Snapshot 9–14 April 2015

**Afghanistan:** Security incidents have spiked in early April, after the announcement that more NATO troops would remain in the country than originally scheduled. NATO convoys were targeted in Nangarhar and Kabul on 10 April. On the same day, five NGO staff were found dead, having been abducted in Uruzgan province in early March.

**Kenya:** Following Al Shabaab’s attack on Garissa University, Kenyan officials said they had asked UNHCR to repatriate almost 350,000 refugees from Dadaab camp, though UNHCR said it had not received any official request. The Central Bank of Kenya has closed 13 Somali remittance firms based in Nairobi.

**Yemen:** Fighting continues to escalate. 650 people are reported dead, and nearly 2,000 people have been injured. Airstrikes have hit 18 of 22 governorates. In Aden, electricity and water supplies have been cut for days at a time. Al Dhale’e is inaccessible. Some 30% of armed group fighters are thought to be minors.

Updated: 14/04/2015. Next update: 21/04/2015
CENTRAL AFRICAN REPUBLIC  CONFLICT, FOOD INSECURITY, INSECURITY

For more information on CAR, visit the ACAPS country analysis page.

LATEST DEVELOPMENTS

10 April: A MINUSCA convoy was attacked on the route from Bambari to Bangui. In the same attack, civilian cars were damaged, 30 people were injured, and Fulani in the area burned 17 houses (local media, 11/04/2015).

10 April: 300–400 people protested against UN peacekeepers, who they claim failed to stop Fulani attacks, in Kaga-Bandoro, Nana Gribizi prefecture, resulting in one death and several wounded (Reuters, 10/04/2015; UNHCR, 10/04/2015).

8 April: The ex-Seleka and anti-Balaka signed a ceasefire agreement in Kenya. The agreement has not been accepted by the transition government so far (USAID, 10/04/2015).

KEY CONCERNS

- More than 5,000 people have died in violence since December 2013 (Government, 16/09/2014, BBC, 07/01/2015).

- 2.7 million of 4.6 million people needed immediate assistance, half of them children (OCHA, 18/03/2015). There are 854,070 people of concern (UNHCR, 05/12/2014).

- 1.5 million people are in Crisis and Emergency phases of food insecurity (USAID, 13/03/2015).

- 27% of the health facilities in the country are damaged and 40% are unable to offer health services (WHO, 31/01/2015).

- 177,530 IDPs in displacement sites and 49,100 IDPs in Bangui (OCHA, 19/12/2014; 07/01/2015; 04/02/2015; 18/03/2015).

- 451,400 CAR refugees in neighbouring countries, 191,616 of whom have arrived since December 2013 (UNHCR 06/03/2015).

OVERVIEW

Health, protection, food, and WASH are top priority needs, as continued violence, looting, and displacement cause further deterioration of an already dire humanitarian situation across the country. Violence between Muslim communities, perceived to have links with the ex-Seleka, and Christian communities, aligned with the anti-balaka militias, has resulted in displacement, targeted killings along communal lines, and human rights abuses.

Political Context

In late 2012, Muslim Seleka fighters advanced from the north, taking control of territory on their way to the capital Bangui, where they held power until December 2013. Seleka committed numerous abuses during their advance and rule, and self-defence militias composed of mainly non-Muslims, ‘anti-balaka’, began to carry out revenge attacks in late 2013. On 8 January, the UN Commission of Inquiry into human rights concluded that violence towards Muslims by anti-balaka in 2014 constitutes ethnic cleansing (Government, 20/01/2015). Most ex-Seleka members withdrew to the north at the end of 2013, but fighting persisted between ex-Seleka and anti-balaka, Muslim and Christian communities, and pastoralists and farmers.

The African Union had already deployed troops to CAR prior to Seleka’s assumption of power, but was overwhelmed by the severity and scope of the conflict. The African Union forces, MISCA, backed by France were deployed in December 2013 authorised by the UN. In mid-September 2014, the UN peacekeeping force took over operations under the name MINUSCA.

A transitional government was formed in August 2014. There will be no national elections before late 2015, and the long duration of the transitional government risks worsening the crisis (Missionary International Service News Agency, 01/09/2014). The ex-Seleka have rejected the transitional Government, and proclaimed a de facto, independent, secular state in northeastern CAR in July (IRIN 23/09/2014; Government, 24/07/2014). On 8 April, the ex-Seleka and anti-Balaka agreed a ceasefire, the transitional Government rejected a previous ceasefire (USAID, 10/04/2015).

Security Context

More than 5,000 people have been killed since December 2013 (BBC, 07/01/2015). More than 1,267 security incidents were recorded between January 2014 and 2015 (OCHA, 21/01/2015). 76 security incidents were reported in February 2015 (USAID, 10/04/2015).

Stakeholders
**Ex-Seleka:** Seleka is an alliance of factions created in 2012 and dissolved by President Djotodia in late 2013. However, many fighters remained active, and were dubbed ‘ex-Seleka’. With the exception of 17,114 confined to three military camps in Bangui, most moved out of the capital and had control of much of central and northern CAR by January 2014 (IRIN, 17/09/2014). Bambari, Ouaka reportedly became the ex-Seleka headquarters in May. Rival ex-Seleka groups have clashed on several occasions (Jeune Afrique, 27/10/2014). An estimated 12,000 fighters make up the armed ex-Seleka, including Muslims from the northeast, and Sudanese and Chadians (IRIN, 12/01/2015; international media, 30/09/2014).

**Anti-balaka:** The anti-balaka were formed in order to counter the Seleka; there are around 75,000 militants, though the numbers are contested, and their main leaders and political programme remain unknown (IRIN, 12/01/2015). After the coup and Djotodia’s resignation, many members of the former government army, the FACA, joined the anti-balaka. It is suspected that up to ten anti-balaka factions function in the vicinity of Bangui (IRIN, 12/02/2014). UN peacekeepers arrested anti-balaka leader, Rodrigue Ngai, on 17 January (Reuters, 18/01/2015).

**LRA:** Mbomou and Haut-Mbomou prefectures remain most affected by the Lord’s Resistance Army, which increased attacks as the political crisis left a power vacuum (OCHA, 10/11/2014). In January 2015, LRA militant Dominic Ongwen surrendered to US forces (BBC, 07/01/2015), a move that incited an increase in attacks by the LRA.

**UN peacekeeping mission (MINUSCA):** MINUSCA officially took over operations on 14 September 2014, under a one-year mandate. In March 2015, the number of peacekeepers was increased by 1,000, to better protect infrastructure and senior officials in Bangui, bringing the total to 13,000 uniformed personnel (Reuters, 26/03/2015).

**French forces:** Half of the French Sangaris peacekeeping mission of 2,000 is deployed in Bangui. Its mandate expires in April 2015, but troops will stay until late 2015, with a reduced presence of 800 (international media, 14/01/2015). Troops will begin decreasing their presence as MINUSCA increases the number of peacekeepers to 13,000 by late April (USAID, 13/03/2015).

**EU forces:** On 21 October, the 700-strong EU military operation in CAR (EUFOR-RCA) was extended to March 2015 to protect civilians and provide security for humanitarian operations in the Bangui area (Government, 07/11/2014) but left CAR the last week of March, less than 12 months after launching their operation (Deutsche Welle, 13/03/2015). The EU launched the EU Military Advisory mission (EUMAM RCA) on 19 January, with the objective of reforming the security sector (Government, 16/03/2015).

**US military assistance:** The US is providing logistical support, Special Forces, and advisers to African troops operating against the LRA in eastern and southeastern CAR.

**Conflict Developments**

Fighting is concentrated around six central and western prefectures: Mambere Kadei, Nana-Grebizi, Nana-Mambere, Ouaka, Ouham, Ouham-Pende, and Sangha-Mbaere (OCHA, 18/03/2015). The Batangafo-Bouca route (Ouham), Mbrès (Nana-Grebizi), Kabo (Ouham), Moyen-Sido (Ouham), Ngaoundaye (Ouham-Pende), Bambari (Ouaka), Kouango (Ouaka), and Bangui (3rd, 4th, 5th, 7th and 8th districts) are all of concern for protection (UNHCR, 26/03/2015).

**Recent Incidents**

**Nana Grebizi:** 300–400 people attacked a MINUSCA camp in Kaga-Bandoro in early April, because UN peacekeepers failed to stop raids by Fulani pastoralists (UNHCR, 10/04/2015; Reuters, 10/04/2015).

**Ouaka:** The area Lihoto in Kouango subprefecture has suffered 17 clashes between ex-Seleka and anti-balaka since June 2014 (ACTED, 19/03/2015). The arrest of alleged Muslim criminals led to the attack of a MINUSCA vehicle on the route from Bambari to Bangui. During the road stop, cars were battered and approximately 17 homes were burned (local media, 11/04/2015). Demonstrators in Bambari on 17 February clashed with anti-balaka and resulted in six deaths (USAID, 02/03/2015). On 7 February ex-Seleka and armed Fulani attacked Ngakobo IDP site, but UN peacekeepers repelled the attack (OCHA, 18/02/2015).

**Ouham-Pende:** On 14 March, an armed group attacked Ngaounday village, killing ten people (AFP, 17/03/2015).

**Humanitarian Context and Needs**

As of February 2015, 2.7 million of 4.6 million people need immediate assistance, half of them children (OCHA, 21/01/2015; 18/02/2015). There are 854,070 people of concern, including IDPs and CAR refugees in neighbouring countries (UNHCR, 05/12/2014). Delivery of aid is expected to decline because funding remains low (OCHA, 02/04/2015).

**Access**

Violent attacks, threats against aid workers, and roadblocks hinder the supply of humanitarian assistance outside Bangui (OCHA, 21/01/2015). Organisations delivering food assistance are challenged by road security (USAID, 13/03/2015).

**Trapped Communities**

At end February, more than 36,000 people, mostly but not exclusively Muslim, were trapped in seven enclaves across CAR (WHO, 28/02/2015). As of 10 December, priority areas included Bangui’s PK5 neighbourhood, Yaloke in Ombella Mpono, Berberati and Carnot in Mambere Kadei, Boda and Boganangone in Lobaye, and Bouar in Nana-Mambere (USAID, 19/12/2014). They require urgent humanitarian assistance, particularly protection, health, and nutrition (OCHA, 04/12/2014). Trapped Fulani in Yaloke (42 of whom have died since their arrival from other conflict areas in April 2014) travelled into the town for the first time in March following negotiations with local leaders (UNHCR, 23/12/2014; Reuters, 25/03/2015). They have resumed limited daily activities in town (USAID, 10/04/2015). On 21 March, looting in Yaloke IDP site caused heightened tensions (OCHA, 02/04/2015). Since 4 March, 20 IDPs in the family reunification process were relocated from Yaloke to Cameroon and others have departed of their own accord, escorted by MINUSCA (UNHCR, 03/04/2015).
Security Constraints

Bangui: Security incidents in Bangui’s PK5 region resulted in teachers fleeing their posts (OCHA, 04/03/2015). A site coordinator held by anti-balaka was released through a MINUSCA intervention in March (OCHA, 04/03/2015). The police station in Bangui opened in March (Reuters, 25/03/2015).

Ouaka: On 10 April, a MINUSCA convoy carrying food was attacked on the route from Bambari to Bangui (local media, 11/04/2015).

Security Incidents Affecting Aid Workers

UN, NGO, and private vehicles are becoming regular targets on main roads (IOM, 02/02/2015). On 9 February, armed men attacked the compound of an international NGO in Ouaka (OCHA, 18/02/2015). A female French charity worker was kidnapped in January and released four days later (Reuters, 19/01/2015). On 25 March, a medical worker was killed at a health centre in Gbokolobo village, Ouaka prefecture (OCHA, 02/04/2015). There were 22 serious security incidents against UN staff between December 2014 and March 2015 (USAID, 10/04/2015). 18 humanitarian workers were killed and six wounded in 142 incidents in 2014 (OCHA, 04/12/2014; USAID, 19/12/2014).

Ouham: On 18 February, armed men attacked an INGO in Batangafo, resulting in MSF suspending its mobile clinic activities in the region (OCHA, 04/03/2015). Aside from MSF, Solidarités International, DRC and Intersos have temporarily suspended activities due to looting and robbery in Kabo (07/04/2015). On 9 April, two cars from the Central African Red Cross were stolen (local media, 11/04/2015).

Displacement

It was estimated in March 2014 that 80–85% of Bangui’s minority Muslim population had fled or been evacuated.

IDPs

As of March, there are 436,300 IDPs in CAR. Some 177,530 are living in 108 sites countrywide (including Bimbo and Bangui), 225,360 people with host families, and 35,650 people in the forest (OCHA, 07/01/2015; 04/02/2015; UNHCR, 03/04/2015).

As of 7 January, there were 125,080 people in 74 sites in the Bimbo area, southwest of Bangui (OCHA, 18/03/2015).

Bangui: Relative improvements in the security conditions of some neighbourhoods outside Bangui have brought the number of IDPs in Bangui down to 49,100 in 35 sites. Some suggest this drop may be due to the poor condition of IDP sites (OCHA, 04/03/2015; IOM, 02/03/2015; UNHCR, 03/04/2015). The largest camps in Bangui are Aéroport Mpoko, Séminaire St Marc, and Mission Carmel (CCCM, 29/10/2014).

Between 17 February and 2 March, landowners threatened five IDP sites in Bangui with eviction: Complexe Scolaire Adventiste, Fédération des Déplacés, Saint Antoine de Padoue, Paroisse Fatima, and Saint Saveur (IOM, 02/03/2015).

Despite its planned closure being overdue, few have left Mpoko. 18,400 IDPs remain, afraid to return home (Reuters, 25/03/2015; USAID, 10/04/2015). 42% of households plan to resettle in new areas and 55% want to return to their place of origin, according to a survey of all households (OCHA, 18/02/2015; USAID, 27/03/2015). AVICOM is an alternative site, but does not have adequate services and only 350 people surveyed agreed to move there (USAID, 13/03/2015; OCHA, 02/04/2015). Priority needs include shelter and NFIs, WASH, and health (IOM, 05/01/2015).

Mambere-Kadei: An assessment of the Gamboula–Dilapoko route, on the border with Cameroon, reported 450 IDPs in Nassole, 160 IDPs in Korondo, and 800 IDPs in Gamboula. Most live with host families or in abandoned homes (ACF, 19/02/2015). In Amada Gaza, a host and transit site, 800 IDPs arrived between December 2014 and February 2015 due to attacks between Gbambia and the Cameroon border. They need NFIs, better access to water and schooling (Solidarités International, 05/03/2015).

Nana Gribizi: 1,584 IDPs were accounted for in a rapid response assessment on the Kagabandodo route, having fled clashes between farmers and anti-balaka. Priority needs are NFIs, WASH, food security and education (Solidarités International, 02/04/2015).

Ouham: A surge in violence resulted in the internal displacement of 30,000 people in Batangafo (UNHCR, 24/02/2015). There is a need for WASH services and access to education in Kabo and Moyen Sido (Solidarités International, 31/01/2015). Due to attacks in neighbouring villages, 1,060 IDPs in Kaboro village, Nana-Bakassa sub-prefecture, are in need of NFIs, food, and access to education (Action contre la Faim, 11/03/2015). Attacks in Ben Zamble over 1–13 February caused 1,215 people to flee toward Gbakala (ACF, 24/03/2015).

Ouaka: There are 57,000 IDPs in the prefecture at 12 March, 5,000 more than at end February (OCHA, 18/03/2015). In the first weeks of March, 3,000–4,000 IDPs arrived in Grimari, due to ex-Seleka and anti-balaka confrontations. They are in need of food, NFIs, and health assistance (OCHA, 04/03/2015; international organisation, 13/03/2015). Another 6,000 IDPs from the Grimari route and others from Lihoto Kouango subprefecture are living in Azengue-Mindoum commune, in Kouango subprefecture (UNHCR, 03/04/2015). This is an area that has suffered 17 clashes between ex-Seleka and anti-balaka since June 2014, resulting in displacement and NFI and WASH needs (ACTED, 19/03/2015). In a survey of the IDPs in Lihoto, only 11% of those surveyed have access to potable water, the only borehole in the village has not worked in seven years, and the school has been closed for the past three years due to insecurity (ACTED, 19/03/2015).

Eastern CAR: 26,520 people remain displaced by LRA activity (OCHA, 10/11/2014).

Refugees in CAR

8,100 refugees and asylum seekers are living in CAR (UNHCR, 26/03/2015). A rise in security incidents during the first half of February 2015 prompted 150 DRC nationals to request assistance to return to DRC (IOM, 16/02/2015).
CAR Refugees in Neighbouring Countries

As of 6 March, there are 451,400 CAR refugees in neighbouring countries, 191,616 of whom have arrived since December 2013 (UNHCR 06/03/2015). 244,800 are registered in Cameroon, 94,300 in Chad, 88,800 in DRC, and 23,500 in Congo (UNHCR, 06/03/2015).

The Chad–CAR border was officially closed in May 2014, but refugees continue to arrive at a number of border points (UNHCR, 07/2014).

Food access is restrained by reduced food production, lack of livelihoods, and high food prices (OCHA, 18/12/2014; FAO, 26/01/2015). Food crop production in 2014 was 58% below average, as a result of insecurity, looting, and the killing of livestock (OCHA, 04/03/2015). Food stocks in rural areas are 40–50% below average due to recurring raids. Fish supply has fallen by 40% and cattle-breeding by 77% compared to pre-crisis levels, and insecurity and poor road conditions have disrupted market linkages and led to significant increases in food prices: prices from March to August 2014 increased 30–70% (FAO, 26/01/2015; OCHA, 18/12/2014).

Farmers are in urgent need of seeds and equipment for April planting. (OCHA, 23/03/2015; FEWSNET, 02/2015).

Health and Nutrition

As of December 2014, two million people need access to health services (OCHA, 19/11/2014; OCHA 22/12/2014). 27% of the health facilities in the country are damaged, and 40% cannot offer health services (WHO, 28/02/2015). Only 25% of those offering services have functioning sources of energy, and 21% have access to water (WHO, 31/12/2014). Many health centres have been out of essential drugs for months due to access constraints (IFRC, 05/12/2014). There is a lack of access to health services in IDP sites (WHO, 31/10/2014).

Nutrition

Based on a national survey, the country has a SAM prevalence of 6.5% (UNICEF, 08/01/2015). For 2015, 32,350 children under five are projected to suffer from SAM and 78,340 from MAM (OCHA, 04/02/2015). In 2014, 28,000 children were severely malnourished and 75,500 moderately malnourished (OCHA, 04/12/2014; 18/12/2014). 195,790 people are in need of nutritional assistance (OCHA, 22/12/2014).

More than 2% of children are malnourished in seven prefectures, compared to only two in 2012 (UNICEF, 17/02/2015). According to the preliminary results of a SMART survey, there has been a reduction in GAM in Bangui, from 8% in 2012 to around 5% in 2014, likely due to the concentration of humanitarian activities in Bangui (WFP, 23/09/2014).

WASH

In Bondiba, Nana-Mambere, a community of around 1,300, with growing IDP numbers since December 2014, only 29% of functioning latrines are hygienic and the two water sources are poorly maintained (ACF, 13/02/2015). According to an assessment in Nola, Sangha-Mbaere, there are no working hygienic latrines, with the displaced population resorting to open defecation. 83% of those interviewed said they do not have easy access to drinking water (NRC, 06/01/2015).

2.3 million people do not have access to improved safe water or improved sanitation (OCHA, 23/09/2014; 22/12/2014). Western areas as well as Mbomou are most affected (OCHA, 31/10/2014).

In Lihotom, Ouaka prefecture, only 11% of the households surveyed have access to potable water, and the only borehole in the village hasn’t worked in seven years (ACTED, 19/03/2015).

Agriculture and Markets

Food access is restrained by reduced food production, lack of livelihoods, and high food prices (OCHA, 18/12/2014; FAO, 26/01/2015). Food crop production in 2014 was 58% below average, as a result of insecurity, looting, and the killing of livestock (OCHA, 04/03/2015). Food stocks in rural areas are 40–50% below average due to recurring raids. Fish supply has fallen by 40% and cattle-breeding by 77% compared to pre-crisis levels, and insecurity and poor road conditions have disrupted market linkages and led to significant increases in food prices: prices from March to August 2014 increased 30–70% (FAO, 26/01/2015; OCHA, 18/12/2014).

In Lihotom, Ouaka prefecture, only 11% of the households surveyed have access to potable water, and the only borehole in the village hasn’t worked in seven years (ACTED, 19/03/2015).
Shelter and NFIs

200 new IDPs in Notre-Dame de la Victoire IDP site in Bambari, Ouaka, need shelter and NFI assistance as well as 2,000 households in Nola, Sangha Mbaere, and Mala, Kemo (OCHA, 18/02/2015; IOM 02/03/2015).

An assessment in Nana-Mambere noted that NFI conditions are worrying for the displaced population in Sabewa village, Bouar subprefecture (ACF, 19/02/2015).

Education

Over 1.4 million children are in need of education (OCHA, 22/12/2014). Only 6,000–10,000 children were enrolled in school 2012–2014 (IRIN, 12/01/2015).

In Nola, Sangha Mbaere, 78% of school-aged children are not in school, primarily for security reasons (NRC, 06/01/2015). In Banqui’s PK5 district, teachers have been leaving due to insecurity, resulting in 60,000 school-aged children in need of safe learning spaces (USAID, 13/03/2015). Schools are due to reopen, but this is perceived risky due to persistent insecurity (OCHA, 02/04/2015).

Protection

Crimes against humanity and war crimes have been, and continued to be, reported. Ex-Seleka are listed for child recruitment, killing, rape and other forms of sexual violence, and attacks on schools and/or hospitals. Anti-balaka are listed for child recruitment, and killing and maiming (Watchlist on Children and Armed Conflict, 04/11/2014).

432 children were killed or maimed by violence in 2014 (OCHA, 04/12/2014). The number of children recruited into armed groups has risen to 8,000–10,000, from 2,500 at the beginning of the crisis (The Guardian, 18/12/2014; OCHA, 02/04/2015).

Updated: 13/04/2015

DEMOCRATIC REPUBLIC OF CONGO CONFLICT, FOOD INSECURITY, EPIDEMIC, DISPLACEMENT

LATEST DEVELOPMENTS

10 April: Heavy rains have left approximately 9,700 people without shelter in South Kivu and damage to infrastructure has restricted humanitarian access (OCHA, 10/04/2015).

6 April: Ten FARDC soldiers were killed in Masisi territory, North Kivu, during the offensive against the FDLR (local media, 08/04/2015; Reuters, 08/04/2015).

KEY CONCERNS

- Internal conflict in the eastern provinces of Orientale, North Kivu, South Kivu, and Katanga.

OVERVIEW

Needs are highest in the conflict-affected regions of North Kivu, South Kivu, Katanga, and Orientale, where there is large-scale, repeated displacement. IDPs, host populations, and those unable to flee are all vulnerable, as insecurity poses multiple protection risks and prevents access to basic services. Needs vary according to geographic area and conflict dynamics.

Political violence and inter-communal strife have persisted for decades, influenced by longstanding tensions with DRC’s eastern neighbours. Operations by DRC armed forces and UN peacekeepers and infighting between armed groups disrupt security and stability.

Political Context

National Political Context

In September 2014, over 2,000 people took to the streets of Kinshasa to protest a bid by President Kabila to modify the constitution so he could stay in power beyond his two-term limit, which should end in 2016 (AFP, 27/09/2014). On 19 January, up to 42 people died in protests in Kinshasa, after a census was proposed, which could also potentially prolong President Joseph Kabila’s term (AFP, 22/01/2015). Parliament voted against the legislation, but doubts remain regarding when in 2015 the preliminary local, provincial, and senatorial polls will be held (AFP, 25/01/2015).

Five pro-democracy activists, members of the LUCHA protest organisation, were arrested in Goma on 7 April; many suggest this is due to the upcoming presidential election (Reuters, 07/04/2015).

Security Context

At least 40 armed groups are operating in the east of the country (ECHO, 22/10/2014). They range from local militias set up initially as self-defence groups (among them many Mayi-Mayi groups), to secessionist groups, and forces first set up by fighters from Uganda (LRA and ADF/NALU), Rwanda (FDLR) and Burundi (FNL). The UN has a peacekeeping mission (MONUSCO), and an EU mission providing assistance to security sector reform (EUSEC) was extended until 30 June 2015 (EU, 25/09/2014). The UN and the Government
Democratic Forces for the Liberation of Rwanda (FDLR) are mainly Hutu Rwandans who were allegedly linked to the genocide. An estimated 1,400 fighters are active, primarily in the Kivu region (Reuters, 22/03/2015).

Mayi-Mayi: At least 20 Mayi-Mayi groups, formed by local leaders along ethnic lines, are active in North Kivu, South Kivu, and Katanga. The number of fighters can range from 100 to 1,000 (AFP 2013).

Allied Democratic Forces/National Army for the Liberation of Uganda (ADF/NALU) is a Muslim militant group founded in the 1990s. MONUSCO and the FARDC launched a second operation in North Kivu to neutralise the group in January 2015 (Radio Okapi, 07/01/2015). On 10 January, two camps were taken from the ADF in Beni Territory (Radio Okapi, 10/01/2015). ADF activity decreased in January, but by early February attacks against villages in Beni territory have increased (AFP, 04/02/2015; 20/03/2015).

Lord’s Resistance Army (LRA), founded by Joseph Kony in Uganda in 1987, has spread to South Sudan and subsequently to DRC and CAR (IRIN).

National Liberation Forces (FNL) are Burundian militants based in South Kivu (AFP 2013).

The armed forces of the DRC (FARDC) comprise 120,000–130,000 fighters (Defence Web, 2013). Two generals have been accused of human rights abuses, but remain active. As a result, the UN withdrew military support for FARDC operations against FDLR in 2015 (AFP, 05/02/2015). Seven army and police officers were banned from receiving MONUSCO support in March 2015 because they pose a risk of committing human rights violations (Reuters, 11/03/2015).

The UN Stabilization Mission in DRC (MONUSCO) is made up of almost 20,000 troops, as well as military observers and police units. The initial mission, MONUC, was established after the signing of the 1999 peace agreement between DRC and five regional states. In March 2014 its mandate was expanded, with the creation of an Intervention Brigade, charged with neutralising armed groups (RFI, 20/10/2014). MONUSCO’s mandate was extended for another year in March 2015, although its force was cut by 2,000 troops. Any further cuts in numbers will depend upon progress against armed opposition forces (Reuters, 26/03/2015; AFP, 26/03/2015).

Conflict Developments

Despite a strong push from the African Union to accept UN military assistance for an offensive against FDLR, the FARDC refused, launching its first attack on 24 February in South Kivu, and then moving to North Kivu territory, where most FDLR operate (AFP, 23/02/2015, 24/02/2015; 26/02/2015). Three weeks after beginning this offensive, the majority of the FDLR remain active in North and South Kivu (Reuters, 22/03/2015; Radio Okapi, 17/03/2015). Recent reports suggest that most FDLR are fleeing into the forest rather than risking combat (Reuters, 08/04/2015).

MONUSCO and FARDC launched an offensive in early January 2015 against FNL militants in South Kivu as well as a renewed attack against the ADF in Beni territory, North Kivu (Radio Okapi, 06/01/2015; 14/01/2015). Since January, the Luba and Batwa have frequently clashed in Kalemie, Manono, and Nyunzu territories (OCHA, 08/04/2015). Ten people were killed by armed Batway in a village close to Kalemie in March (Radio Okapi, 06/04/2015).

Beni territory: Reportedly, ADF fighters are no longer present in a number of localities, including Abya, Mavume, and Pilote and Issa camps (UN, 12/01/2015). Between 2 and 4 February, 23 people were killed and one wounded by ADF militants, in the first attack since mid-December (AFP, 04/02/2015). Four were killed in an ADF attack in March (AFP, 20/03/2015).

Masisi: Communities in Masisi territory say they have seen FDLR activity despite the FARDC having pushed them out. Many humanitarians are leaving due to insecurity (Radio Okapi, 27/03/2015). Ten soldiers were killed on 6 April, including three officers (Reuters, 08/04/2015; local media, 08/04/2015).

Rutshuru: Six UN peacekeepers were injured in an ambush on the night of 8 April (10/04/2015).

South Kivu

Since the start of military operations against FNL on 5 January, four of 20 active armed groups in the region, not solely FNL, have been dismantled (Radio Okapi, 13/01/2015).

Orientale

The Front of Patriotic Resistance in Ituri (FRPI), LRA, and Mayi-Mayi Simba are all active in Orientale.

LRA: On 15 January, the LRA kidnapped 12 people in Bili (Radio Okapi, 16/01/2015). They are also accused of killing three people and injuring four others during an attack on 16 February (Radio Okapi, 17/02/2015). Attacks and abductions decreased significantly between the second and third quarters of 2014, although the number of deaths increased from one to 15 (OCHA, 10/11/2014).

FRPI: An attack on an IDP camp during the night of 8–9 March killed 12 and injured others (AFP, 10/03/2015). On 10 March, FRPI killed two civilians and raped ten women in Ngao locality; another attack on 8 March injured 12 people (OCHA, 19/03/2015). FRPI has increased attacks on the civilian population in Irumu territory (Radio Okapi, 09/04/2015).

Mayi-Mayi: On 17 February, four were killed and 10 injured in an attack on Ezekere village (local media, 19/02/2015).

Katanga

Active armed groups in Katanga include the Mayi Mayi Kata Katanga, the Mayi Mayi Gedeon, and the Corak Kata Katanga. Since January, the Luba and Batwa have frequently clashed in Kalemie, Manono, and Nyunzu territories (OCHA, 08/04/2015). Ten people were killed by armed Batway in a village close to Kalemie in March (Radio Okapi, 06/04/2015).
Okapi, 11/03/2015). From 17–19 March, Kabumbulu, Kazenga and Kyapeswe in Malemba Nkulu territory were attacked: houses were burned and looted, and some people kidnapped (Radio Okapi, 27/03/2015). In February, 45 people were killed in Batwa attacks (Radio Okapi, 20/02/2015; AFP, 25/02/2015).

Since early 2015, Katanga’s triangle of death, composed of Pweto, Manono and Moba territories has experienced a decrease in Mayi Mayi attacks (Radio Okapi, 17/03/2015).

Equateur

Clashes in January between two villages, Ngbada in Kungu territory and Lingotebe in Gemena territory, have caused the populations to flee and resulted in five dead (Radio Okapi, 25/01/2015).

Humanitarian Context and Needs

6.3 million people need humanitarian assistance (WFP, 06/01/2015).

Access

The mountainous and volcanic terrain, and lack of tarred roads limit access across DRC, and access worsens during the rainy season. In the east, insecurity is a major constraint.

North Kivu: Humanitarians are leaving areas of Masisi territory due to insecurity (Radio Okapi, 27/03/2015).

Katanga: An important trade route connecting the villages of Kabwela and Kakuyu in Katanga has reopened after being cleared for landmines (Mines Advisory Group, 17/03/2015).

Security Incidents Affecting Aid Workers

In North Kivu, an international UN staff member was robbed on 3 April in Rutshuru territory (OCHA, 08/04/2015). An international NGO was robbed in Rutshuru territory on 22 March (OCHA, 24/03/2015). On 9 March, four workers from an international NGO were kidnapped (OCHA, 17/03/2015).

In 2014, 188 incidents involved aid workers; six aid workers were killed (OCHA, 15/12/2014). North Kivu registered 120 security incidents against humanitarian aid workers in 2014, mainly in the city of Goma and Masisi territory (OCHA, 27/01/2015).

Disasters

Floods

Katanga: 48,000 people were affected by floods due to heavy rains in January, including 30,000 who were left without shelter in Bukama, Kabalo, Kasaji, Kasenga, Mulono and Malemba Nkulu territories (OCHA, 12/02/2015; 18/03/2015). More than 5,000 homes were destroyed by rains in Haut Lomami. Roads were blocked and crops damaged (Radio Okapi, 22/01/2015). 30,000 people were left without shelter in Haut Lomami. Roads were blocked and crops damaged (Radio Okapi, 22/01/2015). 30,000 people were left without shelter in

Orientale: Heavy rains in Durba, on 3 April destroyed 85 homes, leaving more than 400 people without shelter (Radio Okapi, 03/04/2015).

South Kivu: Heavy rains have left approximately 9,700 people without shelter. 16 have died and 12 are missing. Due to the poor road conditions and damage to Kamvimvira and Kawizi bridges, Uvira territory, humanitarian access is very limited (OCHA, 10/04/2015).

Displacement

IDPs

At end February, there were 2.7 million IDPs in DRC, including 609,600 displaced in 2014 (UNHCR, 28/02/2015). 37,800 were displaced between October and December 2014, 45% fewer than in the previous quarter (OCHA, 21/01/2015). 80% of IDPs are hosted by families and communities who are already facing chronic food insecurity and limited access to services and livelihood opportunities (FAO, 20/11/2014).

North Kivu

North Kivu hosts 942,000 total IDPs at the start of April (OCHA, 17/01/2015; 28/02/2015; 08/04/2015). 41,800 were newly displaced in February 2015 in Beni, Lubero, Masisi, Rutshuru, and Walikale territories (OCHA, 11/03/2015). 78% of IDPs live with host families and 22% in IDP sites, most of which are near Goma, and authorities are moving to close the sites down for security reasons (OCHA, 28/02/2015; AFP, 03/12/2014). The IDP breakdown per region is: 19,300 in Goma city; 172,500 in Beni; 158,500 in Lubero; 238,800 in Masisi; 103,500 in Rutshuru; and 249,800 in Walikale (OCHA, 28/02/2015).

More than 27,000 IDPs, returnees and members of host communities need humanitarian assistance in Masisi and Walikale territories (OCHA, 11/02/2015). Due to the FARDC offensive against the FDLR, young people are fleeing their homes, fearing being forced to carry military equipment (Radio Okapi, 03/03/2015).

Beni: The 89,000 people (17,700 families) displaced after attacks in November are thought to be in Bulongo, Kasindi, and Lume localities and need NFIs, shelter, and access to health (OCHA, 11/03/2015; 09/12/2014; UNHCR, 19/12/2014). More than 18,000 IDPs in Mamove and Samboko localities need multisectoral humanitarian assistance, according to an evaluation of 15–20 January (OCHA, 29/01/2015). There are more than 5,500 new IDPs in Beni territory since early March (OCHA, 11/03/2015).

Lubero: About 3,000 people from Luhanga and Kalevya localities have been affected by armed group clashes and 1,000 were displaced in southwest Lubero (OCHA, 11/03/2015).

Masisi: More than 2,100 IDPs need NFIs, and another 1,000 new IDPs were registered in the territory 17–24 February (OCHA, 04/02/2015; 24/02/2015). Some 3,800 people fled to the bush and other villages on 6 March because of the FARDC offensive against FDLR in Kitchanga and Bibwe (OCHA, 11/03/2015). 1,200 people have fled clashes between FARDC and APCLS (OCHA, 24/03/2015).

Walikale: Some 8,400 people were displaced following clashes between FARDC and a
faction of Raiya Mutomboki (Radio Okapi, 03/03/2015). Since 10 February, 20,200 people were displaced within Pinga due to tensions between the FDLR and Nduma Defence of Congo (OCHA, 17/03/2015). Another 3,500 IDPs were reported in west Walikale and are living with host families (OCHA, 17/03/2015). Approximately 550 IDPs were identified in Kibua centre (OCHA, 08/04/2015).

South Kivu

At 31 December 2014, there were 609,560 IDPs are in South Kivu (OCHA, 10/04/2015; 23/01/2015). More than 21,600 IDPs (4,000 families) are in need of assistance in Walungu and Shabunda territories (OCHA, 28/01/2015). The FARDC offensive against the FDLR displaced more than 20,200. These have primarily been short-term displacements. Another 44,000 people have limited mobility. Poor access and limited humanitarian presence make it difficult to measure the impact of the offensive on the population, especially in Mwenga territory (OCHA, 19/03/2015). Approximately 6,500 people have been displaced following clashes between the FARDC and the Mayi Mayi Yakutumba in southern Fizi territory (OCHA, 10/04/2015).

Orientale

During the fourth quarter of 2014, there were 543,700 IDPs in Orientale province as well as 342,000 returnees (OCHA, 19/02/2015). Around 300,000 people are displaced in Ituri district, including 60,000 IDPs from North Kivu (OCHA, 23/12/2014). Of the 60,000, 12,600 IDPs in Tchabi are living in poor conditions and in need of medicine; 60% are children (Radio Okapi, 16/01/2015). Some 1,620 people have left two villages in Ango territory due to LRA security threats (Radio, Okapi, 25/03/2015). More than 10,000 IDPs in CEBCA, Adventiste, Bolombia, and Ngombenyama IDP sites in Omanda locality refuse to be relocated (OCHA, 08/04/2015).

Katanga

Katanga hosts 551,300 IDPs, including 43,300 displaced in the fourth quarter of 2014 (OCHA, 16/01/2015; 19/02/2015). 80% of IDPs are living with host families. Displacement is triggered by armed attacks and by inter-communal violence.

About 16,500 new IDPs were registered in March in Malemba Nkulu and Pweto territories (Radio Okapi, 27/03/2015). Pweto territory hosted 166,400 IDPs as of 31 December 2014 (OCHA, 18/03/2014).

Violence between Batwa and Luba displaced 27,000 people in February (UNHCR, 28/02/2015).

Maniema

Maniema has 181,500 IDPs as of 30 March (OCHA, 19/02/2015; 02/04/2015). 30% of IDPs are located in Pangi, 26% in Puni, and 20% in Kasongo (OCHA, 14/11/2014).

2,700 people were displaced from Fizi territory in South Kivu to Kabambare following clashes on 23 March between the FARDC and Mayi Mayi Yakutumba. On 25 and 26 March, clashes between Mayi Mayi Yakutumba caused further displacement in Munzanza, a mining site (OCHA, 02/04/2015).

Refugees in DRC

DRC hosts more than 221,700 refugees (UNHCR, 28/02/2015). DRC provincial authorities insist that assistance should only be delivered within camps, making it difficult to support refugees in host communities.

From CAR: As of 26 March, there were 90,900 CAR refugees in DRC, 46,150 of whom had arrived since December 2013 (UNHCR, 03/04/2015; 26/03/2015; 06/03/2015; 13/02/2015). 30,000 arrived in Equateur province over December 2014 and January 2015 (Radio Okapi, 28/01/2015). Another 2,400 people arrived in Mobai, Equateur, in mid-February (UNHCR, 24/02/2015; OCHA, 18/02/2015; UNHCR, 13/02/2015). A new refugee camp for 19,000 is being built in Bili, Bosobolo territory (Radio Okapi, 10/02/2015). The transfer of refugees to Bili started on 13 March and is expected to last 14 weeks (Radio Okapi, 14/03/2015). As of 5 April, there were 2,050 CAR refugees in Bili camp (UNHCR, 03/04/2015).

From Rwanda: DRC is hosting 117,300 Rwandan refugees (UNHCR, 28/02/2015; 30/10/2014; UN 30/12/2014).

From Angola: There are 560 Angolan refugees registered in DRC, and 28,000 are undergoing voluntary repatriation (UNHCR, 28/02/2015). 13,930 Angolan refugees had been repatriated by the end of February (UNHCR, 28/02/2015).

From Burundi: At 30 December, 9,260 Burundian refugees were in DRC (UNHCR, 28/02/2015; 28/01/2015; 30/12/2014).

Returnees

North Kivu: In January 2015, there were 25,900 returnees to North Kivu (OCHA, 06/02/2015). Some 6,300 people returned to Rutshuru territory in March due to a renewed peace (OCHA, 17/03/2015). 760 spontaneous returnees from camps in Uganda were registered in Rutshuru territory (UNHCR, 28/02/2015).

Katanga: During the fourth quarter of 2014, 86,795 new IDP returnees were counted in Katanga (OCHA, 16/01/2015). At 31 December, Pweto territory had 65,700 returnees (OCHA, 18/03/2015). More than 9,000 returnees have arrived in Moba territory since November 2014 and need assistance (OCHA, 12/02/2015). More than 5,300 returnees who arrived in Kasenga Ngayie locality, Moba territory, in February 2015 need multisectoral assistance (OCHA, 08/04/2015).

Maniema: As of 30 March, there were 252,240 returnees (OCHA, 02/04/2015).

Orientale: On 8 February, villagers returned to Nakale, Dungu territory, after being displaced by LRA attacks on 15 January (Radio Okapi, 08/02/2015). 3,000 returnees are awaiting registration in Ango territory (OCHA, 24/02/2015).

South Kivu: At 31 December, there were 256,740 returnees (OCHA, 10/04/2015).
Returnees from CAR: Around 100 refugees returned to DRC through Ango territory in Orientale end December, due to inter-communal violence in Zemio (Radio Okapi, 24/12/2014).

DRC Refugees in Neighbouring Countries

There are around 442,600 DRC refugees in neighbouring countries, mainly in Uganda (187,800), Rwanda (74,000), Burundi (47,900), Tanzania (55,900), Zambia (8,500), Angola (7,000), Congo (23,400), Kenya (17,300), South Sudan (15,220), and CAR (5,300) (UNHCR, 01/01/2015; 01/11/2014).

Food Security

6.5 million people are facing IPC Phase 3 (Crisis) or 4 (Emergency) food insecurity as a result of armed group activity, inter-communal violence, and displacement (Integrated Food Security Phase Classification, 28/01/2015). The food security situation in DRC is worsening due to low agricultural productivity, limited access to land, and frequent flooding, with an increase of about 523,000 people in the Emergency phase (Integrated Food Security Phase Classification, 28/01/2015).

Seven territories are facing Emergency, including Manono, Mitwaba, and Pweto territories in Katanga province; Punia territory in Maniema province; Shabunda territory in South Kivu; Irumu in Orientale; and Boende territory in Equateur. 61 other territories are facing Crisis (Integrated Food Security Phase Classification, 28/01/2015). In Katanga, 1.3 million people are facing food insecurity from December 2014 until June 2015, 11% more than in the previous seasonal cycle (OCHA, 05/02/2015).

Agriculture and Markets

500 hectares of maize, banana, rice, bean, and cowpea crops were destroyed by a locust infestation in Buta, Orientale, in December (Radio Okapi, 27/12/2014). Flooding in November caused up to 80% crop losses in Basoko territory, Orientale province. Prices for basic food products have risen (Radio Okapi, 18/11/2014).

In Nyamilima, North Kivu, farmers are concerned that they cannot sell their products for lack of access to markets. Their crops now rot or are taken to Uganda, for lower profits (Radio Okapi, 18/01/2015).

Farmers in Kipushi, Katanga, are concerned about the upcoming harvests in May 2015 due to the current slow growth of maize and beans (local media 06/04/2015).

Health and Nutrition

23,000 people in Masisi territory, North Kivu, do not have access to health services (OCHA, 11/02/2015). The health centre in Beni, North Kivu, has had a shortage of medicine since 23 February due to the rise in the number of IDPs (OCHA, 11/03/2015).

32 children died from anaemia in Equateur province in January and February (Radio Okapi, 11/03/2015).

Cholera

By 8 February, 2,955 cases of cholera had been reported, and 22 deaths countrywide, compared to 2,796 cases for the same period in 2014 (UNICEF, 27/02/2015). The high number of cases is partly attributable to poor WASH: fewer than 35% of homes have access to safe drinking water, and only 5% use improved toilets (OCHA, 04/03/2015).

In Katanga, 2,000 cases and 37 deaths were recorded between January and 2 April (UN 02/04/2015; OCHA, 18/03/2015). On average 662 cases of cholera are reported per month in South Kivu (OCHA, 04/03/2015). In Beni territory, North Kivu, more than 40 new cases of cholera were recorded 10–17 March (OCHA, 24/03/2015). As of 6 April, 75 cases of cholera and five deaths were reported in Orientale (OCHA, 08/04/2015).

In 2014, there were 22,200 cases of cholera and 372 deaths, compared to 26,440 cases in 2013 (WHO, 31/12/2014; UNICEF, 24/12/2014). In North Kivu, 7,341 cases of cholera were reported in 2014 compared to 4,393 in 2013 (OCHA, 31/12/2014). Over 7,000 cases including 300 deaths were recorded in Katanga in 2014, compared to 13,726 cases and 348 deaths in 2013 (Radio Okapi, 07/11/2014; OCHA, 30/10/2014).

Nutrition

Over two million children under five suffer from acute malnutrition (Radio Okapi, 04/11/2014). At May 2014, three provinces were above the 10% emergency threshold: Maniema (22.7%), Bas-Congo (11%), and Bandundu (10%). In Maniema, SAM was recorded at 8.6% (Government, 05/2014).

108 cases of malnutrition were recorded in Lubumbashi November–December due to shortages of therapeutic food (Radio Okapi, 20/12/2014).

WASH

Inke and Mole refugee camps, provide an average of 10.5L of water per person per day, significantly below standards (UNHCR, 03/04/2015; 26/03/2015).

Access to water in Bunia, Orientale province, is limited (Radio Okapi, 25/03/2015).

Only 40% of the population of Maniema province have access to potable water (OCHA, 02/04/2015).

Heavy rains in Uvira territory, South Kivu, have destroyed latrines (OCHA, 10/04/2015).

Shelter

In Katanga, approximately 104,000 people lost their homes to natural disasters in 2014 (OCHA, 12/02/2015).

More than 235 people in Yamwanda village, Equateur, lost their homes to fire during a month of intercommunal violence (Radio Okapi, 02/04/2015). Heavy rains on 3 April destroyed more than 85 houses in Durba, Orientale (Radio Okapi, 04/04/2015).

An estimated 9,670 people were left without shelter in Uvira territory due to heavy
rains and (OCHA, 10/04/2015).

Education

7.3 million children aged 5–17 – 28% of the school-aged population – are not attending school (Radio Okapi, 10/03/2015).

Only 40% of school-aged children are attending school in Equateur (Radio Okapi, 07/02/2015). In Katanga, 3,600 students in Malemba Nkulu have not had access to school since 15 January due to insecurity (OCHA, 12/02/2015). Another 6,000 school-aged children are out of school in Kalemie, Nanono, and Nyunzu territories due to clashes between Batwa and Luba, fires, and heavy rains in their localities (OCHA, 08/04/2015). Five schools have been closed since October 2014 in Manono territory, Katanga, affecting 950 students (Radio Okapi, 31/03/2015).

Attacks on schools in North Kivu in February are affecting education (OCHA, 24/02/2015). In Rutshuru territory, confrontations between the FARDC and the FLDR are compromising school activity (OCHA, 24/03/2015).

In South Kivu, 35 primary schools in Shabunda territory were shut down due to insecurity in January, affecting 6,800 students (OCHA, 28/01/2015).

Protection

Military, militias, and other armed groups are all accused of repeated abuses against civilians, including arbitrary arrests, extortion, looting, child conscription, sexual violence, and executions. In Orientale, for example, 12,300 protection incidents against civilians were reported in 2014, compared to 4,800 in 2013 (OCHA, 04/02/2015). In Ituri territory, more than 360 protection cases were reported against civilians between 3 and 7 February (OCHA, 11/02/2015).

At least 300 people remain illegally detained following protests against electoral law changes during the week of 19 January (OHCHR, 06/02/2015).

An NGO report determined that 40% of Orientale’s surface contains mines (Radio Okapi, 04/04/2015).

Kidnapping

Between 8 and 17 March, 26 kidnappings were reported in North Kivu, including four INGO staff (OCHA, 17/03/2015).

Child Protection

4,500 child soldiers left armed groups to be reintegrated into society in 2014 (Radio Okapi, 03/03/2015). In Orientale province, 450 children are still active in armed groups (OCHA, 24/02/2015).

SGBV

Sexual violence has been a common element of warfare by the armed groups and soldiers in eastern DRC since the breakout of war in the early 1990s. Not only is it one of the highest in the world, but is considered a threat to a person’s physical and mental health.

2,860 cases of rape have been registered in Karibuni Wamama hospital in Bunia, Orientale province, since 2010. Due to insecurity, the number of rapes reported increases each year, particularly in Ituri territory (Radio Okapi, 05/04/2015).

In Orientale, FRPI are using sexual violence. In Bunia, Irumu and Mambasa territories, 42 cases of sexual violence were reported in February 2015 (OCHA, 19/03/2015). 90% of the 2,900 cases of SGBV reported in Orientale in 2014 occurred in Ituri territory, the others in Uele territory (OCHA, 08/04/2015).

Approximately 100 minors were raped in January 2015 in Kalemie, Moba, and Pweto in Katanga province (Radio Okapi, 19/02/2015). In the past year and a half, rapes of young children and babies have been reported (AFP, 19/03/2015).

1,680 SGBV cases were reported in 2014 in Katanga and 840 in Kasai-Occidental (OCHA, 05/02/2015; Radio Okapi, 11/02/2015). 2,012 were reported in Orientale province, and 1,123 in Bas-Congo (OCHA, 10/12/2014, 03/12/2014; Radio Okapi, 27/11/2014).

Updated: 13/04/2015

NIGERIA CONFLICT, FOOD INSECURITY, EPIDEMIC, DISPLACEMENT

For more information, visit the ACAPS country analysis page.

LATEST DEVELOPMENTS

6 April: Suspected Boko Haram (BH) raided Kwajaffa village, Borno state, killing residents and setting fire to several buildings (AFP, 06/04/2015).

4 April: At least four people were killed in a BH raid on Kayamla village near Maiduguri (AFP, 04/04/2015).

1 April: An explosion outside a bus station that killed ten people was blamed on BH (AFP, 04/04/2015).

31 March: 6,000 people displaced by fighting have fled to Maiduguri, where authorities opened a new camp. However, only 10% of IDPs at the camp have a roof, WASH facilities are lacking, and many people have to rely on relatives for food (MSF, 31/03/2015).

KEY CONCERNS

- Over 2014, 7,711 deaths due to Boko Haram-related violence were reported by media sources, representing over half of BH-related deaths in the country since May 2011 (ACLED, 11/01/2014).
- 1.2 million IDPs (IOM, 02/2015).
- 4.6 million people are moderately food insecure (OCHA, 04/03/2014). Conflict-affected households will remain in Crisis (IPC Phase 3) levels of food insecurity until at least September. Most IDPs continue to need food assistance (FEWSNET, 07/01/2015).

