INTRODUCTION

ACAPS Humanitarian Access Overview provides a snapshot of the most challenging contexts regarding humanitarian access.

ACAPS analysts looked into nine indicators to rank and compare the humanitarian access levels worldwide. Affected populations in more than 50 countries are not getting proper humanitarian assistance due to access constraints.

Humanitarian access has deteriorated in Colombia, Iraq, Myanmar, Nigeria, Pakistan, and Somalia over the past six months.

13 new countries entered the ranking since the latest ACAPS Humanitarian Access report released in August 2018.¹

Physical constraints and restriction/obstruction of access to services and assistance are the most common challenges.

INACCESSIBLE

ERITREA
SOMALIA
SYRIA
YEMEN

NEARLY INACCESSIBLE

AFGHANISTAN
CAR
DPRK
DRC
IRAQ
LIBYA
MYANMAR
NIGERIA
PALESTINE
SOUTH SUDAN
VENEZUELA

HIGH CONSTRAINTS

BURUNDI
CAMEROON
COLOMBIA
ETHIOPIA
MALI
PAKISTAN
SUDAN
TURKEY
UKRAINE

How are the access levels being calculated?

Our methodology groups 9 indicators under 3 dimensions:

1. Access of people in need to humanitarian aid comprised of 2 indicators:
   • Denial of humanitarian needs
   • Restriction and obstruction of access to services and assistance

2. Access of humanitarian actors to affected population comprised of 4 indicators:
   • Impediments to entry into country
   • Restriction of movement within the country
   • Interference with humanitarian activities
   • Violence against personnel, facilities and assets

3. Security and physical constraints comprised of 3 indicators:
   • Ongoing insecurity/hostilities affecting humanitarian assistance
   • Presence of mines and UXO
   • Physical constraints

Each indicator is given a score from 0 to 3 and marked with an X when there is an information gap identified.

The overall access score by country is ranked according to the following scale:

0 - No constraints
1 - Low constraints
2 - Moderate constraints
3 - High constraints
4 - Nearly inaccessible
5 - Inaccessible

We are providing analytical narratives for countries scored between level 3 to 5. Countries scored as 0 - no constraints are not included in this report.

¹ Algeria, Bosnia and Herzegovina, Egypt, El Salvador, India (Kashmir), Indonesia, Madagascar, Malawi, Peru, Tanzania, Trinidad and Tobago, Uganda, and Zimbabwe.
INTRODUCTION

What is new? – Following trends on humanitarian access

In this report we have introduced a comparison of the level of humanitarian access between the last humanitarian access report produced in August 2018 and the current situation. This is represented with the arrows next to the narrative of each country.

Humanitarian access has deteriorated in:

- COLOMBIA
- IRAQ
- MYANMAR
- NIGERIA
- PAKISTAN
- SOMALIA

The situation has remained the same in:

- AFGHANISTAN
- MALI
- BURundi
- PALESTINE
- CAMEROON
- SOUTH SUDAN
- CAR
- SUDAN
- DPRK
- SYRIA
- DRC
- TURKEY
- ETHIOPIA
- UKRAINE
- Eritrea
- YEMEN
- Libya

Humanitarian access has improved in:

- VENEZUELA

Read more about our methodology here.
## ACCESS INDICATORS

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*ACAPS HUMANITARIAN ACCESS OVERVIEW — MAY 2019*
Humanitarian access remains extremely constrained in Syria amid ongoing conflict, even in areas retaken by the government. Intensified conflict in opposition-held territory in Idleb, fighting between opposition groups in the north, and suicide attacks in government held areas hinder access. Health workers and other humanitarian actors continue to be impacted by shelling, airstrikes, and small arms fire. The Jordanian and Turkish border closures are hampering cross-border aid. Access to the 36,000 people in need in the Rukban makeshift settlement at the border with Jordan remains extremely restricted. There is a high presence of UXOs and ERWs, even in areas of return. 1.16 million people are living in hard to reach areas compared to 1.5 million in August 2018.

