

Somalia situation update issue 3

Clashes in Kismayo, Lower Juba | 5 July 2013



Key issues:

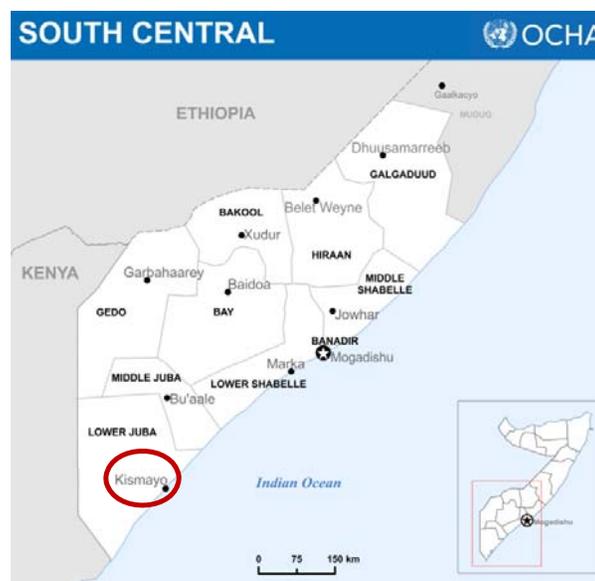
- The security situation in Kismayo was reported as calm albeit unpredictable by early July following the most recent spate of fighting between 28 and 30 June.
- Over 70 civilians were killed and about 300 injured in Kismayo clashes in June according to the latest figures from the World Health Organization.
- Recurrent violence is compounding existing access challenges and has the potential to cause supply pipeline breaks and increases in prices.

Situation overview:

- Kismayo town remains calm, but unpredictable, following armed clashes between 28 and 30 June. At least 71 people were killed and over 300 injured in June due to fighting in Kismayo, according to WHO. Continuing insecurity increases displacement of civilians, limits access to health care and amplifies the risk of outbreaks of cholera and other communicable diseases.
- According to the UN Refugee Agency (UNHCR), about 1,600 people, including about 970 females, fled Kismayo to villages in the Lower Juba region in June. People are reported to have started returning home after the latest flare up of fighting. Numbers are being confirmed.
- Humanitarian access remains challenging and logistics have emerged as a major bottleneck as aid workers have not been able to use the Kismayo port for months due to insecurity. Plans to deliver emergency supplies are being considered, security permitting.

Humanitarian impact:

- In addition to the killing and wounding of civilians, fighting in Kismayo has had manifold humanitarian consequences. A polio vaccination campaign targeting 24,000 people of all ages has been temporarily suspended – a grave concern in light of a wild polio virus outbreak that has resulted in 41 confirmed cases of polio in southern and central regions of Somalia in May and June.
- The Kismayo General Hospital has remained open during the clashes, but has been overwhelmed by the number of casualties and is experiencing a severe shortage of medicines. Fortunately, some new supplies have reached the hospital. On 1 July, 34 wounded civilians – mainly women, children and elderly persons – were evacuated to Mogadishu for medical treatment.



Background on the crisis

The volatile situation in Kismayo is linked to the effort to create a Jubaland federal state within Somalia. After weeks of verbal sparring between political opponents in the region following the contested election of the president of Jubaland state on 15 May, the political crisis developed into military confrontations in June. Although the issue was initially about political leadership between individuals, it quickly took on a clan dimension. Armed clashes erupted on 7 June between the rival political groups Ras Kamboni and forces loyal to Iftin Hasan Baasto. Fighting reignited on 28 June between Ras Kamboni forces and militia allied to Bare Hirale. The security situation remains tense although reportedly an uneasy calm had returned to the city by early July. The Federal Government of Somalia has announced it intends to organize a peace conference in Mogadishu.

Operational context:

- Several organizations reported in early July that they were resuming activities slowly after the fighting intensified in Kismayo at the end of June. However, serious humanitarian access constraints remain. Unless the situation stabilises, the humanitarian situation is likely to deteriorate. Recurrent violence is compounding existing humanitarian access challenges and has the potential to cause supply pipeline breaks and increases in prices.
- Polio vaccines and other supplies have not yet been delivered to Kismayo due to insecurity, although a special flight is being arranged. Access to Kismayo is only by sea or air, as there are no reliable overland routes. Delivery of supplies such as food by air is extremely costly.
- Nine UN staff were relocated from Kismayo in May due to insecurity. Some returned in June, but had to relocate again when fighting intensified. The NGO Safety Programme advised humanitarian actors against movement in the area in May. One aid worker was killed late June when off duty, assisting a wounded civilian. Another aid worker was wounded.