- As of February 2015, 461,000 children under five suffer from severe acute malnutrition (OCHA, 10/02/2015). 1.5 million people are in need of nutrition assistance

- 2.2 million people are in need of WASH assistance; 1.9 million in need of Shelter and NFI assistance; 2.2 million in need of Protection; and 3.5 million people are in need of Healthcare (OCHA, 03/2015).

- 35,996 cholera cases and 753 deaths were reported in 2014 (UNICEF, 10/02/2015). Since January 2015, 1,759 cases have been reported, with 73 deaths and a 4.2% case fatality rate. 903 cases were reported in Rivers state over 1–8 March (UNICEF 27/03/2015).

OVERVIEW

5.6 million people are in need of humanitarian assistance. Violence has internally displaced more than 1.2 million people, restricted movement, disrupted food supply, seriously hindered access to basic services, and limited agricultural activities. People affected by violence in Adamawa, Borno, and Yobe, and neighbouring Bauchi, Taraba, and Gombe states are in urgent need of protection, shelter, food, and access to health services and education.

Political Context

Presidential elections took place over 28-29 March. Incumbent president Goodluck Jonathan, whose party has led country since 1999, lost to Muhammadu Buhari, the candidate for the main opposition All Progressives Congress (APC) (AFP, 02/04/2015). Muhammadu is a former president and military ruler from northern Nigeria (AFP, 11/12/2014).

Although irregularities have been alleged and protests were reported (Reuters, 30/03/2015; Guardian, 31/03/2015), the elections did not spark large-scale violence or displacement as many had feared.

State governorship and parliamentary elections are scheduled to take place in about 30 states on 11 April (AFP, 04/04/2015).

Security Context

Boko Haram’s insurgency gained momentum in 2014 and 7,711 deaths due to BH-related violence were reported by media sources in the year, representing over half of BH-related deaths in the country since May 2011 (ACLED, 11/01/2014). Since the end of 2014, the conflict has taken on a more regional dimensions, with BH attacks in Cameroon, Chad, and Niger, and a strengthened multinational force. With the engagement of regional forces in the conflict, the Nigerian Government has regained territory in early 2015.

Fighting and attacks intensified in the run-up to the presidential elections which Boko Haram had vowed to impede. On 28 March, BH was suspected of killing at least seven people in attacks in Gombe state, including at polling stations. Polling stations were attacked and election materials destroyed in Bauchi state (Reuters, 28/03/2015; AFP, 29/03/2015). Over 9–15 February, 58 people were killed in political violence related to the elections, according to the National Human Rights Commission (AFP, 17/02/2015).

Inter-communal Violence

The Middle Belt area (Benue, Kaduna, Plateau, Nassarawa, and Taraba states) is home to a number of minority groups, divided between the Islamic north and the more secular Christian/animist south. Inter-communal clashes fuelled by ethnic and religious tensions, as well as competition between farmers and pastoralists, flare regularly throughout the region (IDMC, 12/2014).

In March, 82 people were killed and at least 25 people injured in an attack on Egba village, Benue state, by suspected Fulani herdsmen (AFP, 17/03/2015). 500 houses were burned. 36 people were killed as seven villages were overrun by suspected Fulani in a clash between gunmen and farmers, just days after assailants attacked Ikpele and Okpopolo communities in Benue, killing seven farmers and displacing over 6,000 people (ECHO, 17/03/2015). Over 2014, around 1,700 people died in inter-communal violence (ACLED, 2014; ICG, 01/10/2014).

Stakeholders

Boko Haram

Boko Haram (Western education is forbidden) was founded in Maiduguri, Borno state, and has been leading an insurgency to create an Islamic state in the predominantly Muslim regions of northeastern Nigeria. The Nigerian authorities have been fighting BH since 2009, with the insurgents using increasingly aggressive tactics. According to US intelligence reports, BH has a core of 4,000–6,000 fighters (Reuters, 06/02/2015). On 7 March, Boko Haram pledged allegiance to Islamic State (AFP, 07/03/2015).

Nigerian Troops

Reports of low morale and defections persist among Nigerian forces. Failures to act on intelligence, and abuses in the campaign against Boko Haram are also a problem, impacting relations with populations (ACLED, 31/03/2015). In the past, Nigerian soldiers at times reportedly refused to deploy because of inadequate equipment, or fled from operations (AFP, 22/08/2014).

Regional Forces

BH has repeatedly made cross-border attacks into the Far North region of Cameroon, and more recently, Diffa region, Niger. Chad has been providing military support for the fight against BH in January 2015.

The Multinational Joint Task Force (MJTF) has been expanded to 10,000 military and civilian personnel, including larger contingents from Chad, Cameroon, Niger in addition to...
Nigeria and Benin (UNHCR, 26/03/2015). About 2,500 Chadian troops withdrew from Nigerian territory in mid-March, with indications they would be redeployed for fresh offensives elsewhere (AFP, 29/03/2015). Nigerian troops are supported by foreign private military contractors (AFP, 20/03/2015). The scope and remit of the regional force is unclear, and it seems likely that the Nigerian forces will remain the lead. A BH attack on the previously liberated town of Gamboru, Borno state, suggests a co-ordination problem between the allies (AFP, 20/03/2015).

Conflict Developments

Security analysts have warned that the renewed military offensives in early 2015 will prompt BH to revert to guerrilla tactics of bombings and suicide attacks. It is feared that IDPs could be increasingly targeted (AFP, 23/03/2015). Residents and military officers have also reported that BH is carrying out reprisal attacks against Arabic speakers in the northeast, accusing them of aiding Chad's army (Reuters, 12/03/2015).

Boko Haram had changed from guerrilla tactics to seizure of territory from mid-2014. It reportedly succeeded in taking 40% or even 70% of Borno state, though this is difficult to verify (US Institute of Peace, 09/01/2015). Military counteroffensives have since succeeded in recapturing 36 towns (AFP, 17/03/2015). According to the Nigerian army, only Gwoza in Borno, and Goneri and Guja in Yobe state, are still under BH control (UNHCR, 17/03/2015).

Since regional forces are claiming successes against Boko Haram and have increasingly regained territory from the group, BH has reverted to guerrilla tactics. Villages are frequently raided and civilians targeted.

Recent Incidents

Borno state: On 6 April, suspected BH militants raided Kwajaffa village, killing likely more than two dozen residents and setting several buildings (AFP, 06/04/2015). On 4 April, at least four people were killed in a BH raid on Kayamla village near Maimaduguri (AFP, 04/04/2015).

On 27 March, 23 people were beheaded in Buratai, Borno state (AFP, 28/03/2015). On 21 March, Chadian forces returned to Gamboru. The town had been liberated earlier in March, but after Chadian troops left, BH returned and killed 11 civilians (AFP, 21/03/2015). BH reportedly kidnapped over 400 women and children from Damasak before retreatin from the town in early March. Other reports cite about 500 children under 11 were taken (BBC, 24/03/2015). At least 70 bodies were found in a mass grave (Al Jazeera, 21/03/2015; Reuters, 24/03/2015).

On 16 March, troops recaptured Bama, Borno's second main city, according to the Nigerian army (AFP, 17/03/2015). BH carried out mass killings, set fire to homes and forced hundreds of residents to flee towards Maimaduguri as troops advanced on the town (AFP, 15/03/2015). 82 people were killed in a large-scale attack on Maimaduguri on 1 February; BH was ultimately repelled by Nigerian security forces and civil militia (OCHA, 03/02/2015). Several BH bomb attacks hit Maimaduguri in March (AFP, 07/03/2015; AFP, 14/03/2015). Over 2014, more than 4,400 BH-related deaths were recorded by media sources, around half of them civilians (ACLED, 22/01/2015).

Adamawa state: 547 BH-related deaths were recorded by media sources in Adamawa over 2014, around 200 of them civilians (ACLED, 22/01/2015).

Gombe state: On 1 April, an explosion outside a bus station that killed ten people was blamed on BH (AFP, 04/04/2015). On 28 March, BH was suspected of killing at least seven people in separate attacks, including at polling stations (Reuters, 28/03/2015).

Rivers state: Unidentified gunmen invaded Obrikom and Obor communities, killing six people and injuring two. They also set the house of a local politician on fire (AFP, 04/04/2015).

Yobe state: Over 2014, 508 BH-related deaths were reported by media sources in Yobe (ACLED, 22/01/2014).

Humanitarian Context and Needs

According to the National Emergency Management Agency (NEMA), nine million people in the northeast have been affected by the conflict, with three million people in acute need of humanitarian assistance (OCHA, 08/10/2014).

Humanitarian needs are high, particularly as very few international actors are operating in the northeast (OCHA, 01/07/2014; 31/08/2014).

Access

Updated information on the humanitarian situation in the northeast is minimal because of access constraints. Humanitarian access is impeded by insecurity, poor infrastructure, and limited openings for dialogue with non-state actors (OCHA, 05/2014). There is also a lack of coordinated needs assessments in the northeast (PI, 01/2015). News reporting on the security and political situation is equally restricted, and media access has often been prohibited.

Boko Haram has destroyed communication and media infrastructure (Reporters without Borders, 05/2015). In Borno state, most routes to affected areas are inaccessible. The road from Damaturu, Yobe state, is the only route for bringing food and other basic commodities to Maimaduguri and northern Borno state (ECHO, 13/01/2015). Maimaduguri airport is closed to commercial flights.

Movement in BH-controlled areas is reportedly restricted, and the use of vehicles is forbidden, most likely to prevent residents from leaving (IFRC, 23/01/2015).

Displacement

IDPs

There are more than 1.2 million IDPs in Nigeria, most of them in the northeast (IOM, 06/03/2015). The majority of the current IDP population was displaced in 2014 (79%). As of
February, NEMA/IOM report 1,188,018 IDPs in the northeast: 672,714 in Borno; 135,810 in Yobe; 72,019 in Adamawa; 68,152 in Taraba; 60,555 in Bauchi; 24,655 in Gombe. Another 47,276 IDPs (5,910 households) were identified in Plateau, Nasarawa, Abuja, Kano, and Kaduna states.

The IDPs come mainly from Borno (62%), Adamawa (18%), and Yobe (13%). 56% of IDPs are children, of which more than half are under five. 87% of IDPs live with host families while 13% live in camps (IOM/NEMA, 02/2015).

Maiduguri, Borno state capital, hosts 432,785 IDPs. 120,872 individuals (13,658 households) live in 15 displacement sites in Borno. Ten sites are in Maiduguri, four in Jere and one in Biu (IOM/NEMA, 02/2015). Some IDPs have reportedly started to leave Maiduguri for Damaturu, Gombe and other parts of Adamawa state, which they consider safer (OCHA, 06/02/2015). 6,000 people fled to Maiduguri en March, where authorities opened a new camp for them. Only 10% of IDPs at the FTC camp have a roof, WASH facilities are lacking, and many have to rely on outside relatives for food (MSF, 31/03/2015).

27,612 individuals (4,381 households) are living in 18 displacement sites in Adamawa. 41,275 IDPs are located in Yola South (six sites) and 38,495 in Girei (five sites), and 35,293 in Yola North (one site), (IOM/NEMA, 02/2015).

At end March, it was reported that Kano state government had closed a camp for IDPs from Mubi after a BH militant was identified (AFP, 23/03/2015).

In Bauchi, 55% of IDPs have been displaced by the insurgency while 45% have been displaced by communal clashes, mainly resulting from the arrival of people displaced by inter-communal clashes elsewhere (IOM/NEMA, 31/12/2014; 02/2015). In Taraba, 80% of IDPs have been displaced by communal clashes, mainly in Wukari and Ibki. Most are in Gassol (bordering Wukari), Jalingo, Takum, and Gashaka.

The displaced are apprehensive about returning to their communities, even those that have been recaptured by security forces (IFRC, 23/01/2015). IDPs in Adamawa state said lack of information about the security situation in places of origin was a challenge to returning (IOM/NEMA, 31/12/2014).

Nigerian Refugees in Neighbouring Countries

At least 153,000 refugees have fled to Cameroon, Niger, or Chad (WFP, 22/01/2015). Temporary refugee status has been granted to those Nigerians fleeing Adamawa, Borno, and Yobe. UNHCR has advised against forced returns to northern areas.

Niger: 19,000 people have fled to Niger in 2015 (UNHCR, 16/01/2015). 100,000 returnees and refugees are in Niger and 50,000 people have been internally displaced (UNHCR, 04/03/2015). Concentrated in the Diffa region, most refugees are staying with local communities, and food and water resources are limited (UNHCR, 15/06/2014). Niger authorities have lifted a ban on refugee camps, given the large influx of new refugees in 2015. The Boko Haram attacks in Niger since 6 February have also led to internal displacement of a yet unspecified number of people (OCHA, 20/02/2015).

Cameroon: 66,000 Nigerians have fled to northern Cameroon since May 2013 (UNHCR, 10/03/2015) and 73,000 people are internally displaced due to the BH insurgency (UNHCR, 04/03/2015). About 70% of new arrivals are women and children who need immediate assistance. 16,000 people reportedly fled from northeast Nigeria to Cameroon over 28 February–1 March (UNHCR, 03/03/2015).

Chad: Some 27,000 people have fled to western Chad, most of whom have arrived since early January (UNHCR, 10/03/2015).

Food Security

4.8 million people are food insecure across 11 states in northern Nigeria (OCHA, 30/09/2014; IRIN, 28/11/2014).

Households in southern and eastern Borno, southern Yobe, and northern Adamawa will remain in at least Crisis (IPC Phase 3) acute food insecurity until the main harvest in October. Households in relatively less conflict-affected parts of Borno, Yobe, and Adamawa still have limited access to markets and income-earning opportunities. Many of these areas, which are currently Stressed (IPC Phase 2), will move to Crisis (IPC Phase 3) in April as their lean season begins earlier than normal.

Outside the northeast, most households are engaged in normal seasonal off-season agriculture and income-earning activities. Market prices for key staples will remain stable or decline, and Minimal (IPC Phase 1) acute food insecurity is expected through at least June 2015 (FEWSNET, 31/03/2015).

Most IDPs continue to need assistance to meet their food needs (FEWSNET, 07/01/2015). Assessments conducted in IDP camps in Adamawa found that 20% reported never receiving food distributions. 0.75% of IDPs were found to have a source of income (IOM/NEMA, 31/12/2014).

Health and Nutrition

3.5 million people need health assistance. There is a need to pre-position more emergency supplies in IDP camps and host communities, especially in Borno, Adamawa, and Yobe states, as the population increases with continued attacks (OCHA, 04/03/2015).

3,000 health facilities in the northeast are closed or have been partially destroyed (OCHA, 08/10/2014). In March 2014, a multi-sector assessment covering Adamawa, Borno, and Yobe states indicated that only 37% of health facilities are functioning, leaving residents to seek medical attention across the border. Mortality rates are increasing and vaccination programmes are severely hit. Polio vaccination campaigns are now limited to the Maiduguri metropolis.

Most IDPs in host communities have limited access to health services due to various constraints such as lack of information on services and transportation costs (OCHA, 02/10/2014).
Since January 2015, 1,759 cases have been reported, with 73 deaths and a 4.2% case fatality rate. 903 cases were reported in Rivers state over 1–8 March (UNICEF 27/03/2015). There has been a resurgence of cases in Kano and Kaduna states, and there is a risk the outbreak could spread further (UNICEF, 10/02/2015). 35,996 cholera cases, including 753 deaths (2.1% case fatality rate) were reported in 2014.

Meningitis

479 cases of meningitis, with 38 fatalities (7.9% case fatality rate) were reported at 22 February in four areas in Kebbi and Sokoto states, northwest Nigeria. Out of these, 300 new cases were recorded over one week in late February. Aleiro in Kebbi and Gudu in Sokoto are in epidemic phase due to very high attack rates, and Jega and Gwandu in Kebbi are in alert phase (WHO, 22/02/2015).

Nutrition

1.5 million malnourished children and pregnant and lactating women are in need of nutrition assistance (OCHA, 04/03/2015). As of February 2015, 461,000 children under five suffer from severe acute malnutrition (OCHA, 10/02/2015). In the absence of humanitarian support, it is expected that up to three million people will face food consumption gaps in Nigeria by July 2015 (FEWSNET, 07/01/2015). In the northeast, GAM is 12% (UNICEF, 13/01/2015).

Severe acute malnutrition is responsible for more than a third of all child deaths in Nigeria; 350,000 children die from malnutrition every year (ECHO, 08/2014).

A severe acute malnutrition rate of 8.7% was detected among children in Maiduguri and Jere in Borno state; and 27.8% were found to be moderately malnourished. The nutritional situation of the displaced as well as the host communities is rapidly deteriorating (ECHO, 14/03/2015).

Polio

In 2014, 30 cases of vaccine-derived poliovirus type 2 (cVDPV2) were reported, and six cases of wild poliovirus type 1. Kano is the only state to have reported cases of WPV since April (Global Polio Eradication Initiative, 14/01/2015). In 2013, 53 cases were reported, and 102 cases in 2012 (GPEI, UNICEF). 72% of cases in 2013 were recorded in Borno, Yobe, and Kano states.

WASH

2.2 million people are in need of WASH assistance (OCHA, 04/03/2015).

WASH conditions in IDP host communities are of critical concern, with reports of inadequate latrines and lack of access to safe water. The need for hygiene promotion activities and provision of hygiene kits is critical (OCHA, 02/10/2014). In the northeast, only 46% of the population have access to improved sources of drinking water and 21% to latrines (UNICEF, 13/01/2015).

Shelter and NFIs

1.9 million people are in need of shelter and non-food items (NFIs), such as kitchen kits, hygiene kits, appropriate water containers, mattresses, mats, blankets, and solar lamps. There is a need for housing for vulnerable people in conflict-affected areas whose homes were damaged (OCHA, 04/03/2015).

Education

10.5 million children are out of school in Nigeria, more than half of them girls. 60% of these children are in the northern part of the country: one in every three primary school children and one in every four secondary school children are out of school in the northeast (UNICEF, 01/2015).

In March 2014, all state-funded education facilities were closed in Borno state (UNICEF, 23/06/2014). 500 educational institutions in the northeast have been destroyed by the insurgency (OCHA, 08/10/2014). Borno state authorities announced that 176 teachers have been killed by Boko Haram in Borno state since 2011 (UNICEF cited by OCHA, 07/2014).

Protection

2.2 million people are in need of protection assistance (OCHA, 04/03/2015).

Maintaining the civilian nature of places of asylum or displacement is of concern. There is an urgent need for emergency protection, including for unaccompanied and separated children (OCHA, 06/2014).

Abduction, Torture, and Forced Recruitment

In a report in September, Amnesty International said Nigeria’s police and military routinely torture women, men, and children (BBC, 18/09/2014).

Kidnappings of groups of women and girls by BH continue. In March, BH kidnapped 400–500 women and children (Reuters, 25/03/2015; BBC, 25/03/2015). More than 200 schoolgirls are still being held captive. Young men are being forcibly recruited. Human Rights Watch estimates that Boko Haram has abducted at least 500 women and girls since 2009, from more than a dozen towns and villages in Borno and Yobe states. Women and girls have reported abuse such as forced labour, including forced participation in military operations; forced marriage to their captors; and sexual abuse including rape. While some women and girls seem to have been taken at random, the majority appeared to have been targeted – notably students and Christians.

Updated: 08/04/2015

SIERRA LEONE FOOD INSECURITY, EPIDEMIC

LATEST DEVELOPMENTS

April: It is estimated that Ebola caused an additional 735 maternal and 2,562 newborn deaths between May 2014 and April 2015 (UNFPA).

7 April: Seven districts have been reported Ebola-free (UNMEER).
5 April: Nine confirmed cases were reported in the week to 5 April, in Western Area, Port Loko, and Kambia (WHO, 08/04/2015).

**KEY CONCERNS**

- As of 10 April, Sierra Leone reported 12,188 cumulative Ebola cases, including 3,854 deaths (WHO, 13/04/2015).
- The cumulative number of reported Ebola cases across the region has reached 25,591, including 10,604 deaths (WHO, 13/04/2015). The numbers of registered cases and deaths are largely inaccurate.
- Between February and March 2015, 770,000 people (10% of the population) are in IPC Phase 3, or Crisis, food insecurity. 1.32 million are in IPC Phase 2, Stressed. This is projected to increase to 1.1 million in Phase 3 and 1.69 million in Phase 2 by the June-August lean season (Cadre Harmonisé, 01/03/2015).
- The national public health system is overstretched and struggling to deliver non-EVD care (UNICEF, 05/12/2014; ACAPS, 26/02/2015).

For more information on the Ebola crisis in West Africa, visit the ACAPS Ebola Needs Analysis Project page.

**Political Context**

**Unrest and Resistance to Ebola Response**

Reports continue of people fleeing from response teams, hiding bodies, conducting secret burials, and occasional physical assaults on burial teams (Voice of America, 25/03/2015). Strikes and tensions related to pay and incentives also continue to be reported (UNMEER, 01/02/2015).

**Humanitarian Context and Needs**

**Access**

The supply of food, water, and adequate sanitation facilities to quarantined areas has become challenging (UNMEER, 04/03/2015). This is exacerbated by poor coordination between agencies and road access issues, particularly in rural areas, which can render it impossible to reach communities within 24 hours of being placed under quarantine (UNMEER, 16/03/2015). In addition, poor mobile phone coverage is impeding disease surveillance in Koinadugu, Kailahun, and Pujehun (UNMEER, 29/03/2015).

**Food Security**

Between February and March 2015, 770,000 people (10% of the population) were in Phase 3, or Crisis, food insecurity. 1.32 million were in Phase 2 (Stressed). This is projected to increase to 1.1 million in Phase 3 and 1.69 million in Phase 2 in the June–August lean season (Cadre Harmonisé, 01/03/2015).

95% of survey respondents reported that the food security situation is worse than before the EVD crisis. EVD survivors, quarantined households, people with chronic illness and people from poor and very poor households are most affected. Unmet food needs are higher in areas with high EVD exposure (78%) than low EVD exposure (54%) (ACAPS, 04/2015).

About 76% of Ebola-related food-insecure individuals live in rural areas (FAO, 17/12/2014; WFP, 05/01/2015). High food price increases and low wages are hampering food access in the north: Bombali, Koinadugu and Tonkolili have seen the highest uptake of negative coping strategies, as well as Kono and Kailahun in the east (WFP, 31/03/2015).

**Agriculture and Markets**

Following the opening of the border with Liberia, there are signs that markets and trade are recovering across Sierra Leone. The removal of travel restrictions has allowed cassava prices to reach normal levels in some districts (WFP, 28/02/2015). Prices of local/imported rice and palm oil are still above average, but mostly stable (WFP, 25/03/2015). In a FEWSNET survey, 43% of respondents reported that the most important market in their area operated at reduced levels in early March, and 5% reported market closures. 35% of traders reported reduced market supply compared to other years. Most cited travel restrictions as the main reason (FEWSNET, 03/04/2015).

**Livelihoods**

Poverty could rise from 13.8% to 14.1% during 2014–2015 (UNDG, 11/03/2015). In February 2015, 95% of informants described the livelihoods situation as worse than in February 2014. Unemployment, loss of income opportunities and death of caregivers were the main reasons (ACAPS, 02/04/2015). More than 62% of respondents in a FEWSNET survey reported reduced wage opportunities early March, compared to other years. By late March, wage rates were increasing in all districts, on average by 7% (WFP, 31/03/2015). Almost half of traders have said they were not able to sell their cash crops as usual (FEWSNET, 03/04/2015).

**Health and Nutrition**

An estimated 3.5 million people are at risk due to unmet health needs. 75% of key informants surveyed said the health situation is worse than it was before the EVD outbreak. Only 50% of the population is seeking healthcare, compared to 80% before the crisis. Main needs include availability and affordability of medication and services. Reported consequences of the crisis include increased mortality, self-medication, increased morbidity, and under-resourced health facilities. There is a correlation between EVD exposure and the severity of the health situation (ACAPS, 04/2015).

Visits to primary health facilities over June–December 2014 were a third lower than in the same period in 2013. Most districts showed an initial drop at the onset of the Ebola
outbreak in June, and a further decline as the epidemic reached its peak in November–December. Kenema, Port Loko, and Kailahun districts recorded the greatest decrease in use. The decline is not uniform across health services: services related to malaria and diarrhoea are most affected. In December 2014, the number of suspected malaria cases decreased by half compared to December 2013, and only 20% of those cases were receiving treatment. In the same period, treatment of diarrhoea decreased by about 60% (ACAPS, 25/03/2015).

293 health workers have been infected and 221 have died of Ebola; approximately one in ten of the country’s health workers (MSF, 26/01/2015; WHO, 18/02/2015).

Ebola

As of 10 April, 12,188 cumulative Ebola cases have been reported in Sierra Leone, including 3,854 deaths (WHO, 13/04/2015).

Nine confirmed cases were reported in the week to 5 April, making it the fifth consecutive weekly decrease. Urban Western Area reported five new cases, Rural Western Area one, Port Loko one, and Kambia two. Three deaths were confirmed in the community post mortem. In the week to 29 March, 56% of cases came from registered contacts (WHO, 08/04/2015).

The Ebola case reported in Kailahun on 3 April was false, and the district remains Ebola-free. Seven districts have been declared Ebola-free, having gone 42 days without reporting any new cases, most recently Kono and Tonkolili (UNMEER, 07/04/2015).

Healthcare provision: Hazard pay for health workers ended 31 March. The World Bank is developing a project to continue support to these workers (PI, 29/03/2015). Clinical trials for an Ebola vaccine started in Sierra Leone on 11 March and are taking place in Western Urban, Western Rural, Port Loko, Bombali, and Tonkolili (Reuters, 11/03/2015; PI, 29/03/2015). The study aims to enrol 6,000 front-line workers in four highly affected districts: Western Area, Bombali, Port Loko, and Tonkolili (UNMEER, 18/02/2015). Trials are to be extended to approximately 800,000 people in Kambia in June (PI, 13/03/2015).

Containment measures: Market days in parts of Guinea neighbouring Koinadugu result in regular cross-border movement and households in Kono have family ties across the border in Guinea, resulting in concerns of increased cross-border transmission (USAID, 07/04/2015). Officials from both countries have agreed to share information on population movement and to establish screening protocols at border points between Kambia district and Forecariah in Guinea, both areas of active EVD transmission (UNMEER, 07/04/2015).

Many still deny the existence of Ebola; and movement of suspected cases across district and chiefdom borders is impeding effective surveillance (IFRC, 06/03/2015; UNMEER, 01/02/2015; 09/02/2015). Severe shortage of burial space remains an issue in the Western Urban Area. In Kambia, CDC staff note challenges in identifying and documenting all non-household contacts of new EVD cases (04/03/2015).

In early March, an outbreak in Aberdeen near Freetown led to outbreaks in other districts, notably Bombali and Port Loko, and resulted in entire villages being quarantined (IFRC, 06/03/2015; WHO, 04/03/2015). More than 20 children were quarantined in an orphanage after one of its staff was diagnosed with Ebola (international media, 23/02/2015).

Many checkpoints were removed in response to decreasing transmission rates, though some have since been mounted again (Government, 02/03/2015). As of early March, no public transportation carrying goods is allowed in Freetown after 18.00 and boats are not allowed to operate at night. The number of passengers will be restricted on all means of public transportation (Government, 02/03/2015).

A three-day stay-at-home was enforced across Sierra Leone from 27 to 29 March. Ten new cases were found. There were several security incidents (AFP, 29/03/2015; Reuters, 29/03/2015; AFP, 01/04/2015). In the Kaffu Bullom chiefdom of Port Loko, a group of health workers came under attack, and in Freetown residents and security forces clashed over food distributions.

In August, legislation was passed imposing a jail term of up to two years for anyone concealing an Ebola-infected patient, and of up to six months for anyone entering or leaving Ebola-affected areas without medical authorisation (AFP, 22/08/2014; international media, 30/08/2014). On 22 February, the Liberian Government officially reopened its borders with Sierra Leone and Guinea (UNMEER, 23/02/2015).

Regional Outbreak

The cumulative number of reported Ebola cases across the region has reached 25,591, including 10,604 deaths (WHO, 13/04/2015).

Maternal Health

Ebola has had a large impact on maternal and newborn health in all districts, but Kailahun seems to be the most affected. Nationwide, there are an estimated 2,948 maternal deaths from May 2014 to April 2015 – 735 more than is usual in a year. Newborn deaths are estimated to have reached 9,867 – 2,562 more than is usual in a year (UNFPA, 30/03/2015).

Fear, misinformation and mistrust of health workers and facilities are among the main reasons preventing women from accessing maternal and reproductive health services (UN WOMEN, 27/03/2015; UNFPA, 30/03/2015). By December 2014, little more than half of pregnant women were making one ANC visit, compared to 93% between 2008 and 2012 (ACAPS, 25/03/2015). Health staff have been reluctant to attend to pregnant women, as common symptoms such as fever and bleeding are also symptoms of Ebola (UNMEER, 01/02/2015). The number of post-natal visits within 48 hours of delivery decreased by 21% from May to July 2014 (CDC, 02/01/2015). Health facilities have ceased providing family planning services (IRIN, 04/02/2015).

Measles

864 suspected measles cases had been reported in six districts by early March: Bo, Bombali, Koinadugu, Port Loko, Tonkolili, and Western Area. There is an urgent need for...
precautionary measures to prevent further spread of the disease. The majority of cases (more than 500) were among children aged 1–4 years (PI, 06/03/2015). Vaccination rates for measles dropped from 99% in January 2014 to 76% in July, as mass vaccination campaigns were suspended (UNICEF, 03/11/2014). A mass vaccination campaign for under-fives is planned for mid-May (UNMEER, 18/03/2015).

**Mental Health**

There is a high need for grief counselling as a Knowledge, Attitude and Practice survey found that at least 50% of respondents knew someone who had died from Ebola (UNMEER, 15/02/2015). According to an assessment, reduced access to community support systems and normal coping strategies means that trauma due to the Ebola crisis is putting people at risk of mental health problems (International Medical Corps, 09/01/2015).

**Nutrition**

It is predicted that, compared to observed trends from 1992 to 2012, the number of people who are undernourished during 2014–2016 could increase by 1.30–1.39%. This increased has been linked to the Ebola outbreak (UNDG, 11/03/2015). A UNICEF assessment in 60 chiefdoms identified 273 (1.27%) children with SAM (UNICEF, 25/03/2015).

**WASH**

35% facilities of 121 Ebola facilities were found to have inadequate water supply during the dry season (UNICEF 29/01/2015).

More than half of all schools indicated in a survey that they did not have sufficient access to water throughout the year (PI, 11/03/2015).

Concerns have been raised about waste from Ebola facilities being dumped in waste collection sites. This poses a risk for health, especially to waste pickers (PI, 20/03/2015).

About a third of the population live without latrines (UNMEER, 20/11/2014).

**Education**

Respondents in all districts have said the educational situation has worsened since the outbreak because of school closures (ACAPS, 02/04/2015). 1.8 million children have been out of school since the start of the Ebola crisis. Schools will reopen on 14 April – reopening was originally planned for 30 March (Voice of America, 26/03/2015; UNICEF, 18/03/2015). Schools for children aged 12–14 reopened on 24 March (PI, 29/03/2015). There are concerns about the infection prevention control preparedness of schools, given the prevalence of measles in six districts (PI, 06/03/2015).

As children are not attending school, UNICEF warns of an increase in vulnerability, leading to a potential increase in child labour and teen pregnancy (UNICEF, 16/10/2014). Due to limited household resources, children are predisposed and sometime forced to engage in income-generating activities. Long-term consequences include possible school drop-outs (Ministry of Social Welfare, Oxfam, UN Women, 27/02/2015). Visibly pregnant girls will not be allowed to return to school when they reopen, in an announcement by the Ministry of Education (Ebola Deeply, 14/03/2015).

**Protection**

Discrimination and stigmatisation of survivors is still widely reported (IFRC, 06/03/2015; UNMEER, 29/03/2015). 47% of people surveyed indicated that stigma and discrimination exists in their communities: social and family exclusion were the main issues. Fear of Ebola was cited as the main reason for discrimination and stigma (ACAPS, 02/04/2015).

**Sexual and Gender-based Violence**

According to the Government, gender-based violence and sexual assault has dramatically increased within the last year (international media, 09/01/2015; IRIN 04/02/2015). Stigmatisation and discrimination have resulted in abuse and mistreatment of especially women. Many female survivors reported being afraid of experiencing gender-based violence as a result of EVD (Ministry of Social Welfare, Oxfam, UN Women, 27/02/2015).

Many sexual assault and domestic violence clinics have been closed during the epidemic, and there is a lack of doctors. Consequently, there is almost no treatment and counselling available, or expertise to provide evidence for trial (IRIN, 04/02/2015).

**Child Protection**

More than 2,000 cases of sexual abuse against children were recorded in 2014 — a record high. Many more cases have likely gone unreported (Ebola Deeply, 14/03/2015).

As of 18 March, 8,559 children have lost one or both parents to Ebola and 742 are unaccompanied or separated from their caregiver (UNICEF, 25/03/2015). A UNICEF assessment in 60 chiefdoms identified 273 (1.27%) children with SAM (UNICEF, 25/03/2015). Many sexual assault and domestic violence clinics have been closed during the epidemic, and there is a lack of doctors. Consequently, there is almost no treatment and counselling available, or expertise to provide evidence for trial (IRIN, 04/02/2015).

Updated: 14/04/2015

**SOMALIA CONFLICT, FOOD INSECURITY**

**LATEST DEVELOPMENTS**

14 April: Al Shabaab carried out an attack on the Ministry of Higher Education in Mogadishu, leaving nine people dead (BBC).

13 April: Seven Somali-French aid workers were kidnapped in Gedo region, in the areas between Garilley and Fafahdhun. Somali officials have not confirmed the reports (local media).

13 April: Kenyan officials said they had asked UNHCR to repatriate around 350,000 Somali refugees living in the Dadaab camp complex by July, and close it down (AFP, IRIN).
9–10 April: Following the escalation of violence in Yemen, Somalis have begun returning to Somalia (UNHCR). 270 refugees from Yemen have arrived in Somaliland and 289 in Puntland, most of them third country nationals from Ethiopia and Djibouti (IOM).

10 April: Drought and water shortages persist in Bay, Hiraan Galgaadud, Gedo, Lower and Middle Shabelle, and Mudug (OCHA).

8 April: The Central Bank of Kenya revoked the licences of 13 money remittance providers based in Nairobi, in an effort to curb the financing of terrorism (AFP, Adeso).

KEY CONCERNS
- Widespread violence and insecurity, particularly in south-central Somalia.
- Insecurity and bureaucratic impediments continue to hinder humanitarian access.
- 1.1 million IDPs, mainly in the south-central region, with high concentrations in Mogadishu (UNHCR, 12/2014).
- 2.75 million people need safe water (OCHA, 12/03/2015).
- 3 million are estimated to need emergency health services (OCHA, 12/03/2015).
- 731,000 people are at Crisis and Emergency levels of food insecurity. 2.3 million people experience Stressed levels of food insecurity (OCHA, 12/02/2015).
- More than 218,000 acutely malnourished children under five have been reported, mainly in south-central Somalia (OCHA, 23/02/2015).
- 1.7 million children are out of school (OCHA, 12/03/2015).

OVERVIEW
Protracted conflict, consecutive years of drought, natural hazards, and disruption of basic infrastructure have led to large-scale displacement in Somalia and across the region. Almost half the population of Somalia, around 3.2 million people, is vulnerable to external shocks and lacking access to basic goods and services, with an estimated 1.5 million people living in seven regions affected by the Somalia–African Union military offensive: Bakool, Gedo, Lower Shabelle, Hiraan, Bay, Banadir, and Lower Juba.

Political Context
Somalia suffers from a chronic fragility of state institutions as a result of two decades of civil war. Infighting between presidents and prime ministers is a recurrent problem. Vision 2016, the Federal Government’s policy covering constitutional revision, the establishment of regional administrations, and transition to multiparty democracy, is opposed by key figures in the state (UNSC, 25/09/2014; ICG, 01/11/2014).

Security Context
About 1.5 million people live in areas that could be directly affected by the Somali–African Union offensive on Al Shabaab (OCHA, 19/09/2014). UNICEF reported in January that the security situation in south-central Somalia significantly deteriorated in December 2014 (UNICEF, 15/01/2015). On 12 March, Al Shabaab attacked a fortified area in the central town of Baidoa, where a number of regional government headquarters and a United Nations compound and airport are located (AFP, 12/03/2015). On 28 February, AMISOM forces attacked Al Shabaab bases in El Bar, in Bakool region. 11 people were reported killed, although details of the attack are still unclear (local media, 28/02/2015). A drone strike in southwestern Somalia on 2 February, targeting an Al Qaeda base affiliated with Al Shabaab, killed several, including at least four civilians (AFP, 01/02/2015).

Mogadishu: In January, Al Shabaab carried out two attacks, killing six, including the mayor of Afgoy district (local media, 19/01/2015; AFP, 22/01/2015; PI, 22/01/2015). Throughout February, 41 people were killed, including a member of parliament, four civil servants, and ten soldiers (BBC 09/02/2015; local media, 16/02/2015; Reuters, 16/02/2015). In March, a car bomb at a hotel and an attack on a second hotel killed 16 and injured 13 (AFP, 11/03/2015; BBC, AFP, 28/03/2015).

On 14 April, Al Shabaab carried out an attack on the Ministry of Higher Education, leaving nine people dead (BBC, 14/04/2015).

Al Shabaab
Al Shabaab, a militant Islamist group linked to Al Qaeda, took over most of southern Somalia in 2006, seeking to establish an Islamic state. Numbering 7,000–9,000 militants, Al Shabaab typically targets Somali government officials, AMISOM forces, and perceived government allies. Attacks in urban centres and along transport axes are common. Defeated by Ethiopian and Somali forces in 2007, Al Shabaab was forced out of Mogadishu in 2011 and Kismayo in 2012, and lost Barawe, Lower Shabelle, in October 2014. On 27 December, Al Shabaab intelligence chief Zakariya Ismail Ahmed Hersi surrendered to AU forces. Experts suggest that the surrender follows splits within Al Shabaab (AFP, 27/12/2014).

On 2 April, Al Shabaab carried out an attack in Garissa University in Kenya, which left 147 students dead and 79 injured (BBC, HRC, 02/04/2015). In retaliation, Kenyan fighter jets destroyed two Al Shabaab camps in Gedo, although this information has not been independently confirmed (BBC, 06/04/2015). Local eyewitnesses reported that three civilians were injured (Reuters, 06/04/2015).

The latest spate of attacks between Al Shabaab and Kenyan troops began in November. The Kenyan military launched two operations on Al Shabaab camps in Somalia, reportedly killing 115 militants, in response to attacks in Kenya in November and December (BBC, The Guardian, 24/11/2014; BBC, 02/12/2014). On 13 March, the alleged leader of the...
Westgate mall attack in Kenya was killed by a US drone strike (international media (13/03/2015). Al Shabaab then carried out several attacks in in Mandaera and Wajir, Kenya, which left nine dead and ten injured (Reuters, 18/03/2015; AFP, 13/03/2015; AP, 15/03/2015).

SNAF-AMISOM Offensive

In November 2013, the African Union Mission in Somalia (AMISOM) force was increased to 22,000 from 17,600. Its mandate has been extended until 30 November 2015 (UNSC, 25/09/2014). The Somali National Armed Forces (SNAF) and AMISOM launched its military offensive against Al Shabaab-held areas in March 2014: against Bakool, Gedo, Lower Shabelle, Hiraan, Bay, Banadir, and Lower Juba regions (OCHA, 05/2014). The second phase of the offensive began in late August.

Over 2,200 conflict incidents with humanitarian impact were reported in the first nine months of 2014, including military operations, active hostilities, and other forms of violence against civilians (OCHA, 17/10/2014). The number of attacks and fatalities had decreased but 2010 and 2013.

Inter-communal Violence

On 21 March, gunfire between Hawadle and Sure tribes in Deefow district, in Beledweyne, left 12 people dead and dozens injured. The conflict began last year, over land (local media, 31/03/2015).

Humanitarian Context and Needs

Access

Outside Mogadishu, insecurity on the main roads to newly recovered areas makes needs assessment, delivery of humanitarian supplies, and response monitoring difficult (OCHA, 21/11/2014). In late November, OCHA reported that Al Shabaab is blocking strategic roads connecting Beledweyne, Hudur, and Elbarde (WFP, 30/11/2014). Even in areas where there has been no active conflict, illegal checkpoints, banditry, and demands for bribes are common (OCHA, 17/10/2014).

The indefinite closure of Bosaso Airport, Puntland, for renovation, has severely constrained humanitarian operations (Pl, 08/01/2015).

Security Incidents Involving Aid Workers

On 13 April, local media reported that seven Somali-French aid workers had been kidnapped in Gedo region, in the areas between Garilley and Fafahdhun (local media, 13/04/2015). Somali officials have not confirmed the reports.

Aid workers have reportedly been targeted by armed groups for arrest and detention in Bakool, Bay, Gedo, and Lower and Middle Juba. On 3 December, a car bomb was detonated in the vicinity of a UN convoy travelling near Mogadishu International Airport. Al Shabaab claimed responsibility (AMISOM, 03/12/2014; AFP, 03/12/2014). As of September, 32 aid workers had been attacked in Somalia in 2014, with four humanitarian workers killed (USAID, 30/09/2014; OCHA, 17/11/2014). In May 2014, a 400-strong UN military unit was deployed in Mogadishu with a mandate to protect aid workers (UN).

Displacement

IDPs

An estimated 1.1 million Somalis were IDPs by February 2015, 893,000 in the south-central region, 130,000 in Puntland, and 85,000 in Solmaliad. 369,000 IDPs live in makeshift camps in Mogadishu (UNHCR, 03/2015). Figures show little to no change in the past year: 80,000 were displaced due to the SNAF-AMISOM offensive in 2014 (OCHA, 04/12/2014).

Returnees

Following the escalation of violence in Yemen, Somalis living in Al Mukalla, Yemen, have begun returning (UNHCR, 10/04/2015). As an estimated 236,000 Somali refugees are in Yemen; humanitarian actors in Solmaliand are preparing for a major influx (ECHO, 01/04/2015).

The Tripartite Agreement between the Kenyan and Somali Governments and UNHCR, signed in November 2013, establishes a legal framework for those Somali refugees wishing to return home (UNHCR 15/08/2014). Three areas have been designated to receive returnees: Luq, Baidoa, and Kismayo. Only 2,200 refugees have registered to return, compared to the original target of 10,000. (UNHCR, 01/08/2014). As of 22 March, 2,049 returnees had arrived; 1,497 in Kismayo, 531 in Baidoa, and 39 in Luq (UNHCR, 22/03/2015). Somali refugees in Kenya cite insecurity and lack of earning opportunities as their main uncertainties regarding a return to Somalia (UNHCR, East African, 02/08/2014; UNHCR, 10/04/2015; IRIN, 13/04/2015).

Refugees in Somalia

270 refugees have arrived in Solmaliand and 289 in Puntland since violence escalated in Yemen (IOM, 09/04/2015). A majority are third-country nationals from Ethiopia and Djibouti (UNHCR, 10/04/2015).

As of January 2015, there are 2,540 refugees in Somalia (OCHA, 01/12/2014).

Somali Refugees in Neighbouring Countries

961,397 Somalis are refugees in neighbouring countries: 423,510 in Kenya, 245,346 in Ethiopia, and 236,803 in Yemen, 24,040 in Uganda, 19,745 in Djibouti, 3,049 in Eritrea, and 150 in Tanzania. 2,216 new Somali refugees were registered in 2015 (UNHCR, 20/02/2015, 01/03/2015).

Food Security
An estimated 731,000 people are in Crisis and Emergency (IPC Phase 3 and 4) food insecurity and nearly 2.3 million additional people are classified as Stressed (IPC Phase 2) until June 2015 (OCHA, 10/03/2015). About 76% of those who face acute food insecurity are IDPs, 12% live in rural areas, and 12% are the urban poor (FSNAU, 05/03/2015). Urgent lifesaving assistance and livelihood support is required for populations in IPC Phases 3 and 4 between now and June 2015 (FAO, 05/03/2015).

Urban communities in southern Somalia (Xudur and Waajid in Bakool, and Bulo Burde in Hiraan) face acute insecurity because of trade disruptions. Southern agropastoral communities in Juba and pastoralists in coastal areas of northeastern, central, and southern Somalia also face acute food insecurity (FSNAU, 05/03/2015).

In 2014, 1 million people were in Crisis and Emergency (IPC Phase 3 and 4). Humanitarian actors on the ground have warned that the small reduction in numbers is part of the usual season variations and does not indicate a reversal in needs (OCHA, 05/03/2015).

**Agriculture and Markets**

At the end of March, the main planting season began as the gu rains started. Given the length of the dry season, sufficient rains will be critical for crop production, pasture growth and replenishment of water supplies, especially in agro-pastoral and pastoral livelihood zones. According to the climate forecast in the region, gu rains are expected to be normal to below-normal (OCHA, 10/04/2015).

Trade restrictions stemming from inter-clan conflicts and obstruction by Al Shabaab in rural areas of the south have impeded market flows, inflating food prices and increasing unemployment in Bakool, Gedo, Hiraan, and Lower Shabelle (USAID, 30/09/2014).

**Livelihoods**

Following the Al Shabaab attacks Garissa University in Kenya, the Central Bank of Kenya revoked the licences of 13 money remittance providers based in Nairobi in an effort to curb the financing of terrorism. Studies have shown that money received from overseas is used to meet basic needs, including water, healthcare and education (AFP, 08/04/2015; Adeso, 10/04/2015). In early February, a number of banks in the US, UK and Australia also broke ties with money transfer operators in Somalia, following concerns that the funds could be finding their way into the hands of Al Shabaab (Inter Press, 06/02/2015). USD 1.3 billion in annual remittances, representing 25–45% of Somalia’s GDP, will stop entering the country (OXFAM, 19/02/2015).

**Health and Nutrition**

Around 3 million people are in need emergency health services (OCHA, 12/03/2015). Due to lack of funding to humanitarian actors on the ground, as of November, 1.5 million people in parts of south-central Somalia no longer have access to primary health services, and 300,000 children under five no longer have access to primary health services and free immunisation (UNICEF, 31/10/2014).

Current GAM levels are 12% and SAM 1.9%, a decrease from previous levels (which were 14.9% and 2.6%, respectively) (FAO, 05/03/2015). A survey conducted October –December 2014 indicates that 203,000 children under five are acutely malnourished. 38,000 of these are severely acutely malnourished, a slight decrease from previous surveys (OCHA, 19/02/2014). The number of acutely and severely malnourished children has declined by 7% and 13%, respectively, since July 2014 (UNICEF, 31/01/2015). This is thought to be a normal seasonal variation.

1.3 million people are in need of nutritional support (OCHA, 12/03/2015). The areas with the highest critical malnutrition rates are pastoral, agropastoral, and riverine livelihood areas in North and South Gedo regions, agropastoral livelihood areas and Baidoa IDPs in Bay region, Beletweyne and Mataban districts in Hiraan region, Bossaso IDPs in Bari region, Garowe IDPs in Nugal region, and Galkayo IDPs in Mudug region (FEWSNET, FSNAU, 29/01/2015). The food insecurity situation among IDPs in Dolow is classified as Emergency (IPC Phase 4). Populations in the remaining 12 IDP settlements are in Crisis (IPC Phase 3) (FSNAU, 05/03/2015).

**Measles**

10,279 measles cases were recorded in 2014, double the number recorded in 2013 (OCHA, 24/11/2014, 19/02/2015). Most cases were reported in Banadir, Lower Shabelle, and Middle Shabelle (UNICEF, 31/01/2015). Only 30% of the population is vaccinated against measles (OCHA, 12/03/2015).

**Polio**

Somalia has been polio-free since August 2014, although humanitarian actors on the ground state that vaccination campaigns must continue as risk remains (WHO, 19/02/2015). 199 polio cases were confirmed throughout 2014 (WHO, 19/02/12015).

**Education**

1.7 million children are out of school. Children of displaced families remain the most vulnerable and neglected in access to education. 78% of children in south-central Somalia have no access to education. (OCHA, 12/03/2015).

**WASH**

2.75 million people need safe water (OCHA, 12/03/2015). Drought and water shortages persist in Bay, Hiraan Galgadud, Gedo, Lower and Middle Shabelle, and Mudug regions (OCHA, 10/04/2015). On 24 March, ECHO reported that water shortages in Bay, Bakool, Hiraan, and Middle Shabelle had led to displacement. Ten children have died of dehydration in Yagley village in Middle Shabelle. The price of drinking water continues to rise in Burdhabo and Buur-Hakaba towns (ECHO, 24/03/2015).

**Protection**

The major protection issues in Somalia are physical insecurity during the SNAF-AMISOM offensive; SGBV, including cases of sexual violence during interclan conflict; child
protection violations; killing of civilians (including children); separation of children; and forced/secondary eviction. The areas most affected are Middle and Lower Shabelle and Lower Juba (UNHCR Protection Cluster, 10/2014).

**Forced Evictions**

Reports indicate that over 25,700 IDPs have been forcibly evicted from public and private land and buildings in January and February 2015 (UNHCR, 28/02/2015). Over 3-5 March, 19,250 IDPs were forcibly evicted from Mogadishu. The majority fled to settlements in the outskirts of the city. An assessment found more than half are in need of access to shelter, 80% are in need of access safe water and latrines, 70% lacked access to food, and 60% are in need of health services in the new locations (Food Security Cluster, 23/03/2015)

Over 32,500 people were forcibly evicted in 2014. The majority moved to the outskirts of the city, particularly Sarakustra and Tabelaha. Others sought refuge in nearby IDP settlements. Forced evictions have also been reported in Kismayo, Bosaso, and Luuq (UNHCR, 28/02/2015; ECHO, 25/03/2015).

**SGBV**

The prevalence of gender-based violence in Somalia, including rape, is reported to be one of the highest in the world, with IDPs and migrants the most vulnerable (IOM, 08/08/2014). About 1,000 cases of SGBV were reported in Mogadishu in the first six months of 2014 (OCHA, 17/10/2014). On 8 September, a Human Rights Watch report stated that AU forces have been raping and sexually exploiting women and girls in their bases in Mogadishu, sometimes using humanitarian assistance to coerce them into sexual activities (HRW, 08/09/2014).