Insecurity, administrative constraints, entry restrictions, violence against humanitarian workers, and obstruction of civilian mobility hamper access. 6.5m people live in hard-to-reach areas. Fighting exacerbates access challenges, particularly in heavily populated western coastal areas. High fuel prices limit transportation of aid and increase the price of commodities. Checkpoints, landmines and ERW as well as damaged roads and difficult terrain hinder movement. Armed actors have attempted to block aid from reaching groups suspected of disloyalty, directing it to groups more supportive of their agenda or selling it on the black market. Despite the blockade lifting in 2018, impediments to imports and aid, enforced by belligerent parties, hampers aid delivery. Access to basic goods may decrease if the UN brokered ceasefire fails and fighting resumes over the strategic Al Hudaydah port. The UN brokered ceasefire in December 2018 reduced violence around the port, but fighting increased elsewhere, including Hajjah and Al Dhale’e.

Access has deteriorated in Somalia since August. Increased conflict, insecurity and restrictions imposed by armed groups extremely hamper access. Demands for arbitrary taxation, interference in supply and procurement as well as staff recruitment procedures also continues. Bureaucratic impediments by local and state authorities impact the ability of humanitarian actors to reach people in need. Generally, access in the north is better than in southern and central Somalia, where unauthorised roadblocks and checkpoints and extortion restrict the delivery of assistance and nearly 2 million people are living in hard-to-reach, conflict-affected areas. Some areas controlled by Al Shabaab are inaccessible for humanitarian actors. Humanitarian operations are further disrupted by seizure of goods and attacks against aid workers. This situation has been exacerbated by the withdrawal of AMISOM. Security forces have demolished informal settlements, including humanitarian infrastructure, displacing people without warning or providing alternative shelter.

Despite recent improvements in Eritrea’s diplomatic relations with Ethiopia and Somalia, and the lifting of a nine-year arms embargo by the United Nations Security Council, humanitarian access in Eritrea remains extremely restricted. Only a few humanitarian actors are permitted to operate in the country and for those who do gain access, permission is then required to travel outside of the capital Asmara. Nongovernmental organisations and independent media are prohibited, and journalists have often imprisoned. Authorities frequently deny access to human rights observers and researchers. Mine contamination remains a concern across all regions. Information on the humanitarian situation continues to be sporadic due to the high access constraints, and there are significant data gaps.

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**AFGHANISTAN**

Widespread insecurity, mine contamination and difficult terrain present major obstacles for humanitarian access. Hostilities involving non-state armed groups (NSAG) – especially the Taliban and Islamic State Khorasan – and Afghan and international forces have intensified in recent months despite ongoing peace negotiations. Areas controlled or contested by NSAG have increased over the last six months. While humanitarian actors have been able to secure access to areas under non-government control, contested territory remains a challenge. Local NGOs and national staff have been particularly exposed to protection risks. All of the 35 humanitarian aid workers killed, wounded, or kidnapped in Afghanistan between January 2018 and January 2019 were Afghan nationals. Poor road conditions, remoteness, and mountainous terrain restrict access; as has severe flooding in February and March.

**DPRK**

Overall humanitarian access remains poor, though some agencies note an improvement. While the government of DPRK tightly regulates the access and activities of humanitarian organisations, access is now possible for national and international staff in all 11 provinces – Jagang was inaccessible to international staff until last year. However, travel within DPRK remains regulated by national authorities. International humanitarian agencies need to obtain advance clearance for field visits outside of Pyongyang, as do DPRK nationals. Itineraries must be planned in advance and international staff must be accompanied by DPRK nationals. Road networks outside Pyongyang are of varying quality and in some areas become impassable during winter. The demilitarised zone border area between DPRK and South Korea is heavily mined. Detention and labour camps remain inaccessible.

**CAR**

Humanitarian access hasn't improved during the reporting period due to protracted conflict and a stalling peace process. Violent attacks against humanitarian convoys and looting of facilities continue to be regularly reported. Between September 2018 and February 2019, at least 171 security incidents affecting international and local NGOs were reported, including three aid workers killed, 14 injured, and two abducted. The presence of armed groups is restricting the movement of the population and constrains their access to services, especially around IDP camps. Road and transport infrastructure are underdeveloped and poorly maintained, leaving some areas completely inaccessible or hard to reach. Armed groups have blocked main roads connecting to neighbouring countries, demonstrating the extent of their control over some parts of the territory.

