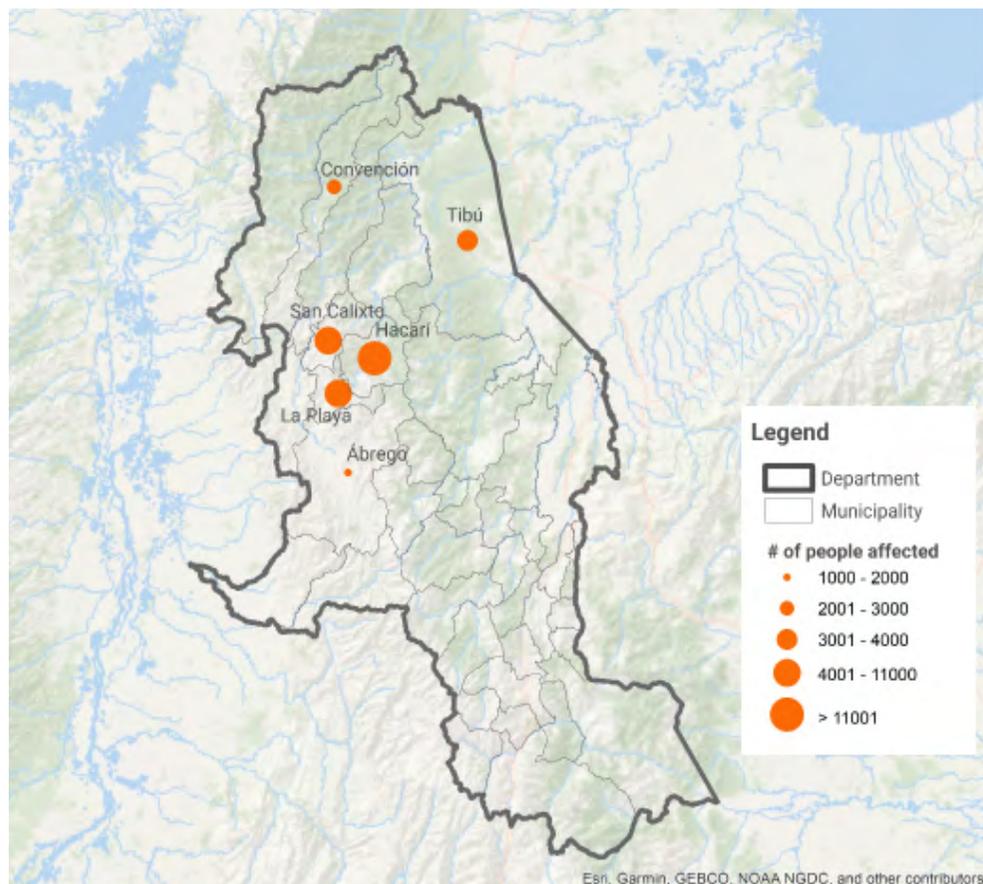
Source: OCHA (accessed 07/01/2022).

Drivers of confinement

From 2019–2021, some of the confinement causes in these municipalities were threats from armed groups towards the population, the installation of APMS near the roads used for transit by communities, and mobility restrictions imposed by armed groups to control COVID-19 (OCHA accessed 07/01/2022; OCHA 20/10/2021, 30/08/2021, and 20/05/2021; Indepaz 13/09/2021; El Colombiano 30/09/2021).

Norte de Santander

Colombia: Areas most affected by confinements in Norte de Santander between 2016-2021



Source: ACAPS using data from OCHA (accessed 07/01/2022).

Trend

Between 2018–2020, more than 39,500 people were confined in Norte de Santander – around 7,000 in 2018 and more than 31,700 in 2020. In 2020, Norte de Santander contributed about 43% of confinements nationwide (OCHA accessed 07/01/2022). Between 2016–2017, there were no confinements reported, possibly because of alliances between the ELN and the Popular Liberation Army (EPL), as well as FARC-EP’s demobilisation process (Verdad

Abierta 26/03/2018; OCHA accessed 07/01/2022). In 2021, there were no new confinements reported, but clashes between the ELN and the EPL continued and caused displacements (OCHA 08/10/2021; InSight Crime 19/01/2021; Pares 22/02/2021). One of the reasons no new confinements were reported was that there were no ‘armed strikes’ that restricted the mobility of people.