**Children**

Children are at high risk of forced recruitment, sexual exploitation and abuse in many parts of the country due to conflict. 4,314 cases of child exploitation and abuse were reported January–November 2014 (OCHA, 30/11/2014). In Tayeeglow, Lower Shabelle, an estimated 115 children have been abducted by Al Shabaab, 80 of whom are still held. It reportedly costs around USD 2,000 to secure the return of a child (OCHA, 21/11/2014). 197 grave violations against children were recorded in January 2015 (UNICEF, 31/01/2015). Grave violations include recruitment or use of children, killing, maiming, rape or other sexual violence (UNICEF).

**Updated: 14/04/2015**

**SOUTH SUDAN** CONFLICT, FLOODS, FOOD INSECURITY, DISPLACEMENT

**LATEST DEVELOPMENTS**

10 April: Two WFP staff members and a WFP-contracted driver have been missing since 1 April in Akoka county, Upper Nile state (WFP, 10/04/2015).

9 April: The South Sudanese government accused Sudan of carrying out air raids against villages near the border in Western Bahr el Ghazal and Northern Bahr el Ghazal

**KEY CONCERNS**

- 50,000 estimated killed in violence since December 2013 (International Crisis Group, 15/11/2014).
- 6.4 million people in need of humanitarian assistance in 2015; 4.1 million people to be assisted by the end of 2015 (OCHA, 08/01/2015).
- 3.5 million people expected to be in Crisis or Emergency food insecurity May – June 2015, including nearly half of the population of Jonglei, Unity, and Upper Nile (IPC, 02/2015).
- 1.5 million IDPs since December 2013 (OCHA, 02/2015). Almost 117,000 are in UNMISS bases (UNMISS, 13/04/2014). 68% of IDPs are estimated to live in flood-prone areas (OCHA, 08/2014).
- 259,000 refugees in South Sudan (mainly from Sudan, DRC, Ethiopia, and CAR).
- 521,000 South Sudanese refugees since December 2013 (UNHCR 04/2015).

**OVERVIEW**

Jonglei, Upper Nile, and Unity are priority states, and the priority sectors are food security and livelihoods, health, NFIs and shelter, nutrition, and WASH. Insecurity is hampering the delivery of assistance. The UN reports widespread violation of human rights and targeted violence against civilians.

Violence has spread across eastern South Sudan since December 2013. Fighting is most intense in the oil-rich northeastern states. Strife has progressively adopted the characteristics of an inter-communal conflict between the Dinka tribe allied to South Sudan President Kiir and government forces, and the Nuer loosely allied with former South Sudan Vice President Riek Machar.

**Political Context**

Sudan–South Sudan

Relations between Sudan and South Sudan have been poor since South Sudan gained independence in 2011. The violence in South Sudan since December 2013 has
exacerbated tensions, with additional concerns in Khartoum regarding an influx of refugees and arms, as well as disruption of oil flow. Sudan has accused South Sudan of using Sudanese militia groups to fight insurgents. South Sudan has made similar accusations.

National Context

Since violence broke out in December 2013, President Kiir’s government forces (SPLA), who are predominantly Dinka and backed by Ugandan troops, are pitted against a loose alliance of military defectors loyal to former Vice President Riek Machar (SPLM-in-Opposition, or SPLM-IO), along with ethnic Nuer militia forces. Despite a significant reduction in intensity from January 2014, violence persists.

Peace talks, mediated by the Intergovernmental Authority on Development (IGAD), an East African regional bloc, collapsed on 5 March, as two parties failed to meet a deadline for an agreement on power sharing and security issues in the final round of peace talks held in Addis Ababa (international media, 6/03/2015). IGAD said it plans to resume talks between the two parties in April (local media, 11/03/2015). Just before the deadline, on 3 March, the UN Security Council adopted a resolution setting out criteria for targeted sanctions on individuals or entities threatening security and stability in South Sudan (UN, 03/03/2015).

On 24 March, the South Sudanese parliament voted to extend President Kiir’s term by three years, thereby cancelling elections scheduled for June 2015 (AFP, 24/03/2015).

Economic Crisis

Following a 60% drop in oil production and widespread inflation, the central bank of South Sudan is allegedly printing money to meet a budget shortfall. The UN has warned of hyperinflation in the coming months (AP, 22/03/2015).

New Insurgent Groups

According to reports, part of the South Sudan Democratic Movement (SSDM) Cobra faction, based in Pibor, Jonglei, has splintered from SSDM and allied with SPLM-in-Opposition. However, a senior member of the Greater Pibor Area Administration denied these reports (local media, 15/02/2015).

**South Sudan Resistance Movement/Army**

Brigadier General Lul Ruai Koang, former military spokesperson for the SPLM-in-Opposition, left SPLM-IO and announced the formation of the South Sudan Resistance Movement/Army, consisting of members from the Lou-Nuer ethnic group. He declared a unilateral ceasefire with the government forces. According to local media, all three commissioners of counties in Greater Akobo, a Lou-Nuer territory, have dismissed his claims of a new movement (local media, 08/03/2015).

**REMNASA**

On 29 January, the South Sudanese Government acknowledged the formation of a new armed opposition movement, the Revolutionary Movement for National Salvation (REMNASA), in Western Equatoria state. REMNASA is estimated to have 100–200 soldiers (local media, 29/01/2015).

Security Context

Most violence is occurring in the oil-rich northeastern states of Unity, Upper Nile, and Jonglei.

At least 50,000 may have died since December 2013, although access restrictions make numbers hard to verify (International Crisis Group, 15/11/2014). On 3 April 2014, according to local media, representatives of the Nuer community stated that over 17,000 Nuer had been killed by pro-government forces since December.

International Military Presence

The UN Security Council voted in December 2013 to increase the number of peacekeepers in the country from 10,000 to 12,500. As of 28 February 2015, there were 11,669 uniformed personnel. The current mandate is up to 30 May 2015.

Border Tensions with Sudan

**On 8 April, the South Sudanese government accused Sudan of carrying out air raids against villages near the border in Western Bahr el Ghazal and Northern Bahr el Ghazal states. Four civilians were killed and nine injured, according to local media reports (local media, 9/04/2015; 10/04/2015).**

**Clashes between the Government and SPLM-in-Opposition**

**Jonglei**

Heavy fighting and artillery shelling were reported in Canal/Pigi county in March 2015 (OCHA, 19/03/2015). Canal/Pigi and Fangak counties saw heavy fighting and displacement of tens of thousands in November and December 2014 (OCHA, 07/11/2014).

**Unity**

Renewed heavy fighting between government and opposition forces has been reported in Bentiu and Rubkona since the end of the rainy season in late October (AFP, 10/11/2014; Reuters, 04/01/2014; OCHA, 12/02/2015). In mid-March, fighting was reported north of the Bentiu PoC site (OCHA, 19/03/2015).

On 24 March, a container filled with ammunition exploded in the village of Gayiel, Leer county, Unity state, killing seven people and injuring one. The container held ordnance left over from heavy fighting between government and opposition forces (VoA, 25/03/2015).

**Upper Nile**

Since 5 March, heavy fighting, including heavy shelling, between government and opposition forces has been reported in Duk Duk, Renk county and Manyo county. SPLA ground troops took control of Wadakona town, Manyo county, on 9 March, killing five people and trapping many civilians (OCHA, 06/03/2015; local media, 09/03/2015). Shelling
between government and opposition forces in Renk county in mid-February destroyed 18 buildings and forced hundreds to flee, according to UNMISS (USAID, 27/02/2015). A member of SPLM-IO claimed that opposition fighters bombed a ferry used by pro-government forces in their offensives (local media, 14/03/2015).

On 3 March, mortar shelling was heard across the Sobat River in Nasir. Nasir town had reportedly been largely deserted following recent attacks (OCHA, 06/03/2015). On 10 February, SPLA accused opposition forces of shelling in Malakal and Nasir counties (local media, 11/02/2015; OCHA, 12/02/2015). Shelling was also reported in Nasir county in January, along with small arms, rocket-propelled grenade, and indirect fire (OCHA, 31/01/2015; 01/01/2015). On 8 January, according to the SPLA spokesperson, 2,000 opposition fighters attacked SPLA bases and positions in an area northeast of Malakal (VoA, 15/01/2015). In March, heavy fighting was reported in GuleiGuk, on the border with Longochuk county, with reports of local populations fleeing the area.

Inter-communal Violence

Inter-clan animosity stems from competition over water resources and grazing land. Deaths from inter-communal fighting have increased since the second Sudanese civil war (1983–2005), as have attacks, abductions, and population displacement.

Lakes

Inter-communal violence has been reported in counties across Lakes state since September 2014. In March, more than 100 people were reportedly killed and 36 wounded, as more than 1,400 cattle were looted from six cattle camps in Rumbek Centre and Rumbek East counties (OCHA, 19/03/2015).

Unity

On 29 March, a grenade exploded in Bentiu PoC site injuring ten civilians. According to NGOs operating at the PoC site, the incident occurred during clashes between two groups of civilians.

Upper Nile

In early April, fighting was reported between armed youth from Dinka and Shilluk communities in Akoka county, Upper Nile state (local media, 2/04/2015). According to unconfirmed reports, 23 people were killed (OCHA, 13/04/2015).

Other Incidents

Western Bahr el-Ghazal

On 26 January, 11 people, including four journalists working for state media, were killed in an ambush in Raga county. Several armed groups are known to operate in the area, although no group has yet taken responsibility for the attack (AFP, 26/01/2015).

Humanitarian Context and Needs

6.4 million people are in need of humanitarian assistance in 2015 (OCHA, 08/01/2015). The delivery of aid is restricted by heavy fighting, logistical constraints, and administrative impediments.

Administrative Constraints

In March, the South Sudan Government announced it would implement routine searches of UN and relief organisation convoys, claiming it had intercepted arms and ammunition in UNMISS-contracted vehicles in Rumbek, Lakes state (UNHCR, 21/03/2014).

Logistical Constraints

The establishment of a humanitarian corridor between South Sudan and Sudan has been approved by both Governments and will enable the delivery of food assistance by WFP (UN, 26/08/2014).

As of 10 March, WFP reported that road access was impossible between Leer (Unity) and Mayendit (Unity). Roads have dried up and are now passable as of February (OCHA, 12/02/2015).

Security Constraints

Incidents against humanitarian personnel and assets reported in January and February 2015 included assault, burglary, harassment, arrest, and detention. Most of the cases were reported in Juba (Central Equatoria), Bentiu (Unity), and in Upper Nile state (OCHA, 18/03/2015). On 17 February, a British aid worker was shot in Juba (international media, 18/02/2014). Increased insecurity in Lakes led to suspension of activities by humanitarian organisations for several weeks from October, and in February the state reported eight access incidents related to insecurity (OCHA, 20/10/2014; 18/03/2015). A WFP staff member and one UNMISS contractor are still being held after their abduction in Malakal in October (UNMISS 17/10/2014; WFP, 17/10/2014). Two WFP staff members and a WFP-contracted driver have been missing since April 1, when contact was lost on their route between Malakal and Melut, Upper Nile state. There were intercommunal clashes along that route on the same day (WFP, 10/04/2015).

Displacement

As of 31 December 2014, over 1.5 million South Sudanese had been displaced internally and over 521,000 South Sudanese refugees had moved across borders since December 2013 (OCHA, 02/03/2014; UNHCR, 13/04/2015). Fluid displacement patterns and limited access to rural areas make numbers difficult to verify (UNHCR 11/07/2014).

IDPs

As of 13 April 2015, OCHA estimated that 1.5 million people were displaced in South Sudan: 673,000 in Jonglei, 366,000 in Unity, 244,000 in Upper Nile, and 133,000 in Lakes (OCHA, 12/02/2015). An estimated 802,120 IDPs are under 18 (UNICEF, 26/03/2015). Displacement patterns remain fluid, driven by violence, floods, and the search
for emergency assistance (IOM, 03/09/2014).

Since January 2015, an estimated but unverified 13,800 people have been displaced due to inter-communal violence in Lakes state (OCHA, 19/03/2015).

117,000 IDPs are sheltering in six Protection of Civilians (PoC) sites on UNMISS bases including 52,900 in Bentiu, 34,000 in Juba UN House, 26,000 in Malakal, and 2,600 in Bor (UNMISS 13/04/2015). The Bentiu PoC site is being expanded to shelter up to 60,000 IDPs (UNMISS, 24/02/2015). In early April, 4,500 people arrived at the PoC site in Malakal fleeing recent fighting in Upper Nile (UN, 7/04/2015).

Refugees in South Sudan

259,232 refugees are in South Sudan: 235,000 from Sudan, 15,500 from DRC, 4,900 from Ethiopia, and 2,040 from CAR. Over 133,000 refugees are based in Upper Nile and around 94,000 in Unity (UNHCR, 31/03/2015). Most of the Sudanese refugees in Upper Nile state reside in four refugee camps in Maban county (OCHA, 03/04/2014).

Between 23 December 2014 and 14 February 2015, more than 5,000 refugees from South Kordofan and Blue Nile states arrived in Yida town, Unity state (UNCHR, 19/02/2015). Arrival rates exceed 500 people per week, double the rate during the same period a year ago. Of the new arrivals in Yida between 20 and 26 February, 65% were women and children (OCHA, 21/02/2015). Refugees cited aerial bombardments, ground attacks and lack of livelihood and education opportunities as reasons for leaving (UNHCR, 30/01/2015).

The South Sudanese Government wants to close Yida camp by June 2015 and relocate refugees to other camps. The South Sudan Government and UNHCR have agreed to expand Ajoung Thok refugee camp to accommodate up to 40,000 people. Panyir, a new site 6km from Yida, has been identified as a potential refugee camp (UNHCR, 19/02/2015).

Returnees

As of 28 August 2014, 186,000 people had returned since the beginning of the crisis: 70,000 in Jonglei, 109,000 in Unity, and 5,000 in Northern Bahr el Ghazal (OCHA, 28/08/2014).

Earlier reports indicated a total of 1.9 million returnees from Sudan since 2007.

South Sudanese nationals as refugees and instead considers them to be Sudanese citizens (UNHCR, 03/04/2014). UNHCR declared this constitutes an obstacle to accessing humanitarian assistance.

Ethiopia: 199,000 South Sudanese refugees (UNHCR, 10/04/2015).

Uganda: 146,000 refugees (UNHCR, 09/04/2015).

Kenya: 45,000 refugees (UNHCR, 02/03/2015).

Food Security

Food security is expected to deteriorate from Crisis (IPC Phase 3) to Emergency (IPC Phase 4) in several counties in Unity, Jonglei and Upper Nile state in April (FEWSNET, 23/02/2015). An early onset of the lean season is expected, and an estimated 3.5 million people will be in Crisis and Emergency food insecurity in May and June (FEWSNET, 04/03/2015). An estimated 90,000 people are in need of food assistance in Guit county, Unity state (12/02/2015).

The food security situation has worsened in Warrap and Lakes states, as they experienced above-normal flooding in 2014, which affected crop harvests, livestock migration, and disease patterns. In Lakes state, increased inter-clan fighting and cattle raiding has affected the stability of livelihoods (IPC, 02/2015). According to WFP’s Vulnerability Analysis Mapping, 15% of households in Warrap state are severely food insecure, the highest percentage in South Sudan (WFP, 12/2014).

Livestock are moving into agricultural areas, rather than conflict-affected pastoral zones. This has destroyed crops, heightens the risk of livestock disease transmission, increases competition for natural resources, and is likely to have an impact on local power structures (FAO, 12/2014). Conflict has also affected trade flows and market infrastructure, and weakened financial systems (WFP, 02/2015). The country depends on food imports, and a de facto devaluation of the national currency between 2011 and 2013, the reduction in oil exports, and the increase in imports, all have a negative impact on households’ purchasing power.

Health and Nutrition

5.8 million people need health assistance. Waterborne diseases in flooded areas, as well as kala azar (visceral leishmaniasis) in Jonglei, are the most pressing health concerns (WHO, 10/2014). Malaria, acute respiratory infections (ARI), acute watery diarrhoea (AWD), and acute bloody diarrhoea (ABD) are the main causes of illness among the IDPs (WHO, 15/02/2015).

Cholera

A cholera outbreak in Nakoringole, Ikotos county, Eastern Equatoria state has claimed 43 cases, including three deaths (case fatality rate, or CFR, 7%), since 11 February (WHO, 15/02/2015). No new cholera cases had been reported as of mid-March (WHO, 17/03/2015).

Hepatitis E
29 hepatitis E cases have been reported in Bentiu since mid-December. The cumulative caseload in Mingkaman IDP settlement is 135, including six deaths (CFR 4.6%) (WHO, 15/02/2015).

Measles

A measles outbreak has been confirmed in Bentiu PoC, with 130 cases of measles reported as of 9 April (OCHA, 13/04/2015)

An estimated 10% of new refugees arriving in Yida suffer from measles (UNHCR, 30/01/2015).

Nutrition

The screening of over 600,000 children across the country in 2014 found a SAM rate of 6.7% and a MAM rate of 12.6% (UNICEF, 19/08/2014).

As of 4 February, at least 229,000 children are estimated severely malnourished (UNICEF, 04/02/2015). 448,000 children were estimated to be moderately malnourished in mid-2014 (OCHA, 29/07/2014). Twice as many needed treatment for SAM in 2014 than in 2013 (UNICEF 15/07/2014).

Malnutrition screening of 22,917 children in January and February in the three conflict-affected states found GAM levels above the emergency threshold of 15% in Upper Nile (17.2%), Unity (18.9%) and Jonglei (26%) (UNICEF, 26/03/2015). In the traditionally high burdened states in the non-conflict affected areas, the GAM rates were highest in Warrap (17.2%) and Northern Bahr el Ghazal (14.6%) (WFP, 12/2014). The highest GAM rates were recorded in Leer county (34.1%) and Panyijar (32.8%), Unity state; Akobo East, Jonglei State (31.8%) and Uror (27%), Jonglei; and Aweil South, Northern Bahr el Ghazal (26.1%) (UNICEF, 20/11/2014).

In Bentiu PoC site, a screening of 12,018 children revealed a proxy GAM rate of 12.5%, an improvement since the previous screening in December (proxy GAM rate of 18.8%) (OCHA, 06/03/2015).

Visceral leishmaniasis

1,025 cases of visceral leishmaniasis, including 31 deaths (case fatality rate 3.02%), have been reported in Lankien, Ulang, Walgak, and Chui (Jonglei) since the beginning of 2015. Of these, 837 were new cases, 188 were relapses, and 18 did not complete treatment (WHO, 15/02/2015; 17/03/2015).

7,204 cases and 199 deaths were recorded in 2014, compared to 2,992 cases and 88 deaths for all 2013 (WHO, 08/01/2015). Most cases were reported in Jonglei (OCHA, 30/10/2014). Kala azar is a chronic and potentially fatal parasitic disease transmitted by the bite of infected sandflies.

WASH

Water supply coverage in Ajoing Thok camp was only 10.9 litres per person per day, much below the minimum standard of 20 liters per person per day (UNHCR, 10/04/2015).

Water supplies were reportedly insufficient in a quarter of displacement sites. Health partners have reported an over 5% increase in diarrhoeal diseases due to the disruption of sanitation and hygiene campaigns in PoC sites (OCHA, 14/11/2014). Water access in Bentiu PoC site was 10.1 L per person per day and there were 93 persons per latrine as of March 2015 (IOM, 20/03/2015).

Education

1.7 million children and adolescents are in need of emergency education, including 400,000 who have dropped out of school (UNICEF, 16/01/2015).

Children are not attending school in 70% of IDP sites (CCCM, 17/04/2014). The inability to pay teachers' wages has limited education activities in displacement areas (OCHA, 26/10/2014). 83 schools are occupied by armed groups or IDPs (OCHA, 27/03/2014). Many schools remain closed in Jonglei, Unity, and Upper Nile. Rising insecurity has disrupted education in remote villages in Lakes state: Yirol West, Cueibet, Rumbek North, Rumbek East and Rumbek Central counties are most affected. The state ministry of education has relocated 19 primary schools from remote areas into Rumbek town for safety reasons (local media, 20/03/2015).

Protection

Children

A UN Security Council report stated that all parties to the conflict since December 2013 were responsible for grave violations against children in 2014, including killing and maiming, recruitment and use, abduction, and rape and other forms of sexual violence (UN, 30/12/2014).

12,000 children were reportedly recruited by armed groups in 2014 (AFP cited UNICEF, 14/12/2014). On 21 February, an unidentified armed group abducted at least 89 boys, some as young as 13, from their homes in the town of Wau Shilluk, near Malakal (Upper Nile). According to UNICEF, the number may be in the hundreds and the children have been recruited as child soldiers. The Shilluk militia, allied with SPLA, is believed to be responsible (UNICEF, 28/02/2015).

UNICEF has identified over 5,830 unaccompanied and separated children since the conflict began in December 2013 (UNICEF, 02/09/2014).

SGBV

According to the UN Special Representative on Sexual Violence in Conflict, rape has been used as a weapon of war between government and opposition forces (international media, 23/10/2014). Early and forced marriage, rape, and domestic violence have been reported in Maban refugee camps (Batil, Doro, Gendrassa and Kaya) (OCHA, 16/10/2014). In Melut (Upper Nile), firewood collection remains a major safety concern for women and girls, with reports of GBV (OCHA, 26/10/2014). Gang rape and forced marriage are increasing in
Cuibeit county, Lakes state, and Magwi and Torit counties, Eastern Equatoria state, as a result of inter-communal violence (OCHA, 09/02/2015).

Updated: 13/04/2015

SUDAN CONFLICT, FOOD INSECURITY, EPIDEMIC, DISPLACEMENT

LATEST DEVELOPMENTS

13 April: Parliamentary and presidential elections are underway as of 13 April, and will conclude on the 15th.

8 April: An estimated 16,300 IDPs have arrived from central Jebel Marra locality in recent weeks, fleeing fighting between government and militia and lacking humanitarian assistance (OCHA, 08/04/2015).

1 April: Sudanese army warplanes dropped ten bombs in an airstrike, in Rowata, Central Darfur, killing 14 civilians and injuring 18 (local media, 7/04/2015).

KEY CONCERNS

- Protracted insurgencies by armed groups are occurring across Darfur, and South Kordofan and Blue Nile states. The conflict in South Sudan has also raised tensions.
- 6.6 million people (20% of the population) need humanitarian assistance (OCHA 17/11/2014): 4.4 million in Darfur and 980,000 in South Kordofan and Blue Nile states (OCHA, 11/2014).
- 2 million children under five acutely malnourished (OCHA, 03/2015).
- Renewed fighting between armed opposition groups, militias, and the Sudanese army in Darfur since March.
- 3.1 million IDPs. Two million in Darfur prior to the latest clashes (OCHA, 03/2015), and 431,000 displaced in 2014 (OCHA, 12/2014) and 43,000 newly displaced in 2015 (OCHA, 02/2015).
- Humanitarian access remains a significant problem due to insecurity, mines and explosive remnants of war (ERW), logistical constraints, and restrictions placed by the authorities.

OVERVIEW

Several regions of Sudan are facing large-scale internal displacement due to violence, widespread food insecurity, malnutrition, lack of access to basic services, and recurrent natural disasters. Humanitarian access to conflict zones is severely restricted.

Numerous, protracted insurgencies are being waged by several armed groups across Darfur, South Kordofan, and Blue Nile. Darfur has been the scene of inter-communal clashes and conflict between the government and armed opposition for over a decade, and fighting intensified in March 2014. Violence in Blue Nile and South Kordofan grew significantly after South Sudan won independence in 2011. Tensions also continue to run high between Sudan and South Sudan.

Political Context

Profound divisions within Sudanese society have persisted since independence in 1956, and the Government’s exploitation of intercommunal differences has aggravated the situation.

Parliamentary and presidential elections are underway as of 13 April. On 11 January, President Omar al Bashir launched his bid for re-election (AFP, 11/01/2015). Both the Sudan Revolutionary Front and the National Umma Party have announced they will not participate in the elections.

Sudan–South Sudan

Tensions between Khartoum and Juba, persistent since South Sudan’s independence in 2011, increased when violence erupted in South Sudan in December 2013. The disruption of oil flow is a key concern for both countries. In November 2014, South Sudanese officials accused the Sudanese Government of bombing Raga county, Western Bahr el Ghazal state, and Maban county, Upper Nile state, where more than 220,000 Sudanese refugees are living (AFP, 14/11/2014).

The Sudanese Government has accused Juba of using Sudanese militia groups, and the South Sudanese army (SPLA) has accused Khartoum of supporting the Sudan People’s Liberation Movement -in-Opposition. Both the opposition and Khartoum have denied the accusations.

Sudan Revolutionary Front

The Sudan Revolutionary Front (SRF), formed in 2011, is seeking a comprehensive peace process covering the whole country. The Government is only willing to discuss the conflict in Darfur.

The SRF is made up of the Sudan People’s Liberation Movement-North (SPLM-N), mainly active in Blue Nile and South Kordofan states, as well as Darfur’s three largest opposition groups: the Justice and Equality Movement (JEM); the Sudan Liberation Movement led by Abdel Wahid Al Nur (SLM-AW); and the Sudan Liberation Movement led by Minni Arkou Minnawi (SLM-MM).

On 27 March 2015, the Sudanese government and a number of Darfur opposition-group commanders led by Mohamedain Ismail Bashir, formerly the operation commander of the SLM-MM, signed a peace agreement in N’Djamena, Chad. The African Union High Level Implementation Panel (AUHIP) had called for a meeting on 5 April with the government and opposition groups in Darfur, including SLM-MM and their political allies, to discuss
procedures for a national dialogue process but the talks were suspended after both parties refused to attend (local media, 27/03/2015; 1/04/2015).

Blue Nile and South Kordofan States

While the SPLM governs the independent South Sudan, the SPLM-North continues an insurgency in Sudan’s Blue Nile and South Kordofan states, which have routinely opposed government rule. Talks between Khartoum and the SPLM-N have repeatedly failed, and negotiations last collapsed in April 2014, reportedly over the SPLM-N’s demand for a comprehensive peace process.

Security Context

Extensive military operations aimed to end armed opposition in Darfur, South Kordofan, and Blue Nile began at the end of 2013. Tribal fighting also intensified in Darfur and Kordofan regions in 2013 and 2014, leading to thousands of deaths and injuries and forcing over 300,000 people to flee their homes. Large-scale violence by pro-government militia against the IDP population in Darfur continues in 2015.

UN Peacekeeping Mission

On 30 November, President Omar al Bashir called for a “clear programme” for the exit of the UNAMID mission in Darfur. Relations deteriorated following the Sudanese Government’s refusal to allow a UNAMID investigation of mass rape in Tabit, North Darfur (AFP, 30/11/2014). A working group of officials from the United Nations, African Union and the Sudanese government reached an agreement on the terms of reference for the exit strategy in February and will resume discussion in early April (local media, 8/03/2015).

Darfur

Security in Darfur has reportedly deteriorated significantly since late December 2013, with numerous aerial bombings in the region, including by the Sudanese Air Force (SAF). Attacks by pro-government militia on IDPs and villagers, their shelters, and commercial convoys, are frequent. On 1 April, Sudanese army warplanes dropped ten bombs in an airstrike on Rowata, Central Darfur, killing 14 civilians and injuring 18 (local media, 7/04/2015).

In early January, 15 villages were burned and another 30 abandoned during fighting between government forces and armed groups in Tawila and Um Baru localities, North Darfur (OCHA, 08/01/2015; local media, 06/01/2015).

In early January, government and opposition forces were reported to be fighting for control over Fanga area, Jebel Marra region (AFP, 02/01/2015). 21 villages in Fanga were burned (local media, 29/01/2014). On 1 February, 11 bombs were reportedly dropped in Golo locality, but no one was killed (local media, 02/01/2014).

Inter-communal violence: On 22 March, clashes between Falata and Salamat tribes in South Darfur left more than 36 dead and more than 70 wounded (local media, 26/03/2015). On 20 March, clashes between Berti and Al Zayadia tribes killed or injured an estimated 30 people near El Fasher, North Darfur. Several villages were also reportedly burned (AFP, 20/03/2015; local media, 20/03/2015). In January, clashes between Falata and Massalit tribes, in Graida, South Darfur, killed nine people and destroyed 165 homes (local media, 22/02/2015). In 2014, there were serious clashes between Misseriya and Salamat in Central Darfur, between Misseriya clans in West Darfur, and between Maaliya and Rizeigat in East Darfur (local media, 20/08/2014).

Kordofan and Blue Nile

Information on Blue Nile and South Kordofan states is difficult to obtain as government authorities severely restrict access to the fighting zone. The Sudanese Government announced that it would expand its counter-insurgency operations in Blue Nile state in May 2014. There have since been reports of an SAF offensive and intensified bombing in the region. Fighting between SPLA-N and the government troops intensified in March, with SPLM-N claiming they captured the garrison town of Habila on 28 March. According to SPLM-N, 54 government troops were killed in the attack but government troops denied both claims (OCHA, 22/10/2014; local media, 25/11/2014; 23/02/2015; AFP, 28/03/2015). On 4 April, SPLM-N claimed that they had captured a truck in South Kordofan, which was carrying ballot boxes for nationwide elections to be held on 13 April (AFP, 5/04/2015).

Abyei

According to the UN peacekeeping force in Abyei (UNISFA), an estimated 100 armed Misseriya attacked and burned 24 houses in Marialachak, a village in southern Abyei in early March (local media, 04/03/2015).

Humanitarian Context and Needs

6.6 million people (20% of the population) are in need of humanitarian assistance; more than half are in Darfur and South Kordofan and Blue Nile states (OCHA 17/11/2014).

In October, 4.4 million people in Darfur, more than half of the region’s population, needed humanitarian assistance (OCHA). This includes 2.4 million IDPs, 1.9 million non-displaced severely affected by violence, and 136,000 returnees or refugees from neighbouring countries.

In South Kordofan and Blue Nile states, 749,000 need assistance in government-controlled areas and 378,000 are estimated displaced by conflict in SPLM-N territory. Limited access to non-government areas makes verification impossible.

Access

Humanitarian access for international relief organisations is a major problem. Humanitarian operations are heavily hampered by insecurity, the presence of mines and ERW, logistical constraints, and government restrictions. The number of humanitarian aid workers in Darfur declined from 6,850 in November 2013 to 5,440 in August 2014 (OCHA, 17/11/2014).

Following fighting in Habila town, South Kordofan, all towns in Habila, Dilling and Al Qoz localities were inaccessible, with the exception of Dilling town (OCHA, 29/03/2015).
August 2013 regulations ban foreign humanitarian groups and UN agencies from working for human rights, and the Government has banned humanitarian access to areas controlled by opposition groups.

East Jebel Marra has been virtually inaccessible since 2010. Access to IDPs in Darfur is constrained by militia checkpoints and insecurity.

The Sudanese Humanitarian Aid Commission banned international staff from UN agencies and international NGOs from participating in an inter-agency multi-cluster needs assessment in Blue Nile state in November (local media, 19/10/2014). There has been no humanitarian access from Sudan to opposition-held areas in South Kordofan since October 2013.

Security Incidents Involving Aid Workers

On 8 February, three Sudanese Red Crescent workers were killed in Blue Nile state. Details of the incident are still unclear (ECHO, 10/02/2015). On 25 January, SPLM-N shot at a WFP helicopter, east of Kadugli, South Kordofan, forcing it to land. Médecins Sans Frontières (MSF) suspended all medical activities in Frandala, South Kordofan after it was bombed in January (MSF, 22/01/2015). There were further incidents in North and South Darfur in January. 25 aid workers were abducted in Darfur in 2014, the highest number of abduction cases recorded since 2004 (OCHA, 22/01/2015).

Displacement

IDPs

As of February 2015, there are 3.1 million IDPs in Sudan, most of whom are in Darfur (OCHA, 03/2015).

2.4 million IDPs reside in 46 camps and 68 settlements in Darfur (82,530 orphans, 34,099 widows, and 52,352 sick and elderly), according to a survey conducted by the Darfur Regional Authority (DRA) from December 2013 to April 2014. OCHA reported in June that government policy to prevent the creation of new camps is an obstacle to the verification and registration of IDPs.

457,000 people were displaced in Darfur January–December 2014, more than in any year since 2004: 141,000 have reportedly returned (OCHA 31/12/2014; 20/07/2014).

41,304 newly displaced have been verified in North Darfur since early January, with an additional 63,900 reported but not verified in North and Central Darfur, including Jebel Marra. Among the unverified, 36,000 people have been displaced in West, Central and North Jebel Marra localities (OCHA, 05/02/2015; 15/02/2015; 01/03/2015).

Jebel Marra: More than 3,000 displaced arrived at areas controlled by the Sudan Liberation Movement, led by Abdel Wahid El Nur (SLM-AW) in Jebel Marra, which is in both North and Central Darfur states. According to SLM-AW, the displaced had fled attacks by government forces on Golo and the neighbouring villages in January (local media, 15/03/2015).

North Darfur: 148,000 total IDPs as of March 2015. 107,000 IDPs; 124,000 returnees in 2014 (OCHA 31/12/2014). 729 villages were destroyed December 2013–April 2014 (DRA cited by local media 16/07/2014). OCHA has verified another 41,304 newly displaced: 4,458 in Rwanda camp; 10,886 in Shagira A, B, C, Behir, and Um Hajaleed towns; 4,587 in Tawila town; 1,645 in Kino and Midasis villages; 4,000 in Guido town; 6,189 in Argo camp; 418 in Dali camp; 7,450 in Um Baru UNAMID site; 1,031 in Majdod town; and 624 in Nifasha camp (OCHA, 22/02/2015).

South Darfur: According to HAC, 2,500 people from the Salamat tribe fled Al Nadeef village for Katila locality, in South Darfur’s Buram locality following fighting between the Salamat and Falata on 21 March (OCHA, 29/03/2015). 105,000 IDPs (OCHA, 31/12/2014). 736 villages were destroyed December 2013–April 2014 (DRA cited by local media 16/07/2014).

Central Darfur: 74,000 verified IDPs as of 2015; 68,000 IDPs; 5,000 returnees in 2014 (OCHA 31/12/2014). 778 villages were destroyed December 2013–April 2014 (DRA cited by local media 16/07/2014). In March and April 2015, an estimated 16,300 IDPs arrived in Guido town from central Jebel Marra locality, fleeing fighting between government and militia, as well as lack of humanitarian assistance. Of these, 6,200 people are from Golo, Jebel Marra, according to aid agencies (OCHA, 08/04/2015).


West Darfur: 1,300 IDPs were reported by OCHA in December 2014, in stark contrast with an earlier local government figure of 373,000 (OCHA, 07/09/2014; DRA cited by local media 16/07/2014).

Blue Nile and South Kordofan: In South Kordofan and Blue Nile states, 378,000 people are estimated displaced in SPLM-N territory (OCHA, 03/02/2015). With no presence in the SPLM-N territory, the UN is unable to verify these figures (OCHA, 19/05/2014). Between November 2014 and mid-January 2015, 820 new displaced people from SPLM-N areas sought shelter in government-controlled areas of South Kordofan (OCHA, 22/01/2015). Between 9 and 18 March, an estimated 23,600 people fled fighting between SPLM-N and government troops and arrived in Al Abassiya, Abu Jubaitha and Rah Abu Jubaitha and Rashad towns as well as surrounding villages in South Kordofan State, according to the Government of Sudani’s Humanitarian Aid Commission (HAC). Almost 60 per cent of these new internally displaced people (IDPs) are women and children under the age of five. An estimated 19,000 of the total 23,600 newly displaced were in El Abassiya and Abu Jubaitha localities (OCHA, 23/03/2015). Fighting in Hабila, South Kordofan, at the end of March caused displacement towards villages in Habila, Dilling and Al Ooz localities, according to HAC. According to the HAC, nearly all people who fled their homes in Habila returned in early April (OCHA, 08/04/2015).

According to the HAC in South Kordofan, a large but unknown number of displaced people are expected to arrive in Kadugli, Al Abassiya, Rashad, Talodi, and Gadier localities from areas controlled by SPLM-N (08/01/2015).
In mid-March, NGOs in Blue Nile reported that 900 people had been displaced from Derag village in Bau locality, fleeing fighting between government forces and SPLM-N in the area. 480 displaced people arrived in Azaza and Algary village in El Roseires locality, 120 in Ed Damazine town and 300 in Bulpang village in Kurmuk locality (OCHA, 15/03/2015).

**West Kordofan:** More than 52,000 people were reported displaced in September (OCHA, 21/09/2014).

**Abyei:** According to an inter-agency mission, nearly 1,700 people have fled Marialahak village following attacks by armed Misseriya. An additional 1,000 residents of Rumamier fled to other areas south of the Kiir river.

**Refugees in Sudan**

As of 1 April 2015, more than 130,000 South Sudanese nationals had arrived in Sudan since 15 December 2013. Between 8 and 19 March, more than 5,000 refugees arrived from Upper Nile state, South Sudan, fleeing fighting between government and opposition forces (UNHCR, 19/03/2015).

An estimated 71,000 refugees live in White Nile, 32,000 in Khartoum, 14,000 in South Kordofan, 3,800 in West Kordofan, and 3,600 in Blue Nile (UNHCR, 19/02/2015; 14/03/2015). 66% (85,240) are children (UNICEF, 02/2015). 91% of households are female-headed (UNHCR, 29/01/2015).

All sites in White Nile state are beyond capacity. Access for aid workers is a concern (ECHO, 23/09/2014).

An estimated 347,000 people of South Sudanese origin are in Sudan (OCHA, 30/04/2014). 6,800 displaced South Sudanese are living in the disputed area of Abyei (OCHA, 17/12/2014).

As of 1 June 2014, Sudan was hosting 157,000 refugees, mainly from Eritrea, with smaller numbers from Chad, Ethiopia, and Somalia, according to UNHCR figures. As of 8 February, UNHCR reported 2,270 CAR refugees in Nyala, South Darfur. They will be relocated to Um Shalaya refugee camp in Central Darfur (OCHA, 08/02/2014).

**Returnees**

Over 9,300 Sudanese have returned from CAR to Um Dafug town, South Darfur (OCHA, 15/02/2015). An estimated 3,000 people had spontaneously returned to the Kernek and Beida localities, West Darfur, by mid-February, according to the HAC (OCHA, 15/02/2015).

**Sudanese Refugees in Other Countries**

As of January 2015, OCHA reported 367,000 Sudanese refugees in Chad, 233,000 in South Sudan, 35,000 in Ethiopia, and 1,880 in Central African Republic (UNHCR, 23/02/2015; OCHA, 03/02/2015).

10,000 refugees from South Kordofan are reported to have fled to South Sudan (Yida, in Unity state) since 23 December 2014. At 500 people a week, the rate of arrival is double that of the same time period in 2013 (UNHCR, 30/01/2015).

**Food Security**

Despite improved food security conditions, acute food insecurity persists among 3.5 million IDPs and host communities in conflict-affected areas. An estimated 20–30% of IDPs in Darfur are expected to remain Stressed (IPC Phase 2) through June 2015 (FEWSNET, 01/02/2014). An estimated 25–30% of IDPs in SPLM-N-controlled areas of South Kordofan will remain in Crisis (IPC Phase 3) (FEWSNET, 03/2014). Hundreds of families in Graida, South Darfur, are facing food shortages after clashes between Falata and Massalit tribes destroyed more than 165 homes (local media, 22/02/2015).

Food availability has otherwise improved. Harvests in North and West Darfur are above-average due to good rains and increased cultivation in some areas. The preliminary findings of the joint Crop and Food Supply Assessment Mission (CFSAM) estimates that 2014/15 national production will be 50% above the five-year average (FEWSNET, 12/2014).

**Health and Nutrition**

The UN estimated in mid-December 2013 that 165,000 children in SPLM-N-controlled parts of South Kordofan and Blue Nile do not have access to basic health services.

There are indications that the health situation in Darfur is deteriorating; many have no access to healthcare.

**Measles**

More than 1,120 confirmed measles cases and 15 deaths have been reported in 12 states in 2015, the majority in Gedaref and Kassala states (OCHA, 29/03/2015).

More than 100 cases of measles have been reported by the three health centres in Otash IDP camp, South Darfur (local media, 02/03/2015).

**Nutrition**

Two million children under five were acutely malnourished as of 30 September 2014, an upward revision from 1.4 million at the beginning of August (OCHA, 15/10/2014). An estimated 500,000 were severely malnourished in 2014 (OCHA, 24/08/2014).

On 27 February, the Federal Ministry of Health acknowledged that children in Sudan suffer from iodine deficiency. The Ministry estimated the deficit to be on average 22% across the country, and 86% in Darfur and 78% in White Nile (local media, 27/02/2014).

**WASH**

A severe shortage of drinking water was reported in February after two wells were damaged in Tabit, Tawila locality, North Darfur (local media, 09/02/2015). According to an inter-agency mission, significant water supply problems were reported in North Darfur’s Tawila locality, particularly in Argo camp. 14 of 40 water sources in Tawila locality were contaminated with bacteria (OCHA, 01/03/2015).
Drinking water crises have also been reported in Kereinik locality, West Darfur and El Jeer district, Nyala, South Darfur (local media, 22/02/2015).

According to the HAC, there is a severe water shortage in South Kordofan’s Abu Kershola locality, after eight hand pumps broke down (OCHA, 01/03/2015).

Protection

Mines and ERW

250 locations covering an estimated 32km² are contaminated by mines and ERW, with the greatest concentrations in Kassala, Gedaref, Red Sea, Blue Nile, South Kordofan, and Darfur (UNMAS). South Kordofan is the most heavily mined area of Sudan, according to the Landmine and Cluster Munition Monitor.

Sexual and Gender-based Violence

Rape of IDPs by pro-government militia was frequently reported by the local media in North, South, and Central Darfur and Jebel Marra in 2014. Reports in early November suggested that more than 200 women and girls had been raped by Sudanese soldiers in Tabit area in North Darfur. Sudanese troops denied UNAMID access to assess the situation (Reuters, 17/11/2014).

Legal Status

As of March 2014, the Sudanese Government refuses to recognise South Sudanese nationals as refugees and instead considers them to be Sudanese citizens (UNHCR, 03/04/2014). All foreigners in Sudan had to register with the immigration administration by 1 April. UNHCR has declared this constitutes an obstacle to humanitarian assistance.

Updated: 13/04/2014

CAMEROON FOOD INSECURITY, EPIDEMIC, DISPLACEMENT

LATEST DEVELOPMENTS

6 April: Boko Haram attacks in northern Cameroon are increasing; militants cross the border for supplies like food and livestock, causing the population to flee (AFP, 06/04/2015).

KEY CONCERNS

- 2.1 million people are in need of humanitarian assistance (OCHA, 17/12/2014).
- 295,000 refugees have arrived from CAR and Nigeria (OCHA, 10/03/2015).
- An estimated 1.08 million people are food insecure in 2015 (OCHA, 10/03/2015).

Overview

Conflict in both Nigeria and CAR continues to displace vulnerable refugees to Cameroon, and the spillover from the Boko Haram conflict in Nigeria in particular threatens security in Cameroon. Some 2.1 million people, 10% of the population, are in need of humanitarian assistance, primarily in the Far North, North, Adamawa, and East regions.

For more information, visit the ACAPS country analysis page.

Security Context

Boko Haram Attacks

The armed Islamist group Boko Haram (BH), based in Nigeria, has intensified attacks in neighbouring Cameroon since the end of December (ECHO, 06/01/2015). The number of security incidents increased drastically between 2013 and 2014, as BH targeted villages with more sophisticated weapons taken from the Nigerian army (UNICEF, 08/2014). While attacks are still concentrated in the Far North region, they have spread southward. An increase in attacks to obtain supplies like food and livestock has been recorded in the north in March–April (AFP, 06/04/2015). BH began its campaign of armed violence in northeastern Nigeria in 2009.

In mid-December, hundreds of BH had crossed into Far North region from Lake Chad, ransacking towns and villages and stealing livestock. BH also attacked military vehicles in Amchide (Reuters, 18/12/2014; VoA, 13/12/2014). At the end of December, BH sent up to 1,000 fighters into Cameroon. They took control of the military base in Achigachia and five villages in the Far North region, prompting Cameroon’s first airstrike against BH (BBC, 29/12/2014). BH carried out a cross-border raid on a military base in the northern town of Kolofata on 12 January (Daily Mail, 14/01/2015).

Hundreds were killed in fighting in October and November. In early December, following reports of increasing recruitment of Cameroonian youth into BH, Cameroon announced it will recruit 20,000 more defence and security forces to fight the militants (VoA, 02/12/2014). The United States has announced it will supply equipment and logistics training to the Cameroonian military to aid the campaign (VoA, 12/12/2014). The Chadian Government has also pledged to support Cameroon in fighting BH (Daily Mail, 14/01/2015).

Recent Incidents

On 19 and 21 February, Boko Haram attacked Irba village, Mayo Tsanaga department, and Tokomari village, Mayo Sava department (UNHCR, 22/02/2015).

On 3 January and 8 February, Boko Haram attacked two buses in the Far North region, kidnapping 20 people and killing 11 (BBC, 09/02/2015; VOA, 03/01/2015). From 11 January to 4 February several cross-border attacks in response to Chad’s troop deployment to combat BH left more than 80 dead and 80 kidnapped (AFP, 29/01/2015; 04/02/2015; Al Jazeera, 19/01/2015).

16 people, including a mayor and local government officials, were kidnapped in March in
Garoua-Boulai, Far North region. They were then taken into CAR (VoA, 21/03/2015; Reuters, 20/03/2015).

**Humanitarian Context and Needs**

2.1 million people are in need of humanitarian assistance (OCHA, 17/12/2014).

**Access**

The limited number of humanitarian actors involved in the response in the Far North has made comprehensive humanitarian intervention almost impossible.

**Logistical Constraints**

The delivery of aid is complicated by the low presence of humanitarian actors in Cameroon (OCHA, 17/12/2014).

Bad road conditions delay the provision of assistance.

**Security Constraints**

The deterioration of the security situation has made access to the Far North extremely difficult. UN agencies have only been undertaking priority activities such as assisting refugees and some host communities, according to WFP (IRIN, 15/08/2014). Organisations like UNHCR do not have access to certain localities where refugees are present, due to heightened insecurity (UNHCR, 25/01/2015).

**Disasters – Heavy rains**

The fishing and tourism industry is threatened by heavy rains and surging tides in southern Cameroon. In 2014, tourism dropped by 60% (Reuters, 30/03/2015).

**Displacement**

At March 2015, there were 407,000 displaced people in Cameroon, including 311,000 refugees from CAR and Nigeria and an estimated 96,000 IDPs in northern regions due to the spillover of the Nigerian conflict (OCHA, 14/01/2015; 10/03/2015; 20/03/2014; UNHCR, 29/03/2015). The number of IDPs almost doubled from the 60,000 recorded on 10 February (OCHA, 10/02/2015), but by 29 March, stood at 96,000 (UNCHR, 29/03/2015). As attacks increase, people are moving toward central Cameroon (OCHA, 06/01/2015).

**Refugees from the Central African Republic**

As of March, 245,000 CAR refugees are in Cameroon: 138,400 have arrived since December 2013 (OCHA, 24/03/2015; 30/01/2015; UNHCR, 13/03/2015). But the border is open and extensive, and there are refugees who cross without being registered. In January 2015, it was reported that the influx of CAR refugees has dropped from 10,000 per week to 8,000. The reduced flow of refugees indicates an improved situation in CAR, but many refugees are reluctant to go home because they are concerned about food security and livelihoods (VoA, 16/03/2015).

In most locations, the number of refugees and third-country nationals exceeds the local population. Host communities and refugees are competing over already inadequate resources and living conditions have become very difficult for host communities (FAO, 11/12/2014).

2,000 CAR refugees were reported in Gbiti, a border town, but due to access difficulties, only 215 have been registered (UNHCR, 20/02/2015). 600 people fled to Gbiti, eastern Cameroon, due to ex-Seleka attacks on 29 January (OCHA, 03/02/2015).

**Refugees from Nigeria**

74,000 Nigerians are estimated to have fled to northern Cameroon since May 2013 (UNHCR, 25/03/2015; 22/02/2015; OCHA, 10/03/2015). Between 28 February and 1 March, 16,000 new Nigerian refugees arrived due to BH attacks and are now awaiting relocation to Minawao camp (ECHO, 05/03/2015). The number of pre-registered refugees doubled from 20,000 to 40,000 in just 21 days in February (UNHCR, 22/01/2015; 25/01/2015; VoA, 23/02/2015).

33,000 refugees have been registered in Minawao camp, in the Far North region (UNHCR, 25/01/2015; 01/02/2015; 28/02/2015; 25/03/2015). The camp’s maximum capacity is 15,000, and the population was only 6,000 in August 2014. The rapid growth in population has put health and education services under severe strain, with water use restricted to 6.6 L/person/day (UNHCR cited by IRIN 06/10/2014; UNHCR, 25/01/2015; VoA, 23/02/2015). The needs among refugees are largely WASH, health, and nutrition-related (UNHCR, 22/02/2015). Local residents from Marwa village in northern Cameroon reported that around 60,000 victims of BH attacks from Borno and Adamawa, Nigeria, are taking refuge in the area (local media, 06/04/2015).

People living outside the camp do not receive humanitarian assistance and lack of identification is a concern. Moreover, relocation from Kourouss transit site is slowed because individuals want to go back to their villages (UNHCR, 25/03/2015).

**Returnees and Third-Country Nationals**

At least 17,500 third-country nationals are currently living in Garoua Boulai and Kentzou transit sites, or in host communities (UNHCR, 07/2014 and IOM, 25/07/2014; 19/02/2015).

**Food Security**

As of March, 1.08 million people are food insecure, mostly in the Far North, North, Adamawa and East regions, with 244,000 in severe food insecurity (OCHA, 10/03/2015; 17/12/2014; 30/01/2015). 54% of households in the Far North and North regions face shortages. An estimated 34.4% of refugee households from CAR are food insecure (FAO, 11/12/2014).

70% of farmers in the Far North region have deserted their farms during the last six months and missed out on planting (AFP, 28/01/2015). Dryness in the Sahel belt and the strain of hosting so many refugees are also affecting food security (ECHO, 06/11/2015).

20.4 million people in the Sahel (Burkina Faso, north Cameroon, Chad, the Gambia, Mali, ...
Mauritania, Niger, north Nigeria, and Senegal) are expected to suffer from food insecurity in 2015 (OCHA, 10/02/2015). Food insecurity affected 24.7 million people in 2014, compared to 11.3 million in 2013 (OCHA, 03/02/2014).