60,000

people in need of humanitarian aid in Kismayo (incl. emergency, crisis and stress)

42,000

people in emergency and crisis in Lower Juba

91,000

people in stress in Lower Juba

386,000

total population in Lower Juba

For more information, contact: Rita Maingi, Information Officer, maingir@un.org, Tel. (+254) 734800120

Disclaimer: This document is subject to availability of data by the time of circulation and does not claim to be exhaustive or fully verified. Depending on how the situation evolves another situation update may be issued.

Humanitarian activities:

The information below is a snapshot of activities and is being updated with humanitarian partners.

Cluster	Kismayo activities
 Education	<ul style="list-style-type: none"> Schools closed temporarily due to fighting 7-8 June. Schools closed again on 28 June due to renewed violence. Reportedly, the schools are now closed until the next semester and would reopen in August.
 Food security	<ul style="list-style-type: none"> The food security partners in Kismayo are implementing activities, which focus on the cluster's three response priorities: improved access to food, livelihood investment and safety nets. Based on the plans submitted by seven cluster members, an average of 94,500 people are targeted to receive assistance through these three response priorities (July to September). Focusing on the ability of partners to deliver, the security situation will likely have more adverse impact on the ongoing safety net responses, which provide cooked meals, on a daily basis, to protect vulnerable people compared to livelihood investment and improved access activities. After the June food distribution, WFP has a remaining balance of 89 metric tons of cereal, but no Plumpy Sup, oil, pulses or corn-soya blend. The total monthly requirement for all activities in Kismayo is some 400 metric tons of mixed commodities.
 Health	<ul style="list-style-type: none"> The main health facility is Kismayo General Hospital. WHO supports the trauma and surgical care department whereas DIAL supports MCH/outpatient services. Kismayo Hospital is partially functioning due to its current bad condition. Renovation and construction in the hospital was planned for July 2013 to establish a trauma centre and a maternity centre. The hospital is currently facing severe supply shortages and needs to be replenished. Fortunately, some new supplies have reached the hospital in recent days. WHO and partners prepositioned almost five tons of emergency medical supplies in Kismayo. Surgical equipment was provided to Kismayo General Hospital in October 2012. WHO supports major hospitals in Kismayo, Gaalkacyo and Mogadishu and has dispatched two inter-agency emergency health kits to Kismayo and two to Gaalkacyo. Numerous health partners have continued activities in Kismayo, treating minor injuries; major injuries have to be transferred to the overburdened Kismayo Hospital. In addition to casualties treated in Kismayo, WHO report about 60 injured people were referred to hospitals in Mogadishu and 51 to Gaalkacyo for further treatment.
 Logistics	<ul style="list-style-type: none"> The Logistics Cluster has not been able to utilise the port due to ongoing insecurity. Partners are looking into means of transport, security permitting.
 Nutrition	<ul style="list-style-type: none"> The current nutrition partners in Kismayo are DIAL (OTP and TSFP), Muslim Aid (OTP and BSFP), Himilo (TSFP), and MSF-SC. SRCS (OTP) also has nutrition programmes. Nutrition response continues in Kismayo town and nutrition partners reported more than 161 newly admitted severe acutely malnourished children aged 6 to 59 months in May. When fighting broke out in late June, partners temporarily closed operations for five days. Some programmes, which had run out of supplies, have been resupplied by warehouses in the area. However, in the short-term a low turnout is expected at nutrition programmes sites unless the security situation stabilizes. Indications from the field are that the current supplies would last up to two months.
 Protection	<ul style="list-style-type: none"> Kisima and SEDHUURO have ongoing population movement tracking/protection monitoring network programmes in partnership with UNHCR. The Protection Cluster has not received reports of significant increases in protection violations. If the situation deteriorates and the environment becomes militarized, medical response to sexual violence would be one of the immediate responses possible. The cluster will check whether PEP kits are available in Kismayo and if not would pre-position them.
 Shelter and NFI	<ul style="list-style-type: none"> The distribution of household items by ARC (in partnership with UNHCR) was disrupted due to the fighting. ARC distributed the remaining 534 kits on 3 July to registered households. ARC conducted an assessment in the other settlements that were not included in the former distribution but were affected by the clashes. An emergency stock was put aside for this.
 WASH	<ul style="list-style-type: none"> Construction of pit latrines and shallows in Kismayo settlements for displaced has been undertaken by Juba Foundation. About 30 pit latrines were constructed and 10 shallow wells rehabilitated. The project has been affected by fighting, resumption of activities to be confirmed. The cluster has flagged a need for a supply hub in Kismayo to ensure timely interventions and avoid supply shortages during emergency responses.