Conflict dynamics

Confinements increased between 2018–2020 because of the termination of alliances to control the territory between the EPL and the ELN, following the demobilisation of the FARC-EP in 2017 (Verdad Abierta 26/03/2018; FIP 26/02/2020). The main cause of confinements in 2020 was an ‘armed strike’ in March led by these two armed groups to expand their territorial control. The groups imposed mobility restrictions, threatening people against moving out of their houses and preventing the movement of vehicles in the municipalities of Ábrego, Hacarí, La Playa, and San Calixto (OCHA accessed 07/01/2022; El Mundo 13/02/2020; Caracol Radio 13/02/2020).

Norte de Santander is strategically important for armed groups, as 28% of coca crops in Colombia were registered in the department in 2020 (Colombia Drug Observatory accessed 25/01/2022). Another reason is its proximity to Venezuela for drug trafficking, illegal mining, and other irregular economies (Centro Nacional de Memoria Histórica 03/03/2020; Verdad Abierta 27/07/2020).

Most affected municipalities in 2020

In 2020, around 43% of the total people affected by confinements were recorded in Norte de Santander. The most affected municipalities were:

MUNICIPIOS	PERSONAS AFECTADAS
Hacarí	11,635
La Playa	8,143
Abrego	1,709
San Calixto	10,253
TOTAL	31,740

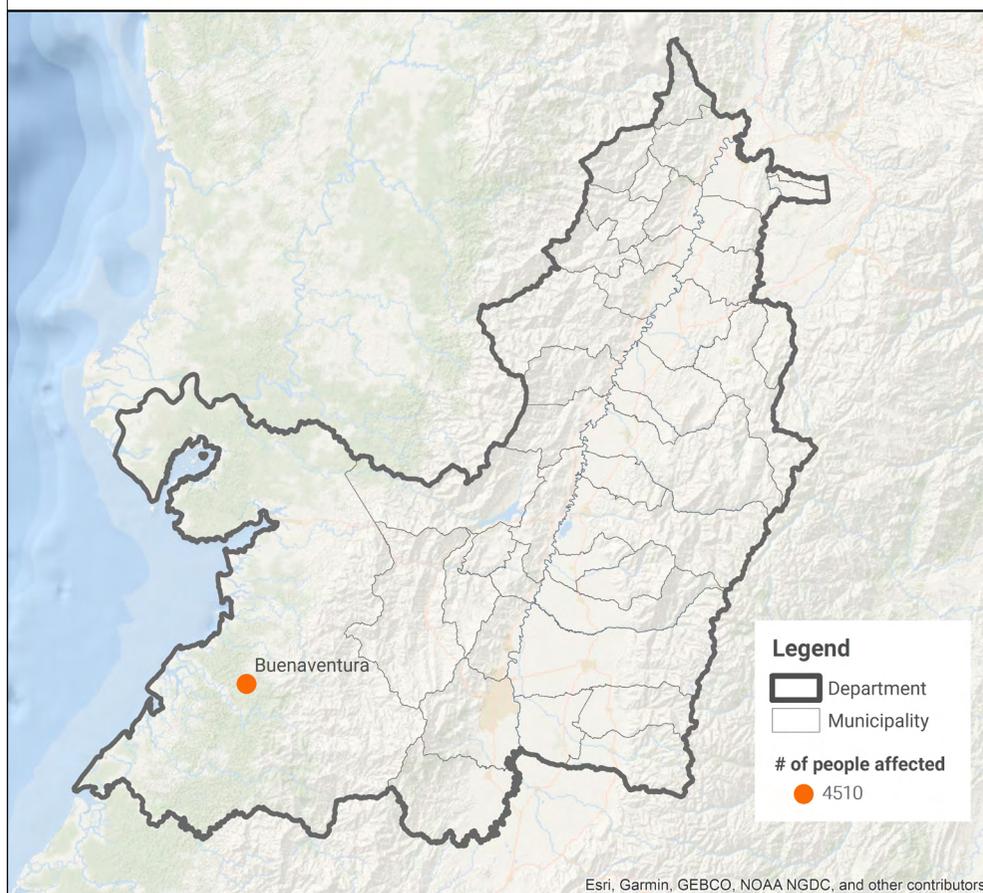
Source: OCHA (accessed 07/01/2022).