Health and Nutrition

As of September 2014, 6.8 million people are in need of health services (IOM, 09/2014).

Cameroon’s Far North, North, Adamawa, and East regions suffer chronic shortages of health workers. The concentration of health staff in wealthier areas leaves around 40% of Cameroonians without access to healthcare. 46% of health centres do not have access to electricity and 70% do not have piped water (Inter Press Service, 19/08/2014).

Acute respiratory infections and malaria are the leading causes of death in refugee camps (UNHCR, 01/03/2015).

CAR refugees mostly suffer from malnutrition, malaria, and respiratory infections, according to an ECHO needs assessment. A number of measles cases have been reported among child refugees.

Nutrition

There were 40% more cases of severe malnutrition in January 2015 compared to the start of 2014 (OCHA, 30/01/2015). There were 54,000 cases of severe acute malnutrition (SAM) among children under five in 2014, most in Far North, North, Adamawa, and East regions. There were 132,000 cases of moderate acute malnutrition (OCHA, 30/01/2015; UNICEF, 08/2014). The prevalence for severe acute malnutrition (SAM) in the Far North is 2.0%, while the global acute malnutrition (GAM) prevalence is 9% (UNHCR, 29/03/2015).

WASH

As of September 2014, two million people were in need of WASH (IOM, 09/2014). Regions affected by the CAR refugee crisis have particularly poor access to drinking water (East: 54% and Adamawa: 70%) and basic sanitation (East: 22% and Adamawa: 64%) (UNICEF, 05/08/2014). The quantity of water provided per day to refugees remains at 6.5 litres in Minawao camp (UNHCR, 25/01/2015; 01/02/2015). The water supply in Gado and Mbile camps, at 15 litres and 17 litres, respectively, is below standard (UNHCR, 26/03/2015; 20/02/2015).

Education

120 schools had to close in the Far North region for the 2014-2015 academic year (UNHCR, 29/03/2015). Students are moving toward the country’s interior and the government is assisting in moving populations to more secure areas after BH destroyed or occupied schools (VoA, 25/11/2014; 08/09/2014). 33,163 children from the Far North Region were either left out of school or were forced to seek education in other communities for the 2014-2015 academic year (UNICEF, 28/02/2015; UNHCR, 29/03/2015). In 2014, more than 200 trained teachers did not take up their posts in the Far North region (IRIN, 01/12/2014). The majority of people residing in Minawao camp have no formal education or profession (UNHCR, 21/03/2015).

School attendance in camps remains low, 44% for primary and 66.9% for secondary school, despite education advocacy with parents (UNHCR, 01/03/2015).

Protection

Witnesses report that hundreds of young people are joining Boko Haram in the Far North region due to lack of access to education and employment. 6,000 troops have been sent to protect the region and prevent further recruitment of young men (IRIN, 05/03/2015).

The Cameroonian Government is refuting allegations by a regional human rights organisation that it is treating suspected BH fighters inhumanely, which emerged following the death of 25 prisoners in December (Reuters, 13/03/2015).

Updated: 07/01/2015

CHAD FOOD INSECURITY, DISPLACEMENT

LATEST DEVELOPMENTS

6 April: Seven people were killed during a Boko Haram (BH) attack on Maidogo, an island on Lake Chad (AFP, 06/04/2015).

27 March: The ongoing conflict with BH will place 3.5-4 million people in Northeastern Nigeria, Niger, western Chad and northern Cameroon under IPC Phase 3 food insecurity (Crisis) until September 2015 (FEWSNET, 27/03/2015).

KEY CONCERNS

- 5.5 million affected by humanitarian crisis, including 2.2 million children (UNICEF, 10/11/2014).

- 460,000 refugees in Chad, including 93,474 CAR refugees at November, 20,000 of whom have arrived since December 2013 (UNHCR, 02/11/2014; 19/12/2014).

- 2.4 million Chadians are food insecure (OCHA, 10/02/2015). 681,000 were considered to be severely food insecure during the lean season (OCHA, 28/01/2015).

Security Context

Regional Military Involvement

In January, the Chadian Government pledged to support the fight against Boko Haram (Daily Mail, 14/01/2015). Between 31 January and 2 February, Chadian forces aided Nigerian security forces to reclaim several towns in Borno state (AP, 03/02/2015; VoA, 01/02/2015). On 8 February, Nigeria, Niger, Cameroon, Chad and Benin agreed to send a joint force of 8,700 troops to fight Boko Haram (10/02/2015). On 8 March, Chad and Niger launched a joint army operation against Boko Haram militants in Nigeria (Reuters, 08/03/2015). Ten Chadian soldiers died and 30 Chadian and Nigerian soldiers were...
wounded taking control of two towns in northern Nigeria, Malam Fatouri and Damasak (Reuters, 09/03/2015). On 12 March, Chadian troops fighting BH withdrew to Cameroon and redeployed further south (Reuters, 12/03/2015). On 31 March, Chad and Nigerian soldiers drove BH militants from a border town, Malam Fatori, which has been a stronghold of the group (31/03/2015).

Chad withdrew its troops from the African Union Peacekeeping Force in CAR in April 2014, after accusations of violence against civilians. Chad denies the charges.

International Presence in Chad

In August, France deployed a 3,000-strong counterterrorism operation across the Sahel region based in Chad. Operation Barkhane is active in Burkina Faso, Chad, Mali, Mauritania, and Niger (local media, 01/08/2014).

Boko Haram Attacks

Boko Haram launched its first attack in Chad in February, killing at least ten and burning Ngouboua, by Lake Chad, where some 7,000 Nigerians have taken refuge (Aljazeera, 14/02/2015). From 28 February to 1 March, Boko Haram attacked Kaiga village, Lake Chad region, targeting Chadian soldiers (ECHO, 03/03/2015). On 15 March, BH attacked Djangagoroum village, in the Lake Chad region, killing one person and burning two houses (Reuters, 12/03/2015). On 2 April, an attack on Maidogo, an island on Lake Chad, killed seven (AFP, 06/04/2015).

Humanitarian Context and Needs

5.5 million people are affected by humanitarian crisis, including 2.2 million children; 3.2 million need humanitarian assistance (UNICEF, 10/11/2014; OCHA, 28/01/2015).

Access

Chad’s President Idriss Déby announced in May that the southern border with CAR would be closed to all except Chadian citizens until the CAR crisis is resolved. Concerns over reports of refusal of refugee entry have been raised. The Government deployed additional security forces to the border, after expressing concern that armed fighters might be infiltrating refugee populations in the area.

Two main roads in Chad, which run through Cameroon and Nigeria and are vital to Chad’s economy, remain insecure and mostly blocked due to violence (AFP, 02/03/2015).

Displacement

IDPs

Nearly 90,000 IDPs are living in protracted displacement in the east, facing difficulties accessing shelter, land, and income-generating activities (OCHA, 19/11/2013). The arrival of CAR refugees since December 2013 is further increasing competition for scarce resources (IDMC, 24/10/2014). Following the 13 February attacks by BH on Ngouboua, approximately 5,000 Chadian IDPs moved toward Baga-Sola (OCHA, 21/02/2015). There are an estimated 14,500 IDPs in the Lake Region (OCHA, 21/02/2015; UNICEF, 20/03/2015).

Refugees

As of 10 February, Chad hosted 515,000 refugees from Sudan, CAR, Nigeria, and DRC (OCHA, 10/02/2015). Of those, 367,200 are Sudanese (OCHA, 31/01/2015), 94,300 are from CAR (UNHCR, 13/03/2015; 26/03/2015), 18,100 are Nigerian (UNHCR, 28/02/2015; IOM, 23/02/2015), and 36,500 from DRC.

Most refugees are in Wadi Fira (157,500), Ouaddai (114,350), Sila (84,650), and Logone Oriental (47,500), while 22,750 are in Dosseye camp and 26,420 in Belom camp, Moyen Charé, and 4,600 in Dar es Salam camp and around 18,100 in Lake region (UNHCR, 25/03/2015; 28/01/2015; 02/11/2014; OCHA, 20/03/2015; 08/02/2015; WFP, 06/03/2015).

1,300 people have been displaced to Mayo-Kebbi East region, fleeing BH violence in Nigeria: 527 Nigerians, 553 Cameroonians, and 232 Chadian returnees (ECHO, 27/02/2015). Two missions in February in Mayo-Kebbi East region counted 2,000 Nigerian refugees, 552 Cameroonians and 590 Chadian returnees in five localities in need of food and healthcare (UNHCR, 28/02/2015).

Nigerian Refugees

The Chadian Prime Minister has appealed for international aid for Nigerian refugees (Reuters, 08/01/2015). At 10 March, 27,000 Nigerian refugees had entered Chad since 3 January (OCHA, 18/03/2015; 21/02/2015; UNHCR, 28/02/2015). Some 6,900 remain stranded on small islands on Lake Chad, where they are living with host communities (OCHA, 21/02/2015). Resources are limited for both refugees and host communities, especially food, shelter, and essential household items (OCHA, 12/01/2015). At least 37,000 people in host communities are affected by the influx of refugees (OCHA, 19/01/2015). There have been almost 7,000 people stranded on islands around the Lake region awaiting assistance (OCHA, 21/02/2015).

Returnees

There are approximately 257,000 returnees in Chad, including 130,000 from CAR and 100,000 Chadian migrants returning from Libya (OCHA, 10/02/2015; 31/12/2014). A recent assessment estimated 57,800 returnees residing in Maingama, Sido, Kobiyeye, Danamadja, Djako and Gaoui (IOM, 02/03/2015). There are 8,500 Chadian returnees from Nigeria in Lake region (OCHA, 21/02/2015).

Returnees from CAR

As of February, there are 113,500 returnees from CAR (IOM, 16/02/2015).

Returnees in the southeast – 7,000 have been identified in Salamat – are less targeted by humanitarian assistance and have little means of subsistence (ICRC, 19/11/2014). 90% of evacuees are in camps (OCHA, 15/10/2014). The Government has increased the
maximum stay in transit centres from ten days to one year to allow the restoration of family links and better prepare relocation (OCHA, 30/09/2014).

The situation in southern transit sites is critical.

There are 7,900 people at the Kobiteye transit site (UNHCR, 23/10/2014; OCHA, 06/03/2015).

The intention is to relocate people from Sido and Doyaba to Maingama, a temporary camp in Moyen Chari; however, Maingama does not have sufficient shelter and WASH capacity to host the entire population of Doyaba and Sido sites (IOM, 16/02/2015). As of 5 January, 12,600 returnees, third-country nationals and CAR refugees had been transferred from Doyaba and Sido to Maingama (IOM, 05/01/2015). Some 15,600 returnees remain in Sido transit site as of March 2015 (IOM, 16/02/2015; UNHCR, 26/03/2015). According to the IOM, there are 15,207 people at Maingama (OCHA, 06/03/2015). Work is under way to increase the hosting capacity at Maingama to 30,000 (OCHA, 30/09/2014).

Danamadja temporary site, in Logone Oriental, has reached its current maximum capacity with over 11,100 inhabitants, although only 40% of the camp is completed (UNHCR, 23/10/2014; OCHA, 16/02/2014).

Host communities

Over 25,000 people who entered Chad since the CAR crisis are living in small villages and remote communities throughout the south, including 22 villages in Mandoul and Logone Oriental hosting around 15,000 returnees (OCHA, 30/09/2014). Pressure on resources is high and conditions are poor, with urgent need for shelter, food, health, WASH and livelihood support. 3,480 CAR arrivals in Bethel, Logone Oriental region have increased the population by five times, putting pressure on access to water, education, and shelter (UNHCR, 30/11/2014).

Food Security

2.4 million people in Chad are food insecure (OCHA, 10/02/2015).

Between January and March 2015, poor households will depend on market purchases and reduced food consumption, resulting in Stressed food security conditions (IPC Phase 2) (FEWSNET, 31/01/2015). In Kanem, Bahr El Ghazal, Guera and Sila, food stocks are low. People in the Lake Chad region may face higher food insecurity if they do not receive humanitarian assistance (FEWSNET, 03/2015).

Due to the closure of the border and the population influx, the price of food in some communities has increased by 50% (OCHA, 21/02/2015).

Cereal harvest is improving food reserves for poor households and thus food security. Beginning in April, food stocks will run out one month prior to other years in Kanem, Bahr El Ghazal and Guera regions, leading to IPC Phase 3 food insecurity (Crisis) from April until June (FEWSNET, 31/03/2015). Conflicts in neighbouring countries limit food exports (Government, 20/11/2014).

Refugees and returnees are putting pressure on household demand, consumption, and spending in Logone Oriental, Moyen Chari, Mandoul, and Salamat (WFP, 07/2014).

Regional Outlook: Sahel

20.4 million people in the Sahel are expected to suffer from food insecurity in 2015 (10/01/2015). In 2014, food insecurity rose dramatically, affecting 24.7 million people, compared to 2013, when 11.3 million people had inadequate food (OCHA, 03/02/2015).

Health and Nutrition

2.5 million people are in need of healthcare (OCHA, 31/08/2014).

Only 34% of children under one have been vaccinated in returnee sites in eastern Chad (UNICEF, 10/11/2014).

Due to the influx of refugees, there is an urgent need to strengthen healthcare activities in host communities and to recruit more qualified medical personnel (UNHCR, 06/03/2015).

21 children in Darfuri refugee camps in eastern Chad died of an unidentified disease during the last week of March 2015 (local media, 30/03/2015).

Cholera

In 2014, 172 cases of cholera were reported (OCHA, 17/12/2014), including two deaths, compared to two cases in 2013 (UNICEF, 10/12/2014).

Nutrition

97,000 children suffer from SAM while 257,000 suffer from MAM, a slight fall in the numbers reported in October 2014 (OCHA, 10/02/2015). In September, Kanem, Bahr El Ghazal, Gera, and Wadi Fira all reported GAM above the emergency threshold of 15% (OCHA, 19/09/2014).

WASH

1.3 million people are in need of WASH assistance: 55% of the population has access to safe water, compared to 46% in 2012 (UNHCR, 03/03/2015; OCHA, 31/12/2014). Additionally only 4% of households and 50% of health centres have access to standard sanitation facilities (OCHA, 31/12/2014).

Water levels are running low at Dar es Salam site as more refugees arrive every day (WFP, 06/03/2015).

Education

Access to primary and secondary education is a need in Danamadja, Kobiteye, and Djako sites (OCHA, 31/10/2014).

An assessment on child refugees from Nigeria showed that 72% of the 296 school-aged children identified had never been to school (OCHA, 21/02/2015; 20/03/2015).

Protection

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Child Protection

Family reunification is a major protection challenge (OCHA, 25/10/2014). Over 600 unaccompanied minors and separated children and 44 children associated with armed groups were reported among the CAR returnee population between December 2013 and August 2014, according to UNICEF (OCHA, 31/08/2014). Only 59% of identified unaccompanied and separated children had been reunited with their families as of mid-November (UNICEF, 10/11/2014).

A survey found that two out of three girls are married before the age of 18 in Chad (UN, 24/03/2015).

Legal Status

Second and third-generation Chadians from CAR have been recognised as de facto nationals by the Government, and UNHCR is working with authorities to formalise recognition and avoid statelessness. The Government will provide birth certificates to every child born in a transit site (UNHCR, 07/2014).

Updated: 07/04/2015

DJIBOUTI DROUGHT, FOOD INSECURITY

LATEST DEVELOPMENTS

1 April: 686 refugees from Yemen have arrived in Djibouti. Refugees are being settled in Obock, where a camp for 5,000 people is being built. Humanitarian actors on the ground are preparing for a major influx of refugees from Yemen in the coming weeks (ECHO).

KEY CONCERNS

- An estimated 300,000 people need humanitarian assistance, including more than 24,000 refugees (ECHO, 01/08/2014; OCHA, 30/11/2014).

Security Context

Djibouti plays a significant role in international efforts to combat piracy in the region and restore peace in Somalia. This has led to sporadic reprisal attacks in the past (UNHCR).

Humanitarian Context and Needs

Stress on rural livelihoods has triggered movement from rural to peri-urban areas of the capital, putting pressure on the delivery of basic services (UN, 12/06/2014).

Access

A lack of access due to insecurity, on top of reductions in assistance, has placed Obock in a particularly precarious situation (FEWSNET, 25/08/2014).

Displacement

Migrants

IOM estimates that over 100,000 migrants transit the country every year, heading towards Yemen. Almost 90% are Ethiopian; the rest are usually Somali. Children account for 32% of the migrant population (UNICEF, 15/01/2015).

Migrants arrive in dire conditions and vulnerable to a number of protection issues. A large number need medical assistance, which strains health facilities in Dikhil, Tadjourah, and Obock (IOM, 21/11/2014). Migrants/refugees continue to report lack of access to food and water during their transit through Obock (UNHCR, 12/2014).

A UNICEF report indicated that thousands of families displaced by drought live in illegal settlements, without basic water or sanitation facilities (UNICEF, 15/01/2015).

Refugees in Djibouti

As of 1 April, 686 refugees from Yemen have arrived in Djibouti. Not all arrivals are Yemeni nationals: 124 are Chinese and Indians. Refugees are being settled in Obock, where a camp for 5,000 people is being built. Humanitarian actors on the ground are preparing for a major influx of refugees from Yemen in the coming weeks (ECHO, 01/04/2015).

24,362 refugees, the majority of Somali origin, are registered in Djibouti (OCHA, 01/01/2015). 70% are women and children who depend entirely on humanitarian assistance and protection services (UNICEF, 15/01/2015). There are also 4,220 asylum-seekers, 3,275 of whom are from Ethiopia. They reside in two camps: Holl Holl and Ali Addeh (UNHCR, 31/12/2014; OCHA, 01/01/2015).

Food Security

14.5% of households in the country are food insecure and 32% are vulnerable to food insecurity. 14,200 people are in IPC Phase 3 (Crisis), while 56,000 are in IPC Phase 2 (Stressed). The region with the highest food insecurity rate is Obock (58%), followed by Dhiuhiil (42%), Arta (33%), Tadjourah (26%), and Ali Sabieh (24%) (WFP, 13/01/2015).

Due to below-average rainfall throughout 2014, rural populations in the Southeast Pastoral Border, Northwest Pastoral, and Central Pastoral zones are expected to be in Stressed (IPC Phase 2) acute food insecurity through June 2015 (FEWSNET, 31/01/2015).

Health and Nutrition

In 2014, OCHA reported that 300,000 people are in need of health services. Rates of communicable diseases are high, including diarrhoeal disease.
According to OCHA, 277,000 people are in need of nutritional aid, compared to 195,400 in 2013. A food security survey conducted in November 2014 indicated that the more food insecure are suffering from malnutrition, acute diarrhoea, and other diseases (GIEWS, 11/11/2014). In Obock region, acute malnutrition rates have increased from 25.7% in 2014 to 29.9% (UNICEF, 15/01/2015).

**Education**

As of January 2015, 41.6% of girls and 33.3% of boys aged 6–10 are out of school (UNICEF, 15/01/2015).

**Protection**

In 2014, 241 migrants were reported dead or missing, compared to 15 in 2013 (IOM, UNHCR, 21/11/2014). Migrants/refugees are exposed to theft and detention during transit (Regional Mixed Migration Secretariat, 31/05/2014).

Reviewed: 08/04/2015

**ETHIOPIA FLOODS, FOOD INSECURITY**

**LATEST DEVELOPMENTS**

7 April: 159 Ethiopian refugees in Djibouti, 131 of whom were heading for Yemen, have returned to Ethiopia (IOM).

6 April: Belg rains have started at the end of March, but have been inadequate and unevenly distributed in northern, northeastern, eastern and southern areas (OCHA).

1 April: Relocation of refugees from Leitchuor and Nip Nip to Jewi and Pugnido has slowed. Refugees do not want to move away from their communities (WFP).

30 March: 1,101 cases of measles have been confirmed so far this year, the majority among people over 15 years of age (OCHA).

**KEY CONCERNS**

- 2.9 million will require food assistance in 2015. The most affected regions are Oromia, Somali, Amhara, Tigray, and Afar (OCHA, 09/03/2015).

- 1.2 million people are in need of improved access to safe water and water sources (UNICEF, 31/10/2014).

- There are 676,060 refugees, mainly from Somalia and South Sudan (UNCHR, 28/02/2015).

- A majority of refugee camps have reached full capacity. Main concerns include overcrowding, malnutrition, flooding and critical shortfalls in humanitarian aid.

- 264,500 SAM cases were reported in March; 446,800 pregnant and breastfeeding women need nutrition interventions (OCHA, 15/03/2015).

**Political Context**

Ethiopia is considered comparatively stable, but deep clan tensions and intra-communal violence persist. Two decades of deadly conflict in the southeastern region of Ogaden have had a severe impact on the Ethiopian Somali population, especially after years of a relatively successful government counter-insurgency campaign. The Government has yet to address the root causes of the violence.

However, weak political opposition, and the Government’s determination to accelerate economic growth all make continued stability likely.

Elections are scheduled for May 2015 (Amnesty International, 22/09/2014). In September, Amnesty International reported violations of civil and political rights. In January 2015, opposition parties reported roadblocks obstructing their efforts to register for the elections (VOA, 14/01/2015).

**Security Context**

**Participation in Regional Military Operations**

Ethiopia has historically been a key player in peacekeeping and counter-terrorism operations in East Africa. Peace talks on the South Sudan conflict, under the mediation of the Intergovernmental Authority on Development, are taking place in Addis Ababa. In 2014, Addis also hosted peace talks over conflict in Sudan.

In January 2014, the Government pledged that Ethiopian troops, currently part of the African Union Mission in Somalia (AMISOM) would remain in Somalia until durable peace and security is achieved. The Somali militant group Al Shabaab has repeatedly threatened Ethiopia since Ethiopian troops arrived in Somalia. On 13 October 2013, a bomb blast killed two people in Addis Ababa. There was no immediate claim of responsibility.

**Humanitarian Context and Needs**

**Access**

South Sudanese refugees are arriving only through Pagak and Akobo, as reception centres in Matar and Pamdong have been closed (IOM, 07/01/2015).

**Displacement**

**IDPs**

As of 11 February 2015, Ethiopia had 495,680 IDPs (IOM through OCHA, 11/02/2015), who mostly live in Sumale (USAID, 2014). About 60% of IDPs represent protracted displacement cases (OCHA, 2014).
As of 28 February, Ethiopia hosts some 676,060 refugees; mainly Somalis, South Sudanese, Eritreans, and Sudanese (UNHCR, 28/02/2015). South Sudanese account for the biggest refugee population (UNHCR, 20/10/2014). Environmental degradation in camps, the fragile ecosystem, and scarce resources have led to tensions between host communities and refugees in some locations (UNHCR, 20/01/2015).

South Sudanese Refugees

As of 28 February, 202,665 South Sudanese refugees have entered Ethiopia since December 2013. 91% are women and children, 67% children (UNHCR, 24/03/2015). They are arriving in a critical nutritional condition (UNHCR, 28/02/2014). The majority come from Upper Nile state and are predominantly from Gajaak, Gajik, and Luo-Nuer tribes (UNHCR, 03/07/2014). 57,800 South Sudanese refugees were in Ethiopia before December 2013 (UNHCR, 12/02/2015). Matar reception centre has been closed, and Leitchuor and Nip Nip camps were so damaged by flooding in 2014 they are not suitable for the settlement of refugees. Relocation to Pugnido camp is ongoing: so far, 9,000 refugees have been relocated (WFP, 20/02/2015). Pugnido is now hosting 54,800 refugees (UNHCR, 28/02/2015). Refugees from Leitchuor and Nip Nip are also being relocated to Jewi, a new camp near Gambella, which will have a capacity of 50,000 (OCHA, 16/03/2015). Relocation has slowed as refugees are unwilling to leave their communities (WFP, 01/04/2015). Other refugees have self-relocated in different parts of Nyinyang and along the Nip Nip–Jakawo corridor and Gambella–Matar highway (UNICEF, 15/08/2014; UNHCR, 10/11/2014). As of January, two other sites, Kobe, with a capacity of 50,000, and Cholan, with a capacity of 20,000, have been identified and approved for development as refugee camps (UNHCR, 09/01/2015, 15/10/2015). 32,668 refugees are living within host communities (UNHCR, 24/03/2015).

Eritrea: As of February 2015, Ethiopia hosts 129,816 Eritrean refugees; including 33,000 new arrivals in 2014 (OCHA, 28/02/2015; UNHCR, 09/02/2015). There was a spike in daily arrivals in the last quarter of 2014: about 5,000 refugees, mainly from Asmara, arrived in October, and an additional 3,588 in November (OCHA, 24/11/2014). New arrivals are transferred to Hitsat camp, which now hosts 27,560 people (OCHA, 24/11/2014). The recent spike has led to a shortage of health services, shelter, and core relief items. UNHCR has highlighted that the large number of unaccompanied minors is cause for grave protection concern (OCHA, 26/01/2015).

Somalia: As of February 2015, there are 244,422 Somali refugees in Ethiopia. 4,621 arrived in 2014 (UNHCR, 28/02/2015).

Sudan: As of February 2015, there are 36,102 Sudanese refugees in Ethiopia (UNHCR, 28/02/2015).

Ethiopian Refugees in Neighbouring Countries

As of 1 January, 2015 there are 3,275 Ethiopian refugees in Djibouti (UNHCR, 31/01/2015).

As of 30 March, there are 30,509 Ethiopian refugees in Kenya (UNHCR, 01/03/2015).

Refugees in Ethiopia

As of 28 February, Ethiopia hosts some 676,060 refugees; mainly Somalis, South Sudanese, Eritreans, and Sudanese (UNHCR, 28/02/2015). South Sudanese account for the biggest refugee population (UNHCR, 20/10/2014). Environmental degradation in camps, the fragile ecosystem, and scarce resources have led to tensions between host communities and refugees in some locations (UNHCR, 20/01/2015).

Returnees

159 Ethiopian refugees in Djibouti, 131 of whom were heading to Yemen, have returned to Ethiopia (IOM, 07/04/2015).

Food Security

An estimated 2.9 million people will require food assistance in 2015, including 381,000 people in need of assistance before the next belg season, in March and April (Government, 31/01/2015). The most affected regions are Oromia, Somali, Amhara, Tigray, and Afar (OCHA, 15/03/2015; 09/03/2015). The food security situation has worsened in belg/gu/ganna/sugum rain-receiving areas in the lowlands of Adar, Oromia, and Somali regions, as the dry season reaches its peak. Belg rains were delayed, but as of the end of March, rains have started in almost all parts of the country, although in northern, northeastern, eastern and southern areas have been inadequate and unevenly distributed (OCHA, 06/04/2015). Poor households in northeastern Afar and in the lowlands of Borena zone in Oromia to remain in IPC Phase 3 until June. In Southern Afar, food security is expected to decline from IPC Phase 2 to IPC Phase 3 from May to June (FEWSNET, 15/03/2015). In Borena, grazing land is drier than normal and much of it is overgrazed. Water availability is very low, reducing livestock production and productivity. The situation is expected to further decline with the forecasted blow average ganna rains (FEWSNET, 15/03/2015).

Health and Nutrition

Malaria remains the main public health concern in all refugee camps, followed by respiratory tract infections and diarrhoeal diseases (IFRC 30/12/2014). Monitoring in Gambella region in 2014 showed critical gaps in medical personnel and supplies, as well as funds for public health clusters (OCHA, 11/08/2014). Measles

There were 13,301 confirmed cases of measles throughout 2014. Oromia, Amhara, and SNNP regions accounted for more than 80% of the total measles caseload (OCHA, 23/02/2015). As of 30 March, 1,101 cases of measles have been confirmed this year. The majority among people over 15 years of age (OCHA, 06/04/2015).

Nutrition

Malnutrition rates at the start of 2015 have decreased in comparison to previous months, except in woredas that received poor kiremt rains, in North Gonder and Washmira zones of Amhara region (OCHA, 16/02/2015). As of 15 March 264,500 SAM cases were reported in 2015 (OCHA, 15/03/2015). (UNICEF, 31/10/2014). 446,800 pregnant and breastfeeding women need nutrition interventions (OCHA, 15/03/2015)

As of January, GAM in Leitchuor, Kule, and Tierkidi refugee camps was 25.8%, 28%, and 30.3%, respectively; SAM rates were 5.7%, 7.8%, and 10%, respectively (UNHCR, 01/01/2015).
WASH

1.2 million people are in need of improved access to safe water and water sources (UNICEF, 31/10/2014). In Legahida and Salahad woredas of Nogob zone, in the Somali region, around 24,000 people require emergency water trucking (OCHA, 26/01/2015). Acute water shortages have also been reported in Deka Siftu woreda of Liben zone (OCHA, 23/02/2015).

The ratio of latrines per person has improved in a majority of camps, although some are still higher than the UNHCR standard of 1:50: 1:38 in Tierkidi, 1:19 in Kule, 1:43 in Leitchuor and 1:6 in Okugo (UNHCR, 27/02/2015). Water supply per day has deteriorated: in Tierkidi it is 17.3L per person, 15.3L per person in Kule, 17.8L per person in Leitchuor, 15L per person in Pugnido, and 9L per person in NipNip. The only camp meeting the UNHCR standard of 20L per person is Okugo, with 24L per person (UNHCR, 01/03/2015).

Protection

As of 24 March 2015, 18,379 unaccompanied minors and separated children were identified among the refugee population (UNHCR, 24/03/2015).

In December women have been more susceptible to attacks and assaults outside Leitchuor refugee camp, as lack of firewood and cooking gas forces them to travel further in search of wood (UNHCR, 11/12/2014).

Vulnerable Groups and Minorities

The Kwegu, a small tribe in Ethiopia’s Lower Omo Valley, are in need of humanitarian assistance due to the destruction of their land to make way for the Gibe III dam and associated large-scale irrigation. Reports indicate no consultation took place with the indigenous peoples in Lower Omo Valley about projects on their land, and some tribes were forcibly settled by the Government in a process called “villagisation” (Survival International, 10/03/2015).

Updated: 08/04/2015

GAMBIA FOOD INSECURITY

LATEST DEVELOPMENTS

No significant developments this week, 09/04/2015. Last update 07/01/2015.

KEY CONCERNS

- 265,460 people are food insecure and in need of food assistance (OCHA, 10/02/2015; 13/02/2015).
- 10,000 children suffer from severe acute malnutrition (OCHA, 10/02/2015; 13/02/2015).

Political and Security Context

On 30 December, an attempted coup was reported as gunfire was heard outside the presidential palace in the capital Banjul while President Yahya Jammeh was out of the country (UN, 01/01/2015). The situation in Banjul has since calmed.

Humanitarian Context and Needs

Displacement

Refugees in the Gambia

As of September 2014, around 9,500 refugees, mostly Senegalese from the Casamance region, live in the Gambia (OCHA, 31/08/2014). Smaller numbers of refugees come from Liberia, Sierra Leone, Côte d’Ivoire, and Togo.

Food Security

265,460 people are food insecure and in need of food assistance (OCHA, 10/02/2015).

 Aggregate cereal production in 2014 will drop by 75% compared to 2013, to about 57,000 metric tons, due to irregular rains causing poor growing conditions. Production of groundnut, the main cash crop, is anticipated to decline by more than 80%. Access to food will be further constrained by high cereal prices and depreciation of the national currency, which has increased domestic prices of imported food commodities (FAO, 05/11/2014). The Ebola epidemic in neighbouring countries is further aggravating food insecurity, as the crisis has led to a 60% decline in tourism, a significant source of income (Reuters, 12/02/2015).

Sahel Food Crisis: Regional Overview

20.4 million people in the Sahel (Burkina Faso, north Cameroon, Chad, the Gambia, Mali, Mauritania, Niger, north Nigeria, and Senegal) are expected to suffer from food insecurity in 2015 (OCHA, 10/02/2015). In 2014, food insecurity rose dramatically, affecting 24.7 million people, compared to 2013, when 11.3 million people had insufficient food (OCHA, 03/02/2014).

Health

Nutrition

10,220 children are severely malnourished as of February 2015, an increase compared to 8,000 severely malnourished in mid-2014 (OCHA, 02/2015; 09/2014).

Reviewed: 09/04/2015

GUINEA FOOD INSECURITY, EPIDEMIC

LATEST DEVELOPMENTS

Updated: 08/04/2015
1 April: Sigui and Fria prefectures reported confirmed Ebola cases for the first time in more than 50 days (WHO).

1 April: The number of reported measles cases continues to rise. 203 suspected cases were reported in the week to 29 March (UNICEF).

29 March: In the week to 29 March, 57 Ebola cases were confirmed in Guinea, compared to 45 the previous week (WHO, 01/04/2015).

KEY CONCERNS
- The cumulative number of reported Ebola cases across the region has reached 25,228, including 10,463 deaths (WHO, 02/04/2015). The numbers of registered cases and deaths are largely inaccurate, underestimating the gravity of the situation on the ground.
- Between February and March 2015, 1.35 million (15%) of Guinea's population is in phase 2 food insecurity, and 275,000 are in phase 3 (5%). These figures are expected to 1.5 million in phase 2 (20%) and 395,000 in phase 3 (5%) in the lean season between June and August 2015. (Cadre Harmonise, 01/03/2015).
- Resistance to the Ebola response remains high. The Red Cross says its staff in Guinea are attacked on average 10 times per month (IFRC, 12/02/2015).

For more information on the Ebola crisis in West Africa, visit the ACAPS Ebola Needs Analysis Project page.

Political Context

Presidential elections are due in 2015, but in 2014 President Condé suggesting delaying them because of the Ebola crisis (International Crisis Group, 01/11/2014). The opposition held protest rallies in January, demanding electoral commission reform (International Crisis Group, 01/02/2015). On 24 February, the Government replaced the minister charged with organising this year's presidential election with an army general on 24 February, saying the move was necessary to strengthen the fight against Ebola (Reuters, 01/03/2015).

The Ebola response has increased tensions between President Condé's ethnic group, the Malinke, who make up about 35% of the population, and the Fulani ethnic group, about 40% of the population (local media, 18/10/2014).

Security Context

Guinea deployed security forces to the southwest in response to reports that Sierra Leoneans were crossing the border to flee an Ebola stay-at-home. Residents reported tension in the region (AFP, 28/03/2015).

Resistance to the Ebola response

Though widespread reports of resistance to the Ebola response persist, there are indications of improved access in certain communities. Ebola is still believed to be a myth and sick relatives continue to be hidden. Traditional practices, such as washing of the dead body, are still conducted (IRIN, 23/03/2015; Voice of America, 24/03/2015). A Knowledge, Attitudes and Practice study concluded that 75% of resistance stems from lack of information or misinformation, with some people doubting the sincerity of EVD-related messages, in part due to its resemblance to other diseases in Guinea. The interventions which most frequently trigger resistance are safe burials, disinfection of public places (schools), and contact tracing activities (USAID, 25/02/2015).

The Red Cross said members of its staff in Guinea are attacked on average ten times per month (IFRC, 12/02/2015). The Prime Minister has announced measures against resistance, including prosecution of those who hide patients from medical teams or those who hold medical teams hostage (International media, 12/01/2015). On 17 February, 58 people were convicted of an attack on Ebola workers in January 2015 (UNMEER, 18/02/2015).

In Niala village in the sub-prefecture of Fanah, the community impeded an burial team (UNMEER, 09/03/2015). In Conakry, a Red Cross volunteer was attacked in Dixinn commune while disinfecting a house after a suspected Ebola patient died, and a burial team was impeded by the community (IFRC, 06/03/2015; UNMEER, 02/03/2015). The arrest of a Guinean cleric who was charged with assaulting an Ebola health worker led to demonstrations in Conakry, where around 12 people were injured after clashes with police (AFP, 25/02/2015). Rumours of the Guinean Red Cross spraying schools to infect children with Ebola prompted community members to threaten its headquarters (IFRC, 20/02/2015).

In Faranah prefecture, MSF has reported several security incidents, including a vehicle set on fire and stones thrown at staff (international organisation, 04/03/2015). Students destroyed a transit centre (international media 15/02/2015).

In Kito, Boffa prefecture, resistance is rising as community sensitisation and epidemiologic investigations are taking place (WHO, 20/03/2015).

In Kiby, Boffa prefecture, resistance is rising as community sensitisation and epidemiologic investigations are taking place (WHO, 02/03/2015).

In Nzerekore region, contact tracers have received death threats in Diecke and Bignamou sub-prefectures, (UNMEER, 23/02/2015).

In January and February, several incidents of assault were reported in Forecariah, including the killing of two men accused of spreading Ebola (IFRC, 12/02/2015; international media, 20/01/2015; local media, 14/01/2015; UNMEER, 15/01/2015). There have been several incidents of violence associated with rumours about Red Cross vaccination programmes in schools (UNMEER, 23/02/2015).

Humanitarian Context and Needs

Access

The larger size and population of Guinea compared to Liberia and Sierra Leone make the response more difficult (Washington Post, 13/03/2015). Poor road infrastructure means many communities outside the capital are inaccessible (OCHA, 16/09/2014). Community
resistance, especially in Forecariah, also challenges relief activities, as the community does not want to receive support associated with the response to the Ebola epidemic (WFP, 13/02/2015).

**Food Security**

Between February and March 2015, 275,000 people (5% of the population) are in Phase 3, or Crisis, food insecurity. These figures are expected to climb 395,000 in Phase 3 and 1.5 million in Phase 2 in the June–August lean season. (Cadre Harmonisé, 01/03/2015).

Almost 90% of the Ebola-driven food insecure live in rural areas (FEWSNET, 31/12/2014). Those who have not been able to harvest their crops, due to rupture of activities and containment measures related to the Ebola outbreak, have already entered the lean season (PI, 18/02/2015).

**Agriculture and Markets**

All agricultural sectors have been hit by the crisis. In the Forest region, Ebola-related fears have reduced the availability of agricultural labour, resulting in reduced yields. Prices of local/imported rice and palm oil remained have remain above average, but generally stable (WFP, 25/03/2015). Based on commercial forecasts, Guinea has a rice import gap of about 44,000 metric tons, of an estimated 340,000 metric tons to be imported from October 2014–September 2015 (WFP, 05/01/2015).

**Livelihoods**

Poverty is predicted to rise from 2.25% in 2014 to 7.9% in 2015 (UNDG, 11/03/2015). Difficulties marketing over long distances have resulted in excess supply in many places, bringing prices of local rice in December to below their 2013 levels (FEWSNET, 31/01/2015).

In the central Fouta Djallon region, potato exports to Senegal in 2014 dropped by 90% from 2013, to 22 metric tons (local media, 15/01/2015). In Labé, potato crops have spoiled, in some cases more than 50%. Similar issues have been reported by fruit and tomato producers in Kindia, who typically export to Senegal (FEWSNET, 31/12/2014).

**Health and Nutrition**

The national Attendance at health facilities fell sharply from August 2013 to August 2014. Primary medical consultations dropped by 58%, hospitalisations by 54%, and vaccinations by 30% (UNDP, 19/12/2014).

There has been an almost 50% reduction in the numbers of children vaccinated due to Ebola (UNICEF, 17/12/2014).

**As of 31 March, 3,494 cumulative Ebola cases, including 2,320 deaths, have been reported in Guinea (WHO, 02/04/2015).** The utility of case numbers has been questioned; statistics are reported to be highly unreliable due to a lack of a comprehensive contact tracing, timely case investigation, and rapid Ebola testing (UNICEF, 06/09/2014).

57 confirmed cases were reported in the week to 29 March, compared with 45 the previous week. The geographic area of transmission has expanded, as seven prefectures reported at least one case, up from three the week before. The increase in reported cases may be due to improved access to communities that previously reported resistance to the response. Forecariah reported 20 cases, Conakry 19, Coyah eight, Dubreka three, and Boffa two. For the first time in more than 50 days, Fria prefecture reported three cases and Siguiri two (WHO, 01/04/2015).

Phase III clinical trials of an Ebola vaccine began in Guinea on 8 March. Front-line workers are targeted for the first round of vaccinations (UNMEER, 09/03/2015).

**Containment measures:** The President announced a 45-day ‘health emergency’ in Forecariah, Coyah, Dubreka, Boffa, and Kindia end March. Additional measures will be taken to combat Ebola, including possible lockdowns, the closure of health facilities where Ebola cases have been reported recently, and all burials should be carried out by the Red Cross or security forces (Al Jazeera, 28/03/2015; BBC, 29/03/2015; international media, 29/03/2015; UNMEER, 01/04/2015).

The Forecariah Ebola Response Coordination has agreed on an information sharing system with neighbouring Kambia district in Sierra Leone, to harmonise EVD response and sensitisation on both sides of the border (UNMEER, 02/04/2015). A stay-at-home period, similar to that implemented in Sierra Leone end March, will take place in Forecariah prefecture (WHO, 01/04/2015).

The high number of confirmed Ebola deaths in the community suggests that the need for early isolation and treatment is not being met (IFRC, 06/03/2015). In the seven days to 29 March, 20 unsafe burials were reported (WHO, 01/04/2015). In the week to 22 March, 53% of confirmed cases arose from registered contacts.


**Healthcare provision:** As of 23 March, 179 health workers have been infected, 93 of whom have died (UNICEF, 25/03/2015). A spike of new health care worker infections was reported in March, all of which occurred in non-Ebola health facilities (USAID, 18/03/2015; Al Jazeera, 28/03/2015).

**Regional Outbreak**

25,228 cumulative Ebola cases reported across the region, including 10,463 deaths (WHO, 04/02/2015).

**Malaria**

The recent gains from the past ten years in reducing malaria mortality by 50% have been seriously hampered by the Ebola outbreak. About five million people are affected by malaria each year; the disease kills at least ten people every week (international media, 14/11/2014).
Maternal Health

Medical studies have shown that the mortality rate for pregnant women and newborn babies can be as high as 95%. Fear and misinformation about the impact of Ebola on health services have made women reluctant to access maternal and reproductive health services, as well as prevention of mother-to-child HIV transmission (UN WOMEN, 27/03/2015). In addition, Ebola-infected pregnant women are often not permitted in Ebola treatment centres because of the high risk of contamination during delivery (UNFPA, 13/02/2015). A 10–25% decline in antenatal consultations has been reported, as well as a 7–20% drop in births attended by the health service (UNDP, 19/12/2014).

Measles

The number of suspected measles cases continues to increase. Between 23 and 29 March, 203 new suspected cases were reported. Since January, 843 suspected measles cases have been reported in the country, 55 of which have been confirmed (UNICEF, 01/04/2015). A vaccination campaign was conducted in three villages hardest hit by measles in Lola prefecture (Nzerekore region) (UNICEF, 18/03/2015). Difficulty reaching children in remote areas hampered a measles vaccination campaign in Gaoual and Koundara prefectures (UNICEF, 16/03/2015).

Nutrition

Relative to trends between 1992 and 2012, the prevalence of undernourishment during 2014–2016 could increase by 0.49%, to 1.72% (UNDG, 11/03/2015).

Education

Most schools reopened on 19 January. Around 1.3 million children have returned to school, bringing attendance to 88% of pre-Ebola levels. All assessed schools have hygiene equipment to help prevent further spread of Ebola (UNICEF, 25/03/2015).

Some parents are reportedly refusing to send their children to school, or students are declining to attend classes due to EVD fears (USAID, 28/01/2015). A reported 159 primary and secondary schools remain closed in February, notably in Forecariah, Boffa and Faranah (UNICEF, 11/02/2015; international media, 19/01/2015; Government, 11/02/2015). In Faranah and Forecariah, a lower percentage of schools have reopened, because of community resistance and a lack of teachers (UNICEF, 04/02/2015).

Protection

A UNDP study suggests women have been disproportionately affected by the Ebola virus, especially in certain regions. In Gueckedou, women represent 62% of the infected, and in Télémilé, women make up 74%. This could be explained by women's role in family and resulting increased exposure. (UNMEER, 11/02/2015; UNDP, 30/01/2015).

As of 25 February, 4,429 children have been identified as having lost one or both parents to Ebola (UNICEF, 25/02/2015). All 773 children who lost both parents have been placed with extended family (UNICEF, 06/02/2015).

Health workers and survivors are stigmatised (MSF, 26/01/2015). There are reports of recovered patients not being accepted into their communities, despite awareness-raising in the community (USAID, 18/03/2015).

Updated: 07/04/2015

KENYA FOOD INSECURITY, INSECURITY

LATEST DEVELOPMENTS

12 April: Kenyan officials said they have asked UNHCR to repatriate all Somali refugees from Dadaab camp. UNHCR said it has not received a formal request (AFP, Al Jazeera).

7 April: The Central Bank of Kenya closed 13 remittance firms, in an effort to curb the financing of terrorism (IRIN, UN).

KEY CONCERNS

- Violence in the capital Nairobi, as well as northeastern and coastal areas; two-thirds of attacks were attributed to the Somali Islamist Al Shabaab movement.

- Inter-communal tensions are running high: Inter-communal violence in Kenya caused 310 deaths, 214 injuries and displaced 220,200 in 2014. Mandera, Marsabit, Turkana, Baringo and Moyale counties are the most affected (OCHA, UNHCR, 12/2014).

- More than 585,076 refugees, including at least 450,000 Somalis and 90,714 South Sudanese (UNHCR 01/02/2015).

- 1.6 million people are acutely food insecure (02/2015, FEWSNET).

Political Context

Kenya is considered relatively stable in the Horn of Africa and held peaceful presidential elections in March 2013. However, the country remains ethnically polarised and affected by two decades of conflict in neighbouring Somalia. The implementation of a devolution process, land reform, and national reconciliation all challenge stability in a country where institutions are perceived to be weak.

On 16 December, the Government de-registered 510 NGOs, accusing them of using their charitable status as a front for raising funds for terrorism. Many of the NGOs appear to be aid agencies, Christian organisations, orphanages, or organisations working in development and health (The Guardian, 16/12/2014).

Security Context

The frequency and scale of militant attacks in Kenya have increased dramatically since
In 2011, when Kenyan troops began operating in Somalia, as has the nature of the violence. Al Shabaab has built a cross-border presence and clandestine support network among the Muslim population in the northeast, in Nairobi, and on the coast. Non-Muslims continue to be targeted.

The increasing radicalisation of the ethnic Somali Muslim population is allegedly fuelled by systematic ethnic profiling and discrimination. Muslims make up 11% of Kenya’s 40 million population. In addition, deadly inter-communal violence remains common in a number of areas, particularly in Turkana and Baringo.

### Al Shabaab-related Violence

On 1 April, ten armed men, thought to belong to Al Shabaab, stormed the premises of an NGO working in Dadaab refugee camp in Hagadera, Garissa county, killing one person and injuring three (local media, 01/04/2015).

On 2 April, Al Shabaab gunmen launched an attack on the campus of Garissa University in Garissa, leaving 148 people dead and 79 people injured. Some Muslim students were set free while Christians were held hostage and executed (AFP, 02/04/2015; HRW, 03/04/2015). This is the deadliest attack by Al Shabaab in Kenya since the 1998 bombing of the US embassy in Nairobi. In response, the government ordered the recruitment of 10,000 individuals to boost the police force. On 6 April, Kenyan fighter jets bombed positions held by Al Shabaab in Somalia (Reuters, 04/04/2015; BBC, 06/04/2015).

The April attacks follow several months of escalating Al Shabaab activity in Kenya. In November, Al Shabaab gunmen killed 28 non-Muslims taken from a Nairobi-bound bus in Mandera, in retaliation for Kenyan police raids of suspected radical mosques in Mombasa earlier in the month (OCHA, 28/11/2014). Significant numbers of people reportedly left Mandera, mainly health workers, teachers, and civil servants (Kenya Daily Nation, 27/11/2014). Attempts to hire new health workers have failed as perceptions of insecurity in the area remain high (local media, 26/03/2015).

The Kenyan military responded to the Mandera incident by launching operations in the area, particularly parts of Homa Bay, Siaya, and Kisumu counties. Residents have to walk several kilometres to retrieve water. The situation has also cause a food shortage, as most of these areas rely on rain-fed agriculture (Kenya Daily Nation, 10/02/2015). In the past, food insecurity has been the cause of inter-clan violence in Meru.

### Disasters

#### Drought

Acute water shortages have affected parts of Western Kenya following a long dry spell, particularly parts of Homa Bay, Siaya, and Kisumu counties. Residents have to walk several kilometres to retrieve water. The situation has also cause a food shortage, as most of these areas rely on rain-fed agriculture (Kenya Daily Nation, 10/02/2015). Most water points in pastoral areas are depleted and livestock trekking distances have increased 20–50% compared to normal. Distances are expected to increase further as the short lean season progresses (Government, 03/03/2015).

All subcounties in Meru have recorded a decline in vegetation growing conditions, particularly for maize and beans (local media, 20/01/2015). In the past, food insecurity has been the cause of inter-clan violence in Meru.

#### Floods

On 5 April, two dams in Miruka and Ochot overflowed, causing floods in Bondo, Siaya county in southwest Kenya. Five people were killed and property and crops destroyed (local media, 05/04/2015).

### Displacement

#### IDPs

Heavy rains on 6 April displaced 1,500 in Kasese village and more than 350 people in Achuorhoo village, in Kisumu County, western Kenya. Roads to the villages have been rendered impassable. Residents were forced to leave their homes for higher ground, while others sought refuge in churches and schools (local media, 06/04/2015).
On 11 February, Kenya had 309,200 IDPs (OCHA, 11/02/2014).

As of 30 November, inter-communal violence had caused the displacement of 125,107 people in Mandera, 84,980 in Wajir, 4,920 in Lamu and 1,730 in Turkana in 2014.

Conflicts in Baringo in December 2014 caused the displacement of at least 17,600 people. Mid-January reports indicate that the displaced are facing acute food shortages and are still in need of shelter support (local media, 25/01/2015). The Government has provided aid to facilitate the return of 5,000 of the displaced (local media, 19/03/2015).

Refugees

As of 1 March, Kenya is hosting more than 585,000 refugees and asylum seekers. 224,884 are in Dadaab, 127,674 in Alinjugu, 180,674 in Kakuma and 51,757 in Nairobi (UNHCR, 01/03/2015).

From Somalia: As of March 2015, 424,691 Somali refugees are in Kenya. 13,162 arrived in 2014, indicating a considerable drop in arrivals (UNHCR, 31/12/2014). Most are in the northeastern Dadaab and Alinjugu refugee camp complex (UNHCR, 01/07/2014). Additionally, there are 2,620 asylum seekers (UNHCR, 24/03/2015).

