

# Protecting populations, preserving humanitarian space

## The urgent need for humanitarian access in East Africa and Yemen

The collateral impact of Covid-19 will disproportionately affect communities already experiencing multiple and overlapping humanitarian crises. Yet the restrictions put in place to control the spread of the virus are inadvertently creating barriers to the delivery of aid

The Covid-19 pandemic has brought some of the world's most powerful and resource-rich countries to their knees. Health systems are overwhelmed, economies are crumbling, and lives are being lost at a rate largely unfamiliar to current generations. What remains to be seen is the impact of the pandemic on some of the world's poorest and most conflict-affected nations. Across the East Africa region and Yemen, tens of millions of civilians are already experiencing multiple interlocking humanitarian crises: protracted civil war, political instability, recurrent drought, floods and other climatic shocks, hunger and food insecurity, mass displacement, economic fragility, weak or damaged infrastructure - and now, the potentially catastrophic destruction of food crops and grazing land by swarms of desert locusts.

While Covid-19 itself does not discriminate, its collateral impact will disproportionately affect communities already contending with widespread humanitarian challenges, creating a seemingly impossible dilemma for countries at greatest risk: implement firm measures to prevent the spread of the virus, potentially to the detriment of other

humanitarian priorities; or sustain support for the broad scope of pre-existing humanitarian concerns, potentially risking public health.

It is however possible for countries to do both. It is the responsibility of all governments, those experiencing crises and those helping to address them, to facilitate humanitarian assistance on the basis of need. The tens of millions of people across East Africa and Yemen in need of humanitarian assistance must not see the threat of Covid-19 used for strategic purposes, or a reason to impede aid. Ongoing assistance must not be jeopardised. Public health measures and humanitarian access are not mutually exclusive endeavours; governmental actors, local authorities and humanitarian actors must work together to maximise both.

NRC defines humanitarian access as the ability of vulnerable people to access impartial assistance and protection from humanitarian actors. This also encompasses the ability of NRC and other humanitarian actors to access people with emergency aid and protection. The right of people

in need of humanitarian assistance is established in international law, as is the responsibility of governments and parties to armed conflict to facilitate rapid and unimpeded passage for humanitarian relief.

Across East Africa and Yemen, an estimated 48 million people are in need of humanitarian assistance or protection, and many more face similarly dire circumstances as a consequence of Covid-19 related restrictions on fragile economies. Many vulnerable people across the region were unable to access life-saving assistance even before the compounding impact of the disease, and now many humanitarian agencies are experiencing barriers to delivering it. International and domestic restrictions intended to curb the spread of the Covid-19 pandemic threaten to exacerbate existing challenges delivering humanitarian and protection assistance to those who need it most, exposing tens of millions of people to yet further risk.

Current Covid-19-related restrictions across East Africa and Yemen must be measured against pre-existing barriers to humanitarian access, and the relative risks for vulnerable populations in not having access to aid and protection. In many countries across the region, the current restrictions have resulted in the complete or partial suspension of many critical humanitarian activities, potentially creating a high risk of hunger, disease, abuse and exploitation for already vulnerable populations. Such restrictions include but are not limited to the following:

#### **Border closures:**

As is the case across most of the world, border closures have been implemented across the East Africa and Yemen region – Sudan, South Sudan, Uganda, Ethiopia, Djibouti, Eritrea, Somalia, Tanzania, Kenya, and Yemen – for the justifiable purpose of containing the spread of the virus. Yet humanitarian efforts have also been constrained. The suspension of some commercial and humanitarian flights has restricted the capacity of humanitarian organisations to move essential personnel, and delayed or disrupted cargo, both intended for the Covid-19 response, as well as

goods and materials required for other humanitarian purposes. Such as construction supplies for emergency shelter, food and cooking items, sprays and equipment needed to manage the threat of locusts on agricultural production. Humanitarian resources across all sectors remain critical to protecting people and communities from immediate threats to life and safety that extend far beyond Covid-19.

In addition, humanitarian operations rely on the ability of agencies to move staff to and from duty stations, or to bring in expert technical surge capacity when needed. Yet the current restrictions are creating challenges. For example, in the East Africa and Yemen region, NRC currently have 39 staff unable to access their duty stations, this places additional strain on regular operations, and impacts the scaling-up of operations in response to Covid-19.

#### **Movement restrictions:**

Restrictions on movement between cities or states has in many cases delayed the transportation of critical relief items, and risks disruption to market supply chains, leaving communities with limited access to basic supplies, and vulnerable to inflated prices on key commodities. Movement restrictions and social isolation have been critical elements of curbing the spread of Covid-19 in many countries, but also represent a risk in those where people most urgently require sustained access to markets and basic resources. In some cases, water tankers have been prevented from delivering clean water to congested IDP camps, while humanitarian staff are prevented from entering sites to deliver critical services such as building repairs, borehole installations and distributions of hygiene items. Such measures should therefore be implemented in a manner that minimises risk, while also ensuring critical assistance can be sustained.

