Aid Worker Security Report 2013
Preview: Figures at a glance

272 aid workers were victims of major attacks in 2012

66 killed
115 wounded
91 kidnapped

There were 167 separate, major attacks against civilian aid operations in 2012 – a record high.

Despite more attacks, fewer aid workers than last year were affected (a total of 272 victims, down from 308 in 2011).

Of these victims: 74 were shot, and 64 were victims of explosives and heavy arms including 12 that were caught in complex attacks (utilising combinations of suicide bombing and small arms fire).

Kidnapping remains the most prevalent, if less lethal, threat to aid workers in terms of numbers of victims affected, with 91 aid workers kidnapped in 2012.

The forthcoming Aid Worker Security Report (October 2013) will focus on the phenomenon of kidnapping as the nexus of criminal and militant activity that has surged in situations of asymmetric warfare over the past decade, and increasingly affected aid workers.

It is difficult to capture complete numbers of kidnappings, since many go unreported, with releases negotiated in secret. However the data suggest that the settings with the highest numbers of kidnappings tend to overlap those where the most violence against aid workers occurs overall. The five countries with the highest numbers of reported kidnappings in 2012 were, in descending order, Afghanistan, Pakistan, Yemen, South Sudan and Somalia.

Although it did not have any reported kidnappings, Syria entered the ranks of one of the most violent contexts in 2012 with a large number of aid workers caught in the cross fire or targeted by parties to the conflict. Since its independence in 2011, South Sudan continues to be a complex operational environment and attacks have been made with impunity.

The Aid Worker Security Report 2013 will unpack the data presented here including a special focus on aid worker kidnappings and provide the perspectives of humanitarian and security professionals on the risk of aid delivery in these violent operational environments.