The Tripartite Agreement between the Kenyan and Somali Governments and UNHCR, signed in November 2013, establishes the legal framework for those Somali refugees wishing to return home (IOM, UNHCR, 09/12/2014). As of 31 March, 2,049 returnees had arrived in Somalia (UNHCR, 31/03/2015). On 12 April, reports suggested that Kenyan officials had asked UNHCR to close Dadaab camp and repatriate all Somali refugees. UNHCR said it had not received a formal request (AFP, 12/04/2015; Al Jazeera, 12/04/2015).

From South Sudan: As of 19 March, more than 45,342 South Sudanese refugees had crossed into Kenya through Nadapal border since mid-December 2013 (OCHA, 19/03/2015). 64% of these are children (UNICEF, 05/02/2015). The total population of South Sudanese refugees in Kenya had reached 90,714 in February 2015 (UNHCR, 01/02/2015).

There is a critical need for land. Kakuma camp has exceeded its capacity of 125,000 by over 56,000 refugees (UNHCR, 19/03/2015). The overpopulation and burden on services is causing friction among refugee communities, and security forces are finding it more difficult to manage situations (UNHCR, 14/11/2014).

From Ethiopia: As of 24 March, There are 30,478 Ethiopian refugees and asylum seekers in Kenya (UNHCR, 24/03/2015).

From DRC: As of 24 March, There are 17,303 DRC refugees and asylum seekers in Kenya (UNHCR, 24/03/2015).

From Sudan: As of 24 March, there are 9,631 refugees and asylum seekers in Sudan (UNHCR, 24/03/2015).

Access

Humanitarian workers on the ground have reported that poor roads, hilly terrain and protection concerns along the northern Rift Valley and northeastern regions hamper the delivery of aid (OCHA, 31/11/2014).

Food Security

Due to below-average rains, constrained food access and high food prices, over 1.6 million people, mainly in the northern pastoral areas, are food insecure. The food insecure population is 75% larger than in 2013 (UNICEF, 05/02/2015).

On 10 February, authorities reported that 25 constituencies in Mandera need emergency food. WFP, the leading food supplier in the area, is said to have stopped supplies in the region (local media, 10/02/2015). An estimated 400,000 people in North Rift are in dire need of food relief (local media, 01/03/2015).

Hotter-than-normal conditions from January through March are likely to lead to a more severe deterioration of rangeland. Livestock productivity is continuing to decline. The majority of households in pastoral areas will remain Stressed (IPC Phase 2) through June; parts of Isiolo, Wajir, Garissa, Turkana, and Marsabit that had inadequate short rains are in Crisis (IPC Phase 3) (FEWSNET, 26/03/2015).

Agriculture and Markets

The short rains’ crops are expected to be 40% to 50% below average in volume (FEWSNET, 04/02/2015).

Livelihood

On 7 April, the Central Bank of Kenya closed 13 remittance firms, in an effort to curb the financing of terrorism. This has affected Somali refugees in Kenya, as families are unable to receive funds from abroad. 30 remittances outlets work in Dadaab, all of which have suspended their businesses for fear of police harassment (IRIN, UN, 10/04/2015).

Due to the recent cholera outbreak in Migori and Kisii county, the sale of food on the street has been banned. Local media report the ban has affected 10,000 traders (local media, 11/02/2015; local media, 25/02/2015).

Health and Nutrition

Lack of medical staff was reported in Kakuma camp, creating a gap in consistent service delivery. Insufficient supply of condoms, vaccines, and associated materials were also reported (UNHCR, 28/01/2015). The ratio of hygiene promoters to refugees in Kakuma camp is 1:2,500, well below the UNHCR standard of 1:500 (UNHCR, 09/01/2015).

Eleven of 26 health facilities in Mandera have closed as staff have left the county (UNICEF, 05/02/2015).

Cholera

Humanitarian workers on the ground have reported that poor roads, hilly terrain and protection concerns along the northern Rift Valley and northeastern regions hamper the delivery of aid (OCHA, 31/11/2014).
A cholera outbreak has been reported in Homa Bay, Migori, and Nairobi counties (local media, 13/02/2015). The outbreak has spread to Kisii county. As of 24 February there were 805 confirmed cases and 12 deaths, most in Migori (IFRC, 24/02/2015).

Nutrition

Around 310,000 pastoral children in northern Kenya suffer from acute malnutrition (UNICEF, 29/01/2015).

SAM rates among South Sudanese refugees arriving in Kakuma camp in February were 11.1%, a decrease from 15.4% in October 2014. GAM was at 20.5%, a decrease from 29.3% in October 2014 (UNHCR, 23/10/2014, 28/02/2015).

Education

Sexual offences have been on the rise in Kwale county, eastern Kenya, and this has forced girls to drop out of school (Kenya Daily Nation, 07/02/2015).

Access to education has been disrupted for 9,000 schoolchildren in Mandera, because non-local teachers were advised by their unions not to report to duty in 2015 (UNICEF, 05/02/2015). Authorities are in the process of hiring new local staff (local media, 26/02/2015).

More than 20 schools have been closed in Baringo North and South due to insecurity. An attack on a primary school in Baringo South, where armed raiders shot dead a security guard, has further aggravated the situation (local media, 21/01/2015).

Protection

Following Al Shabaab attacks in Mandera in late November, a new security bill was introduced limiting the rights of people who are arrested and accused, adding harsh criminal penalties, and restricting freedoms of expression and assembly. On 23 February, Kenya’s High Court discarded key aspects of the law, including those which curb media freedom and introduce a refugee cap (BBC, 23/02/2015). In January, Human Rights Watch issued a report that highlighted the government’s efforts to tackle insecurity have been marred by serious human rights violations, including extrajudicial killings, arbitrary detentions and torture by security forces (HRW, 29/01/2015).

Child Protection

14,619 South Sudanese refugee children are unaccompanied or separated minors (UNHCR, 31/01/2015). Trafficking of separated South Sudanese children is a growing phenomenon in Kenya. Traffickers find the children on their way to or inside refugee camps and take them to southern Africa, often Malawi, where they use or sell them as slaves (Jesuit Refugee Service, 14/01/2015).

Updated: 13/04/2015

LIBERIA FOOD INSECURITY, EPIDEMIC

LATEST DEVELOPMENTS

29 March: No new confirmed Ebola cases were reported from Liberia in the week to 29 March (WHO, 02/04/2015).

28 March: Authorities are urging Ebola survivors to refrain from unprotected sex beyond the recommended 90 days until more information on the likelihood of transmission is collected (NYT, 28/03/2015).

26 March: 95% of women who were engaged in small business have lost their markets and are accumulating debt (UN, 26/03/2015).

23 March: The number of outpatient visits decreased by 61% in 2014 (UN 26/03/2015).

KEY CONCERNS

- As of 29 March, 9,712 cumulative cases reported, including 4,332 deaths (WHO, 07/04/2015).

- 25,228 cumulative Ebola cases across the region, including 10,463 deaths (WHO, 02/04/2015).

- 1.23 million people are facing Stressed (IPC Phase 2) food insecurity, and 190,000 Crisis (Phase 3). Crisis food insecurity is projected to increase to 720,000 people (15% of the population) in the lean season (June–August), particularly in Nimba, Lofa, Bong, Margibi, and Montserrado counties (Cadre Harmonisé 03/2015).

- There is insufficient capacity to meet non-Ebola medical needs, leading to an increase in non-Ebola related morbidity and mortality.

For more information on the Ebola crisis in West Africa, visit the ACAPS Ebola Needs Analysis Project page.

Political Context

Despite the Ebola outbreak and the risk of infection related to public gatherings, Liberia held legislative elections on 20 December 2014. Turnout was less than 30%. The opposition won most seats (international media, 24/12/2014; BBC, 23/12/2014).

International Presence

On 15 December, the Security Council extended the mandate of the UN Mission in Liberia until 30 September 2015, in light of the consequences of the Ebola outbreak for national reforms (UNSC, 15/12/2014).

Humanitarian Context and Needs

Access
Transportation problems are hampering the humanitarian response, due to a lack of vehicles in good condition, and poor road network (UNICEF, 11/02/2015). The upcoming rainy season, May–October, will exacerbate these issues (USAID, 25/03/2015).

Resistance to the Ebola Response

Instances of resistance to the Ebola response continue. A funeral home in Monrovia was reported to be refusing to allow mouth swabs of bodies in March (PI, 20/03/2015). In Garraway district, Grand Kru county, some residents prevented humanitarian actors from conducting Ebola awareness-raising activities due to fear of them carrying the disease (UNMEER, 22/02/2015).

Refugees in Liberia

Liberia is hosting 39,843 refugees, asylum seekers and others of concern, including 37,907 refugees from Côte d’Ivoire. Voluntary repatriation of Ivorian refugees, suspended by the Government of Côte d’Ivoire at the beginning of the Ebola epidemic, will resume on 6 April (UNMEER, 15/03/2015; UNHCR, 28/02/2015).

Food Security

As of March, 1.23 million people are facing Stressed (IPC Phase 2) food insecurity, and 190,000 Crisis (Phase 3). Crisis food insecurity is projected to increase to 720,000 people (15% of the population) in the lean season during June–August, as poor and very poor households in Nimba, Lofa, Bong, Margibi, and Montserrado counties will face insufficient purchasing power (Cadre Harmonisé 03/2015).

Despite food security improving since the last harvest and the decreased incidence of Ebola cases, poor households used more coping strategies in February than in January, especially in Lofa, Bomi, Gbarpolu, and Grand Cape Mount counties. Female-headed households are more vulnerable to food insecurity (WFP, 28/02/2015).

Agriculture and Markets

Markets and trade seem to be recovering since the reopening of Liberia’s borders with Guinea and Sierra Leone, but high staple food prices and low wages continue to hamper food access in the northwest (WFP, 28/02/2015).

Quarantine has disrupted trade throughout the country. Inadequate food availability was reported by 25–50% of traders on markets in Lofa, Gbapolu, Montserrado, Margibi, Bong, Nimba and Grand Gedehe counties (FEWSNET, 07/01/2015).

Agricultural sector growth will decline by over 2% due to the Ebola outbreak, according to a recent recovery report (UN, 26/03/2015). Nationally, rice production in 2014 is estimated to have declined by 12%, and cassava by 5%. In Lofa and Margibi, a 20–25% decrease in rice production has been reported (Food Security Cluster, 30/11/2014; FAO, 05/01/2015; FAO, 22/01/2015). 60% of Liberians rely on imported staple crops, and a rice import gap of 90,000 metric tons is exacerbating food insecurity, based on commercial forecasts (FAO, 05/01/2015; 22/01/2015). Surveys indicated that rice prices in January were 40% above the January baseline in more than seven counties, with the largest increase in Lofa, due to Ebola and the devaluation of the Liberia dollar (World Bank, 12/01/2015; BBC, 27/01/2015; UNDP, 24/12/2014; ECHO, 31/12/2014).

Livelihoods

The impact of EVD on livelihoods seems to be reducing. Nearly 20% of Liberians who had stopped working since the Ebola crisis have returned to work in February. Farmers still report difficulties organising work teams due to fear of Ebola (World Bank, 24/02/2015). Some were unable to participate due to movement restrictions (Cadre Harmonisé, 03/2015). Women are particularly vulnerable since they work disproportionately in non-farm self-employment. 95% of women who were engaged in small business have lost their markets and are accumulating debt, which they will struggle to repay (UN, 26/03/2015). Microcredit, one of women’s main sources of funding, decreased to negligible amounts. This is, limiting recovery for many households (UNDP, 31/01/2015; Cadre Harmonisé, 03/2015).

In a World Bank survey, 85% of participants reported having sold assets, sold or slaughtered livestock, borrowed money, sent children to live with relatives, spent savings, or delayed investments since the start of the Ebola crisis (World Bank, 24/02/2015). In an Oxfam survey, 75% of families have seen their incomes decline, with an average income drop of 39% (Reuters, 27/01/2015). Bush meat vendors are out of business due to bans on sales. Closure of many industries has led to increased unemployment (Cadre Harmonisé, 03/2015).

Economic growth in 2014 fell to by an estimated 2.2%, from the 5.9% expected before the crisis. Overall 2015 growth is projected at 3. Revenue for 2015 is now projected to decline by about 16% (UN, 26/03/2015).

Health and Nutrition

Nearly all health facilities in the country are open, but most are operating at reduced levels compared to before the outbreak. Many patients are still fearful of infection and so avoid health facilities (MSF, 02/04/2015). Between August and December 2014, the number of outpatient visits decreased by 61% compared with the same period in 2013 (UN 26/03/2015). Routine disease surveillance remains sporadic and data is limited. Outbreaks of infectious disease have been reported (UNMEER, 15/03/2015).

The Ebola outbreak has significantly reduced vaccination rates. DTP3 vaccinations have decreased by 53% since 2013 (UN, 26/03/2015; Save the Children, 02/03/2015).

Ebola

As of 29 March, 9,712 cumulative cases reported, including 4,332 deaths (WHO, 07/04/2015). The utility of case numbers has been questioned; statistics are reported to be highly unreliable due to a lack of comprehensive contact tracing, timely case investigation, and rapid Ebola testing (CDC, 09/2014; international media, 20/11/2014).

No new confirmed cases were reported from Liberia in the week to 29 March. The most recently confirmed Ebola patient died on 27 March. 185 contacts associated
with this patient are being monitored (WHO, 01/04/2015). The low number of suspected cases being reported and tested indicates weak surveillance (IMS, 27/02/2015). Some new suspected cases are not being reported for testing because reporting will lead to quarantine (PI, 07/03/2015).

**Healthcare provision:** A recent assessment of non-Ebola health facilities in Montserrado county showed 40% had a functional triage system (WHO, 11/03/2015). 372 health workers have been infected, 180 of whom have died (UNICEF, 25/03/2015).

**Containment measures:** Few people are currently quarantined. On 22 February the 1200 –0600 curfew was officially lifted (AFP, 20/02/2015). The Government reopened its borders with Sierra Leone and Guinea, which had been closed since 29 July (UNMEER, 23/02/2015). Thousands of people are now crossing daily through official and unofficial crossing points, but the Sierra Leone side of the border remains officially closed. Due to critical gaps in infection control supplies, particularly on the Guinean side, only one official crossing with Guinea has opened on both sides (UNMEER, 15/03/2015). Infection prevention and control challenges persist in border areas, according to a CDC assessment in March, including a lack of safe drinking water at nearby health centres; inadequate WASH facilities; insufficient fuel for incineration; and inconsistent accessibility to and storage and use of personal protective equipment (USAID, 25/03/2015). Residents of Lofa county have voiced concerns about the limited monitoring of infection prevention protocols (IMS, 07/03/2015; PI, 16/03/2015; VOA, 18/03/2015).

There are indications that some male survivors are not waiting the required 90 days to have sexual intercourse, potentially placing their partner at risk (Reuters, 19/03/2015). Authorities are reportedly urging Ebola survivors to refrain from unprotected sex by the recommended 90 days, until more information on the likelihood of transmission is collected. This is due to the last confirmed case being suspected of having been sexual transmitted (VOA, 29/03/2015, NYT, 28/03/2015).

On 3 October, Parliament criminalised the deliberate concealment of information about people with contagious diseases such as Ebola and HIV (UN, 04/10/2014).

**Regional Ebola Outbreak**

25,228 cumulative Ebola cases across the region, including 10,463 deaths (WHO, 02/04/2015).

Before the Ebola outbreak, more than 70% of the 30,000 HIV patients in Liberia had access to treatment, but more than 60% of the facilities distributing antiretroviral medicines have since closed, according to the National AIDS Control Program (IRIN, 21/11/2014).

**Maternal Health**

Women in the three most-affected countries are no longer giving birth in health facilities and the number of assisted births has decreased. Antenatal consultations decreased by 40% and institutional deliveries decreased by 37% by the end of 2014 compared to 2013 (IASC, 10/02/2015, UN, 26/03/2015). In addition, Ebola-infected pregnant women were often not permitted in Ebola treatment centres because of the high risk of contamination during delivery (UNFPA, 13/02/2015).

**Measles**

More than 180 suspected measles have been reported in Monrovia in the past weeks (MSF, 23/03/2015). Suspected cases have also been reported in Sinoe county (UNMEER, 25/03/2015). On 20 March measles cases were confirmed in Grand Bassa county. The patients were being hosted in an empty ETU Buchanan, which is against protocol (PI, 20/03/2015). In response to a measles outbreak in Lofa county, periodic intensification of routine immunisation was planned across the country, with an emphasis on children under 12 months who missed their routine vaccination. The next round has been delayed until 8 – 14 May, to allow social mobilisation campaigns more time to combat rumours that confuse routine vaccination with the Ebola vaccine trials, which have led to resistance from some parents (UNICEF, 11/03/2015). There are reports of people suspected to have measles abandoning their homes to avoid specimen collection and testing (UNMEER, 27/03/2015).

Different reports suggest measles vaccination coverage have decreased by between 45% and 58% by December 2014, compared to 2013. The minimum acceptable level is at least 80% to protect a population against the virus (UN, 26/03/2015; Save the Children, 02/04/2015). Children in Monrovia’s slums are most at risk (international media, 23/03/2015).

**Pertussis**

There are 240 suspected cases of pertussis in Barrobo and Karluway districts in Maryland county (UNICEF, 25/02/2015).

**Mental Health**

A need for access to mental health and psychosocial support remains, especially for survivors, orphans and the bereaved (UNMEER, 22/02/2015).

There is only one psychiatrist and there are no psychologists in Liberia. 143 mental health clinicians are meant to be attached to wellness units, but these are yet to be established. There are no long-term treatment facilities for mental health in Liberia. There is one facility with approximately 80 beds for short-term patients (PI, 21/03/2015).

**Nutrition**

52,000 children are estimated to be at risk of severe acute malnutrition (SAM). However, there is no nutritional status information post-Ebola, since the “no-touch” policy has prevented screening. Relative to trends observed from 1992–2012, malnutrition prevalence is forecast to increase by 2.8–5.3% between 2014 and 2016 (UN Development Group, 21/11/2014).

Global acute malnutrition was 6% before the EVD crisis (PI, 24/03/2015). There is no nutritional status information post-Ebola, since the “no-touch” policy has prevented screening. Relative to trends observed from 1992–2012, malnutrition prevalence is forecast to increase by 2.8–5.3% between 2014 and 2016 (UN Development Group, 21/11/2014).

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WASH

Two million people directly or indirectly affected by the Ebola epidemic are in need of WASH (UNMEER, 12/12/2014). WASH services in Ebola treatment centres have been prioritised, leading to regular acute shortages of safe water supply among communities (PI, 24/01/2015). Half of the population has no access to toilets (UNMEER, 20/11/2014). Challenges remain regarding on-site and off-site management of liquid waste from some of the first Ebola treatment units constructed (UNICEF, 15/03/2015).

55% of schools do not have access to functional water supply and 43% lack access to functional latrines. Only 18% of schools have hand-washing facilities (Ministry of Education, 26/02/2015). In schools with functional sanitation facilities, there is an average of 118 boys or 113 girls per latrine.

Education

16 February was the official date for schools to open, but the exact number of schools that reopened are still unknown (UNMEER, 19/02/2015; PI, 20/02/2015). Many schools are reportedly not in compliance with hygiene protocols, and parents’ concerns make them reluctant to send their children to school (UNICEF, 18/03/2015; UNMEER, 15/03/2015).

An estimated 2,800 schools need improved access to water (PI, 26/03/2015). 31% of schools assessed by the Education Cluster did not have functional latrines, while schools that do average one latrine for every 123 students. Only 60% of the schools had safe drinking water within 500m, 40% of schools had soap and water for hand washing, and 39% had functional hand-washing facilities (Education Cluster, 17/03/2015).

Protection

Families of victims, survivors and people quarantined are experiencing physical and verbal abuse and lack access to health facilities, food, and water sources (UNMEER, 30/11/2014; UNMEER, 11/01/2015). Health care workers who were in ETUs face similar discriminatory attitudes (Mercy Corps, 02/04/2015).

Best estimates suggest there are currently around 2,000 survivors in Liberia (VOA, 30/03/2015). Many return home to find their possessions have been destroyed to prevent the spread of the virus. Landlords have terminated leases and some have lost their jobs (VOA, 30/03/2015). Women and girls, who have worse access to jobs and education, are especially vulnerable (UNFPA, 03/02/2015).

There have been reports of people being forcibly placed under quarantine by the Government. Recently, a group of young males were placed inside an ETU scheduled for decommission after one died under suspicious circumstances (PI, 20/02/2015).

Child Protection

4,265 children have been identified as directly affected by Ebola – defined as quarantined, unaccompanied, orphaned and separated children, and children in treatment or discharged. 2,951 have lost one or both parents due to Ebola (UNICEF, 05/04/2015). Social workers have raised fears of child trafficking and exploitation, after some children, who have been placed into foster care and are receiving material support or onetime cash grants, have been claimed by strangers who failed to come forward previously (UNICEF, 31/12/2014).

Updated: 07/04/2015

LIBYA DISPLACEMENT, CIVIL WAR, POLITICAL UNREST

LATEST DEVELOPMENTS

5 April: A suicide attack claimed by IS in Misrata killed four people and reportedly wounded 21 (AFP, 05/04/2015).

On 3 April: Clashes between the Libyan National Army (LNA) and Libya Dawn in Aziziya near Tripoli killed four militants. One person died in firing on Tripoli’s Mitiga airport (AFP, 03/04/2015).

KEY CONCERNS

- 393,420 IDPs in 35 cities and towns (UNHCR, 14/11/2014). More than 150,000 people have sought refuge abroad (UNHCR 10/10/2014).

- Over 331,000 people are at risk and in need of humanitarian assistance (OCHA, 08/10/2014).

- Indiscriminate shelling and targeting of civilian areas (UNSMIL, 04/09/2014).

- Access is a major concern (OCHA, 03/09/2014).

OVERVIEW

It is estimated that two million people have been affected by the conflict, which has generated shortages of food, fuel, water, medical supplies, and electricity, as well as reduced access to healthcare and public services.

The rapidly deteriorating security situation has caused waves of displacement, particularly in the western outskirts of Tripoli and the eastern city of Benghazi. The prices of food and basic items, such as cooking fuel and wheat flour, have doubled.

Most displaced people are living in schools and host communities are under growing strain. Access is difficult, with blocked roads preventing the delivery of food and medical supplies to areas most affected by conflict.
Libya has two rival parliaments and governments, with militias exerting much control on the ground. The political crisis led to worsening armed conflict over 2014. Rival economic policies and a potential struggle over the control of resources is likely to exacerbate the crisis, and worsen the economic situation (Financial Times, 08/12/2014).

The House of Representatives was elected in June. It moved to Tobruk in early August and towards the end of 2014 to the town of Shahat (AFP, 12/11/2014). The Islamist-dominated General National Congress (GNC), which preceded the House of Representatives and had never stood down, reconvened and voted to replace the House on 25 August.

Prime Minister Al Thani's Government, from the House of Representatives was sworn in on 28 September. In October, the House of Representatives officially endorsed former General Haftar and his Operation Dignity (now known as the Libyan National Army) against Islamist militias. On 6 November, Libya’s Supreme Court ruled the House of Representatives unconstitutional. Certain members of the House of Representatives declared that they did not recognise the ruling (UNHCR, 14/11/2014).

Economic Crisis

Oil production, which pays for 95% of government expenditure, has plummeted, leading to a USD 22 billion deficit in 2014. Forecasts for the 2015 deficit are even worse, as a drop in global oil prices compounds the shortfall in production. Unless the political crisis is resolved, these increasing financial constraints could pose serious risks to Libya’s ability to provide essential services (UNICEF, 03/2015).

Peace Talks

UN-brokered talks between the House of Representatives and elected members who boycotted the assembly and had links to the GNC began on 29 September (Reuters, 01/10/2014). During January talks, a ceasefire was agreed by the main warring factions, including Libya Dawn, who were not present (NYT, 18/01/2015). This has not held.

On 11 February, there were talks involving both governments, although the House of Representatives suspended participation on 23 February, citing the GNC’s alleged failure to condemn a recent IS attack (AFP, 11/02/2015; BBC, 23/02/2015).

Over 6–8 March, the rival parliaments held their first direct, led by the UN (AFP, 06/03/2015; 11/03/2015). Adjourned on 26 March, talks are scheduled to resume in April, aiming for warring factions to agree on a unity government (Libya Analysis, 01/04/2015).

Security Context

The surge in violence since July 2014 has affected more than two million people (UN, 03/09/2014). Since January 2015, fighting has claimed over 800 lives, including almost 200 in March (ACLED, 28/03/2015). In 2014, there were 2,383 reported fatalities from battles and remote violence (ACLED, 15/01/2015).

An abundance of weapons from the NATO-backed uprising against Gaddafi are sustaining warring factions (AFP, 14/07/2014). The United Nations Stabilization Mission for Libya (UNSMIL) left the country in mid-July 2014.

Main Stakeholders

Libya Dawn

The Libya Shield brigades, tied to the city of Misrata, are allied to Islamist political forces, as are the Shura Council of Benghazi Revolutionaries (SCBR), a Benghazi-based alliance including Ansar al Sharia, Libya Shield units and other armed groups. Together with insurgents from Tripoli and other towns including al Zawiya and Gheryan, these groups make up Libya Dawn.

Fissures between actors deriving their political legitimacy from the GNC, and Islamists in the GNC. Some are wary of the threat of Islamic State (IS) to regional and local interests; others are willing to cooperate with IS to defeat Haftar and the Libyan National Army (ACLED, 03/2015).

Libyan National Army

Former General Khalifa Haftar launched Operation Dignity in May 2014, aiming to break the strongholds of Islamist forces. Operation Dignity and its supporters are now called the Libyan National Army (LNA), and Haftar is army chief (ICG, 05/01/2014; Middle East Eye, 24/02/2015). Support comes from the Al Qa’qa’ and Al Sawaiq brigades, allied with the city of Zintan, and fighters from the Warshefana region west of Tripoli, as well as units of Libya's regular armed forces. The House of Representatives has repeatedly appealed to the international community for more weapons (AFP, 05/01/2014).

Islamic State and Allies

The Islamic Youth Shura Council has declared an Islamic emirate in the eastern city of Derna and pledged allegiance to Islamic State (Al Arabiya, 06/10/2014). The Battar Brigade, based in Derna, pledge allegiance to Islamic State. It is not affiliated with either of the rival governments and has warned all governments and militia groups not to interfere with its activities.

Regional Involvement

Egypt and the United Arab Emirates have reportedly bombed Islamist militia positions near Tripoli's airport, according to the United States (AFP, 08/10/2014). On 8 October, Prime Minister Al Thani announced that Egypt would help to train the Libyan army.

Islamic fighters pushed out of Mali following French intervention are said to be hiding in Libya’s south. Experts see links between these groups and Islamist militias in northern and eastern Libya (AFP, 26/10/2014). IS has set up training camps in eastern Libya, according to US officials (BBC, 04/12/2014).

Palestinian, Sudanese, and Syrian nationals have been banned from entering Libya (Libya Herald, 05/01/2015). Tuareg from Mali and, reportedly, Tebu from Chad, have joined their respective Libyan tribe members in fighting over Ubari (Al Jazeera, 05/12/2014).

Conflict Developments

The rival governments have been carrying out tit-for-tat airstrikes in east and west Libya
respectively (Libya Herald, 01/04/2015).

On 15 February, militants pledging allegiance to Islamic State executed 21 Coptic Christians, 20 of them Egyptians (HRW, 23/02/2015).

Tripoli and Western Libya

Tripoli is largely under the control of Operation Dawn. On 12 March, a bomb attack on a police station, which wounded one officer, was claimed by IS (Reuters, 12/03/2015). On 27 January, gunmen killed nine people in a hotel in Tripoli before blowing themselves up. The attack was claimed by Islamic State. The GNC stated the attack was an attempt to assassinate its chief, Omar al Hassi, who was inside the hotel at the time, and blamed Haftar (AFP, 29/01/2015). On 20 March, the LNA announced an assault to recapture Tripoli, and carried out airstrikes the day before (Reuters, 23/03/2015). Targets were reportedly Mitiga airport, a camp used by Libya Dawn, and the airport in Zuwarah (Reuters, 21/03/2015). On 24 March, an airstrike by Operation Dignity on Tarhuna, near Tripoli, killed eight people (AFP, 24/03/2015).

On 3 April, clashes between the LNA and Libya Dawn in Aziziya near Tripoli killed four militants. One person died in firing on Tripoli’s Mitiga airport (AFP, 03/04/2015).

On 5 April, a suicide attack claimed by IS killed four people and reportedly wounded 21 in Misrata (AFP, 05/04/2015).

In October and November, there were clashes between militias from Zintan and supporters of Operation Dawn in the town of Kekla (AFP, 13/10/2014). Operation Dawn expanded south into the Nafusa mountain region, with factional fighting between Zintan militia and Misrata and other tribal and city-based militia groups (ACLED, 24/11/2014).

In December, Operation Dignity reportedly targeted Dawn strongholds in Zwara, 110km from Tripoli, and close to the Tunisian border (AFP, 02/12/2014; Reuters, 05/12/2014; Asharq Al Awsat, 6/12/2014; Libya Herald, 07/12/2014).

Sirte: In early March, it was reported that IS, backed by local militias and militias from Misrata, controls the city of Sirte (NYT, 10/03/2015). The GNC has sent forces from Misrata and from bases near oil ports to recapture Sirte; fighting is ongoing (Reuter, 25/03/2015). On 25 March, five people were killed in a suicide bombing in Sirte (UNSMIL, 25/03/2015).

On 1 April, Zintan airport was aerially bombarded, reportedly by Libya Dawn. Unconfirmed reports state that nearby Rujiban was also hit (Libya Herald, 01/04/2015).

Benghazi and Eastern Libya

Operation Dignity began an offensive on Benghazi on 15 October; SCBR had apparently been in control since mid-July (UNSMIL, 04/09/2014). In December, Ansar al Sharia was reported to be firing missiles indiscriminately into Benghazi (Libya Herald, 07/12/2014). Between mid-October and January, 600 people were killed due to fighting in the city, according to medical staff (Reuters, 18/01/2015). In early January, the Libyan National Army claimed to have almost full control of Benghazi’s Lajith district, which had been a key Ansar Al Sharia stronghold (Libya Herald, 06/01/2015). On 6 February, the LNA claimed to have taken control of central Benghazi’s port area as well as taken part of the neighbouring Suq Al Hout district following heavy fighting there the day before (Libya Herald, 06/01/2015). On 2 March, rockets hit residential areas, killing at least two people and wounding more than 30 others, according to officials (Reuters, 02/03/2015). On 24 March, a suicide bombing killed eight (UNSMIL, 25/03/2015).

Oilfields and Terminals

In December, Libya Dawn announced a campaign for the control of oilfields and terminals (The Telegraph, 14/12/2014). On 20 January, renewed Libya Dawn–LNA clashes were reported near As Sidr (Reuters, 20/01/2015). On 3 February, Libya Dawn-affiliated Islamist militants temporarily seized Al Mabruk oilfield south of Sirte. The Libyan national oil company has declared 11 oilfields non-operational because of theft, looting, sabotage, and destruction by unidentified armed groups (NYT, 05/03/2015). On 1 April, LNA were withdrawn from As Sidr oil field (Libya Herald, 01/04/2015). The withdrawal of troops from Ras Lanuf and As Sidr could mean that oil terminals will reopen soon (The Guardian, 01/04/2015).

Derna

On 16 February, Egypt carried out airstrikes on the city of Derna, IS’s stronghold in Libya, reportedly killing seven civilians (Reuters, 23/02/2015). Days later, armed groups claiming affiliation to IS carried out twin suicide attacks in Al Guba, near Derna, killing at least 44 people, including six Egyptians, and injuring dozens more (HRW, 24/02/2015). IS stated the strikes were in retaliation for Egyptian airstrikes (BBC, 23/02/2015). Over 3-4 January, the LNA launched airstrikes on an oil tanker in the Islamist-held port of Derna, killing two crew members and wounding others (AFP, 05/01/2014).

Inter-communal Violence

Intermittent violence in the south, linked to inter and intra-ethnic rivalries, has been exacerbated by geopolitics and shifting allegiances. Conflict, particularly in and around the cities of Sabha and Ubari, has resulted in displacement (UNHCR, 14/11/2014). Ubari saw repeated armed clashes between the Tebu (allied with the House of Representatives) and Tuareg (allied with Libya Dawn) communities between mid-September and December. Tuareg families sought shelter and medical aid outside the city (WHO, 24/11/2014). As of end March, fighting is ongoing in Ubari (UNSMIL, 25/03/2015).

Humanitarian Context and Needs

Access

Indiscriminate fighting has led to restrictions of movement for people trying to flee conflict areas. Violence and checkpoints along the route to Zawia from Tripoli are preventing people from reaching the Tunisian border. The Salloum border crossing between Libya and
Egypt has been closed indefinitely (Libya Herald, 21/01/2015). All commercial flights to Libya have been suspended (The Telegraph, 06/01/2015).

Access to areas most affected by conflict is difficult. Armed groups lack knowledge of humanitarian organisations and restrict their access to people in need. Most humanitarian agencies have left. Even before the worsening security situation, there were few humanitarian agencies with staff on the ground in Libya. The national agency tasked with leading the humanitarian response evaluates its own response capacity as almost nonexistent (IRIN 07/08/2014).

**Security Incidents Involving Aid Workers**

The ICRC suspended work in the country after an ICRC staff member was assassinated in Sirte in June 2014 (UN Security Council, 05/09/2014).

**Infrastructure**

Significant damage and destruction has been reported to public installations in Tripoli’s southern and western suburbs (UN Security Council, 05/09/2014). In October, power outages were reported in Tripoli (IRIN, 01/10/2014). Shortages of diesel have been reported (UNHCR, 14/11/2014). Numerous civilian aircraft have been damaged at Tripoli airport. Bridge 27, linking Tripoli and western Libyan cities, has been damaged (UNSMIL, 04/09/2014).

**Displacement**

**IDPs**

IDPs’ basic needs for shelter, food, and medical services remain grossly unmet. Their physical security has been seriously threatened by indiscriminate shelling, attacks on IDP camps and sieges. There is serious concern for tens of thousands of displaced migrants who are trapped in Libya and particularly vulnerable (IDMC, 30/03/2015).

As of 14 November, there are 393,420 IDPs in 35 cities and towns in Libya (UNHCR, 14/11/2014), including approximately 290,000 women and children (UNICEF, 03/2015). Additionally, at least 56,544 IDPs are still displaced since the 2011 conflict (IDMC, 23/09/2014).

There are 269,000 IDPs in and around Tripoli (IDMC, 03/2015). Near Tripoli, NGOs and the local council estimate some 83,270 people are living in settlements, schools and abandoned buildings (UNHCR, 16/01/2015).

In Benghazi, the local council is reporting around 90,000 people unable to return home. The displacement has been centred around Benghazi, Derna, and near the Gulf of Sidra, in Ben Jawad and Ras Lanuf (UNHCR, 16/01/2015; IDMC 03/2015).

Around Ubari, local crisis committees in the southeast confirm 18,492 people from Ubari are displaced in six towns: Sabha, Wadi Shati, Jufra, Ghat, Murzuq, and Lewenat (UNHCR, 16/01/2015; IDMC, 03/2015). IDPs from Ubari are facing difficulties as services have been severely disrupted by fighting. Schools, hospitals and markets remain completely inaccessible (UNHCR, 16/01/2015).

In the west, civilian groups report 38,640 people have been displaced by fighting in Kikla, including many women and children (UNHCR, 14/11/2014). 100,000 people have been displaced from the area around Warshefana since mid-September (UNHCR, 10/10/2014).

As of early October, most displaced people were living with local families (UNHCR, 10/10/2014). However, many IDPs are now reported to be living in schools. Some local councils have stopped registering new arrivals due to limited response capacity.

According to UNSMIL, the Benghazi Local Council has registered some 34,000 IDPs in need of basic assistance (UNHCR, 14/11/2014). Al Marj, near Benghazi, has had to close its schools to accommodate people unable to stay with host families. Al Bayda and Tobruk are also under pressure. Schools in Tobruk will be closed so they can host IDPs.

An estimated 35,000 of Tawerghan IDPs have been sheltering in temporary camps in Tripoli and Benghazi since 2011. No aid has been provided to the Tawerga camps since February 2014. While 10,000 Tawerga who had fled Tripoli have mostly returned, in the east, where the community is estimated to be 18,000-strong, many families are still displaced (IRIN, 10/12/2014). Some 2,500 Tawerga left their camp in Benghazi because of fighting and were staying in parks, schools and parking lots in and around the town of Ajdabiya, many with only thin plastic sheets for shelter (UNHCR, 14/11/2014).

**Migrants, Refugees and Asylum-seekers in Libya**

Prior to the crisis, in addition to IDPs from the 2011 conflict, Libya was supporting a growing population of refugees and asylum seekers using the country as an exit point to Europe. At end December, the total number of refugees in Libya was 36,984 (OCHA, 28/12/2014). In addition, IOM estimates that there are at least 150,000 migrant workers in Libya, 5,000 of whom might be vulnerable and in need of evacuation assistance, health services, and psychosocial support (IOM, 08/01/2015).

Detention of migrants, asylum seekers and refugees in Libya is widespread and prolonged; conditions, which were poor prior to the current fighting, have worsened (UNSMIL, 04/09/2014). Third-country nationals face extreme difficulties leaving the country as passage through Libya’s borders with Egypt and Tunisia is restricted (IOM, 14/09/2014).

**Refugees and Third-country Nationals in Neighbouring Countries**

By September, more than 150,000 people, including third-country nationals (estimated at 15,000) had sought refuge abroad since the beginning of the conflict (OCHA, 03/09/2014).

Since 15 February, some 20,000 Egyptians have fled Libya, many of them from Sirte (AP, 25/02/2015).

**Over 2014, 170,000 migrants departed from Libya and arrived in Italy. An estimated 3,200 people died crossing the sea (IOM, 31/03/2015).**

Approximately 1.8 million people have fled to Tunisia since 2011 (NYT, 09/09/2014).

**Food Security**

Insecurity is affecting the food supply chain, with some estimates indicating a substantial
decline in food imports into eastern Libya since May. Food prices in Tripoli remain volatile, reducing the purchasing power of the poorest households (WFP, 18/12/2014).

Shortages of basic food supplies have been reported in all areas of Tripoli and food prices have risen drastically (IOM, 12/08/2014; UNHCR, 14/11/2014). Warehouses (both public and private) are situated in conflict areas, and fuel shortages are aggravating the situation.

Fighting has disrupted oil exports as well as imports of goods by road and sea, and caused problems purchasing food on international markets. The HoR has reported it had started tapping into the country’s strategic wheat reserves to ensure bread supplies. In recent weeks some bakeries in Tripoli and Benghazi have closed or produce less (Reuters, 04/02/2015).

Livelihoods

People in Benghazi and Tripoli specifically, and in other cities in general, have been facing regular electricity cuts, plus interruptions to the internet and wider communications. In Tripoli, fuel shortages and water cuts have affected livelihoods (IFRC, 12/08/2014).

Health and Nutrition

Large numbers of expatriate medical personnel have left Libya, and such staff make up 80% of all medical personnel, according to the Ministry of Health.

Access to health services has become a major concern mainly in Benghazi. Ongoing fighting has led to restrictions of movement for people and health workers in the conflict areas (WHO, 24/11/2014).

The hospitals that remain operating in Tripoli and Benghazi have been overstretched dealing with casualties. Many national medical personnel have not been able to work due to insecurity. Tripoli hospitals have been hit by shelling, leading to suspension of services. Ambulances have been stolen. In Warshefana, fighting has disrupted health services (ICRC, 17/09/2014).

In August and September, a number of reports indicated shortages in medical supplies, destruction of storage facilities, and problems access warehouses in a number of towns (UNSMIL, 04/09/2014; IOM, 12/08/2014; IFRC, 12/08/2014; ICRC, 17/09/2014).

WASH

In Tripoli, shortages of water were reported in November (UNHCR, 14/11/2014).

Shelter

Alongside civilian properties, factories, mosques, and shops have also been destroyed in residential areas (Amnesty International, 08/08/2014).

Protection

Abductions, looting, burning of homes and other acts of revenge have all been frequently reported (UN Security Council, 05/09/2014). With some exceptions, civilians have not been given the chance to evacuate before hostilities commenced and severe fighting has taken place in and around houses and other places of refuge (UNSMIL, 04/09/2014).

Human rights defenders and justice sector officials are targeted, intimidated, and frequently attacked (UNSMIL/OHCHR, 25/03/2015). In Benghazi and nearby Derna, there were at least 250 politically motivated killings in 2014 (HRW, 24/09/2014). Armed militias controlling Derna are reported to have carried out summary executions, public floggings, and other violent abuse (HRW, 27/11/2014).

Abduction and Detention

On 9 March, nine foreign oil workers were reportedly kidnapped by IS, during an attack on Al Ghani oil field in which several guards were killed (BBC, 09/03/2015).

In mid-January, a group claiming affiliation with Islamic State claimed to have 21 Coptic Egyptians seized from various places in Tripoli province (Libya Herald, 14/01/2015). Militants pledging allegiance to IS on 15 February beheaded 21 Coptic Christians, 20 of them Egyptian (HRW, 24/02/2015).

In addition to the detention of fighters or suspected fighters, dozens of civilians remain missing (UNSMIL, 04/09/2014).

Third-country refugees and asylum-seekers, including unaccompanied children, face arbitrary arrest and indefinite detention for migration control purposes by both state and non-state actors. Torture and ill-treatment have also been reported (AI, 30/09/2014).

Mines and ERW

Incorrectly armed fuses or faulty ammunition have resulted in large quantities of unexploded ordnance in conflict areas (UNSMIL, 04/09/2014). According to Islamist militias, approximately 600 anti-personnel mines have been cleared since they seized Tripoli airport on 24 August (HRW, 05/11/2014).

Updated: 09/04/2015

MALAWI FLOODS

LATEST DEVELOPMENTS

7 April: Reports of rape and cross-border trafficking between Malawi and Mozambique are a concern (Government/UN).

7 April: Populations on the east bank of the Shire River in Nsanje remain difficult to access following rains early April, and require food, WASH and NFI support (Government/UN).

1 April: Nearly 80 new cholera cases were recorded in Malawi 26 March–1 April (UNICEF).
For more information, visit the ACAPS country analysis page.

Humanitarian Context and Needs

Access

Access to cut-off populations on the east bank of the Shire River in Nsanje, especially in the Makhanga area (including Chikali, Chigwamafumu and Makhanga), remains a challenge, even more so as rains were continuing in early April (Government/UN, 07/04/2015; 02/03/2015). Access to camps in Mulanje district is also reportedly difficult due to damaged roads (Government/UN, 13/03/2015; Logistics Cluster, 17/03/2015). The Logistics Cluster is facing a funding gap of USD 450,000, and WFP helicopters have had to leave Malawi due to a funding shortfall (Government/UN, 13/03/2015; Logistics Cluster, 10/03/2015). At March, the Preliminary Response Plan, appealing for USD 81 million, was 40% funded.

Disasters: Floods

Heavy rains since early January have led to severe flooding across Malawi and caused great damage to crops, livestock, food stocks, and infrastructure. The southern districts of Nsanje, Chikwawa, Phalombe, and Zomba have been most affected, and 15 districts declared a state of emergency in January (ACT, 15/01/2015; Government/UN, 02/03/2015). Around 638,000 people have been affected overall, 104 have died and 645 have been injured. Priority needs are for food, shelter and NFIs, WASH, and protection (Government/UN, 11/02/2015; 22/01/2015).

Displacement

Flood-affected IDPs

People displaced by flooding continue to return to their places of origin amid early recovery preparations. Yet, as of 31 March, around 162,000 people remain displaced in 202 open sites; 57% are female. 68,420 IDPs are in 31 sites in Nsanje, 32,720 in 23 sites in Chikwawa, 29,350 in 49 sites in Zomba, and 27,174 in 67 sites in Phalombe. 87% of IDPs have been displaced within their areas of origin (IOM/Government, 31/03/2015).

Shelter support and planned relocations, especially in Nsanje, are priorities for returnees (Government/UN, 07/04/2015; 02/03/2015).

Refugees

At August 2014, there were 19,923 refugees and asylum seekers in Malawi, mostly from DRC, Burundi and Rwanda, residing in Dzaleka camp in Dowa district in central Malawi or among host communities (UNHCR, 30/08/2014).

Food Security

700,000 people who suffered production shortfalls in the 2013/2014 season will face Minimal (IPC Phase 1) food security outcomes up to April, thanks to humanitarian assistance (FEWSNET, 31/01/2015).

An additional 616,000 people in 17 districts affected by floods and heavy rainfalls are in Crisis (IPC Phase 3) due to a reduction or total loss of livelihoods, and will need assistance until at least July (FEWSNET, 31/01/2015; WFP, 23/03/2015). 73 IDP sites report no access to a market; 40 report having difficulties accessing food, including through distributions (IOM/Government, 31/03/2015).

Agricultural Outlook

Around 64,000 hectares of land have been submerged, including 42,000 hectares of cropland, affecting 116,000 farmers (Government/UN, 03/02/2015). Due to the delayed start of the season, the main green harvest is expected late March–mid-April instead of mid-February; food availability is reduced until then (FEWSNET, 31/01/2015).

Dry conditions in the highly productive northern and central regions since early March have also reportedly caused some wilting and drying of premature crops. Current estimates indicate that over 105,000 metric tons of cropped maize has been lost (FEWSNET, 28/02/2015; SADC, 20/03/2015). Tools and seeds remain priorities (Government/UN, 07/04/2015).

Health and Nutrition

As of 1 April, 251 cases of cholera, including three deaths, have been confirmed since the start of the floods, mostly in Nsanje. The rise in cases is linked to a cholera outbreak in Mozambique (UNICEF, 01/04/2015; 26/03/2015). Diarrhoea and malaria are also significant among IDPs (IOM/Government, 31/03/2015).

Health facilities have been damaged by floods; lack of personnel and medical supplies to cope with the needs of the displaced is also an issue (Government/UN, 23/01/2015). More than half of IDP sites report that it is more than 3km to the nearest health facility (IOM/Government, 31/03/2015).

Nutrition

There has been a significant increase in the number of malnourished children as a result of the floods and poor harvests. Only 20 IDP sites report availability of supplementary feeding for pregnant and lactating women, while 36 report availability for children...
25,313 children aged 6–59 months were suffering from SAM as of July (Government/UN, 08/03/2015; UNICEF, 27/09/2014).

WASH

There are 70,000 people in need of WASH assistance. Water sources have either been damaged or contaminated in the affected areas, and pit latrines damaged (Government/UN, 03/02/2015; UNICEF, 26/01/2015). There is an increased need for WASH activities as cholera cases are rapidly increasing (Government/UN, 13/03/2015). 41 of 202 IDP sites reportedly have less than 15L of water per person per day.

WASH needs are greatest in Chikwawa and Nsanje, where the current sanitation ratio is one drop hole for 170 people (IOM/Government, 31/03/2015).

Shelter and NFIs

Shelter remains a primary need among flood-affected communities. 76% of IDP sites are spontaneous; around 430 families in Chapinga camp in Nsanje are living without a single tent (Government/UN, 07/04/2015; IOM/Government, 31/03/2015). On the east bank in Nsanje, many are waiting to be allocated land to rebuild their homes, but lack the resources to build them (Government/UN, 07/04/2015).

NFI support is required in most IDP sites, with kitchen supplies and blankets highlighted as priorities (IOM/Government, 31/03/2015).

Education

Preliminary assessments show that school enrolment for boys in Nsanje has dropped by 32% (UNICEF, 01/04/2015). 415 schools and 350,000 students have been affected, including 181 schools used as camps. 37 schools in Phalombe have been damaged (Government/UN, 03/02/2015).

Protection

Reports of rape and cross-border trafficking between Malawi and Mozambique are a concern (Government/UN, 07/04/2015).

There is limited capacity to identify vulnerable children affected by flooding and refer them to basic social services (Government/UN, 13/03/2015).

Updated: 08/04/2015

MALI CONFLICT, FOOD INSECURITY, DISPLACEMENT

LATEST DEVELOPMENTS

6 April: Armed men opened fire on a market in Diarafabe, Segou, killing one person (AFP).

4 April: Armed men killed two people in Boni, Mopti region (AFP).

KEY CONCERNS

- Security, particularly in the north, remains volatile, and access is limited for aid workers. Security in and around the northeastern region of Kidal remains of particular concern, and security incidents in Gao and Mopti have increased since early 2015.

- 181,000 children suffer from severe acute malnutrition (OCHA, 10/02/2015).

- An estimated 241,000 people are severely food insecure (IPC Phase 3 and 4) and 2.4 million people are in IPC Phase 2 (Stressed) (Cadre Harmonisé, 22/03/2015).

- 690,000 million people are in need of health assistance and 840,000 are in need of WASH (OCHA, 31/01/2015).

5 April: Militants killed a civilian and wounded three others during shelling in Gao city (AFP).

In Gao, an agreement between MINUSMA and the Azawad Movement Coalition has been suspended. Tabankort had been named a buffer zone between opposing forces, where pro-government militias would be disarmed. However, on 27 January, four civilians died and several were severely injured as thousands protested against MINUSMA and the
weakening of the militia (international media, 26/01/2015; local media, 27/01/2015; UN, 28/01/2015).

Insecurity in the north has held up the revision of voter rolls, delaying local and regional elections that were scheduled for April (international media, 07/03/2015).

Security Context

Attacks by and clashes between rival armed groups, including separatist Tuareg movements, government forces and Islamists, continue to hamper security in the country. In addition to the northern provinces of Kidal, Gao, and Timbuktu, security incidents have been reported in the southern regions of Mopti and Segou since January, and in Bamako in March. Landmines and improvised explosive devices (IED) are a particular threat. Attacks on MINUSMA vehicles, camps, and peacekeepers have spiked since mid-August 2014 (AFP, 21/09/2014). It often remains unclear who is responsible for the attacks.

The Movement for Unity and Jihad in West Africa (MUJAO), which split from Al Qaeda in the Islamic Maghreb (AQIM) in 2011, and Ansar Dine, are among the main Islamist groups active in northern Mali, carrying out attacks on pro-government and international forces.