**DRC**

Humanitarian access has continued to be restricted, and subject to local conflict dynamics. Most security incidents were reported from Nord and Sud Kivu, Ituri, Tanganyika and Haut-Uele provinces. Besides armed conflict and insecurity, remoteness and poor infrastructure are major obstacles for humanitarians. Whereas access to Maniema and Kasai provinces has improved due to surrender of armed groups since the elections in December, violence and violent clashes between FARDC and armed militia in Fizi and Shabunda territory, Sud Kivu, and Beni and Masisi territory, Nord Kivu, diminished access to affected populations. Attacks on humanitarian staff and facilities, including kidnapping and looting, continue in various provinces and force humanitarian actors to suspend activities. Attacks against Ebola treatment centres have increased since December as community mistrust against aid workers persists.
Humanitarian access has decreased in Myanmar overall. In Rakhine state, the government has imposed severe travel restrictions on aid workers. An escalation in fighting between the Arakan Army and Myanmar army since January 2019 has caused increasing constraints for the vulnerable population in rural townships in northern and central Rakhine state. Restrictions on freedom of movement causes limited access to health facilities for Rohingya and other Muslims, including internally displaced people in central Rakhine. The Myanmar military has been accused of blocking relief supplies to people displaced in Rakhine state. In Kachin and Shan states, ongoing violence has restricted access, affecting particularly the delivery of non-food items, assistance to improve the living conditions, and protection support.

Access in the northeast and the Middle Belt region remains restricted due to insecurity. Presidential and legislative elections on 23 February led to increased violence, impacting aid operations. Humanitarian staff relocated throughout the election period, particularly in humanitarian hubs in northeast Nigeria. Over the few past months, a marked deterioration in access was observed in the northeast due to increased Boko Haram attacks and military operations. Some 800,000 people in northeast Nigeria are entirely inaccessible. Rann town, Borno state has been inaccessible to humanitarians following the attacks in mid-January that displaced 30,000 Nigerians to Cameroon. Access in most other affected areas is highly constrained and only partially accessible to humanitarian actors. Data on access in the Middle Belt region, where insecurity is the main access constraint, is limited.
**PALESTINE**

Access remains severely constrained as humanitarian organisations face significant obstacles on the movement of humanitarian personnel and goods across Gaza and the West Bank due to political, security, and administrative measures implemented by Israeli authorities. Civilian populations often face severely reduced access to reaching basic services, particularly health care. In Gaza, the Israeli government maintains its land, sea, and air blockade, exacerbated by Egyptian restrictions on the border, limiting the movement of people and goods in and out of Gaza and disrupting access to water. Intermittent border closures constrain the import of relief items. Humanitarian operations in Gaza are also hampered by restrictions imposed by Hamas. In the West Bank movement is restricted by physical obstacles including checkpoints, and administrative requirements, particularly limited access to permits. Aid is often confiscated.

**SOUTH SUDAN**

Signing of the peace agreement in September 2018 has resulted in decreased hostilities overall, yet access constraints persist, including violence against humanitarian personnel, restriction of movement, and bureaucratic impediments. Access gains from late August, after 4 months of no humanitarian access, were sustained in Greater Baggari, Western Bahr el Ghazal and movement improved in Jonglei and Upper Nile states, although non-state civilian authorities and security forces continue to impose bureaucratic restrictions in these states. Clashes between signatories and non-signatories of the peace agreement increased road insecurity in January 2019 around Yei, Central Equatoria, limiting humanitarian operations including Ebola preparedness. Disruption to humanitarian imports are recorded since December, following a presidential decree on customs exemptions. Multiple taxations and widespread looting are also interfering with humanitarian operations.

**VENEZUELA**

Rising and undeniable needs have resulted in the government allowing a few humanitarian organisations to operate comparing to last year and yet the country remains nearly inaccessible. Humanitarian assistance is subjected to political interference and operations can be highly restricted. On 23 February, President Maduro denied access of humanitarian aid from the US through Colombia (while accepting aid from the EU, Russia, China and Cuba) and decided to close the border crossings with Colombia and Brazil, pushing thousands of people to resort to dangerous alternatives like crossing rivers or paying armed groups to use the trochas, unofficial border crossings. Sources indicate that people perceived as critics of the government are prevented from accessing basic goods at government-set prices.
**Burundi**

Criminality and insecurity resulting from the socioeconomic situation continues to restrict humanitarian access. Humanitarian activities and movements are heavily regulated by the Burundian government: local and international organisations face administrative restrictions, bans, suspensions, and even staff arrests. Heavy rains and floods routinely cause damage to infrastructure, particularly roads and bridges, decreasing access to affected populations. The political context makes it difficult for agencies to share information about the crisis.