#### **Maintaining lifesaving assistance:**

While Covid-19 is a direct concern to public health, humanitarian activities across all sectors remain critical to the safety and survival of large populations and must be allowed to continue, including within the parameters of ongoing efforts to mitigate the risk of Covid-19. Tens of millions of

people across East Africa and Yemen depend on sustained humanitarian assistance for food, safe water, sanitation and hygiene materials, shelter, education and protection. Such essential services must be provided by humanitarian organisations on the basis of need alone. Without access to these essential services, confinement will expose people to significant risks in the course of seeking out their basic needs, potentially exacerbating risks of Covid-19, as well as food insecurity, malnutrition, other diseases and severe protection concerns.

### **Stigmatisation:**

Displaced populations, both within national borders and across them, already commonly experience a higher risk of discrimination, more limited access to services, and restrictions on freedom of movement. With increasing measures to contain the spread of Covid-19, so too have communities become fearful and self-protective, creating additional risks for people moving to seek protection, including the risk of stigmatisation against particular groups.

Restrictions on movement and the stigmatisation of displaced populations represents a notable threat to access for these groups to humanitarian services and likewise places them at additional risk of exclusion, marginalisation or direct acts of violence. Fear and anger about Covid-19 having been brought to Africa from other parts of the world have in some cases translated to direct concerns about people from other continents or those working with them in humanitarian organisations, creating additional risks for humanitarian staff and impacting acceptance of humanitarian organisations.

### **Lack of humanitarian protection:**

The closure of land and sea crossings is affecting the capacity of people to flee violence, or seek protection in neighbouring countries. Added to which, over 3,263,00 refugees, across more than 36 refugee camps in five East African countries (Kenya, Uganda, Ethiopia, Tanzania and South Sudan) are currently experiencing restrictions on their movement, preventing people from leaving the confines of the camp, even where this is

required to access medical services or employment, or for other reasons, such as safety. Equally, in some cases, humanitarian actors have been prevented from entering refugee camps, even where measures are in place to mitigate risks of transmitting the virus.

In instances where people have circumvented border closures to cross into neighbouring countries unofficially, these people lack access to the usual channels of registration and protection. Many refugee reception centres have been closed, and those seeking protection risk being returned to places that are unsafe. People arriving without access to refugee status determination procedures may remain undocumented, creating challenges for host communities and diminishing access for vulnerable people to protection and assistance, which in turn exacerbates the risk of exploitation.

### **Ongoing insecurity/hostilities affecting humanitarian assistance:**

The intensification of fighting in some parts of Yemen during the first few months of 2020 has made access to humanitarian assistance for many newly displaced people even more difficult. Over the same period, tentative steps towards implementation of the peace agreement in South Sudan saw a reduction in clashes between armed groups. Yet, UNOCHA still reported 170 humanitarian access incidents in the first three months of 2020, an 18 per cent increase from the same period last year and largely attributed to localised inter-communal violence in areas that had not previously witnessed active armed conflict. In Somalia, humanitarian operations consistently face severe access constraints due to ongoing instability, intercommunal violence, military operations and extreme weather events, limiting the capacity of organisations to deliver sufficient assistance to 2.6 million displaced people and a total of 5.2 million people in need of humanitarian or development assistance in 2020.

In many cases across East Africa and Yemen, authorities have taken commendably swift action to reduce the risk of the virus spreading and engaged humanitarian actors in the planning and preparations to mitigate the spread of the virus. As

they do so, authorities must likewise take additional steps to facilitate humanitarian aid and allow humanitarian organisations to deliver this on the basis of need alone, without interference or complicated bureaucratic requirements. Pre-existing humanitarian needs across East Africa and Yemen, as well as those created by the pandemic, will extend beyond the virus itself. It is the responsibility of all governments and other authorities to identify and enable safe modalities by which humanitarian organisations can continue to deliver emergency assistance of all kinds to people who need it.

We acknowledge governments, donors and local authorities that are already taking actions to facilitate humanitarian assistance without interference. The need for modalities that enable sustained humanitarian assistance to people in need must be regarded as a matter of urgency.

NRC and other humanitarian partners remain committed to working with governments and relevant authorities to identify such modalities in the interests of protecting people in the East Africa region and Yemen from both the direct and indirect consequences of this crisis.

### Recommendations:

- Establish safe protocols that will enable the ongoing movement of humanitarian personnel into and out of countries in the region, including continued issuance and extension of visas, residency permits and work permits, and facilitation of humanitarian transport for key personnel
- Institute, in cooperation with humanitarian organisations, measures to safeguard public health, including standard operating procedures that set out quarantine and testing requirements for incoming humanitarian personnel
- Establish humanitarian corridors, and ensure that commercial supplies can reach land-locked countries or regions with minimal delays

- Commit to procedures that enable reception and protection centres to remain open for people forced to relocate internally, or across borders owing to conflict or climatic shocks, including registration and access to emergency assistance
- Make consolidated efforts to combat stigma relating to Covid-19, recognising this virus is a global health problem, the most effective response to which will involve solidarity across the region
- Communicate in advance, to the extent possible, changes to Covid-19 regulations. This will allow organizations to modify activities or areas of intervention and to best respond to humanitarian needs in the region