International Presence

The stability of the Sahel region relies on the presence of foreign troops. In addition to Malian forces, there are French forces, MINUSMA, and the EU military training mission (EUTM), mainly in Bamako (53% of forces) and in northern cities such as Kidal, Gao, Timbuktu, and Menaka (28%) (OCHA, 31/05/2014). MINUSMA’s mandate expires on 30 June 2015. 34 peacekeepers have died since the start of the UN mission in July 2013 (UNSC, 06/01/2015; international media, 17/01/2015).

On 1 August 2014, France deployed a 3,000-strong counterterrorism operation across the Sahel region. Based in Chad, Operation Barkhane is active in Burkina Faso, Chad, Mali, Mauritania, and Niger (Local Media, 01/08/2014).

Security Incidents

On 6 April, armed men opened fire on a market in Diarafabe, Segou region, killing one person. They continued to the town hall to burn the Malian flag (international media, 06/04/2015). On the same day, two MINUSMA peacekeepers were injured as their vehicle hit a mine (UN, 07/04/2015). On 5 April, one civilian was killed and three wounded during shelling by militants in Gao city (international media, 05/04/2015). On 4 April, armed men suspected to have links with Islamist groups killed two people in Boni village, Mopti region (international media, 04/04/2015). On 1 April, three armed men were killed in clashes between government troops and an armed group, in Boulkessi, Mopti region, close to the border with Burkina Faso. On the same day, a MINUSMA base was attacked in Ansongo, northeast of Gao. A child was killed and two peacekeepers were injured (local media, 01/04/2015; international media, 02/04/2015).

Humanitarian Context and Needs

Food Security

As of 31 July 2014, 61,621 people were internally displaced as a consequence of the 2012 conflict and continued insecurity, a decrease from 86,000 reported in October. 53% are women and 56% are children under 18. About half reside in northern Mali, with 11,990 in Kidal, 10,348 in Timbuktu and 7,245 in Gao. In the south, 14,386 IDPs were identified in Bamako, and 10,456 in Koulikoro. Mopti and Segou regions also host several thousand IDPs. (Government, USAID, IOM, 06/04/2015).

Refugees in Mali

As of 31 July 2014, Mali hosts over 14,525 refugees from countries including Mauritania (12,900) and Côte d’Ivoire (1,110) (OCHA, 16/09/2014). Planning figures for January 2015 from UNHCR do not indicate a large change in the number of refugees (UNHCR, 01/12/2014).

Returnees

In December 2014, 394,655 returnees were registered in Mali; most in Timbuktu, followed by Gao and Mopti. The increase confirms the trend of return observed through the decrease in IDPs. 39% of returnees came from Bamako (Government, USAID, IOM, 06/04/2015).

Some 35,000 Malian refugees have returned: more than 10,000 from Burkina Faso; over 12,000 from Niger; around 7,300 from Mauritania; and 2,200 from Algeria (OCHA, 31/01/2015; UNHCR, 14/08/2014).

Malian Refugees in Neighbouring Countries

As of 28 February, 52,400 Malian refugees are registered in Mberra camp, Mauritania, and 48,742 in Niger (UNHCR, 28/02/2015). Burkina Faso hosts 33,125 Malian refugees as of 31 March (UNHCR, 31/03/2015).
As of end of March, the food security situation is generally acceptable across the country. An estimated 240,880 people are in Crisis food security (IPC Phase 3), most in Timbuktu, Mopti, and Gao. In Timbuktu and Gao, some 7,000 people are in Phase 4, Emergency (Cadre Harmonisé, 22/03/2015). The situation in Kidal has improved thanks to food security programmes. 2.4 million people are in Phase 2, Stressed food security (Cadre Harmonisé, 22/03/2015).

The total number of people in IPC Phase 3 and above is projected to increase to more than 400,000 from April to August 2015 (Cadre Harmonisé, 22/03/2015). Poor households’ prolonged dependence on markets in Timbuktu and Gao is leading to increased use of coping strategies such as borrowing and decreasing food expenditure. They will face Crisis food insecurity (IPC Phase 3) as of July. For agropastoral households in the north, an early lean season and associated high animal mortality are triggering atypical herd movements, leading to decreased milk production and lower prices of animals (FEWSNET, 26/03/2015; 01/04/2015). Prices in Timbuktu and Kayes have increased. Insecurity is negatively affecting the functioning of markets and limiting household access to markets. Otherwise, markets are generally well supplied with cereals and prices are more or less stable (WFP, 28/02/2015).

Sahel Food Crisis: Regional Overview

Early 2015, the number of people suffering from food insecurity in the Sahel is estimated at 20.4 million and least 2.6 million have crossed the emergency threshold and require urgent food assistance (OCHA, 31/12/2014; 02/04/2015). In 2014, food insecurity rose dramatically to 24.7 million food insecure people, compared to 2013 when 11.3 million people had inadequate food (OCHA, 03/02/2015).

Health and Nutrition

690,000 people are estimated to be in need of health assistance (OCHA, 31/01/2015).

Nutrition

As of 10 February, 181,000 children suffer from severe acute malnutrition (SAM), and 534,000 suffer from moderate acute malnutrition (MAM) (OCHA, 10/02/2015). SAM rates are highest in Mopti (3.7%), Segou (3.4%) and Koulikoro (2.7%). MAM rates are highest in the northern provinces, with 11.3% in Gao (FEWSNET, WFP, FAO, 28/02/2015; ACF, 31/12/2014).

WASH

About 840,000 people are in need of WASH assistance, the majority of whom live in the northern regions of Gao, Kidal, Timbuktu, Mopti, and Segou, and are IDPs, returnees, and host families without access to safe drinking water (OCHA, 15/01/2015).

Shelter and NFIs

Some 378,000 people are in need of NFIs and 137,000 in need of shelter. Those of concern are mainly IDPs and returnees (OCHA, 15/01/2015).

Education

In the three northern regions as well as several areas in Mopti affected by the conflict, access to education has been disrupted for an estimated 260,000 children. This includes 20,000 displaced children expected to return to the north in 2015, about 16,000 children who have been out of school for two years, and those living in areas affected by insecurity and who have limited access to schools.

Only 76% of schools in the north that were functional before the crisis were functional as of December 2014. Only 23% of children in school before the crisis are currently enrolled. More than 300 schools are still closed in Gao, Kidal, Mopti and Timbuktu; 79% of schools in Kidal are not functioning, 69 schools closed in Segou and Mopti after attacks in January. Education has been temporarily suspended for some 9,000 children (UNICEF, 27/01/2015; OCHA, 15/01/2015; UNICEF, 15/01/2015). In the communes of Nampala (Segou), Dioura, Tenenkou and Youwara (Mopti) parents refuse to send their children to school and teachers have left due to insecurity (OCHA, 31/01/2015).

Protection

About 860,000 people are in need of protection, including 313,000 non-displaced in the north (OCHA, 31/01/2015). Explosive remnants of war (ERW) caused 101 casualties from 2012 to June 2014 (OCHA, 30/06/2014).

Three armed groups (Ansar Dine, MNLA and MUJAO) are reportedly recruiting and using children, and are listed for rape and other forms of sexual violence.

Updated: 08/04/2015

MAURITANIA FOOD INSECURITY, DISPLACEMENT

LATEST DEVELOPMENTS

No significant developments this week 09/04/2015. Last update 21/01/2015.

KEY CONCERNS

- 800,000 people are estimated to be food insecure, of whom 428,000 are severely food insecure (OCHA, 02/2015).
- 24,100 children suffer from severe acute malnutrition (OCHA, 02/2015)

Political Context

The credibility of the Government continues to be questioned by much of the northern population, who claim they are being marginalised concerning the provision of basic
Humanitarian Context and Needs

Displacement

Malian Refugees

Mauritania hosts almost 48,000 Malian refugees as of February 2015 (OCHA, 02/2015). Almost all live in Mbera camp, a remote desert location on the border that has significant security challenges, and where food insecurity and malnutrition are high. According to UNICEF, 60% of camp residents are women and children, and many have been in the camp for two years, resulting in overlapping emergency and medium-term needs.

Security problems and inaccessibility to areas of northern Mali make it difficult to obtain return figures.

Food Security

In February 2015, nearly 820,000 people, a fifth of the total population, were food insecure, including 428,000 who are in IPC Phase 3 (Crisis) and 4 (Emergency), according to the Cadre Harmonisé (Harmonised Framework), and in need of food assistance (OCHA, 02/2015). Poor households in affected areas of the Senegal River Valley (near the border between Mauritania and Senegal) and western agro-pastoral zones (southwestern Mauritania) will be particularly vulnerable as a result of declines in seasonal income and food consumption gaps (FEWSNET, 19/03/2015).

Erratic rains have affected pasture regeneration and level of water points in several pastoral areas, particularly in Hodh el Chargui, Hodh el Gharbi, Brakna and Tagant regions (FAQ, 27/01/2015). Declining prices for sheep and cattle will affect poor pastoral households between April and May (FEWSNET, 03/2015).

Without additional, well-targeted emergency assistance, more than 600,000 households could face Crisis (Phase 3) acute food insecurity by June. (FEWSNET, 18/11/2014; 03/2015).

Food Security in the Sahel Region

20.4 million people in the Sahel (Burkina Faso, north Cameroon, Chad, the Gambia, Mali, Mauritania, Niger, north Nigeria, and Senegal) are expected to suffer from food insecurity in 2015 (OCHA, 10/02/2015). In 2014, food insecurity rose dramatically to 24.7 million food insecure people, compared to 2013, when 11.3 million people had inadequate food (OCHA, 03/02/2014).

Health and Nutrition

Nutrition

91,300 children are acutely malnourished as of February 2015, of which 24,100 children suffer from severe acute malnutrition (OCHA, 02/2015).

Results of an August survey indicate that the national GAM rate had decreased from 13.1% to 9.8%, although Guidimakha region is reported to have GAM of 16%, exceeding the emergency threshold. GAM is over 10% in Gorgol, Assaba, Tagant, Hod El Chargui and Hod El Garbi (UNICEF, 10/2014).

A nutrition survey carried out in Mbera camp in November 2014 showed a significant decrease in both global acute malnutrition (from 11.8% to 9.9%) and severe acute malnutrition (1.4% to 0.8%) (UNICEF, 12/2014).

Reviewed: 09/04/2015

NIGER FOOD INSECURITY, DISPLACEMENT

LATEST DEVELOPMENTS

March 30: Chad and Niger troops repelled a BH attack on Bosso town, close to the Nigerian border, killing 47 militants (international media).

KEY CONCERNS

- An estimated 3.5 million people are food insecure (OCHA, 02/2015).
- 1.3 million acutely malnourished children, 366,858 of whom are severely malnourished (OCHA, 01/2015).
- More than 150,000 Nigerian refugees have fled to Niger since May 2013 (OCHA, 22/01/2015).- 1,749 cases and 64 deaths have been recorded since January in a cholera epidemic, reportedly linked to the one in neighbouring Nigeria (UNICEF, 11/2014).

Security Context

Insecurity has been rising in Niger and across the region due to crises in Nigeria, Mali and Libya. Terrorist threats from Boko Haram, Al Qaeda in the Islamic Maghreb and the Movement for Oneness and Jihad in West Africa (MUJAO) are all of concern.

In February, Niger declared a state of emergency in response to Boko Haram attacks. It has been extended until 25 May (AFP, 24/02/2015; AFP, 26/02/2015). Niger’s Parliament has also authorised the deployment of 750 Niger soldiers in a regional offensive against BH (BBC, 10/02/2015).

Boko Haram Incidents

Thousands of troops from Niger and Chad have launched a major ground and air offensive against BH in southeastern Niger (AFP, 14/03/2015). On 30 March, Chad and Niger troops pushed BH attacking Bosso back to Nigeria, killing 47 BH fighters.
BH attacks on islands in Lake Chad have ended in clashes with troops; dozens have been killed (Reuters, 21/02/2015; AFP, 2/03/2015; 3/03/2015). On 18 February, 36 people were killed and 27 injured when an unidentified plane bombed a village near the Nigerian border (AFP, 18/02/2015).

Humanitarian Context and Needs

Access

Movement within Diffa, northern parts of Zinder, Tahoua, and Tillabery regions is possible only with military escorts (OCHA, 16/02/2015).

With thousands of people fleeing Diffa town, it has become more expensive to travel: the cost of the seat in any vehicle travelling to Zinder from Diffa has tripled (Reuters, 12/02/2015).

Displacement

Nigeria Crisis

150,000 people are estimated to have settled in Diffa region from Nigeria since the beginning of the crisis in May 2013, according to the Coordination and Management Team for Refugees and Returned Nigeriens (OCHA, 22/01/2015). 99,852 Nigerian refugees had been registered by the Government at 25 January, including 85,872 women and children, more than half of the refugee population (UNICEF, 03/03/2015).

There are reports of large-scale displacement from Diffa town since the BH attacks towards Zinder, Niger’s second-largest town, 480km west of Diffa. Displaced persons are also transiting through Zinder to travel onward to Maradi and Tillabery regions, and Niamey (OCHA, 02/2015). Since late 2014, a new wave of Nigerian refugees has also arrived in Zinder directly from Nigeria. More than 2,800 refugees were reported in the Zinder region in February: 1,128 in the department of Gouré, 1,083 in Magaria, and 373 in Dungass (OCHA, 02/2015).

The newly displaced are in a critical situation, and have shelter and NFI, food, water, and health and nutrition needs (OCHA, 24/09/2014). New arrivals have settled in 106 sites (UNICEF, 03/03/2015). Insecurity is limiting assistance to those who have settled on islands in Lake Chad (OCHA, 12/12/2014). Refugees who arrived earlier in the year are becoming host families for new arrivals, adding to the burden on families with very limited resources (IFRC, 03/10/2014). Sayam Forge camp was opened on 30 December, and as of 10 February, 704 Nigerian refugees had been relocated from Gagamari area (OCHA, 11/02/2015). The initial camp capacity is 5,000, though the camp can be extended (OCHA, 14/01/2015). Two more camps will be set up (UNICEF, 03/03/2015).

Diffa is vulnerable to both flooding and drought, and has long faced serious gaps in the provision of food staples, healthcare and potable water.

Mali Crisis

49,488 Malian refugees are in Niger (UNHCR, 31/03/2015). In March 2014, 80% of refugees were women and children. Most live in three camps in Tillabery region: Abala, Mangaize, and Tabarey barey. Two refugee hosting areas have been established in Intikane and Tazalit, Tahoua, for refugees from nomadic communities.

CAR Crisis: Returnees

Since December 2013, 1,160 Niger nationals have been repatriated from CAR by IOM in coordination with the Government of Niger.

Food Security

3.5 million people are estimated to be food insecure in 2015, compared to 5.3 million in 2014 (OCHA, 02/2015 and 30/09/2014).

363,620 people (51,000 households) in Diffa, an estimated 43% of both the IDP and host population, are in need of emergency food assistance (OCHA, 20/03/2015). Security constraints have forced food assistance programmes to be scaled back (FEWSNET, 01/04/2015).

Diffa region will face Crisis food insecurity (IPC Phase 3) beginning April, following high cereal prices and poor pastoral revenues (FEWSNET, 03/2015).

Livelihoods

In Diffa region, unstable security situation has led to a decrease in demand for workers and lowered wages. This has particularly affected livelihoods of households growing pepper, who are also unable to sell because of insecurity (FEWSNET, 01/04/2015).

Sahel Food Crisis: Regional Overview

20.4 million people in the Sahel (Burkina Faso, north Cameroon, Chad, the Gambia, Mali, Mauritania, Niger, north Nigeria, and Senegal) are expected to suffer from food insecurity in 2015 (OCHA, 10/01/2014). In 2014, food insecurity rose dramatically to 24.7 million food insecure people, compared to 2013, when 11.3 million people had inadequate food (OCHA, 03/02/2014).

Agriculture and Markets

Boko Haram-related market disruptions have limited trade flows towards Diffa and increased marketing costs (FEWSNET, 31/07/2014). Moreover, the new wave of internal displacement came when farmers should be preparing to plant crops. This has raised concerns about the long-term economic impact of the violence (Reuters, 12/02/2015). Agropastoral areas of northern Tillabery, Tahoua, and eastern Zinder will face food deficits as a result of early depletion of cereal and food stocks from May or June 2015 (FEWSNET, 01/02/2014). Poor pastoral resource availability in parts of the northern Sahel will begin to stress pastoral households from June to September 2015 (FEWSNET, 11/2014).

Health and Nutrition

(UNICEF, 03/03/2015). Insecurity is limiting assistance to those who have settled on islands in Lake Chad (OCHA, 12/12/2014). Refugees who arrived earlier in the year are becoming host families for new arrivals, adding to the burden on families with very limited resources (IFRC, 03/10/2014). Sayam Forge camp was opened on 30 December, and as of 10 February, 704 Nigerian refugees had been relocated from Gagamari area (OCHA, 11/02/2015). The initial camp capacity is 5,000, though the camp can be extended (OCHA, 14/01/2015). Two more camps will be set up (UNICEF, 03/03/2015).

Diffa is vulnerable to both flooding and drought, and has long faced serious gaps in the provision of food staples, healthcare and potable water.
MSF has temporarily withdrawn from Diffa region and relocated to other parts of the country, following increased violence by Boko Haram (MSF, 12/02/2015).

**Cholera**

51 cases of cholera have been registered throughout Niger as of end February 2015. 25 cases were registered in Tillabery region, and 26 in Diffa region (OCHA, 02/2015). On 13 December, The Ministry of Health declared a cholera outbreak in Diffa region: 291 cases and 18 deaths had been reported by the end of December, and the incidence dropped sharply (OCHA, 12/2014, 14/01/2014).

**Nutrition**

Around 1.3 million children are acutely malnourished in Niger: 366,858 of them are severely malnourished, and 12,710 of these are in Diffa (OCHA, 22/12/2014; OCHA, 01/2015). GAM among children under five is at 14.8% nationwide as per the SMART nutrition survey conducted between July and August, and exceeds the 15% emergency threshold in Maradi region (OCHA, 09/2014). In September, GAM was at critical levels in Agadez (14.0%), Tahoua (14.7%), Tillabery (13.4%), and Diffa (13.8%), according to OCHA.

**WASH**

Access to safe water remains limited in certain sites hosting IDPs. Hygiene and sanitation conditions are precarious in some areas (OCHA, 20/03/2015).

**Education**

In Diffa region, dozens of schools were closed due to or occupied by refugees in December (OCHA, 12/12/2014). Several schools reopened in March, but attendance levels are low (OCHA, 20/03/2015).

**Protection**

82% of 13,000 Nigerian refugees surveyed in Diffa did not have identity documents, according to an IOM assessment (IOM, 23/02/2015). Unaccompanied children have been reported arriving from Nigeria (OCHA, 28/11/2014).

**Updated: 08/04/2015**

**SENEGAL FOOD INSECURITY**

**LATEST DEVELOPMENTS**

No significant developments this week, 09/04/2015. Last update: 18/02/2015.

**KEY CONCERNS**

- Over 3.8 million people are food insecure, including 927,420 in Crisis (IPC Phase 3) due to erratic rains in 2014 (UN, 16/02/2015).
- 332,300 children suffering from acute malnutrition, 68,650 from severe acute malnutrition (OCHA, 30/11/2014).

**Political Context**

Separatists have long opposed authorities in the coastal Casamance area, but the country overall remains stable. Salif Sadio, leader of the separatist movement, declared a unilateral ceasefire in April 2014, as proof of engagement in an ongoing peace process.

**Humanitarian Context and Needs**

4.3 million people are in need of assistance in 2015 in Senegal (31% of the population), corresponding to a 266% increase on 2013. The needs are mostly due to climatic conditions, a rise in food prices, and reduced cross-border exchange (UN, 16/02/2015).

**Displacement**

As of February, there are 17,085 refugees in Matam, Saint Louis, and Tambacounda, mostly from Mauritania. 52% of refugees have declared they are seeking naturalisation in Senegal (UN, 18/02/2015).

**Food Security**

3.8 million people are expected to be food insecure in Senegal until at least March. This comprises 927,420 in Crisis (Phase 3), mainly in central and southern regions (FAO, 31/03/2015). Poor households, especially in Thiès, Louga, Matam, and northern Tambacounda, will likely be Stressed until April and Crisis from May due to the exhaustion of food stocks – which normally does not occur until June – and higher than average market dependence (FEWSNET, 27/02/2015; 29/01/2015). The poor are expected to be in Crisis (Phase 3) through October (FEWSNET, 03/2015). 1.9 million and 675,000 were in Stressed and Crisis conditions, respectively, in 2013 (UN, 16/02/2015).

**Agriculture and Markets**

Pasture deficits will affect animal production and reduce breeders’ purchasing power; there is also a high risk of increased livestock mortality from April (FEWSNET, 29/01/2015). A 38% reduction in 2014 cereal and groundnut production is reducing food availability and purchasing power (FAO, 31/03/2015).

**Sahel Food Crisis: Regional Overview**

20.4 million people in the Sahel (Burkina Faso, north Cameroon, Chad, the Gambia, Mali, Mauritania, Niger, north Nigeria, and Senegal) are expected to suffer from food insecurity in 2015. In 2014, food insecurity rose dramatically to 24.7 million food insecure people, from 11.3 million in 2013 (OCHA, 10/01/2014, 03/02/2014).
Health and Nutrition

332,300 children are acutely malnourished, including 68,650 suffering from SAM. 319,000 were acutely malnourished in 2013. Matam, Saint Louis (Podor department in particular), and Tambacounda regions are most affected (UN, 16/02/2015).

Reviewed: 09/04/2015

BURUNDI  FOOD INSECURITY, DISPLACEMENT

LATEST DEVELOPMENTS

4 April: Burundian refugees, citing renewed violence by pro-government militias in favour of President Nkurunziza, have been arriving in Rwanda in the past weeks (local media).

1 April: Rains and landslides in south Bujumbura have left 1,800 homeless. Roads, bridges and schools were seriously damaged as well (Burundi Red Cross).

31 March: As the lean season progresses, household food stocks and purchasing power have declined. Food security for the poor is expected to deteriorate to Stressed (IPC Phase 2) starting in April until the beginning of Season B in June (FEWSNET).

31 March: Most staple food prices are roughly 25% above the five-year average, particularly in Bujumbura, Ruyigi, Myinga, and Gitega markets (FEWSNET).

KEY CONCERNS

As of September, Burundi has 78,940 IDPs (UNHCR, 31/11/2014).

Political Context

Since the President’s re-election in 2010, scores of political killings, intimidation of the opposition, and a crackdown on media freedom have been reported. Most recently, observers stated concerns about restrictions on civil and political rights, following a series of violent acts by the ruling party’s increasingly militant youth wing, Imbonerakure.

2015 Elections

Deteriorating relations between the parties within the ruling coalition stem mainly from the desire of President Nkurunziza, first elected in 2005, to run for a third term in 2015. Under the Burundian constitution and the terms of the peace deal, no leader is supposed to hold power for more than ten years, but President Nkurunziza’s supporters argue that his first term does not count as he was selected by lawmakers in 2005, and not voted in (Reuters, 20/03/2015). In June 2014, the Government, the National Independent Electoral Commission, and all political parties and actors signed the General Principles for the conduct of the 2015 elections (UN, 10/06/2014). The UN Electoral Observation Mission in Burundi (MENUB) is mandated to follow and report on the presidential, parliamentary, and local elections scheduled between May and September 2015, though the Government has stated that MENUB’s mandate is limited, and does not cover validating the results (UN, 03/01/2015; AFP, 12/01/2015). In mid-January, opposition figures were jailed for bribery and links to armed groups (AFP, IRIN, 16/01/2015). International actors on the ground have prepared contingency plans, as the risk of violence during and after elections remains high (Burundi Red Cross, 04/03/2015).

Security Context

The Burundian army claimed it killed 100 armed fighters who had crossed from DRC in the first week of January. The fighters were reportedly trying to reach Kibira forest, an area used as a base by opposition groups in the past. Army reports have suggested that a major offensive has been planned to destabilise the country ahead of the elections (AFP, 05/01/2014; 06/01/2014). A Human Rights Watch report published in February asserted that during this attack, the Burundian National Defense Forces and police committed at least 47 extrajudicial executions, adding that armed members of the Imbonerakure also participated in the killings (Human Rights Watch, 12/02/2015).

Humanitarian Context and Needs

Disasters

Landslides

Torrential rains in late March caused landslides south of Bujumbura, which killed 20 people; ten more are missing. Crops have been severely damaged (local media, 30/03/2015; Caritas, 01/04/2015). Around 1,800 people have been left homeless and are staying with family, and roads, bridges and schools were seriously damaged as well (Burundi Red Cross, 01/04/2015).

Displacement

IDPs

As of January 2015, Burundi has 77,600 IDPs (IDMC, 31/01/2015). They are mostly ethnic Tutsis, located in and around 120 sites across northern and central Burundi, who were displaced by inter-ethnic and inter-communal violence. No new displacement has been recorded since 2008 (Internal Displacement Monitoring Centre).

There are concerns remain that tensions in neighbouring countries and the upcoming elections could bring about an increase in displacement (IDMC, 04/03/2015).

Refugees

As of September, Burundi is host to 49,800 refugees, mostly from DRC (UNHCR, 31/11/2014). Refugees are mainly located in the border regions of Ngozi (north, alongside
Returnees

43,000 Burundians have been forcibly repatriated from Tanzania. Most of them have not been registered due to a lack of reception facilities (IOM, 01/2014). The high number of IDPs and refugees returning is aggravating tensions over land ownership, as returnees claim land where other families, often of a different ethnic background, have since settled.

Burundian Refugees in Neighbouring Countries

Humanitarian actors on the ground are warning of a potential refugee crisis in the region as a result of displacement into Rwanda, Tanzania and DRC ahead of the presidential elections. Reports suggest that Burundian refugees have been arriving in Rwanda in the past weeks, although exact figures have not been confirmed. Refugees are citing renewed violence by pro-government militias in favour of President Nkurunziza (local media, 04/04/2015).

As of 1 September 2014, 14,367 Burundian refugees and asylum-seekers were residing in Uganda. Most Burundian refugees are located in Nakivale and Oruchinga (UNHCR, 23/09/2014).

As of 30 September 2014, 9,233 Burundian refugees were residing in DRC (UNHCR, 30/09/2014).

As of 1 March 2015, 6,619 Burundian refugees were residing in Kenya (UNHCR, 01/03/2015), most of them in Kakuma camp.

Food Security

As the lean season progresses, household food stocks and purchasing power have declined. Food security for the poor is expected to deteriorate to Stressed (IPC Phase 2) starting in April until the beginning of Season B in June. The rest of the households will remain in Minimal (IPC Phase 1) food security through June (FEWSNET, 31/03/2015).

Markets

Most staple food prices are roughly 25% above the five-year average, particularly in Bujumbura, Ruyigi, Muyinga, and Gitega markets (FEWSNET, 31/03/2015).

Protection

The Government is reportedly targeting and incarcerating journalists, activists, and members of political parties (Human Rights Watch, 22/01/2015).

Updated: 08/04/2015

NAMIBIA FOOD INSECURITY

LATEST DEVELOPMENTS

31 March: At least 28,000 people from Ruacana in Omaheke region are in need of food aid due to poor rains and as a result of poor crops (local media).

KEY CONCERNS

- Prolonged unseasonal dry spells since January have resulted in poor vegetation conditions and unfavourable production prospects for the 2015 harvest (FAO, 11/03/2015).

Humanitarian Context and Needs

Food Security

Large parts of the country, including the main producing regions of Oshikoto, Oshana and Omaheke, have received well below-average rains since January. At least 28,000 people from Ruacana in Omaheke region are in need of food aid as a result of poor crops (NOAA, 08/04/2015; local media, 31/03/2015).

At July 2014, 117,660 people were affected by a food security crisis and around 557,900 people in rural areas were at risk of food insecurity and requiring assistance. Kunene, and parts of Omaheke, Otjozondjupa, Omusati, and Erongo regions, were most affected (SADC, 08/2014).

Agriculture and Markets

The extended dry spells means prospects are unfavourable for the June 2015 harvest, notably for cereals and maize (FAO, 11/03/2015; WFP, 03/03/2015). Farmers are in need of livestock support (local media, 24/03/2015).

Crop harvests in September 2014 were already 20–50% lower than in the same period in 2013 due to localised dry spells, and agricultural employment opportunities had been reduced by 40–65% (OCHA, 22/09/2014).

Updated: 13/04/2015

UGANDA DISPLACEMENT

LATEST DEVELOPMENTS

31 March: The lean season in Karamoja has begun four months early. Coupled with decreased labour and incomes, most poor households will be in Crisis (IPC Phase 3) food insecurity starting in April (FEWSNET).

19 March: 4,949 cases of typhoid have been confirmed, more than double the 5 March figure of 1,940 cases (local media).
KEY CONCERNS
- 145,225 South Sudanese refugees have arrived in Uganda since December 2013 (UNHCR, 18/03/2015).
- GAM rates of 19.6% and SAM levels of 4.1% have been reported among South Sudanese refugees in Arua, Adjumani and Kiryandongo districts (UNICEF, 23/01/2015).
- In Karamoja, GAM rates of 13.4% are the highest recorded in the last five years, while SAM remains above 3% (UNICEF, 23/01/2015).
- Rapid expansion of refugee camps has strained health services (UNFPA, 16/02/2015).

Humanitarian Context and Needs

Displacement

IDPs

As of 11 February, Uganda has 30,140 IDPs (OCHA, 11/02/2015).

Refugees in Uganda

As of 11 February, there were 422,440 refugees and asylum seekers in Uganda, from DRC (44%), South Sudan (38%), Somalia (7%), Rwanda (4%), Burundi (3%), and others (4%) (OCHA, 11/02/2015). Refugees are hosted in settlements in Adjumani, Kiryandongo, Kampala and Arua districts (UNHCR, 24/11/2014).

As of 18 March, 145,225 South Sudanese refugees had fled to Uganda since December 2013 (UNHCR, 18/03/2015). Women and children account for 87% of arriving refugees; half are children under 12 years (FAO, 11/11/2014).

As camps are overwhelmed, preparation of new land in Maaji, Moyo district, is ongoing. As of 4 February, 261 people had been relocated (UNHCR, 04/02/2015).

Ugandan Refugees in Neighbouring Countries

At 1 March, there were 145,225 Ugandan refugees in Kenya (UNHCR, 01/03/2015). At 30 June 2014, there were 1,211 Uganda refugees in DRC (UNHCR, 30/05/2014).

Food Security

In Karamoja, about 700,000 people remain at Stressed (IPC Phase 2) level of food insecurity (FEWSNET, 31/12/2014). In bimodal areas, mostly in central and western Uganda, pasture is likely to regrow and livestock will recover their body conditions by mid-April despite a delayed start to the rainy season. Minimal (IPC Phase 1) food insecurity is expected to last through June. In Karamoja, below-average rainfall has decreased labour demand and lowered incomes, affecting access to food: lean season started four months early, leading to Crisis (IPC Phase 3) food insecurity in most poor households in April (FEWSNET, 31/03/2015).

Harsh climatic conditions and poor yields have deteriorated the food security situation in Arua camp. (UNHCR, 20/01/2015). A general food shortage has been reported in Arua district, which has led to increased cost of food items (UNHCR, 18/03/2015).

Health and Nutrition

Nutrition

GAM rates of 19.6% and SAM levels of 4.1% have been reported among South Sudanese refugees in Arua, Adjumani and Kiryandongo districts (UNICEF, 23/01/2015). Rapid expansion of the camps has strained health services (UNFPA, 16/02/2015).

In Karamoja, GAM rates of 13.4% are the highest recorded in the last five years, while SAM prevalence remains above 3% (UNICEF, 23/01/2015).

Health centres in Arua require additional staff, space, and supplies to respond to refugee needs (UNHCR, 20/01/2015). The number of community-based hygiene promoters remains limited, with a ratio of 1:873. There is also the need to scale up health education related to HIV counselling and testing among refugees (UNHCR, 18/03/2015).

Typhoid

As of 19 March, 4,949 cases of typhoid have been confirmed, more than double the 5 March figure of 1,940 cases. Most cases are located in Kampala (local media, 28/03/2015). As of 19 February, nine cases of typhoid fever and two deaths had been confirmed in Kampala city and the neighbouring districts of Wakiso and Mukono (Government, 19/02/2015; WHO, 05/03/2015).

WASH

Boreholes have dried up, so water trucking has been necessary in Adjumani. In Arua, the water supply is 13.8L per person per day, and in Kiryandongo, 16L per person per day, both below the UNHCR standard of 20L (UNHCR, 18/03/2015).

The current ratio of hygiene promoter per population is 1:775 (UNHCR, 20/01/2015).

Protection

Human Rights Watch issued a report in November asserting that the government response to deadly ethnic violence in the Rwenzori region in western Uganda in July 2014 was inadequate. Bakonzo community members attacked police and army posts in several districts, sparking reprisals by other ethnic groups and security forces (HRW, 05/11/2014).

Updated: 08/04/2015
ERITREA  FOOD INSECURITY

LATEST DEVELOPMENTS

No new significant developments this week, 08/04/2015. Last update: 11/02/2015.

No accurate or verified data relating to the food security situation or general humanitarian needs in Eritrea is available, therefore Eritrea is not included in the Global Overview prioritisation.

KEY CONCERNS

- 1.2 million people, including 696,000 children under 18, are in need of humanitarian assistance (UNICEF, 15/01/2015).
- Over 60% of the Eritrean population was reported as undernourished between 2011 and 2013 (WFP).
- Torture, arbitrary detention, and severe restrictions on freedom of expression, association, and religion are common in Eritrea (UN, HRW).
- Ongoing human rights abuses prompt thousands of Eritreans to flee the country every year. In January 2015, Ethiopia was hosting an estimated 125,000 Eritrean refugees (OCHA, 26/01/2015).
- Operations and maintenance of established humanitarian systems remain a significant challenge (UNICEF, 15/01/2015).

Political Context

President Isaias Afwerki, who has ruled for over 20 years, uses the pretext of previous border conflicts with Ethiopia to justify tight control over the population (New York Times, 03/10/2014). Attempts to bring the various opposition parties under one political umbrella have been mostly unsuccessful and no consensus has been reached regarding a roadmap for democratic transition (19/01/2015, Norwegian Peacebuilding Resource Centre).

Humanitarian Context and Needs

1.2 million people need humanitarian assistance as of 15 January 2015, including 696,000 children under 18 (UNICEF, 15/01/2015).

Access

There is a lack of updated and reliable data on the humanitarian situation due to limited humanitarian access. Providing direct humanitarian assistance remains a challenge due to limited access, and absence of assessments and humanitarian space (ECHO, 10/2013).

In November–December 2013, several projects in partnership with the UN and the Government began; the Government had previously ordered the end of all operations by non-state development partners by the end of 2012 (IFRC, 30/05/2014).

Displacement

Refugees

As of 11 February, 2,900 refugees reside in Eritrea (OCHA, 11/02/2015).

Eritrean Refugees in Neighbouring Countries

According to 2012 UNHCR figures, there are 300,000 Eritrean refugees in neighbouring countries as well as in Europe and Israel. According to UN figures, some 4,000 Eritreans, among them hundreds of unaccompanied minors, are fleeing the country every month to escape government repression and lack of basic freedoms (UN, 05/06/2014). The high proportion of unaccompanied minors who cross from Eritrea to Ethiopia is a priority concern (UNHCR).

Ethiopia: As of 31 January, there are 136,363 Eritrean refugees in Ethiopia (OCHA, 31/01/2015), mainly settled in four camps in the northern Tigray and Afar regions (OCHA, 26/01/2015). Arrival rates spiked towards the end of 2014, with a total of 33,000 arriving by the end of the year (OCHA, 24/11/2014; UNHCR, 09/02/2015). The recent influx has resulted in shortages of shelter in the camps (OCHA, 26/01/2015).

About 90% of those who arrived in October were between 18 and 24 years old, and cited intensified mandatory recruitment into military service as their reason for flight (local media, 15/11/2014).

Sudan: Sudan reportedly hosts at least 114,500 Eritrean refugees. Eastern Sudan received an average of 500 Eritrean refugees per month in 2013, down from 2,000 a month in 2012.

Djibouti: As of 1 January, there are 1,240 Eritrean refugees in Djibouti (UNHCR, 30/01/2015).

Yemen: Reports indicate hundreds of Eritrean refugees are scattered across the streets of Al Safeyah in Sana’a, without proper shelter or livelihood. Refugees have informed UNHCR that most are imprisoned upon arrival in Yemen, on the grounds of security concerns (Yemen Times, 19/08/2014). Several NGOs have called on the Yemeni authorities to stop deporting Eritrean political refugees (UNHCR).

Kenya: As of 1 March, there are 1,546 Eritrean refugees in Kenya; most are located in Nairobi (UNHCR, 01/03/2015).

Chad: On 6 February, the Chadian Government announced plans to deport a dozen Eritrean refugees from Chad. Humanitarian organisations have protested the move, as the returnees will most probably face indefinite detention in Eritrea (local media, 06/02/2015).
Food Security

A positive rainy season in 2014, between June and September, may significantly improve the food security situation in highland areas, but not in the coastal lowland regions (UNICEF, 15/01/2015).

It is estimated that Eritrea produces only 60% of the food it needs, and markets do not seem to be functioning properly. These two factors suggest that a significant part of the population may be in need of food assistance. In addition, local food and fuel prices are likely to be high, putting severe pressure on household coping mechanisms. The Government officially denies any food shortages within its borders and refuses food aid (ECHO).

Health and Nutrition

According to FAO in 2013, over 60% of the Eritrean population was reported to be undernourished during 2011–2013.

Protection

Indefinite national service, and arbitrary arrest and detention, including incommunicado detention and inhuman prison conditions, are the focus of a March 2015 UN human rights report (UN Human Rights Council). Between 5,000 and 10,000 political prisoners are being held in a country of just over six million people. The UN human rights chief has accused the government of torture and summary executions (UN Human Rights Council, 05/02/2014).

Harassment of citizens by authorities, on the grounds of their plotting to leave Eritrea, is reportedly widespread (UN Human Rights Council, 31/03/2014). In September 2014, the UN Human Rights Council set up a Commission of Inquiry to investigate human rights abuses in Eritrea, but by January 2015 it still had not been granted direct access to the country (Human Rights Watch, 24/09/2014; UNHRC, 16/01/2015).

Mines and ERW

With only 25% of minefields cleared, UNICEF reported in January 2015 that the impact of landmines and explosive remnants of war (ERW) in 2014 continued to have a serious impact on the population, including causing child death, injuries and disabilities in war-affected communities. Humanitarian mine action programmes in the country have weakened due to limited access (UNICEF, 15/01/2015). There are 995 dangerous areas, 914 mined areas and 702 minefields in Eritrea (UN Mission in Ethiopia and Eritrea).

Reviewed: 08/04/2015
Natural disasters and armed conflicts in Afghanistan have caused humanitarian crisis. Assistance needs include food, healthcare, and protection.

The Afghan Government faces both internal and external challenges to its capacity and legitimacy, and political instability. The security environment is highly volatile and expected to deteriorate as international troops gradually withdraw from the country.

Political Context

Afghan President Ashraf Ghani introduced a list of 16 new cabinet appointments on 1 April, replacing the candidates rejected by Parliament end January (local media, 01/04/2015; AFP, 04/02/2015). Ashraf Ghani and Abdullah Abdullah were sworn in as Afghanistan’s new President and Prime Minister, respectively, on 29 September 2014 (Reuters, 29/09/2014). The pair were rival presidential candidates in disputed elections (AFP, 26/09/2014).

Peace Talks with the Taliban

Although preliminary contacts between Kabul and the Taliban have been renewed since December 2014, no substantial talks have been launched. Peace talks with the Afghan Taliban have been stalled since mid-2013. On 10 January, Afghanistan joined Pakistan in military operations against militants in both countries (British & Irish Agencies Afghanistan Group, 31/01/2015).

Conflict Developments and Incidents

Peace Talks with the Taliban

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Security Context

Clashes between state and anti-government forces, inter-tribal disputes and harassment and intimidation by anti-government forces, remained major causes of insecurity and displacement in February, mostly in Helmand, Kunduz, Kapisa, Logar, and Maidan Wardak. Military operations intensified in the north of Helmand during the second half of February, and turned to the West/South-West early March (UNHCHR, 28/02/2015).

There were 1,810 civilian casualties between 1 January and 31 March (655 killed, 1,155 injured). Civilian casualties from ground engagements rose by 8%, casualties from mortars and rockets by 47%, and women and children casualties continue to increase. The sustained use of indiscriminate weapons and IEDs is of concern (UNAMA, 12/04/2015). 3,699 civilians were killed and 6,849 injured in 2014, a 22% increase in casualties on 2013 (UNAMA, 18/02/2015).

Taliban

The Taliban claimed victory against NATO as it ended its combat mission at the end of 2014, and said they would continue their fight against remaining foreign forces in the country (Al Arabiya, 29/12/2014). Remote parts of southern and southeastern Afghanistan, near the border with Pakistan, remain under Taliban control. Taliban numbers have increased by 15% since the beginning of 2013, as the group has intensified attacks. They are increasingly financed by criminal enterprises, including heroin laboratories, illegal ruby and emerald mines, and kidnapping (UNSC, 02/02/2015).

International Military Presence

NATO formally ended its combat mission in Afghanistan on 31 December 2014, moving to the Resolute Support mission made up of 9,800 US troops and 3,000 soldiers from other member states. The mission will focus on supporting Afghan forces’ fight against the Taliban, along with US counter-terrorism operations (Reuters, 01/01/2015). The number of US troops remaining in Afghanistan until end December is significantly higher than the 5,500 initially planned, and has been denounced by the Taliban (Le Monde, 24/03/2015).

Peace Talks with the Taliban

Although preliminary contacts between Kabul and the Taliban have been renewed since December 2014, no substantial talks have been launched. Peace talks with the Afghan Taliban have been stalled since mid-2013. On 10 January, Afghanistan joined Pakistan in military operations against militants in both countries (British & Irish Agencies Afghanistan Group, 31/01/2015).

Conflict Developments and Incidents

Baloch: Gun and grenade exchanges during a Taliban siege of a court killed at least ten people and wounded dozens on 9 April (AFP, 09/04/2015).

Ghazni: A roadside bomb killed 12 in Khogyani district on 10 April (AFP, 10/04/2015). A landmine explosion killed seven on 30 March in the province (AFP, 31/03/2015).

Helmand: Two Taliban attacks in Lashkargah in March, targeting provincial officials and a police station, killed 11 people and wounded 61 (AFP, 18/03/2015; AFP, 11/03/2015). A Taliban suicide attack targeting an army police base in Sangin district on 3 March killed nine people, including five civilians, and wounded eight (AFP, 03/03/2015).

Kabul: A suicide attack targeting a NATO convoy in Kabul wounded three on 10 April (AFP, 10/04/2015). An explosion targeting Afghan police vehicles in Kabul killed six people on 4 April (AFP, 06/04/2015). Two suicide attacks in Kabul on 25 and 29 March, including one targeting a prominent Afghan MP, killed ten and injured dozens (AFP, 25/03/2015). Gunmen killed six and wounded five at a Sufi mosque on 7 March, raising fears among Muslim minorities over increasing sectarian unrest (AFP, 17/03/2015; 07/03/2015). A Taliban attack on a NATO vehicle killed two people on 26 February (AFP, 26/02/2015).

Other incidents: Incidents increased in early April. A suicide attack targeting a NATO convoy in Nangarhar province killed three and wounded another four (AFP, 10/04/2015). An explosion targeting Afghan police vehicles in Baghlan killed three people on 6 April (AFP, 06/04/2015). Two suicide attacks in Kabul on 25 and 29 March, including one targeting a prominent Afghan MP, killed ten and injured dozens (AFP, 25/03/2015). Gunmen killed six and wounded five at a Sufi mosque on 7 March, raising fears among Muslim minorities over increasing sectarian unrest (AFP, 17/03/2015; 07/03/2015). A Taliban attack on a NATO vehicle killed two people on 26 February (AFP, 26/02/2015).

Humanitarian Context and Needs

Planning figures are for 6.9 million Afghans in need of humanitarian aid in 2015, including 2.8 million children, compared to 7.4 million in 2014 (UNICEF, 21/01/2015). Badghis, Helmand, Kunar, Nangarhar, and Wardak most need assistance (OCHA, 25/11/2014).
Access

Access in January was most constrained in parts of Helmand, Kandahar, Ghor, Paktika, Khost, Nangarhar, and Nuristan (WFP, 19/01/2015). Lack of access to IDPs remains a significant challenge, particularly in Helmand, where only two districts are accessible to humanitarian actors (UNHCR, 31/01/2015).

International military withdrawal raises concerns over reduced funding affecting the sustainability of services available to the population (Handicap International, 04/12/2014).

Security Incidents Involving Aid Workers

Five members of an NGO’s national staff, abducted in Uruzgan province on 3 March, were found dead on 10 April (UN, 11/04/2015).

16 incidents against national and international organisations were reported across Afghanistan in February, leading to eight staff abducted, two killed, and two wounded. There were 293 incidents against aid workers in 2014, including 57 killed (UN, 11/04/2015; OCHA, 31/12/2014). The Mine Action Programme in Afghanistan was directly affected by 37 incidents resulting in 34 deaths among its personnel and 27 injuries in 2014 (UN, 15/01/2015).

Disasters

Nearly 64,440 people (8,827 families) in 137 districts of 24 provinces were affected by floods, heavy snowfall, and avalanches occurring 1 February–1 April, including 1,910 families in Nangarhar and 1,500 in Parwan. 291 people have died and 96 were injured. Some 8,575 houses have been damaged or destroyed, and communication lines interrupted in some remote areas. Accessibility and security challenges due to road closures and areas controlled by non-state armed groups are hampering needs assessment and aid provision in some provinces. Priority needs are for food, NFIs, and emergency shelter (OCHA, 05/04/2015; IOM/USAID, 15/03/2015; IFRC, 18/03/2015).

Displacement

There are 829,300 IDPs in Afghanistan and 241,640 refugees from Pakistan in Khost and Paktika provinces; returns from Pakistan are increasing since December 2014, while around 2.5 million Afghans have taken refuge in neighbouring countries.

IDPs

At end February, there were 829,300 profiled IDPs in Afghanistan, including 46% displaced in January, and 156,200 displaced by conflict in 2014. Nearly 213,200 IDPs are in the south, 206,430 in the west, 140,000 in the east and 133,100 in central Afghanistan. Military operations in Helmand have triggered displacement since February, but numbers are difficult to obtain as access to the area is limited. Priority needs are food and NFIs; health needs also emerged in the south (UNHCR, 28/02/2015, 31/12/2014).

Refugees

Displacement from Pakistan to Afghanistan’s Khost and Paktika provinces has been ongoing since mid-June 2014. At 6 April, these provinces were hosting around 241,640 refugees (34,918 families) from Pakistan, 70% of whom are in Khost (UNHCR, 06/04/2015). Urgent needs remain for shelter, nutrition, and WASH (UNHCR, 08/04/2015; 01/04/2015).

More than 80% of refugees live in host communities, which are often remote and difficult to access, and stretched beyond capacity (UNHCR, 11/02/2015; 03/12/2014). Gulan camp in Khost hosts 9,180 families; outward movements from the camp back to communities are expected in the coming weeks. An unknown number of spontaneous returns of refugees to Pakistan have also been reported (UNHCR, 08/04/2015; 06/04/2015).

An additional 600,000 Baloch refugees who have fled insurgency activities in Pakistan since 1986 are living in precarious conditions, notably in Nimroz (AAN, 31/12/2014).

Returnees

Returns of undocumented Afghans from Pakistan have increased following security incidents in the country, particularly the December Taliban attack in Peshawar. As of 23 March, 55,000 undocumented Afghans had returned home in 2015 via the Torkham border crossing, twice as many as in all 2014, including 19,000 who have reportedly been deported (local media, 30/03/2015). 30–40% of undocumented returnees are vulnerable and in need of assistance (OCHA, 28/02/2015; IOM, 13/02/2015).

Afghan Refugees in Neighbouring Countries

As of 30 September 2014, there were 2.5 million Afghan refugees in neighbouring countries (USAID, 01/10/2014).

Food Security

At least 3.7 million Afghans are food insecure in 187 districts (IPC, 01/11/2014). IDPs inaccessible to humanitarian agencies, particularly in insecure districts in Helmand, are in Crisis (IPC Phase 3), having lost much of their access to income (FEWSNET, 30/11/2014, 01/11/2014). IDPs and households affected by heavy rains and snowfall in 2015, including in Badakhshan, Bamyan, Daykundi, Nuristan, and Ghor provinces, are expected to remain Stressed (IPC Phase 2) through June (FEWSNET, 31/03/2015). At least 20% of households in Badghis province will move to Crisis from April to May, due to a below-average 2014 harvest and lack of dietary diversity during the lean season (FEWSNET, 11/02/2015).

Agriculture and Markets

Floods and avalanches since 23 February have destroyed farmland and orchards across the country (Government, 28/02/2015).

2014 wheat production was 64% lower than 2013, and January 2015 wheat grain and flour prices have increased 12% on average compared to 2014, leading to excess sales of livestock; Badghis province is most affected (FEWSNET, 11/02/2015). Conflict in Helmand in 2014 hampered farmers’ ability to harvest their crops (FEWSNET, 01/11/2014).
Livelihoods

Political uncertainty over 2014 led to decreased investment in many sectors including construction and trade, which are key employers of casual labour. Faryab province saw the largest decline in casual labour wages: rates were 43% lower in September than in 2013 and the five-year average. They were 23% and 14% lower than 2013 in Badakhshan and Balkh provinces, respectively (FEWSNET, 01/11/2014).

Decreased prices for some cash crops compared to last year is limiting income (FEWSNET, 01/12/2014). Opium poppy cultivation in Afghanistan has risen by 7% in a year, from 209,000 hectares in 2013 to 224,000 hectares in 2014 (UN, 12/11/2014).

Health and Nutrition

A spike in pneumonia cases and deaths has been reported among children under five, notably in Takhar province, following severe weather conditions (OCHA, 05/03/2015). Increasing reports of malaria and measles cases, especially in Paktika, Khost, Balkh and Zabul provinces, are a cause for concern (Government, 07/03/2015).

There is a shortage of trained surgeons, anaesthetists, and trauma capacity in conflict-affected areas (OCHA, 25/11/2014). Nearly 80% of maternal and reproductive health needs are unmet (WHO, 10/12/2014). Tuberculosis is also a high burden for Afghanistan, but many new cases were missed out in 2014 due to lack of close monitoring (Government, 24/03/2015).