Drivers of confinement

The causes of confinement were the installation of APMs, ‘armed strikes’ to restrict people’s mobility, and threats to communities (OCHA accessed 07/01/2022; OCHA 08/10/2021 and 31/12/2018; FIP 26/02/2020; Radio Nacional 17/02/2020).

Valle del Cauca

Colombia: Areas most affected by confinements in Valle Del Cauca between 2016-2021



Source: ACAPS using data from OCHA (accessed 07/01/2022).

All confinements reported in Valle del Cauca occurred in rural areas of Buenaventura municipality.

Trend

Between 2017–2021, confinements resulted from threats to the population to prevent them from leaving the community and denouncing the confinements. In 2021, about 5% of confinements nationwide were in Valle del Cauca (OCHA accessed 07/01/2022).

Conflict dynamics

The increase of confinements resulted from the entry of the AGC in the department, particularly in the rural areas of Buenaventura, where all the confinements were reported. In this area, the AGC and the ELN fight over the control of income from drug trafficking and illegal mining (El Tiempo 28/11/2021; Ombudsman's Office 14/10/2021; CIJP 25/08/2021).

Drivers of confinement

Between 2017–2021, confinements resulted from threats to the population against mobilising outside the territory and denouncing the confinements, as well as clashes between armed groups (OCHA accessed 07/01/2022; CIJP 25/08/2021; OCHA 24/08/2021).

Other departments

While the departments mentioned above register the majority of confinements, since 2019, other departments have reported confinements as well. Cauca and Putumayo reported 1,574 people affected by confinements in 2019. Around 380 people were confined in Cauca and Córdoba in 2020. In 2021, confinements affected over 1,300 people in Cauca, Putumayo, Córdoba, and Risaralda, indicating that drivers such as confrontations between armed groups and threats by armed groups against communities are increasingly affecting parts of the country that did not experience confinements between 2016–2018 (OCHA accessed 24/01/2022).

In early 2022, confinements were reported in Arauca in connection with clashes between armed groups and escalation of violence (ACH 12/01/2022).

Apart from confinements, mobility restrictions imposed by armed groups have been reported in 20 of Colombia's 32 departments between 2016–2021 (OCHA accessed 07/01/2022). In 2021, Amazonas, La Guajira, and Meta reported mobility restrictions; they had not reported mobility restrictions between 2016–2020 (OCHA accessed 07/01/2022). Among the main causes of mobility restrictions are disputes over territorial control, the control of strategic routes for drug trafficking, threats to communities by armed groups (OCHA 06/2020; OCHA 07/2021; PARES 13/04/2021), the installation of APMs (OCHA 12/2020 and 08/2021; OCHA 18/01/2021), curfews, and 'armed strikes' (ELC 12/2020; OCHA 17/12/2021).

AGGRAVATING FACTORS

Natural hazards: heavy rains cause flooding and can aggravate the humanitarian situation in conflict-affected departments (Infobae 23/11/2021; MIRE 14/11/2020). The Colombian Pacific Coast is the rainiest region in the country, especially Lopez de Micay in Cauca and Buenaventura in Valle del Cauca (UNAL 28/08/2020). These municipalities also reported forced confinement by non-state armed groups (OCHA 18/01/2022 and 12/11/2020). Violence by non-state armed groups and extreme weather events also make communication, access to communities, and the overall aid response more difficult (TNH 25/11/2021).

INFORMATION GAPS

Disaggregated data of affected people is not available for many confinements reported.

GBV: there is no up-to-date record and monitoring of GBV cases in situations of confinement (KII 25/01/2022).

Ex-combatants: there is no clear information on how and how many ex-combatants are affected by confinement. Since several spaces for reincorporation are in areas with the presence of armed groups, it is possible that ex-combatants have been affected by confinements.

Coping mechanisms: communities have developed strategies to deal with confinements, such as storing food for future events or normalising curfews and mobility restrictions (KII 24/12/2022; KII 25/01/2022). There is no information on other mechanisms used by communities – especially indigenous communities, which are the most affected by confinements.

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