**Colombia**

Increased violence, natural disasters, and bureaucratic requirements for people needing humanitarian assistance are restricting access. Hostilities among armed groups fighting for control of illegal trades in areas now vacated by FARC – particularly in the Pacific regions and along the Venezuelan border – have led to increased displacement and population confinement, disrupting access to basic services. Landmine presence is also restricting movement. Violence has repeatedly prevented a timely humanitarian response and delayed assessments of people in need. Physical constraints including flooding and landslides during the rainy season in April-May and October-November, and wildfires due to drought and El Niño, make access difficult in affected areas. Despite government efforts to help Venezuelan migrants, overstretched resources as well as people's fear to denounce a situation of irregularity are limiting access to basic services for many Venezuelans.

**Cameroon**

Humanitarian access continues to be restricted due to the volatile, unpredictable security situation, travel restrictions, and poor road conditions. Widespread violence and insecurity in the Anglophone Northwest and Southwest regions at the hands of state security forces and separatists deteriorated in the past six months and started spreading to neighbouring Francophone regions. Increased targeting of civilians, health and education facilities has limited access to services. The interruption of humanitarian operations and access is further exacerbated by government-installed curfews; lockdowns imposed by separatists, and damage to roads and bridges deliberately aimed to restrict mobility. Access to the Far North region remains restricted as Boko-Haram related violence increased in March and the threat of IEDs persists.

**Ethiopia**

The Ethiopian government has eased some restrictions on civil society groups in recent months, though the activities of humanitarian organisations remain heavily regulated. Some areas, such as Kamashi zone in Benishangul-Gumuz, have seen an escalation of intercommunal violence leading to increased insecurity and humanitarian access being almost completely restricted since September 2018. In Gedeo (SNNPR) and West Guji (Oromia), the government has been accused of barring agencies from providing assistance to IDP populations as a strategy so IDPs will return to their place of origin. There are a number of physical access constraints, particularly in rural areas where transportation infrastructure is relatively underdeveloped. Overall, there is a relative lack of information about humanitarian access in Ethiopia that is reliable and up to date.
SUDAN

Humanitarian access remains restricted, especially in conflict areas. The security situation has become more unpredictable since a new military regime took power in April 2019, posing access risks. Ceasefire agreements in September 2018 opened access to Blue Nile and South Kordofan, but areas controlled by the Sudan People’s Liberation Movement-North (SPLM-N) remain hard to access. In Jebel Marra, Darfur, UNAMID personnel were sporadically denied access to conflict areas due to insecurity. UNAMID’s retreat reduces safe access as fighting between government forces and the Sudan Liberation Movement – Abdel Wahid al-Nur (SLM-AW) continues. Humanitarian travel policies were eased in 2016, but administrative procedures still present obstacles. Mines, explosive remnants and poor roads hamper assistance. The economic crisis and countrywide lack of fuel and hard currency hamper aid delivery and access to aid.

PAKISTAN

Humanitarian access remains constrained in Pakistan amid the ongoing violence. Major security incidents continued in the tribal districts of Khyber Pakhtunkhwa (KP), Balochistan province, and Azad Kashmir. A sharp deterioration compared to the previous six months was observed regarding impediments to enter the country, as Pakistan ordered 18 international NGOs to discontinue their operations and leave the country in October 2018. Human rights organisations were particularly targeted. In February 2019, flooding in Balochistan, Punjab and KP province caused further access constraints. Particularly in Lasbela district, Balochistan province, flooding had a high impact on the road infrastructure and communication system. There is no data indicating how improvised explosive device (IED) blasts affected humanitarian activities.
Despite a decrease in hostilities observed in 2018, insecurity and the presence of mines and UXO continue to be major access obstacles in eastern Ukraine. In addition, logistical constraints and administrative requirements render people living close to the contact line and in non-government-controlled areas in Luhansk and Donetsk oblasts particularly hard to reach. Despite improvements to some administrative requirements and infrastructure at the five entry-and-exit checkpoints, conditions at crossings remain dire and continue to restrict people’s free movement and access to basic services and social benefits. Critical civilian infrastructure continues to be heavily affected by shelling and insecurity often impedes or delays critical repairs.