Polio

One case of polio has been reported so far in 2015, from Helmand province. 28 cases were reported in 2014, mostly in conflict-affected areas, compared to 14 in 2013 (Global Polio Eradication Initiative, 25/02/2015; 14/01/2015).

Nutrition

517,596 children suffer from SAM (UNICEF, 21/01/2015). In Uruzgan, Nuristan, Khost, Paktia, Wardak, Kunar, and Laghman provinces, GAM rates were breaching the emergency threshold of 15% in mid-2014 (National Nutrition Survey, OCHA 31/07/2014).

An estimated 45% of all child deaths in refugee and IDP camps are linked to malnutrition (UNICEF, 21/01/2015). The presence of common animal diseases in areas of Khost and Paktika have reduced the availability of meat and milk products to Pakistani refugees and host communities (FEWSNET, 11/02/2015). Fewer than 20% of children with SAM and MAM received the treatment they needed in 2014 (OCHA, 25/11/2014).

WASH

1.9 million Afghans are in need of better access to safe WASH facilities (UNICEF, 21/01/2015). Refugee influxes have stretched already limited water and hygiene resources and infrastructure in Khost and Paktika; lack of solid waste management and latrines are major challenges (UNHCR, 08/04/2015).
For information relating to the Syria crisis, see SNAP’s latest reports.

**LATEST DEVELOPMENTS**

**12 April:** IS launched three suicide attacks against Baiji oil refinery in Salah al Din, the fiercest attack since government forces recaptured the area in November (Al Arabiya).

**10 April:** Two explosions in Baghdad killed eight and wounded 27 (AFP).

**8–10 April:** Government forces and associated militias launched operations to retake Anbar. Clashes around Ramadi and Hit district were reported. IS prevented residents from leaving or entering Hit (ISW).

**16 March:** Fuel shortages were reported in one hospital in Anbar. Contact with health facilities in western areas of Anbar has been lost (WHO).

**KEY CONCERNS**

- Almost 1,000 deaths were recorded by UNAMI in March, including around 730 civilians. Approximately 12,000 people were killed in 2014, corresponding to the worst levels of violence since 2006–2007 (UNAMI 01/04/2015, 01/01/2015).

- An estimated 5.2 million people are in need of humanitarian assistance, including 2.68 million IDPs and 2.2 million beyond the reach of aid agencies (ECHO, 12/12/2014; IOM, 31/03/2015).

- Access is highly constrained in Anbar, Kirkuk and Ninewa (2015).

- 247,680 registered Syrian refugees are in Iraq; 64% are women and children (UNHCR, 31/03/2015; UNFPA, 31/03/2015).

- Protection is a key concern, particularly in areas directly affected by conflict and under IS control.

**OVERVIEW**

The IS insurgency has compounded an already fragile political and humanitarian situation, leading to a level 3 humanitarian crisis and international military intervention. Iraq now hosts one of the largest internally displaced populations in the world. Priority needs are food, water, shelter, fuel and access to healthcare. Access constraints and human rights violations, particularly in IS-controlled areas, are of major concern. There are large information gaps on the situation of affected populations outside of the Kurdistan region of Iraq.

**Political Context**

**National Political Context**

The perceived marginalisation of Sunni groups by former President Maliki’s Government is considered one of the main drivers of the current conflict. A unity government, led by President Abadi, was formed in September 2014. While trying to balance sectarian tensions inside the country, Abadi has been seeking to garner international support for the fight against the Islamic State, including from neighbouring Sunni Arab states, where high level officials have been regularly sent in an effort to sooth long-standing animosity (Foreign Affairs, 16/01/2015).

**Kurdistan Region of Iraq (KR-I)**

Masoud Barzani’s Kurdistan Democratic Party (KDP) and the Patriotic Union of Kurdistan (PUK) have ruled the autonomous KR-I through a coalition government since 2005. Barzani’s term has been extended to 2015, a move denounced as illegal by the opposition. In mid-November 2014, Baghdad and Erbil reached a budget agreement around oil revenues, which was incorporated into Iraq's 2015 national budget law late January; both sides have signaled reluctance to uphold commitments (Al Jazeera, 19/02/2015; UN, 02/12/2014).

**Security Context**

Around 1,000 people were killed in acts of violence in March, including 730 civilians, with Baghdad most affected (UNAMI, 01/04/2015). At least 12,000 people were killed and more than 23,000 injured in Iraq in 2014, in the worst violence since 2006–2007. It is difficult to verify reported casualties in conflict areas (UNAMI, 01/03/2015, 01/01/2015).

**Stakeholders**

**Islamic State (IS)**

In June, IS declared the establishment of a Sunni caliphate, covering the area between Aleppo in northern Syria and Diyala in eastern Iraq. Abu Bakr al Baghdadi was declared caliph and leader for Muslims worldwide. IS has taken over large areas of northern and eastern Syria, and parts of northern and central Iraq. In September, IS had around 20,000–31,500 fighters in Iraq and Syria (BBC, 15/09/2014). The group has suffered significant losses, while attracting an increasing number of foreign fighters. It has been selling crude oil and gasoline to finance its operations. It has destroyed several heritage sites (Le Monde, 07/03/2015).

**Government Forces**

Iraqi Security Forces (ISF) are made up of around 48,000 troops, involved in offensives around Baghdad, and in central governorates (Foreign Policy, 28/03/2015). The Iraqi Prime Minister declared in January that falling global oil prices could lead to possible budget deficits, which will hamper the capacity to undertake military operations (Reuters, 22/01/2015).

**Shi’a militias**

Three militias have been supporting government forces on all major fronts against IS since the beginning of the insurgency, as part of the Popular Mobilisation Forces: Asa’ib, Kita’ib...
Hezbollah, and the Badr Brigades. Escalating abuses of civilians in Sunni areas by militias have been reported since the fall of Mosul last June (UN, 19/03/2015; Reuters, 30/04/2014; HRW, 15/02/2015). The Popular Mobilisation Forces are made up of around 100,000 fighters, including 30,000 reportedly backed by the Iranian Government (Al Jazeera, 23/01/2015).

KR-I Forces

The Kurdish Peshmerga, supported by Kurdish fighters from Syria and Turkey, are engaged in a counteroffensive against IS. Kurdish fighters receive training and equipment from multiple countries, including the United States (AFP).

International Involvement

In August, US forces started airstrikes on IS locations. On 15 September, 30 additional countries pledged to help Iraq fight IS. Iran has dispatched members of its elite Revolutionary Guards Corps and reportedly carried out airstrikes against IS (The Economist, 03/01/2015; The Guardian, 05/01/2015, 04/12/2014). Gunfire exchanges were reported in January, engaging Canadian forces who came under attack while training Iraqi troops (Al Jazeera, 20/01/2015).

Conflict Developments

Since December 2014, IS has carried out simultaneous attacks on multiple fronts, in areas north of Baghdad, Anbar, Salah al Din, and Kirkuk governorates (ISW, 12/12/2014, 31/01/2015).

IS made important gains in Anbar in the last quarter of 2014, taking control of around 80% of the governorate, and continues to push into the provincial capital Ramadi (REACH, 27/01/2015). However, ISF and Kurdish forces have regained territory. IS recaptured all populated areas of Diyala governorate from IS in January, and Al Baghdadi in Anbar early March (AFP, 26/01/2015; 08/03/2015). Peshmerga forces are fighting IS in Kirkuk.

Recent Incidents

Anbar: ISF and associated militias launched operations to retake Anbar on 8 April 8, targeting areas east of Ramadi. Clashes were also ongoing in Hit district as of 9 April, with IS preventing residents from leaving or entering the district (ISW, 10/04/2015; 08/04/2015). Clashes between IS and Iraqi forces have been ongoing in the southern part of Anbar since early January, especially around Garma and Fallujah (ISW, 13/03/2015; 21/01/2015).

Baghdad has seen nearly daily bombings and shootings since November. However, the 2003 night curfew was lifted on 7 February as a result of relative security improvements in the city (AFP, 07/02/2015). Two explosions in Baghdad on 10 April killed eight and wounded 27 (AFP, 10/04/2015). An explosion killed six and wounded 18 on 2 April (AFP, 02/04/2015). At least 19 people were killed and 44 wounded in a series of explosions and bombings in the governorate in March (AFP, 23/03/2015; Al Jazeera, 08/03/2015).

Dahuk: Community tensions are rising. Yezidis in eight IDP camps organised protests calling for international recognition of a genocide targeting their communities, and strengthened efforts to liberate those held in IS captivity, in early April. Some turned violent (OCHA, 03/04/2015).

Kirkuk: Peshmerga forces initiated a wide operation to dislodge IS from areas of southwestern Kirkuk in February; by 18 March, Peshmerga and Popular Mobilisation forces had retaken Bashir and surrounding villages (ISW, 18/03/2015). Both forces, with the support of ISF, are planning for an operation in Al Hawija in the coming months. This cooperation is significant, as tensions are visible between Kurdish and Shi'ite rivals over control of Kirkuk city, raising fears of IS advances if violence erupts (ISW, 13/03/2015; Ekurd Daily, 17/02/2015; The Daily Beast, 17/02/2015).

Ninewa: IS continues to carry out security operations south of Mosul, to control tribal resistance and safeguard one of their most important areas of control. Peshmerga forces have reportedly taken control of a key road used by IS to supply Mosul.

Salah al Din: Iraqi forces and affiliated armed groups launched an offensive on IS strongholds along the Tigris River on 2 March, later supported by coalition airstrikes; as of 31 March, they had reportedly recaptured Albu Ajil, Tal Ksaiiba, Al Alam, Al Dour, and Tikrit (local media, 31/03/2015; WSJ, 13/02/2015; Al Jazeera, 08/03/2015). There are concerns over forces’ capacity to deal with hundreds of booby traps. Tensions are rising between government forces and militias (Reuters, 04/04/2015). On 12 April, IS launched three suicide attacks on Baiji oil refinery, the fiercest since ISF recaptured the area in November (Al Arabya, 12/04/2015).

Other incidents: A bombing near Umm Qasr port in Basra governorate on 18 March killed at least three people and wounded another four (AFP, 18/03/2015).

Humanitarian Context and Needs

As of end February, 5.2 million people are in need of humanitarian assistance, including 2.6 million children (UNICEF, 28/02/2015).

Access

Around 2.2 million people in need of emergency assistance are beyond the reach of aid agencies, and access to the estimated 3.6 million people in areas under control of IS and affiliated armed groups is limited (ECHO, 12/12/2014). Several INGOs have suspended activities in IS-controlled areas, or provide emergency assistance through local partners. High insecurity and unexploded ordnance (UXO) also hinders access, as do long delays in obtaining clearance from Iraqi authorities (OCHA, 05/12/2014).

Border crossings: Due to the temporary closure of the Ibrahim Khalil border crossing since 2 March, most refugees have been entering via the Peshkabour crossing (UNHCR, 15/03/2015). The IS-controlled Al Qa'im and Al Waleed crossings are technically open, but security prevents most civilian movement. Insecurity at Rabia crossing prevents cross-border movement (Reuters, 23/11/2014, UNHCR, 28/02/2015; 15/01/2015).

IDP movement restrictions: Over 30% of IDPs are forced to stay within the governorate, due to movement restrictions imposed by neighbouring governorates; restrictions have
been reported at checkpoints in Baghdad, Salah al Din and Anbar ((IOM, 15/01/2014, Protection Cluster, 15/01/2015; OCHA, 27/03/2015). Access to and in KR-I remains challenging for certain IDPs, particularly those of Arab ethnicity (UNHCR/Protection Cluster, 28/02/2015; OCHA, 23/01/2015).

Anbar remains largely inaccessible. Thousands of people are trapped in siege-like conditions in Ramadi (UNHCR, 31/01/2015). One-fifth of Falluja’s population was left in the city in January, and prevented from leaving, with roads and bridges blocked due to insecurity and UXOs (ISW, 18/03/2015; REACH, 27/01/2015). The three main roads linking Haditha to other cities in Anbar are closed, leaving the population in urgent need of food and fuel for cooking (OCHA, 23/03/2015; 02/03/2015). Checkpoints from Baghdad to the Anbar border can severely delay deliveries (NRC, 30/03/2015).

Kirkuk: Inaccessibility is hampering the delivery of essential medical supplies, equipment and vaccines, especially access to Al Hawija and Debes districts, where a significant displaced population is reported. Health workers have fled Al Hawija (WHO, 12/03/2015; IOM, 24/02/2015).

Nineva: Access to Mosul is impossible for humanitarian actors and communications with areas outside the city are allegedly cut off. Civilians are prevented from leaving the city. Conditions have dramatically deteriorated since IS took control (OCHA, 02/03/2015; WFP, 02/02/2015).

**Displacement**

As of mid-March, there are 2.63 million IDPs, 246,836 Syrian refugees, and 1.5 million in need of assistance in host communities.

**IDPs**

At 26 March, more than 2.68 million IDPs were identified across 3,038 sites, 39% are in KR-I, including 445,104 in Dahuk and 214,550 in Erbil. Outside of northern Iraq, Anbar hosts 401,125 IDPs, Kirkuk 355,380, and Baghdad 352,670. 8% are in 25 IDP camps (mostly in KR-I), 27% in critical shelter arrangements (mostly in Dahuk and Anbar), and 65% in private settings. Priority needs are for income, shelter, NFIs, and food support (IOM, 31/03/2015). The number and wide geographical spread of IDPs pose a major challenge to the assessment of needs and delivery of assistance (IOM, 02/12/2014).

Anbar: Newly displaced or people trapped by conflict are in need of NFIs, food, and health support, especially in Haditha and Hit (UNAMA/UNHCR, 24/02/2015; IOM, 24/02/2015). 17,000 families in Haditha are in urgent need of humanitarian support. A surge in displacement, averaging approximately 80 families per day, continues from Haditha to Nukhaib subdistrict of Rutba (OCHA, 23/03/2015).

Erbil: 150 Sunni IDP families are reportedly arriving in Shaqlawa district from Baghdad each week, due to insecurity. They were originally displaced from Anbar. The majority are living in poor conditions, mostly in unfinished buildings (OCHA, 03/04/2015).

Salah al Din: At 11 March, nearly 30,000 people had fled operations between ISF and IS in Tikrit for areas in and around Samarra, adding up to nearly 97,500 IDPs in Samarra since January 2014. The majority are living in 127 collective shelters. Priority needs are for food, shelter, health, and WASH (ECHO, 11/03/2015). Numbers have also fled to Baghdad, Kirkuk, and Diyala (UNHCR, 15/03/2015).

The humanitarian situation for IDPs in Najaf, Karbala, Babel, Qadissiya, and Wasit in public buildings or collective shelters, with significant food, WASH, and livelihood needs, is also critical (WFP, 27/01/2015; REACH, 27/01/2015).

**IDP Returnees**

Since February, nearly 56,000 IDPs have returned to Diyala, including 35,000 to Khalis and 17,500 to Muqdadiya, where the security situation remains volatile. 74,000 IDPs also returned to their places of origin in Nineawa, and 16,250 to Al Alam in Salah al Din (OCHA, 03/04/2015).

Heavily disrupted health and water infrastructure, mines, IEDs, inter-communal tensions and threats by sectarian militia all increase the risks for returnees (OCHA, 20/02/2015; ICRC, 24/02/2015).

**Refugees in Iraq**

As of 31 March, 247,860 Syrian refugees were registered in Iraq; 64% are women and children. KR-I hosts an estimated 97%, with nearly 110,000 in Erbil and 100,510 in Duhok; 4,520 were last known to be in Anbar and 1,320 in Ninewa (UNHCR, 31/03/2015). The number of Syrian refugees in Al Obaidy camp in IS-controlled Al Qa’im in Anbar significantly decreased over the past two months, to 851, although understanding the trend is difficult due to access constraints (UNHCR, 15/03/2015, 04/03/2015).

Around 33,810 Syrian refugees have arrived in KR-I from Kobane since 25 September; a reduction in arrivals has been noted since 16 February. Most families are residing in host communities (UNHCR, 15/03/2015; 19/03/2015).

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As of mid-March, there are 2.63 million IDPs, 246,836 Syrian refugees, and 1.5 million in need of assistance in host communities.

38% of refugees live in nine camps; half are in Domiz camp in Dahuk (49,050), 10,215 in Kawergosk and 9,810 in Darashakran in Erbil (UNHCR, 31/03/2015). The number of Syrian refugees in Al Obaidy camp in IS-controlled Al Qa’im in Anbar significantly decreased over the past two months, to 851, although understanding the trend is difficult due to access constraints (UNHCR, 15/03/2015, 04/03/2015).

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**Non-Syrian Refugees**

During the first quarter of 2014, there were 39,480 registered, protracted, non-Syrian refugees and asylum seekers. There is no updated information on this number.

**Iraqi Refugees in Neighbouring Countries**

As of end 2014, there were around 254,000 Iraqi refugees in neighbouring countries, including 200,000 in Turkey, 43,000 in Jordan (the Government estimated 58,000), 8,700 in Lebanon, and over 3,000 in Yemen (PI, 07/01/2015, UNHCR, 01/2015).

**Food Security**
2.8 million people urgently need food assistance. Needs are particularly high in Anbar (Baghdadi, Haditha, Hit, and Rutba districts), Diyala (Khanaqin and Ba‘quba), Baghdad (Resafa and Tarmia), Qadisiyya, Najaf and Missan governorates (OCHA, 03/04/2015). Due to funding shortages, 1.8 million people are at risk of losing WFP food assistance from May (OCHA, 27/03/2015).

In Anbar and Diyala, purchasing power has fallen by a quarter since February, while it is lowest in Ninewa (WFP, 03/2015). Food prices are high in Anbar, Ninewa, Kirkuk, and Salah al Din because of conflict and blocked supply lines (WFP, 08/04/2015). In Salah al Din, rice and flour prices have doubled, and increased fivefold in some areas (WFP, 11/03/2015).

Refugees: Due to a reduction in funds, WFP has reduced the food voucher value in Domiz, Darashakran, Akre, and Kawergosk camps from USD 28.20 to USD 19 per person per month since February. A further reduction is expected from April if shortfalls persist, and WFP will begin targeted assistance (WFP 22/01/2015).

Agriculture

Many farmers and rural households have fled their fields (FAO, 11/2014). Some 120,000 farmers in host communities need agricultural inputs for the winter planting season (OCHA, 06/02/2015). IS controls major wheat storage silos in Ninewa and Salah al Din (FAO 10/02/2015). The prospects for the 2015 winter crop are uncertain in conflict-affected parts of Anbar, Salah Al Din and Diyala (WFP, 11/03/2015).

Refugees: Reduced access to basic feed is posing a significant risk to refugees’ livestock, especially in Ninewa and Dahuk (FAO, 10/02/2015; UNHCR, 18/02/2015).

Livelihoods

800,000 people are in need of livelihood support in Iraq (UN, 18/02/2015). The need for livelihood support is increasing as IDPs’ financial conditions are deteriorating, and unemployment is rising in IS-controlled areas (UNHCR, 15/03/2015; OCHA, 02/03/2015). In conflict-affected areas, casual labour opportunities are limited and wage rates are low (WFP, 11/03/2015). KR-I’s poverty rate increased from 3.5% to 8.1% between 2013 and 2014. GDP growth in Iraq declined by five percentage points to 3% in 2014 (World Bank/Government, 12/02/2015).

Refugees: The ability to find sustainable job opportunities is still severely limited, and hampered by competition. As of February, only 5% of refugees targeted for access to wage employment in 2015 had been reached (DRC/UNDP, 28/02/2015).

Health and Nutrition

5.2 million people need health support in Iraq (WHO, 16/03/2015). Acute diarrhoea, acute respiratory infections, and scabies remain a leading cause of morbidity among refugees and IDPs.

A number of health facilities have been damaged by bombing and shelling; 80% of the remaining facilities are only partially functional. Critical shortages of essential medicines, vaccines, and supplies are concerning in urban facilities, as supply routes from Baghdad are disrupted; difficulties in import and clearing of supplies through customs are also reported (OCHA, 23/03/2015). The rapid and massive influxes of IDPs have further strained the health system. Health professionals are in short supply in KR-I and conflict areas (45% of health professionals have fled violence), while insecurity hampers access to healthcare in some areas (WHO, 16/03/2015; 09/2014). The influx of under-vaccinated Syrian refugees into KR-I increases the health risks in the region (WHO, 11/2014).

Limited or unavailable treatment for tuberculosis, leishmaniasis, and hepatitis are major concerns in Salah al Din and Kirkuk (WHO, 16/03/2015).

Anbar: Critical shortages of essential medicines are reported by still functional health structures (ECHO, 16/02/2015). Shortages of fuel affecting healthcare delivery has been reported in one hospital in Anbar, while contact has been lost with facilities in western Anbar (WHO, 16/03/2015).

Dahuk: Public health concerns include the spread of communicable diseases due to overcrowding, lack of immunisation, and increased mental health issues (WHO, 28/01/2015). The newly established Kebirto and Sharia IDP camps have no functioning primary health centres (WHO, 18/01/2015).

Mosul: Only two units of the main hospital remain functional, staffing levels are down to 30 –50%, and severe medicine shortages have been reported (AFP, 12/2014). IS has reportedly executed ten doctors for refusing to treat wounded IS fighters, and evacuated hospitals in order to treat injured IS members only (ISW, 01/12/2014).

Sulaymaniyah: The measles outbreak in Arbat camp is gradually showing a steady decrease, with 31 cases as of early March (WHO, 16/03/2015). Overcrowding in Arbat IDP camp has reportedly led to referrals to medical facilities in Sulaymaniyah city, putting additional pressure on the health infrastructure (OCHA, 23/03/2015).

Refugees: 20% of the non-camp population has difficulties accessing health services, due to cost and perceived availability (WHO/UNHCR, 28/02/2015). In KR-I, health service delivery for refugees is challenged in areas with high concentrations of IDPs; lack of specialised care for disabled children, and mental health and psychological care for refugees, are also a concern (UNHCR, 31/01/2015; 28/02/2015).

Maternal Health

It can be assumed that 450,000 IDPs and 50,000 Syrian refugees are women and girls of reproductive age. Maternity services are particularly stretched in Erbil hospital (WHO, 10/11/2014; UNFPA, 30/11/2014).

WASH

Five million people need WASH support, while many essential operations face imminent suspension due to funding constraints (UNHCR, 15/03/2015; OCHA, 28/02/2015).

Access to safe water is a critical problem in areas affected by conflict or controlled by armed groups. Power cuts, disruption of supply routes, shortage of chlorine, and broken
pipelines have left communities without safe water (WHO, 01/02/2015; 20/12/2014). Urgent WASH support is required for 50,000 IDP families in Anbar, 3,000 in Diya, and 2,000 in Qadissiya (OCHA, 03/04/2015). Support is also needed in Arbat camp in Sulaymaniyyah, in Baharka and Debagah camps in Erbil, and IDP camps in Dahuk, where facilities are hard to reach or need upgrading (OCHA, 13/02/2015; 20/02/2015; WHO, 12/03/2015).

**Refugees:** In Darashakran and Basirma camps in Erbil, drainage, waste disposal and water quality remain pressing issues (UNHCR, 15/03/2015; 15/01/2015). Garbage collection has halved in refugee camps in KR-I due to lack of funding (UNICEF/UNHCR, 28/02/2015).

### Shelter and NFIs

Around 1.37 and 1.4 million IDPs require shelter support, including one million in urgent need (OCHA, 23/03/2015). Urgent shelter solutions are needed for 2,000 families in Salah al Din, and 14,000 returned families to Zummar in Nineva (OCHA, 03/04/2015). 852 shelters need rehabilitation in Muqadiya district in Diyala, while 75% of returnee houses in Al Alam in Salah al Din have been demolished (OCHA, 27/03/2015).

Arbat IDP camp in Sulaymaniyyah is overcapacity and access to basic services is of major concern, as it hosts 19,500 individuals instead of the planned 7,160. 1,200 families will be shifted to its extension end April (OCHA, 23/03/2015; 02/03/2015; CCCM, 01/03/2015). Overcrowded Laylan camp in Kirkuk also needs support (OCHA, 03/04/2015). Most camp facilities and services do not meet minimum Sphere standards (REACH 31/10/2014).

Eleven camps are under construction for an additional capacity of 384,235 IDPs (CCCM, 02/03/2015). 93 informal sites out of 735 are at risk of eviction, putting 1,900 IDP families at risk in KR-I and 1,300 in Kerbala (UNHCR/CCCM Cluster, 23/03/2015).

**Refugees:** 20% of refugees live in inadequate dwellings in Domiz camp (UNHCR, 31/12/2014). Basirma and Kawergosk camps’ capacities are exhausted (UNHCR, 15/12/2014). In Sulaymaniyyah, refugees renting houses are facing eviction due to the pressure on accommodation, and are trying to move to Arbat camp (UNHCR, 15/03/2015).

### NFIs

1.4 million IDPs require NFI support, including 472,000 in urgent need (OCHA, 23/03/2015)

### Education

68% of school-aged displaced children across Iraq are still out of school (512,700,000 children) (OCHA, 27/03/2015). Over 500 schools, including 378 in Anbar, remain occupied by IDPs, and an estimated 130 by the military, affecting 39,000 children.

**Refugees:** 61% of school-aged refugee children (aged 6-17) in camps are attending schools, compared to 40% of those out of camps. Only 3% are enrolled in pre-school (UNICEF/Save the Children, 28/02/2015). Challenges include limited capacity in schools with an Arabic curriculum, shortages of Syrian teachers, increasing schooling demand, and insecurity (UNHCR, 31/12/2014; 12/02/2015).

### Protection

5.2 million people are in need of protection support (OCHA, 28/02/2015). Widespread abuses committed by IS, including targeted attacks, killings, torture, rape and sexual slavery, forced religious conversion, and child conscription, may amount to war crimes, crimes against humanity and genocide. Sharia courts have been established in IS-controlled territories, carrying out extreme punishments against men, women, and children (UN, 19/03/2015; 20/01/2015).

Violations allegedly carried out by ISF and associated militias during their counter-offensives against IS, including killings, torture and abductions, also amount to war crimes. Reports have documented raids of villages and neighbourhoods around Amerli in Salah al Din following operations to end IS siege late August 2014 (UN, 19/03/2015; HRW, 18/03/2015). Violence, looting and human rights violations have also reportedly been committed following operations to retake areas in Salah al Din, notably in Al Dour and Tikrit (Reuters, 04/04/2015; 21/03/2015; Amnesty, 02/04/2015).

### Eviction

An increase in detention of IDPs is reported, due to growing mistrust from local authorities and communities (OCHA, 19/12/2014).

Eviction concerns remain for urban families in Kirkuk, where arrests have been reported (UNHCR, 15/03/2015; OCHA, 27/03/2015). 20 IDP families were evicted from their shelters in Kirkuk city beginning of January, while 170 received eviction warnings (OCHA, 30/01/2015).

### Documentation

Around 10% of IDPs have no documentation, which is a prerequisite for obtaining residency permits and difficult to obtain outside a person's area of origin. Up to 50% of displaced families report that at least one family member is missing one or more civil documents (UNHCR/Protection Cluster, 28/02/2015).

**Refugees:** Refugees are in need of targeted legal responses and services including registration and documentation. Residency in urban areas is reportedly being denied to Syrian asylum-seekers lacking original ID documents (UNFPA, 31/03/2015; Protection Cluster 15/01/2015).

### SGBV

Accurate numbers of women and girls affected by abuses across Iraq are hard to obtain. Reports show an increase in sexual violence, abductions, trafficking, and forced recruitment towards women. Due to stigmatisation, many survivors are reluctant to seek assistance (UNAMI, 08/03/2015).

### Child Protection

Concerning issues include harmful practices targeting girls, such as early and forced
Concerning issues include harmful practices targeting girls, such as early and forced marriage, child labour, and discrimination of children from ethnic minorities (OHCHR, 22/01/2015). IS is reportedly selling children as sex slaves, using minors as suicide bombers, and providing military training to schoolchildren in Syria and Iraq (OCHA, 06/02/2015; Radio Liberty, 10/2014).

Iraq is heavily mined, with up to 1,838km² of contaminated territory and IS is reportedly planting more (Landmine Monitor/ICBL, IRIN, 06/11/2014 Updated: 13/04/2015)

OVERVIEW

The humanitarian situation continues to worsen. The conflict has killed over 220,000 people and caused large-scale displacement. Over 2014, more people moved to camps than the previous year, and the humanitarian needs of non-displaced people continued to grow. Protection concerns are widespread. The country has also experienced severe drought. WASH and access to food are high priorities as well as access to health services. Humanitarian needs in areas under prolonged and ongoing siege are particularly high as access is obstructed.

Political Context

A new round of Russia-mediated peace talks started on 6 April. The National Coalition did not participate (Al Jazeera, 06/04/2015). On 27 March, main opposition parties inside Syria, Building the Syrian State Party and National Coordination Committee for Democratic Change (NCCDC) announced formal participation in the Russia-peace talks (AFP, 27/03/2015).

In a separate process, UN Envoy Mistura continues to advocate for the establishment of ‘freeze zones’ in Aleppo (UN/BBC 11/2014; Reuters, 05/02/2015).

Security Context

Widespread conflict and high levels of violence continue, including indiscriminate aerial bombing by government forces and indiscriminate shelling by armed opposition (UNSC 21/11/2014). In 2014, 76,000 people were killed in the conflict, the highest toll since the war began. 18,000 civilians, including at least 3,500 children, were among the victims (SOHR, 02/01/2014). At least 6,550 civilians died during airstrikes, half of them in Aleppo. More than 220,000 people have died since fighting began in March 2011 and more than one million people have been wounded or suffered permanent disabilities (SOHR, 02/12/2014, 07/02/2015, UNICEF, 03/2015).

Stakeholders

Government forces: Government forces have control of several areas near Aleppo, in and around Homs city, and several areas in the Qalamoun region in Rural Damascus. Government forces control As-Sweida governorate, Tartous, parts of Dar’a and Latakia, several areas in Idleb, and positions in predominantly IS or Kurdish controlled areas in Al Hasakeh.
Islamic State (IS, formerly the Islamic State in Iraq and the Levant) declared an Islamic caliphate on 30 June, defining the group's territory as running from northern Syria to the Iraqi province of Diyala, northeast of Baghdad. IS has been in full control of Ar-Raqqa governorate, its stronghold in Syria, since October 2014. It holds significant swathes of territory in Aleppo, Al Hasakeh, and Deir-ez-Zor, and is fighting in Rural Damascus, Damascus, and Homs.

Democratic Union Party (PYD) and People's Protection Units (YPG): Syrian Kurds, repressed by the current Syrian Government, have been in de facto control of Kurdish zones in the north since Government forces withdrew mid-2012. Kurdish leaders from the PYD formed an armed wing, the YPG, aiming to secure control over predominantly ethnic Kurdish areas in northern and eastern Syria (ISW 19/09/2014). According to media reports, the YPG has 65,000 fighters (Today's Zaman, 04/01/2015).

Jabhat al Nusra (JAN), linked to Al Qaeda, is increasingly consolidating its control in northwestern Syria, previously held by the collapsing moderate opposition. JAN has turned against other opposition factions, such as the Syria Revolutionaries' Front (SRF) and the Hazm Movement, which are considered mainstays of the Free Syrian Army (FSA). In contrast, mainstream Islamist groups have begun to strengthen relations with JAN. The dissolution of the Hazm Movement in western Aleppo governorate cements JAN gains in the area (ISW, 02/03/2015).

Opposition alliances: Ahrar al Sham has been reconstituted following the merger of two group members (ISW 09/12/2014). Five major factions, including Ahrar al Sham, Jaysh al Mujahideen, and Harakat Nour al Din al Zenki, have united in a new military command called the Sham Front (ISW, 30/12/2014).

Christian militias: Christian militias in northeastern Syria, in alliance with Kurdish forces and other armed opposition groups, are attempting to counter IS advances. Reportedly, they number up to 450 (The Guardian, 03/03/2015).

International intervention: As part of a multinational campaign against Islamist militant groups, a US-led coalition began airstrikes on IS and JAN military installations in mid-September. In early February, following IS’s execution of a Jordanian captive, Jordan carried out 56 airstrikes on IS targets in three days (BBC, 08/02/2015). More than 2,000 people have been killed by coalition airstrikes since the beginning of the offensive, the vast majority of them IS fighters, according to the Syrian Observatory for Human Rights (SOHR, 23/03/2015). Increasing Iranian involvement may potentially serve larger Iranian strategic objectives by positioning Iranian forces in closer proximity to the disputed Israeli-controlled Golan Heights (ISW, 11/02/2015; 10/03/2015).

Conflict Developments

IS has come under pressure on four fronts in Syria (ISW, 17/03/2015). The YPG, supported by other armed groups, and coalition airstrikes have considerably challenged IS in the north (ISW, 02/03/2015). The group appears to have shifted the main effort of its military campaign to target the Government in central Syria (ISW, 24/03/2015).

Over late October – late March, the Syrian Government carried out over 10,000 airstrikes and dropped more than 5,300 barrel bombs (SOHR, 20/03/2015). Increased Iranian involvement in generating irregular forces to augment pro-Government ranks appears to be fraying government command-and-control structures. In addition to challenging direct Syrian state control, the increased role of Iranian proxy groups in Syria has challenged the cohesion of remaining state forces (ISW, 24/03/2015).

Aleppo: Clashes between IS and regime forces continue to take place in north Aleppo (SOHR, 07/04/2015). Aleppo city saw heavy clashes between opposition and government forces in early March, and high casualties on both sides (BBC, 04/03/2015; AFP, 05/03/2015). By 9 March, JAN had seized Handarat village (SOHR, 09/03/2015). Opposition forces had launched an incremental counteroffensive in Aleppo city in January, which reversed government forces’ most recent gains (OCHA, 02/01/2015).

Clashes between IS and YPG continue in the Kobane countryside (SOHR, 15/03/2015). Kurdish forces have recaptured the Kobane city area and, backed by Ar-Raqqa armed groups including Shams Al Shama and Jabhat al Akrad, have gained control over 242 villages around Kobane (SOHR, 19/02/2015). IS took control of over 300 villages and advanced toward Kobane in September (The Guardian, 11/10/2015).

Al Hasakeh: Clashes continue between YPG and IS in the Tal Tamr countryside (SOHR, 30/03/2015). Following a joint YPG and Syrian Military Council offensive on IS positions, IS began an offensive on Assyrian positions in February, carrying out a raid in Tal Tamr and capturing several villages (Long War Journal, 24/02/2015; AFP, 07/03/2015). If Tal Tamr falls, IS would dominate a key road that links to its stronghold of Mosul, in Iraq (AFP, 07/03/2015; SOHR, 09/03/2015). The US-led coalition has carried out several strikes on IS positions around Tal Tamr (SOHR, 15/03/2015). On 30 January, YPG and regime forces in Hasakeh city reached a ceasefire agreement after YPG seized several government position in the north of the city (ISW, 04/02/2015).

Damascus: Large parts of Yarmouk Palestinian refugee camp were seized by IS on 5 April. Intense fighting between armed groups supporting and opposing the Syrian Government began in Yarmouk on 1 April, when IS forces launched an assault on the camp (ECHO, 07/04/2015). Regime forces have also reportedly shelled the camp and dropped barrel bombs on it, according to the Syrian Observatory for Human Rights (AFP, 05/04/2015).

Deir-ez-Zor: The pro-government attack on the T2 pumping station in March is its first attack deep into IS-controlled Deir-ez-Zor countryside since IS's occupation of the province in July 2014 (ISW, 10/03/2015). IS made minor advances in government-controlled areas of Deir-ez-Zor city in January (OCHA, 16/01/2015; SOHR, 12/2014; SOHR, 06/02/2015).

Idleb: On 29 March, JAN and Ahrar Al Sham, backed by other opposition groups, seized Idlib city, (ISW, 24/03/2015; AFP, 29/03/2015; Syria Comment). The week before, a chlorine gas attack in the opposition-controlled town of Sarmin killed six people and poisoned a further 70. Helicopters were seen dropping barrels (MSF, 18/03/2015). The manoeuvre indicates the calculated use of a chemical weapon against a civilian population as a military tactic to create freedom of movement for pro-government military forces (ISW, 17/03/2015).
Since mid-2014, JAN has seized towns and extended its influence along the border with Turkey. By mid-December, JAN had gained control of most of Idleb governorate (AFP, 16/12/2014). At end January, JAN seized the town of Hamadiyat al Shahad in Idleb, not far from the besieged government airbase of Abu Duhur (OCHA, 30/01/2015). JAN has attempted to consolidate its influence in rural Idleb, setting up checkpoints on key access routes. Its activities have resulted in protests, and in Salqin in western Idleb, clashes between Ahrar al Sham and JAN (OCHA, 02/01/2015).

Central and southern governorates: Opposition groups consider the south, especially Dar’a, as a main stronghold. Central governorates have witnessed an increase in airstrikes and the use of barrel bombs, especially Rural Damascus. The operation launched on 9 February by pro-government forces in Dar’a marks the first significant government offensive in southern Syria since May 2014.

Humanitarian Context and Needs

Some 12.2 million people are in urgent need of humanitarian assistance inside Syria, including 5.6 million children. The humanitarian situation appears most critical in the governorates of Aleppo, Ar-Raqqa, Rural Damascus, and Deir-ez-Zor (SNAP, 28/01/2015).

Parties to the conflict continue to target public infrastructure and facilities. Water cuts in Aleppo, rural Damascus, Deir-ez-Zor, Ar-Raqqa, and Idleb are frequent and deliberate (UNICEF, 15/02/2015). Syria experienced severe drought conditions in 2014, impacting the availability of drinkable water and the health status of the population, as well as reducing agricultural output and local food production. 83% of lights in Syria have gone out since the beginning of the conflict, indicating the impact on infrastructure and supplies (Catholic Agency for Overseas Development, Islamic Relief, et al., 16/03/2015).

The UN’s response efforts are chronically underfunded: As of 30 March, 90% of the Strategic Response Plan for 2015 has not been funded (OCHA, 07/04/2015).

Access

4.8 million people are living in hard-to-reach areas, including up to two million children (UNICEF, 12/2014).

There is a trend of tit-for-tat blocking of access between IS and its opponents, making IS-controlled areas hard to reach, particularly from northern Al Hasakeh, underlining the importance of cross-border access (OCHA, 16/01/2015). Similarly, stakeholders do not allow assistance to reach people perceived to be affiliated with opposing parties, for example in government-controlled areas of Lattakia, Hama, and Idleb. Siege tactics are used by all actors in the conflict.

Security Incidents Involving Aid Workers

69 humanitarian workers have been killed in the conflict since March 2011. 27 UN staff (including 24 UNRWA staff) have been detained or are missing (UNSC 21/11/2014).

212,000 people remain besieged at the end of 2014: in Nubul and Al Zahra in rural Aleppo, Eastern Ghouta, Daryya, and Moadamiyah in Rural Damascus; the Old City in Homs; and Yarmouk camp in Damascus (UNSC 21/11/2014; UNICEF, 12/2014). Shortages of food and medicine caused the deaths of more than 300 civilians, including about 100 children, in areas besieged by the Syrian regime in 2014, mostly Eastern Ghouta (AFP, 27/12/2014).

January 2015 saw a 44% reduction in the amount of food delivered into Syria’s hard-to-reach areas compared to the previous month, primarily as the result of insecurity and delays in approvals (WFP, 04/03/2015).

Aleppo: February saw an increase in clashes on the fronts inside Aleppo city, especially on the Salamiyah and Sheikh Hilal roads that are used by the UN (UNFPA, 10/03/2015).

Ar-Raqqa: As of end January, persistent insecurity continued to render Ar-Raqqa governorate completely inaccessible (WFP, 04/03/2015). IS has closed the Syrian Arab Red Crescent and several small local charities, and appropriated warehouses and equipment. Several INGOs continue to operate cross-border into Ar-Raqqa (OCHA, 30/01/2015).

Damascus: At 6 April, a significant percentage of the 18,000 civilians in Yarmouk camp were in the area controlled by armed groups, according to UNRWA. UNRWA carried out the last aid deliveries to the camp on 28 March. Around 2,000 are thought to have fled the camp; Assistance had been delivered to just under 100 people who had left the camp (international media, 05/04/2015; ECHO, 07/04/2015).

Rural Damascus: It is estimated that close to a quarter of a million people in Ghouta are in urgent need of assistance (WFP, 04/03/2015). Over February–March, an escalation of violence and attacks were reported in several besieged locations of eastern Ghouta (OCHA, 18/03/2015).

Deir-ez-Zor: Since January, IS has increasingly restricted commercial and humanitarian access to government-controlled neighbourhoods of Deir-ez-Zor city, which caused a shortage of food supplies and a rise in prices (OCHA, 18/03/2015). Volatile security conditions and the presence of armed groups along access routes have prevented WFP deliveries since May (WFP, 31/12/2014).

Homs: Under partial siege since October 2013, over half of Al Waer’s 350,000 residents are IDPs, who are mostly living in substandard accommodation (WFP, 22/10/2014). Following intense negotiations, the first UN aid delivery for six months reached Homs in November (AFP 13/11/2014).

Idleb: In March, aid delivery to Idleb city was possible (UNHCR, 26/03/2015). An estimated 20,000 Shia minorities who reside in government-controlled Foah and Kafraya enclaves north of Idleb city, which have been seized by JAN and Ahrar al Sham, are particularly at risk of human rights abuse (OCHA, 30/03/2015).

Border Restrictions

Border closures or tight restrictions by neighbouring countries are dissuading people in life-threatening situations from seeking refuge abroad. Humanitarians have voiced concern...
over the inconsistent application of regulations at border crossings. Palestinian refugees are particularly affected by closed borders and forced returns from neighbouring countries (UN 24/11/2014).

Turkey: All border crossings with Syria were closed to individuals in early March, reportedly due to security concerns (NYT, 29/03/2015). Restrictions as of 1 January 2015 mean that refugees crossing between Turkey and Syria can only spend three out of every six months in Turkey. Those without a valid passport or travel document will be turned back (IRIN, 14/01/2015).

Displacement

IDPs

There are 7.6 million IDPs within Syria; 50% are children (OCHA 25/11/2014). There are 147 IDP camps in northern Syria, and 175,520 IDPs are sheltering in camp settlements (OCHA, 30/01/2015).

Multiple displacement is increasing, due to changed conflict dynamics, ongoing violence, the depleted capacity of host families, depletion of savings, and the search for better livelihoods (MSNA 30/10/2014; OCHA/REACH 30/10/2014).

Around 2,000 people left Yarmouk camp in Damascus on 4–5 April (international media, 05/04/2015).

Almost 15,000 people fled Idleb city in the last week of March; thousands more could leave because of further attacks and destroyed infrastructure (Save the Children, 02/04/2015).

The IS advance on Assyrian settlements in Al Hasakeh in February displaced around 6,000 people. Reportedly, 1,200 people (200 households) from IS-besieged villages fled to Qamishli, while 2,000 people went to Hasakeh city (AFP, 26/02/2015; The Guardian, 03/03/2015).

30,000–40,000 people remain displaced in northwest Dar’a and southwest Rural Damascus, although the government offensive to retake strategic locations has stalled. More recently, almost 4,000 people are believed to have been displaced from Busra Esh-Sham, close to the Jordanian border, after clashes between opposition and pro-government forces. These IDPs are now seeking refuge in several villages to the northeast (OCHA, 23/03/2015).

Refugees

Palestinian refugees in Syria: 460,000 Palestine refugees registered with UNRWA are in need of assistance (UNRWA, 02/03/2015). Over 50% of approximately 540,000 in Syria have been displaced within Syria (UNRWA 28/10/2014).

Iraqi refugees: There are an estimated 29,000 Iraqi refugees in Syria (UNHCR 25/11/2014).

Syrian Refugees in Neighbouring Countries

3,961,704 Syrians are registered or waiting to register as refugees outside Syria as of 26 March (UNHCR, 07/04/2015).

Turkey: 1,738,448 registered refugees (UNHCR, 20/03/2015). The Government suspended pre-registration in October to focus on the full biometrical registration process (UNHCR, 05/01/2014).

Lebanon: 1,191,451 refugees (UNHCR 26/03/2015). Lebanon’s borders have been closed to Syrian refugees since 24 October. Since January, Syrians wanting to enter Lebanon must apply for a visa (BBC, 05/01/2015).

Jordan: 627,295 refugees (UNHCR 26/03/2015).

Egypt: 133,619 refugees (UNHCR 22/03/2015).

Iraq: 246,836 refugees (UNHCR 15/03/2015).

PRS: 42,000 have been recorded with UNRWA in Lebanon, 14,348 in Jordan (UNRWA, 02/03/2015) and 860 in Gaza. Around 4,000 are reportedly in Egypt (UNRWA 28/10/2014).

Returnees

In Kobane, Aleppo governorate, media reports indicate up to 25,000 returnees (Deutsche Welle, 23/02/2015). In mid-February, some sources reported up to 500 returns a day. Some are staying, or are unable to return to Turkey due to restrictions on re-entry, and are in need of emergency assistance (OCHA, 17/02/2015).

Food Security

9.8 million people require food, agriculture and livelihoods-related assistance, according to the Food Security and Livelihoods sector analysis. Of these, around 6.8 million people live in high priority districts and need critical food assistance (WFP, 26/03/2015). IDPs outside formal camps are most susceptible to food shortages. The most acute needs are reported in Aleppo, Dar’a, Quneitra, and Rural Damascus (MSNA, 10/2014).

Food dispatches continue to be hindered by worsening security, particularly in the northeast and south (WFP 25/11/2014). Only 304 of the 212,000 people who are besieged were reached with food in January (UN, 26/02/2015).

The food aid basket for 4.2 million Syrians was cut by 40% in October (AFP, 10/2014).

Agriculture and Markets

According to FAO estimates, Syria’s overall cereal production in 2014 was approximately 25% below total production in 2013 (FAO, 05/03/2015). Drought and conflict have both impacted production.

Since August 2014, the price of 1kg of rice has increased by 26%. Between August 2014 and February 2015, the average retail price of bread rose by approximately 33%.
Between August 2014 and February 2015, the price of diesel rose by 92% (WFP, 28/02/2015). Since 2011, the average monthly price of wheat flour increased 197%; rice has gone up 403% (WFP, 31/01/2015).

Livelihoods

More than half the population lived in extreme poverty at the end of 2013. Unemployment is at 54% (3.39 million people) (Syrian Centre for Policy Research/UNDP, 19/10/2014). Gross domestic product has contracted by more than 40%, and exports have fallen by 90%. Oil production has dropped by 96% (World Bank/IMF/AFP, 02/12/2014). Official diesel prices increased by 102% from January 2014 to February 2015, while petrol prices increased by 30% over the same period (WFP, 27/02/2015).

Health and Nutrition

Over 2.4 million people are in need of health assistance, with highest numbers reported from Ar-Raqqa (627,600), Aleppo (475,270), and Al Hasakeh (356,200). Tuberculosis, typhoid, hepatitis A and scabies have become endemic in northern Syria (AFP, 28/11/2014). In opposition-held Aleppo, these diseases, as well as cholera, are spreading, according to local doctors (Reuters, 08/01/2015).

Since the start of the conflict, some 200,000 Syrians have died from chronic illnesses due to lack of access to treatment and medicines. Hospitals are unable to cope with the demand for surgery, due partly to the increase in the number of injured – averaging 25,000 each month (PHR, 10/2014). The number of available health professionals has fallen to approximately 45% of 2011 levels and there are severe shortages of surgeons, anaesthesiologists, laboratory professionals, and female health professionals (WHO, 27/03/2015). Local production of medicines has been reduced by 70% and many lifesaving treatments are not available (WHO, 27/03/2015).

Tuberculosis, typhoid, hepatitis A and scabies have become endemic in northern Syria (AFP, 28/11/2014). In opposition-held Aleppo, these diseases, as well as cholera, are spreading, according to local doctors (Reuters, 08/01/2015).

Only 43% of hospitals are fully functioning (UNICEF, 29/01/2015). 711 of 1,921 primary health centres are out of service (Syrian Ministry of Health/UNFPA, 11/2014). Aleppo, Rural Damascus, Homs, Dar’a, and Deir-er-Zor have the highest number of non-functional public hospitals. Only four public hospitals remain operational in Aleppo governorate, and only 132 primary health care centres (WHO, 22/02/2015). In Ar-Raqqa, no obstetric, gynaecological, or paediatric services are reportedly available for the 1.6 million people living there (PHR, 27/02/2015). Little to no mental health services are available (PHR, 27/02/2015).

Attacks on Health Workers and Facilities

As of 31 December 2014, 599 medical personnel had been killed since the conflict began (PHR, 27/02/2015). Over 2014, government forces were reportedly responsible for 93% of the deaths of 162 medical personnel (PHR, 03/2015). PHR documented 224 attacks on 175 separate medical facilities between March 2011 and the end of December 2014 (PHR, 27/02/2015).

Diarrhoeal Disease

Diarrhoea is one of the main causes of death for children under 12 months old (IFRC, 24/07/2014).

Hepatitis A

Some 31,400 cases of hepatitis A were reported in 2014. Since January 2015, 1,000 have been recorded per week (Reuters, 24/02/2015). Hepatitis A is linked with lack of safe water and poor sanitation.

Mental Health

Three million women and girls of reproductive age are in need of assistance in Syria, including around 432,000 pregnant women. 26 of 41 basic emergency obstetric care centres are reported as non-functional (Syrian Ministry of Health/UNFPA, 30/11/2014).

Mental Health

More than 350,000 individuals in Syria are estimated to suffer from severe forms of mental illness; over two million people suffer from mild to moderate problems such as anxiety and depression disorders, and a large percentage suffer from moderate to severe psychological/social distress (WHO/UNHCR, 19/10/2014).

Nutrition

In areas with high IDP concentration, 2.3% SAM – above the 2% crisis threshold – and 7.2% GAM rate has been reported (UNICEF, 21/10/2014). It is estimated that four million women and children are in need of preventative and curative nutrition assistance (UNICEF, 15/02/2015).

WASH

4.6 million people are in need of WASH assistance. Six out of ten governorates report major problems in the WASH sector.

The availability of safe water is at a third of pre-crisis levels (WHO, 27/03/2015). The reliability of urban piped water is severely reduced and the quality of drinking water cannot be guaranteed due to a lack of testing facilities. Fuel shortages also affect water supply (UNICEF, 15/02/2015). One-third of water treatment plants no longer function, and sewage treatment has halved (PHR, 10/2014; WHO/UNICEF, 22/07/2014).

Shelter and NFI

1.6 million people are in need of shelter assistance (MSNA, 30/10/2014). 1.2 million houses have been damaged, 400,000 of which have been totally destroyed (UNHCR, 30/10/2014). Only IDPs in government-controlled areas receive shelter response, through collective shelter rehabilitation and private shelter upgrade (UNHCR, 20/11/2014).

Dar’a, Lattakia, and Quneitra have acute needs, followed very closely by Hama, Ar-Raqqa, Aleppo, Al Hasakeh and Rural Damascus. 40% of people identified in need of shelter are...
located in Aleppo governorate, as are 34% of people identified in need of NFI assistance (MSNA, 30/10/2014). Satellite imagery analysis indicated that fighting in Kobane affected 3,250 structures, destroying 1,200 (UNOSAT, 06/03/2015).

2.7 million people are in need of NFI assistance. The dispatch of non-food items (NFIs) has fallen significantly since April 2014 (MSNA, 30/10/2014).

Education

The estimated number of children enrolled in basic education increased from 2.9 million in the 2012/13 academic year to 3.6 million in 2014/15. Likewise, the gross enrolment ratio in basic education rose from 66% in 2012/13 to 79% in 2013/14 (UNICEF, 15/02/2015). Continued conflict and the recent closure of some schools in Ar-Raqqa and Deir-ez-Zor governorates and parts of rural Aleppo in Syria are believed to have disrupted education for 670,000 school-aged children. The primary reason for student drop-out is the need to work to support the family (Syrian Interim Government/OCHA, 07/11/2014). In areas of active conflict for a prolonged period, like Aleppo, education enrolment is estimated to be around 6%. In 2014, half of refugee children were not receiving any form of education (Save the Children, 23/03/2015).

In 2014 there were at least 68 attacks on schools across Syria, killing at least 160 children and injuring over 340 (UN, 06/01/2015). 4,000 Syrian schools have been destroyed, damaged, or used to house IDPs. 76 UNRWA schools – more than two-thirds – have become unusable.

Protection

Protection is a priority concern. Human and organ trafficking are reported (UNHCR 20/11/2014). Non-state armed groups continue to commit violations, including summary executions. Ethnic and religious communities in IS-occupied areas have been targeted directly (UN Human Rights Council 11/2014). IS has executed 1,429 people in Syria over June - November, the majority civilians (UN Human Rights Council, 14/11/2014; SOHR/HRW, 17/11/2014). Over October–December 2014, IS killed more than 120 of its own members, most of them foreign fighters trying to return home (SOHR, 28/12/2014).

On 21 February, it was reported that the Syrian Government had executed at least 48 people, including ten children – the families of opposition fighters – in Rityan village, north of Aleppo (AFP, 21/02/2015).

On 24 February, IS abducted between 220 and 300 Assyrian Christians from Tal Tamer, Al Hasakeh governorate. By 2 March, 21 had been released. There are conflicting reports over whether they were released for ransom or following a IS “court” order (Al Jazeera call, 26/02/2015).

Indiscriminate Attacks

Improvised mortar bombs, used by Syrian fighters, killed 311 civilians between July and December 2014, two-thirds in Aleppo (SOHR/Reuters, 12/12/2014).

Children

In 2015 alone, IS has trained over 400 children as fighters (AFP, 24/03/2015). Non-state armed groups and the Government’s Popular Committees are increasingly recruiting children: over 120 cases – more than half by the Free Syrian Army – were documented between 1 January and 19 August 2014, including girls, and some as young as eight (UNSC, 08/2014). In Ar-Raqqa, IS is using education to foster a new generation of recruits (UN Human Rights Council, 14/11/2014).

Chemical Weapons

There have been allegations of chlorine attacks, the most recent reported on the town of Kafr Zeta on 28 August (OPCW, 09/2014). An OPCW commission found confirmation that a toxic chemical was used in three villages of northern Syria earlier in 2014. A chlorine gas attack in Idleb governorate, reportedly carried out by government forces, killed six and poisoned over 70 people in March 2015 (MSF, 18/03/2015).

Mines and ERW

In 2013, there were 2,403 civilian casualties from landmines, victim-activated improvised explosive devices (IEDs), cluster munition remnants, and other explosive remnants of war (International Campaign to Ban Landmines/Cluster Munition Coalition, 19/11/204). Large quantities of unexploded ordnance and many booby-trapped houses in the Eastern sector of Kobane city and the surrounding countryside are preventing return (OCHA, 17/02/2015). Reportedly, ten civilians have died and around 20 injured by mines in Kobane city (Geneva call, 26/02/2015).

Detention

200,000 people are estimated to be in government detention, including 20,000 detainees who are unaccounted for (SOHR/HRW, 02/12/2014). 13,000 people have died in Government detention since March 2011, including more than 100 children, reportedly from torture (SOHR, 13/03/2015).

Some 7,000 government troops held by opposition forces are unaccounted for (SOHR, 07/2014). Another 1,500 IS, other opposition, and Kurdish fighters have been kidnapped during battles in the first half of 2014 (AFP, 07/2014).

Sexual and Gender-based Violence

IS has sought to exclude Syrian women and girls from public life. Forced marriage of girls to IS fighters and the selling of abducted girls into sexual slavery have been reported (UN Human Rights Council, 14/11/2014).

Media

Journalists and other media workers are systematically targeted.

Updated: 07/04/2015
Yemen Conflict, Food Insecurity, Displacement

**LATEST DEVELOPMENTS**

13 April: According to the UN, more than half of the nearly 650 deaths since the escalation of the conflict are civilians (Al Jazeera).

13 April: Airstrikes hit residential areas in Shabwah, Al Dhalee, Aden, Sanaa, Sa’ada, Amran, Marib, Ibb and Al Jawf governorates. Airstrikes have occurred in 18 of the 22 governorates (OCHA).

13 April: Landlines and cellphone networks are down in some areas in Aden City and Lawder district in Abyan, and in Al Dhale’e. Aden and Al Mukalla (Hadramaut) have experienced power outages of between eight and 12 hours (OCHA).

12 April: Exiled President Hadi appointed his former Prime Minister Khaled Bahah as vice president (Reuters).

10 April: A 10-35% increase in food prices has been registered in several governorates affected by violence (WFP).

9 April: Up to 30% of fighters are children. Since 26 March, 77 children have been confirmed killed and 44 others injured (UNICEF in AFP).

8 April: Electricity in Aden had been cut for three days and water supply cut in highly populated areas (MSF).

7 April: Members of the Southern Movement who represented the group at the National Dialogue Conference of 2013 and 2014 called for an end to hostilities and a return to dialogue (Yemen Times).

**KEY CONCERNS**

- 15.9 million people are in need of humanitarian assistance (OCHA, 28/12/2014).

- 10.6 million are food insecure, including 5 million severely food insecure (Comprehensive Food Security Survey 2014; WFP, 31/12/2014). Levels of food insecurity have doubled since 2009 (FAO, 06/2014).

- 8.6 million have no access to healthcare (OCHA, 09/10/2014).

- One million children under five are acutely malnourished; 280,000 are severely malnourished (OCHA, UNICEF 06/2014).

- 13.1 million do not have access to safe water and improved sanitation; 4.4 million lack access to adequate sanitation (OCHA, 09/10/2014). Open defecation remains the practice for more than 20% of the population (UNICEF 2014)

- 335,000 IDPs, 227,000 returnees and 245,000 refugees in the country (OCHA, 09/10/2014).

- Extreme access constraints prevail in Hadramaut, Shabwah, and Marib governorates. The governorates with the highest severity of needs are Aden, Abyan, Amanat Al Asimah, Al Jawf, Sa’ada, Hajjah (OCHA, 22/12/2014).

**OVERVIEW**

The highest priority humanitarian needs include protection, food and nutrition assistance, access to healthcare, shelter – primarily for conflict-affected people –, and provision of water and sanitation.

Yemen’s political transition turned into armed conflict between Houthis from the north and the Government. Southern secessionists, Al Qaeda in the Arabian Peninsula (AQAP) activity throughout the country and recently also Islamic State attacks compound the security and political challenges.

**Political Context**

Instability and violence continue across the country, and attempts at political transition have been upended. In February 2015, the Shia Houthis dissolved Parliament and replaced the Government with a presidential council they claimed will fill the presidential vacuum for two years. The move was condemned as a coup by other parties and Yemen’s neighbours. Shortly after arriving in Aden on 21 February, President Hadi called for troop mobilisation in the south (AFP, 21/02/2015). Former Prime Minister Bahah and members of his cabinet were released from almost two months of house arrest on 16 March (NYT, 16/03/2015). On 25 March, Hadi fled Yemen for Saudi Arabia (Huffington Post, 25/04/2015).

On 12 April, President Hadi appointed his former Prime Minister Khaled Bahah as vice president, a move apparently aimed at improving the chances of a peaceful settlement (Reuters, 12/04/2015).

On 8 February, the Houthi-controlled interior ministry banned all unauthorised anti-Houthi protests (AFP, 08/02/2015). However, demonstrations in support of President Hadi have multiplied since late February (AFP, 12/03/2015).

**Southern Movement (Al Hirak)**

Members of the Southern Movement who represented the group at the National Dialogue Conference of 2013 and 2014 called for an end to hostilities and a return to dialogue on 7 April (Yemen Times, 07/04/2015). Various leaders of southern provinces had announced their secession following events in Sanaa in January (Reuters, 25/01/2015). Rallies in the south calling for secession had gained momentum since October 2014 (Yemen Times, 19/10/2014; AFP, 01/01/2015).
Economic Crisis

Oil production represents over 70% of total government revenue. Production was suspended in the major oil-producing governorates of Shabwah and Hadramaut in January, and is likely to be disrupted in Marib (FEWSNET, 18/02/2015).

Oil revenues had already declined almost 30% between January 2013 and January 2014 (Yemen Central Bank, 02/2014). In July 2014, the Government increased the price of petrol by 60% and diesel by 95%. Observers have warned that the economy will continue to decline if the Government cannot protect pipelines. Attacks on oil pipelines are regularly reported (Al Jazeera).

Security Context

Conflict has escalated significantly in Yemen since 23 March, affecting 14 of Yemen’s 22 Governorates. Houthi-affiliated militants have moved south, and armed clashes have erupted between Houthi supporters and Hadi loyalists. Saudi-led coalition airstrikes began on 26 March, and have occurred in 18 governorates (OCHA, 13/04/2015). Nationwide, nearly 650 people have been killed and more than 2,000 wounded since 19 March, including at least 77 children killed since the airstrikes began (AFP, 11/04/2015).

Certain factions in the deeply divided Yemeni army have allied themselves with the Houthis against President Hadi, including members of the former central security force, a unit seen as loyal to ousted president Ali Abdullah Saleh (Reuters, 12/03/2015; ABC, 23/03/2015). AQAP, Al Qaeda’s powerful Yemeni branch, backed by Sunni tribesmen, has fought to halt the Houthis’ advance (AFP, 20/10/2014). Hundreds of young men have been recruited since Hadi called for 20,000 new troops from the south (Yemen Times, 16/03/2015).

International media report that violence resulted in more than 1,500 deaths in 2014, a 150% increase on 2013 (USAID, 13/02/2015).

Houthis

The Houthis, also referred to as Ansarullah, are based in Sa’ada governorate. Houthi insurgents have de facto control over Sa’ada and neighbouring Amran, Raymah, and parts of Al Jawf, and Hajjah governorates. They occupied much of the capital in September 2014. Violence persisted despite a peace agreement in September, and an annex covering security and military conditions in other governorates witnessing violence (Yemen Times, 29/09/2014). The Houthis have taken up arms before, citing political, economic, and religious marginalisation (Al Jazeera, 16/11/2009).

Al Qaeda in the Arabian Peninsula (AQAP) and Ansar al Sharia

AQAP, based in the south and east of the country, has expanded its presence in Hadramaut. According to analysts, the Houthi advance has bolstered support for AQAP and Ansar al Sharia (Reuters, 09/11/2014). According to the national security service, there are around 1,000 Al Qaeda militants in Yemen from 11 Arab and non-Arab countries (AFP, 17/01/2015).

AQAP regularly targets army and security forces, foreigners for abduction, and oil pipelines. In late December and early January, AQAP targeted several members of the security forces, including in Al Bayda and Shabwah. Yemeni authorities blame AQAP for a campaign of targeted killings in which up to 350 senior army officers have died in the past three years (Reuters, 04/01/2014).

International Involvement

Saudi Arabia firmly backs President Hadi. UAE, Bahrain, Kuwait and Qatar are providing fighter jets. Egypt, Jordan, and Sudan have said their forces are involved in the operation, with Sudan pledging ground troops as well as warplanes. Morocco declared its support for the Saudi-led operation, but did not confirm or deny earlier reports that it had sent fighter jets. Pakistan said it had not decided whether to heed a request for military support from Saudi Arabia, but reaffirmed its support for the kingdom. Turkey also expressed its support (Reuters 27/03/2015). The US Government stated it had authorised the provision of logistical and intelligence support to the Saudi Arabian coalition’s military intervention (Amnesty 26/03/2015).

The air campaign includes over 100 jets (Washington Post 26/03/2015). Saudi Arabia has mobilised 150,000 troops and said it is prepared to launch a ground invasion if necessary (NBC 26/03/2015; IRIN 26/03/2015). Iran has been accused of backing Houthi militiants financially and materially, a claim the Iranian Government denies (Amnesty 26/03/2015). Iran has deployed a war ship near Yemen (Huffington Post, 08/04/2015).

Security Incidents and Conflict Developments

Sanaa: On 26 March, 25 people, including at least six children, were killed in airstrikes on Sanaa. A number of military targets were hit, but the crowded, low-income suburb of Bani Hewat near Sanaa International Airport was also badly damaged (IRIN 26/03/2015).

On 20 March, three suicide attacks on mosques in Sanaa, targeting Shi’ite worshippers, killed 142 people and wounded at least 351. Islamic State claimed responsibility (AFP, 21/03/2015).

Aden: Conflict in Aden continues to escalate. Airstrikes have intensified. Heavy armed clashes continue to be reported in residential districts and have reportedly expanded to new areas (OCHA, 11/04/2015). Health facilities, water and food supply are disrupted (ECHO, 07/04/2015).

On 19 March, President Hadi’s palace was attacked in an air raid (AFP, 19/03/2015). Houthis seized the airport temporarily before it was recaptured by Government forces on 29 March (Bloomberg, 29/03/2015).

Al Bayda: Clashes between Houthis, AQAP and affiliated tribes began in October and intensified in November. Attacks in January killed at least 15 (Reuters, 01/02/2015; Yemen Times, 12/01/2015; Reuters/Yemen Times 06/01/2015). Clashes have involved attacks on schools and hospitals used by the warring parties (AFP, 17/10/2014; 20/10/2014; 08/11/2014).

Abyan: On 9 March, AQAP militants overran the city of Mahfad, a former AQAP
stronghold, and held it for eight hours before they were driven out by the Yemeni army (Gulf News, 10/03/2015).

Ibb: The Houthis have deployed some 5,000 militia and more than 80 tanks to an area of Ibb 30km northeast of Taizz (ABC, 23/03/2015).

Hadramaut: On 20 February, a bomb attack targeting an army general on a road between the main towns of Sayun and Shibam killed one soldier and wounded four (AFP, 20/02/2015).

Hajjah: On 30 March, an airstrike killed 45 people and wounded 65 in Mazraq refugee camp (Reuters, 30/03/2015).

Lahj: Lahj governorate was seized by Houthi militants on 25 March (Washington Post, 26/03/2015). According to sources, troops loyal to President Hadi and southern paramilitary forces deployed in Lahj in anticipation of a possible Houthi advance (Al Jazeera, 22/03/2015; ABC, 23/03/2015). On 20 March, IS claimed responsibility for an attack that killed 29 police (ABC, 23/03/2015).

Marib: On 25 March, a ceasefire was agreed between Houthi militias backed by security forces and tribesmen in the Qania area (Yemen Times, 25/03/2015). However, fighting has since resumed between Sunni tribes, pro-Hadi security forces and Houthi fighters (Huffington Post, 12/04/2015). According to tribal sources, upwards of 30,000 armed tribesmen are stationed in Sahil area (Yemen Times, 12/01/2015).

Sa’ada: On 12 March, thousands of Houthi fighters held military exercises in the Al Buqa region, close to the border with Saudi Arabia (Reuters, 12/03/2015).

Taizz: Violent demonstrations against the Houthi takeover left eight dead and wounded over 140 people (ICRC; 26/03/2015). On 23 March, Houthi forces seized part of Taizz city and its military airbase (BBC, 22/03/2015; ABC, 23/03/2015).

Humanitarian Context and Needs

An estimated 15.9 million people, over 60% of the population, are in need of humanitarian aid. Children under 18 years old represent 50% of people in need. Of the 50% of people in need who are over 18 years old, 4% are elderly (over 60 years old) (OCHA, 05/03/2015).

Access

Insecurity is the biggest challenge to humanitarian access in the south. No humanitarian assistance has been delivered to Al Dhalee (OCHA, 13/04/2015). The aerial campaign has led many aid agencies to suspend their activities and evacuate their staff (IRIN, 27/03/2015).

The closure of airspace over Yemen is severely restricting air operations, as are other limitations in neighbouring airspace zones. The Port of Aden is reported to be closed due to conflict (OCHA, 10/04/2015).

It is extremely difficult to move within the country to evaluate needs and provide assistance (MSF, 01/04/2015). In some areas, lack of fuel supplies is interrupting the transportation of urgent humanitarian relief (OCHA, 10/04/2015).

The World Bank has suspended operations in Yemen, after a review concluded that the situation in Yemen had deteriorated to the degree that the Bank was unable to exercise effective management over its projects (World Bank, 11/03/2015).

Critical Infrastructure

As of 8 April, MSF reported that electricity in Aden had been cut for three days and water supply had been cut in highly populated areas (MSF, 08/04/2015). In addition, Aden and Al Mukalla have experienced prolonged power outages lasting between eight and 12 hours (OCHA, 13/04/2015). Phone networks are no operating working in some areas in Aden City and Lawder district in Abyan (OCHA, 13/04/2015).

In Al Dhalee, electricity shortages also mean water shortages, as it cannot be pumped (MSF, 10/04/2015). Phone networks and internet have been disconnected in Al Dhalee (OCHA, 13/04/2015).

In Sa’ada and Aden, 15 public facilities were completely or partially destroyed over 7 –11 April, including three hospitals and medical centres. The destruction of two schools was reported in Hajjah and Ibb. In Aden, an armed group has occupied six schools (OCHA, 13/04/2015).

IDPs

More than 120,000 people have fled their homes since airstrikes began 26 March: 59,690 in Hajjah; 29,290 in Amran; 18,650 in Saada; 8,650 in Abyan; 3,500 in Al Hudaydah; and 1,500 in Al Jawf. In Abyan, displaced include 1,640 people hosted in 15 schools. The rest are living in host communities or with family and relatives. Numbers of newly displaced in Sana’a and Aden are still unclear (OCHA, 13/04/2015).

As of end of December, there were 334,000 IDPs in Yemen (OCHA, 22/12/2014). The vast majority are hosted in five governorates: Sa’ada (103,014 people); Hajjah (88,603 people); Amran (71,548 people); Sanaa (46,228 people); and Al Jawf (24,700) (OCHA, 11/2014).

90% of IDPs are estimated to live outside camps (OCHA, 03/09/2014; Global CCCM Cluster, 27/03/2014).

Over 2014, localised conflicts displaced approximately 100,000 Yemenis – most returned home within days, according to the UN. These conflicts were primarily associated with the movement of Houthi forces into new areas, including Amran, Al Bayda, Al Jawf, Marib,
Sanaa, and Ibb governorates (USAID, 13/02/2015).

**Al Dhalee:** Reportedly 63,000 people have been displaced from Al Dhalee district, mainly to Al Azareq, Jaha'i, Al Hussien and Al Shu'aib districts or to neighbouring villages (OCHA, 31/03/2015). **As of 10 April, MSF estimated that around 60% of Al Dhalee city had fled to surrounding areas (MSF, 10/04/2015).**

**Lahj:** Local authorities report 1,400 people fled from Al Anad, Hawa and Sabir to Tur Al Bahaa and Al Waht districts (OCHA, 31/03/2015).

**Sa’ada:** 7,000 have reportedly moved to Amran governorate, and almost 9,000 have moved to Hajjah (including 520 families who moved into the Mazraq IDP camps before an airstrike hit one camp on 30 March). A number of people are also internally displaced within Sa’ada, having sought refuge from airstrikes in neighbouring areas (OCHA, 31/03/2015). **In Sa’ada, 1,000 people reportedly stranded in Al Mashnaq in Shida district since 26 March need assistance (OCHA, 13/04/2015).**

**Hajjah:** Mazraq IDP camp residents were observed fleeing following the airstrike that hit one camp. IDPs were reportedly moving towards Al Madab, Al Khathra, Zahab Hajar and Haradh town. As of 6 April, regular shelling continues in the area of the Mazraq IDP camps. As a result, most IDPs who had returned have left the camps again (OCHA, 31/03/2015; ECHO, 06/04/2015).

Refugees and Migrants

Around 800,000 refugees, asylum seekers, and migrants require humanitarian assistance. There are 257,645 registered refugees, most are Somalis (236,803); 5,934 are Ethiopians (Mixed Migration Secretariat, 28/02/2015). **As of 10 April, UNHCR reported almost 600 arrivals in Somalia from Yemen, mostly Somalis fleeing the violence in Yemen (UNHCR, 10/04/2015).**

In 2014, nearly 91,600 refugees, asylum seekers, and migrants arrived in Yemen, a 40% increase compared to 2013, according to IOM. They have reported abduction, torture, physical assault, and rape as common forms of abuse (Mixed Migration Secretariat, 28/02/2015).

Somali refugees are living in precarious conditions either in the only refugee camp, Kharaz, or in urban areas. One million undocumented Ethiopian migrants also live in Yemen (ECHO, 27/08/2014: UNHCR, 12/2014, ECHO, 09/02/2015).

At least 2,000 Syrian refugees have been registered in Yemen since August 2014. The total number of Syrians in Yemen is estimated to be more than 10,000 (OCHA, 05/11/2014).

UN reports the arrival of Yemeni refugees in Djibouti and in Somalia, in a reversal of migration dynamics (ECHO, 05/04/2015). **As of 10 April, 317 Yemeni refugees had arrived in Djibouti over a period of ten days (UNHCR, 10/04/2015).**

**Returnees**

During October, IOM recorded 25,940 Yemeni returnees at the Al Tuwal border crossing point between Yemen and Saudi Arabia (IOM, 14/11/2014). Between January 2013 and September 2014, 936,408 Yemenis returned from Saudi Arabia, as the Saudi Government restricted the activities of foreign workers (OCHA, 30/11/2014). Most returnees have acute humanitarian needs.

At the end of November, 215,400 IDPs had returned home (OCHA, 31/12/2014). Returnees were located in Abyan (138,631), Sa’ada (68,618) and Al Bayda (8,155) (OCHA, 31/12/2014).

**Food Security**

Prior to the escalation of the conflict, five million people were estimated to be severely food insecure (WFP, 31/12/2014). Most areas of Yemen are expected to remain in Crisis (IPC Phase 3) through June 2015, with increased need for humanitarian assistance as the lean season and political crisis continue (FEWSNET, 03/2015). Nearly half of the rural population and over one quarter of the urban population are food insecure (Comprehensive Food Security Survey, 11/2014).

Sa’ada governorate has the country’s most food insecure areas; more than 40% are of the governorate’s population severely food insecure (Comprehensive Food Security Survey, 11/2014).

**Agriculture and Markets**

**Acute fuel shortages provoked by the conflict have affected food prices. A 10–35% increase in food prices has been registered in several governorates affected by conflict (WFP, 10/04/2015).**

Insecurity is hampering agricultural activity as well as agricultural assistance programmes (FAO cited in OCHA, 08/10/2014).

Due to conflict-related disruptions to the imported food supply, as well as the likely reduction in fuel subsidies and currency depreciation, food prices are likely to increase in the coming months. Disruptions to sources of income and the potential increase in the cost of food and other goods are likely to reduce household purchasing power. This is likely to decrease the quantity and quality of food consumed, as almost all poor households rely heavily on market purchases (FEWSNET, 03/2015).

The declining supply of cooking gas led to a 30–40% increase in prices in January. Shortages may worsen if the current political tension in Marib deteriorates, as this governorate supplies cooking gas to Sana’a and other central and northern governorates (FEWSNET, 18/02/2015).

**Health and Nutrition**

An estimated 8.6 million people have limited access to health services (OCHA, 09/09/2014). Qualified medical staff are in short supply, as is medical equipment.
In the south, there are growing concerns over safety of health assets. Armed forces in Aden took three ambulances on 1 to 2 April for non-medical use. Since violence escalated, three volunteers with the Yemen Red Crescent have been killed (OCHA, 07/04/2015).

In Sa’ada and Aden, three hospitals and medical were completely or partially destroyed over 7–11 April (OCHA, 13/04/2015).

In Sa’ada, services at 11 health facilities were suspended due to their close proximity to areas targeted by airstrikes (OCHA, 08/04/2015). Limited access to essential health services as a consequence of ongoing conflict has increased the risk of higher morbidity and mortality from mass casualty events and common diseases (diarrhoea, respiratory infections and vaccine-preventable diseases) in areas such as Al Bayda, Marib, Taizz and Aden.

Over 2015, an estimated 7,500 children are expected to contract vaccine-preventable diseases with serious consequences. 400,000 children are estimated to need psychosocial support due to the humanitarian situation (UNICEF, 29/01/2015).

Nutrition

The number of acutely malnourished children under the age of five has fallen from an estimated one million at the end of 2013 to just over 840,000 in 2014, according to the Nutrition Cluster. In the same period, the number of severely acutely malnourished children declined from 279,000 to about 170,000. However, more than one in ten children is still acutely malnourished, with boys more affected than girls (Comprehensive Food Security Survey, 11/2014).

National GAM has slightly improved: 12.7% of under five children are malnourished compared to 13% in 2011 (OCHA, 31/08/2014; FEWSNET, 16/09/2014). The Comprehensive Food Security Survey shows that GAM has improved considerably in Al Hudaydah, Aden, Lahj, Marib, Al Dhale’e, Hadramaut and Al Bayda; but severely deteriorated in Taizz, Ibb, Dhamar and Al Maharah, due to various factors including poor water and sanitation conditions, poor food consumption habits, and scarce health facilities. In early February, 61 out of 333 districts in Yemen were reported to have critical levels of GAM (over 15%) and another 105 with serious levels (10–14.9% GAM) (OCHA, 14/02/2015).

WASH

An estimated 13.1 million people do not have access to safe water (OCHA, 09/09/2014), 12.1 million are without access to improved sanitation, and 4.4 million lack access to adequate sanitation (OCHA, 28/02/2014). An estimated 68,000 IDPs, many of whom are in protracted displacement, and their host communities in Hajjah require WASH assistance. About 9,000 people (1,500 families) affected by conflict in Al Jawf over August–September need WASH assistance (OCHA, 14/02/2015). Open defecation remains standard practice for more than 20% of the population and appears to be higher for young children (UNICEF 2014).

Education

In 2015, 1.1 million people affected by conflict or other disasters will require education services, including provision of education or rehabilitation of schools, among other things (OCHA, 22/12/2014). Over 350 damaged schools require rehabilitation or reconstruction, affecting some 72,000 children (Yemen Times, 04/11/2014).

Nationwide, an estimated 2.5 million children are not in school (OCHA, 04/2014). 69% of the estimated 1.14 million 6–14 year-olds not in school are girls (UNICEF cited in Yemen Times, 04/11/2014).

Protection

According to the UN, more than half of the nearly 650 deaths since the escalation of the conflict are civilians (Al Jazeera, 13/04/2015).

Protesters against the Houthi takeover have been illegally detained and tortured, according to several reports. One protester was reported dead on 14 February, after sustaining severe injuries while being detained by Houthi militias (AFP, 14/02/2015; Amnesty, 16/02/2015). Over 15 October–15 January an NGO in Ibb governorate documented 37 killings, 12 cases of assault against journalists and human rights activists, five demolitions and 17 partial demolitions of homes, 381 people displaced, 49 homes looted, nine cases of taking over public institutions, three cases of shelling public institutions, and 190 cases of illegal detention of civilians (Yemen Times, 05/03/2015).

Over January, 1,490 migrants and refugees arriving in Yemen were reportedly abducted. 234 were women. A further 243 migrants and refugees reported being physically assaulted and 63 reported robbery or extortion (RMMS, 31/01/2015).

Due to their marginalisation, the Mumasheen minority has higher humanitarian needs than the average population (UNICEF, 20/02/2015).

Children

Up to 30% of fighters in armed groups are children. Since 26 March, 77 children have been confirmed killed and 44 injured (UNICEF in AFP). In December, the UN estimated that in 2015, an estimated 3.9 million children are living in areas where violations of their rights constitute a serious risk. Of these, an estimated 2.6 million are in need of child protection services (OCHA, 22/12/2014).

Houthis, Ansar al Sharia, AQAP and state forces are all recruiting children (Watchlist on Children and Armed Conflict, 01/10/2014). Armed children guard checkpoints throughout Sa’ada, Ibb, Hudaydah, and Amran (UNICEF cited in Yemen Times, 31/12/2014; 01/10/2015).

SGBV

About 100,000 people are predicted to require support related to gender-based violence in 2015. GBV in Yemen remains critically under-reported. From January to mid-October 2014, 8,300 GBV cases were reported (OCHA, 22/12/2014).

Mines and ERW

Landmines and explosive remnants of war are a major concern in the northern...
Landmines and explosive remnants of war are a major concern in the northern governorates. There were several incidents reported in Sana’a, Sa’ada, Al Dhale’e, Amanat Al Asimah and Ibb in September and October (UNICEF, 31/10/2014).

In Lahj, local partners report that AQAP has placed landmines in Al Hamra area of Al Hawta district in order to guard against any Houthi advance (OCHA 31/03/2015).

The Yemen Executive Mine Action Center (YEMAC) believes areas in northwestern Hajjah governorate contaminated with area cluster munition remnants, but it has been unable to survey them due to insecurity. YEMAC has confirmed the presence of cluster munition remnants in four districts on the border between Sada’a governorate and Saudi Arabia (Cluster Monitor, 04/12/2014).

In 2013, there were 49 casualties from mines or ERW, including 40 children (Landmine & Cluster Munition Monitor, 19/11/2014).

Updated: 14/04/2015

LEBANON DISPLACEMENT

LATEST DEVELOPMENTS

No significant developments this week, 08/04/2015. Last update 01/04/2015.

KEY CONCERNS

- 1,191,451 Syrians are registered as refugees in Lebanon. 11,266 are awaiting registration. Bekaa is hosting 418,189 refugees; Beirut 346,125; North Lebanon 286,882; and South Lebanon 140,255 (UNHCR 26/03/2015).

- More than three million people are directly affected by the Syrian crisis in Lebanon (UNHCR, 25/01/2015).

- 300,000–400,000 refugee children of school age not being educated within Lebanon; between 210,000 and 320,000 are involved in some form of child labour (VoA, 23/01/2015)

- Only 30% of Syrian children born in Lebanon have birth certificates (UNHCR 10/11/2014).

OVERVIEW

Lebanon has the highest per capita concentration of refugees worldwide. While the country struggles to deal with the refugee influx, which exceeds a quarter of the Lebanese population, tensions between host and refugee populations are increasing due to food price hikes, and pressure on health and education systems, housing, and employment. The number of poor living in Lebanon has risen by nearly two-thirds since 2011, to 2.1 million, and Lebanese unemployment has doubled (UNHCR 18/12/2014).

Political Context

The Lebanese Parliament has extended its mandate until June 2017, on the grounds that elections would present too much of a security risk. The Reform and Change bloc boycotted the extension vote and said it would challenge the extension at the Constitutional Council (Daily Star, 12/11/2014).

The Government was formed in February 2014 after ten months of political stalemate. It brings together the Hezbollah movement and its allies, and the Future Movement bloc, who back opposing sides in the Syria war. Neither side has veto power over the other.

Former president Michel Sleiman’s term expired on 25 May 2014. The March 8 bloc, which includes Hezbollah, has boycotted voting for the new president, arguing that the sessions are futile until rival groups agree on a consensus candidate. The next parliamentary session to vote for a new president has been postponed until 22 April (Daily Star, 02/04/2015).

Security Context

Hezbollah’s involvement in Syria, and the alleged presence of Jabhat al Nusra (JAN) and the Islamic State (IS) in Lebanon, raises destabilisation concerns in Lebanon. Longstanding tensions between Lebanon and Israel have flared occasionally in the context of the Syrian civil war.

The security situation in many Palestinian refugee camps is tense. A Palestinian joint security force deployed to the southern refugee camp of Mieh Mieh in late March, less than a year after a similar security plan was implemented in Ain al Hilweh. The refugee camps of Burj al Barajneh and Shatila, in Beirut’s southern suburbs, are planned to be the next in line for the deployment of the security force (Daily Star, 24/03/2015). In Ain Al Hilweh, Lebanon’s largest camp for Palestinian refugees, security forces have reported 46 people joined jihadi groups in Syria. Fighters reportedly transit back and forth between Syria and the camp (Daily Star; AFP, 07/04/2015).

South Lebanon: On 12 March, shooting was reported between Israel and Lebanon in the disputed Shebaa Farms. The same day, an Israeli soldier was wounded in a shooting incident near Quneitra in the Golan Heights (Daily Star, 10/03/2015; 12/03/2015). There were a number of incidents between Hezbollah and Israeli Defence Forces at Shebaa Farms and the Golan Heights in January. 13 were killed, including a UN peacekeeper and a General of the Iranian Revolutionary Guard (UNIFIL/Daily Star, 28/01/2015; NYT, 28/01/2015; Washington Post, 19/01/2015; BBC, 19/01/2015; Middle East Monitor, 21/01/2015).

Bekaa Valley: Along its northern and northeastern border with Syria, Lebanon is engaged in a battle against armed groups reportedly affiliated to IS and JAN. However, analysts estimate that no more than 3,000 IS and JAN fighters are in Syria’s Qalamoun area on the border with Lebanon, which is insufficient to wage a large-scale assault on the country (Stratfor, 03/01/2015; Daily Star, 06/01/2015).

The Lebanese army has maintained a near-daily pattern of attacking militant positions on
Electricity power is scarce as the shortage of surface water has reduced hydroelectric power generation (UNHCR 11/2014).
An increased number of livestock have been crossing from Syria into neighbouring countries and potentially spreading animal diseases (FAO, 17/03/2015).

Livelihoods

700,000 people are in need of livelihood assistance (UNDP, 31/01/2015). An ongoing assessment indicates that 36% of refugees are severely or moderately economically vulnerable (UNHCR, 04/03/2015). 78% of refugee households are not able to generate an income, citing a lack of work as the main issue. Newcomers arriving in 2014 are in general more vulnerable: 39% of refugees surveyed in July were unemployed for over 12 months in Syria before fleeing to Lebanon (UNHCR 09/2014).

88% of the employed are paid 40% less than the minimum wage. Female Syrian workers earn 30% less than male workers (UNHCR 09/2014).

Palestinian refugees from Syria: More than 37% of PRS have reported cash and food aid as their main source of income (UNRWA, 03/2014). The majority of employed PRS cannot rely on wages to ensure a decent standard of living. Only 11% of PRS households were able to rely on previous savings and remittances.

Health and Nutrition

3.3 million people are in need of healthcare (WHO/UNHCR, 31/01/2015). Health services are available, but are costly (WHO, 01/2015). Short opening hours and lack of trained health personnel further limit access.

72% of primary health centres assessed by UNICEF in 2014 lack sufficient essential drugs, 67% lack sufficient medication for chronic diseases, and 49% lack sufficient antibiotics for children (08/2014).

Mental Health

Around 300,000 displaced Syrians are estimated to be most vulnerable to mental health concerns; 60% are women and children (WHO 07/2014). 89% of Syrian youth (18–25 years of age) have described themselves as depressed, anxious, or afraid most of the time (UNFPA; UNHCR 10/2014).

WASH

3.9 million people are in need of WASH assistance (UNICEF/UNHCR, 31/01/2015). As of mid-2014, 33% of refugee households do not have drinking water, compared to 28% in 2013 (VASyR 08/2014; UNHCR 07/2014). In some areas, water shortages can only be addressed through infrastructure projects (UNHCR 09/2014).

WASH conditions are worse for refugees in informal settlements, in difficult-to-access locations in the Bekaa Valley and the north, and PRS (UNHCR 07/2014). Informal settlements have limited or no sanitation facilities.

Approximately 12% of households (twice the percentage in 2013) do not have access to a place for washing. Of those who had access, over 7% were sharing bathrooms and latrines with 15 people or more (VASyR 08/2014).

Only 8% of wastewater in Lebanon is treated, and the increase in the population has led to an 8–14% increase in the amount of wastewater generated (Ministry of Environment; UNHCR 16/12/2014).

Waste management: Waste management remains poor in most places where refugees live. Diminishing funding has reduced waste management activities in Bekaa and the north, and municipalities do not have the capacity to collect (UNHCR 09/2014).

Shelter and NFIs

1.8 million people are in need of shelter assistance (UNHCR, 31/01/2015). 55% of Syrian refugees live in substandard housing, including 38% in insecure dwellings; and 17% in improvised informal settlements (UNHCR 09/2014).

The number of refugees forced to move to tents in informal shelters continues to grow (MSF, 26/01/2015). As of 1 September, 1,392 informal settlements house 186,240 refugees; in June 2012, there were 282 informal settlements (UNHCR 09/2014, 07/2014). Their populations are highly dependent upon assistance and loans (UNHCR/ REACH 11/2014). In Beirut, many Syrian refugees have settled in Palestinian refugee camps, where WASH and shelter conditions are often substandard (IFRC, 03/02/2015).

Palestinian refugees from Syria: The PRS population has increased from 110,000 to 140,000 since 2011: 44,000 are Palestinian refugees from Syria (OCHA 09/2014; 01/2015). PRS households are residing in alarmingly crowded dwellings, with an average of 4.6 persons per bedroom; 8.4 people on average share one bathroom. Most households (71%) reported paying rent for shelter. Slightly over a quarter of households (27%) were hosted free of charge.

Lebanese returnees: At least 20,000 Lebanese nationals had returned from Syria by mid-December (UNDP, UNHCR, 18/12/2014). Assessments indicate that at least 51% of returnees are shelter insecure: 27% live in single-room structures, warehouses, garages, or unfinished buildings; 4% live in informal settlements and collective shelters; 4% are classified as homeless (IOM/OCHA 09/2014; UNHCR 07/2014).

Education

750,000 children are in need of education assistance (UNICEF, UNHCR, 31/01/2015).

According to ILO estimates, 300,000–400,000 refugee children of school age are not being educated (VoA, 23/01/2015). 90,000 Syrian refugee children between the ages of 5 and 17 were enrolled in public schools in 2013/2014. A total of 502,000 school-aged Syrian refugee children in Lebanon (aged 3-18 years) are registered by UNHCR (31/01/2015).

The biggest barrier to schooling is financial. Other obstacles are a lack of awareness of available educational support; a lack of space in public schools; and the cost of transportation. Language barriers and safety concerns contribute to a high drop-out rate among refugee children (REACH 11/2014; UNHCR 09/2014).

Palestinian refugees from Syria: About 6,600 PRS students have enrolled in 60 UNRWA schools for the 2014/2015 school year (UNRWA 03/12/2014). School enrolment rates have
doubled since the previous academic year, to 64%. Enrolment rates are lower for PRS living outside camps, and decrease as children grow older (even within the same household): children aged 13 years and older are facing difficulties adjusting to UNRWA’s Lebanese curriculum, taught in English or French.

Protection

Members of the Lebanese army have committed serious violations, including violations of the rights of detained refugees, evictions, and threats of eviction. 45 Lebanese municipalities have imposed curfews on Syrian refugees since the clashes in Arsal in August, which violate international human rights law and appear to be illegal under Lebanese law (HRW 10/2014). As of February, the Lebanese army has ordered 17,000 refugees in eastern Bekaa Valley to vacate informal tented camps, according to UNHCR, reportedly in an attempt to prevent infiltration by militants (Daily Star, 07/02/2015). Around 4,000 people have already left camps and around 65 sites are believed to be at risk (UNFPA, 28/02/2015).

Statelessness: Stateless refugees in Lebanon include Syrian Kurds who were denaturalised in Syria in 1962. Between March 2011 and August 2014, 34,272 Syrian refugees have been born in Lebanon. 72% do not possess an official birth certificate (UNFPA 30/11/2014). The exact number is difficult to ascertain.

Sexual and Gender-based Violence

The mobility of refugee women in Lebanon is reportedly restricted due to fear of sexual harassment and exploitation (UNFPA 13/08/2014). 25% of survivors of reported SGBV cases are under 18 years of age. A weak legal framework, limited resources, and social barriers prevent refugees at risk of SGBV, or victims, from seeking and receiving adequate protection. Other challenges include lack of documentation and growing tension between refugees and host communities.

There are no official statistics on child marriage, which exists in some areas; but the rate has risen with the influx of Syrian refugees (UNICEF, AFP 08/2014).

Child Protection

Only 30% of Syrian children born in Lebanon have birth certificates (UNHCR 10/11/2014). According to ILO estimates, between 210,000 and 320,000 refugee children of school age who are not in school, are involved in some form of child labour (VoA, 23/01/2015). The main factors that cause children to live or work on the streets are social exclusion, vulnerability of households, the influx of Syrian refugees into Lebanon, as well as organised crime and exploitation of children (ILO et al., 16/02/2015).

The fragile national child protection system, compounded by protracted displacement and a dispersed refugee population, remain the main challenges in addressing refugee child protection risks (UNHCR 31/10/2014).

Mines and ERW

Lebanon has nearly 1,400 confirmed minefields and 520 cluster munitions strike areas, including in areas hosting refugees. In March 2014, refugees were living within 10–20m of known minefields in West Bekaa and Rashaya (Mine Action Group).

On 27 March, eight children were wounded when a landmine exploded in Zebqin, Tyre region (AFP, 27/03/2015).

Updated: 07/04/2015

OCCUPIED PALESTINIAN TERRITORIES

LATEST DEVELOPMENTS

27 March: Only two-thirds of the tax revenue owed to the Palestinian Authority has been returned. PA has refused to accept any funds until it receives the full amount (AFP, 05/04/2015; BBC, 06/03/2015).

KEY CONCERNS

- 1.9 million people need humanitarian assistance; 1.3 million in Gaza and 600,000 in the West Bank (OCHA, 12/02/2015).
- 1.45 million people, or 33% of the people in oPt, are estimated to be food insecure (WFP, 19/12/2014). 868,000 people in Gaza alone require food aid (UNRWA, 05/02/2015).
- 1.4 million people are in need of WASH assistance, particularly access to water (OCHA, 12/02/2014).
- Continuity of medical care is threatened by the financial crisis and electricity shortages in both the West Bank and the Gaza Strip (OCHA).
- The ongoing blockade of the Gaza Strip limits access and movement of both people and goods.

Political Context

The Palestinian reconciliation Government, made up of members of both Hamas and Fatah, was sworn in before President Abbas in June, ending seven years of division (AFP, UN, 02/06/2014). It had a six-month mandate, but no formal announcement regarding the passing of the six months was made (UNRWA, 14/12/2014).

On 27 March, the Palestinian Liberation Organisation ended its security cooperation
On 27 March, the Palestinian Liberation Organisation ended its security cooperation with Israel, in response to the Israeli Government withholding USD 375 million in Palestinian tax revenue (Reuters, 05/03/2015). The Israeli Government announced later the same day that it would release the funds, but only two-thirds was returned, as it claims the Palestinian Authority (PA) has unpaid utility debts (AFP, 27/03/2015). The PA has refused to accept any funds until it receives the full amount. If not, they have threatened to appeal to the International Criminal Court (ICC) (AFP, 05/04/2015; BBC, 06/03/2015).

On 16 January, the ICC launched a preliminary examination of the events of the 50-day war (ICC, 16/01/2015). Palestine became an official member of the ICC on 26 March (AFP, 26/03/2015). The United States and Israel opposed the move, citing that oPt is not a sovereign state.

On 28 February an Egyptian court declared Hamas a terrorist group, increasing tension along the Gaza border (UNRWA, 06/03/2015).

Security Context

64 Palestinians were injured across oPt in the week ending 30 March. 42 were injured at clashes commemorating ‘Land Day’ (OCHA, 31/03/2015).

Gaza

In the week ending 9 March, Israeli forces opened fire on several fishing boats, injuring two and killing one (OCHA, 09/03/2015).

Only USD 135 million out of USD 720 million requested for repairs and rental subsidies has been received, and the slow pace of recovery from Operation Protective Edge, as well as two months of reduced salaries for Palestinian Authority staff, is prompting protests outside UN and international NGO premises (AFP, 28/01/2015; OCHA, 02/03/2015; UNRWA, 06/03/2015).

The growing unrest has been linked to an increase in the number of violent incidents not associated to the conflict (Al Mezan Center for Human Rights, 16/02/2015). During the week ending 6 March, Palestinian militant factions clashed in Beit Lahia, resulting in one man injured (UNRWA, 06/03/2015).

Operation Protective Edge

Israel launched Operation Protective Edge on 8 July 2014, striking Gaza with intensive aerial bombing, aimed at ending cross-border rocket fire. Hamas and Israel agreed to a permanent ceasefire on 26 August (AFP). At least 2,257 people were reported killed, including 539 children: an estimated 1,473 victims were civilians (UNICEF, 02/01/2015). Thousands of structures were destroyed. On the Israeli side, 66 soldiers, and five civilians, including one child, were killed (OCHA, 29/08/2014).

West Bank and East Jerusalem

On 26 March, three Palestinian children were injured during clashes between Palestinian security forces and gunmen in Balata refugee camp near Nablus (AFP, 26/03/2015). On 13 March, Israeli forces opened fire on more than 100 Palestinian protesters at the entrance of Jalazun refugee camp, injuring one Palestinian, (AFP, 13/03/2015). On 6 March, a Palestinian deliberately drove his car into a group of Israeli pedestrians in Jerusalem, injuring six police (BBC, 06/03/2015). Clashes associated with the construction of the West Bank Barrier, or during search and arrest operations, are the most frequent cause of injury and death.

Settler-related Violence

In the week ending 31 March, there was one settler attack on Palestinians resulting in injury or property damage and three Palestinian attacks against settlers which resulted in injuries (OCHA, 31/03/2015). There have been two hit-and-run incidents so far in 2015 (OCHA, 09/02/2015). 184 structures have been demolished and 227 people displaced in 2015 (OCHA, 31/03/2015).

590 buildings were destroyed and 1,177 people displaced in 2014. 330 incidents of settler-related violence resulted in Palestinian casualties or property damage in the West Bank and 237 incidents resulted in Israeli casualties or property damage in 2014 (OCHA, 16/02/2015).

Humanitarian Context and Needs

Access

Border Restrictions

Material for the reconstruction effort in Gaza continues to be restricted and delayed (UNRWA, 31/03/2015).

Egyptian authorities last opened the Rafah crossing in both directions on 9 and 10 March, allowing 649 Palestinians to leave and 477 people to cross into Gaza. It has only opened for 13 days since October 2014 (OCHA, 16/03/2015). 30,000 people are waiting to exit Gaza; 17,000 are registered with the border authority (OCHA, 09/02/2014).

A European Union delegation was denied access to the Gaza Strip by the Israeli authorities in March (UNRWA, 24/03/2015).

Critical Infrastructure

Sewage systems and the electricity grid remain damaged throughout the Gaza Strip (ICRC, 20/02/2015).

Due to fuel shortages and infrastructure restrictions, there continues to be 12 to 18
Security Incidents Involving Aid Workers

Nine UNRWA staff members were killed in July and August (UNRWA, 03/08/2014).

Disasters

On 22 February, 100 people were evacuated because of flash floods in the Gaza Strip (OCHA, 24/02/2015).

Displacement

As of 6 March, 100,000 people remain displaced since the July–August conflict, and are residing in schools or temporary shelters (IFRC, 06/03/2015).

Between 27 January and 2 February, at least 162 Palestinians were displaced in the Jordan Valley and Hebron by the Israeli military, due to their proximity to an Israeli-declared ‘firing zone’ (OCHA, 02/02/2015).

Food Security

1.45 million, or 33% of Palestinians, are food insecure: 57% of the population of Gaza and 19% of the population of the West Bank (WFP, 19/12/2014). 868,000 people in Gaza require food aid (UNRWA, 05/02/2015).

Electricity shortages have impacted food production and refrigeration. Delays at crossings are complicating deliveries. Destruction of tunnels bringing inexpensive goods has also impacted access to food and supplies.

Health and Nutrition

Longstanding shortages of electricity, equipment, and drug supplies persist. Fifty primary health centres and 17 hospitals reported infrastructure damage during the conflict; one hospital and seven clinics were destroyed (OCHA, 04/09/2014; WHO, 05/09/2014).

The health system was already overstretched before the 2014 conflict (WHO, 30/09/2014). In the West Bank, stocks of 150 (of 525) essential medicines were at zero in May; the main government pharmacy in the Gaza Strip reported no stock of 118 (of 481) essential medicines (OCHA, 31/05/2014).

Child Protection

Approximately 30 children were injured by live ammunition in 2015 in as of March (Defence for Children International, 23/03/2015).

Up to 1,500 orphaned children will need sustained physiological and social support (OCHA, 04/09/2014; UNICEF, 02/01/2015).

Detention

In March, Israeli authorities issued administrative detention orders against 121 Palestinian (Palestinian New & Info Agency, 31/03/2015).

WASH

90% of the water in Gaza fails WHO standards for safe drinking water (UNWRA, 24/03/2015). The groundwater level is declining, and the aquifer is infiltrated by seawater and wastewater.

Although solid waste is being collected in most areas, it is being left in temporary sites rather than dumped in designated landfills.

Shelter

16,000 new housing units are needed to replace homes destroyed during Operation Protective Edge or which were rendered uninhabitable (Washington Post, 31/03/2015). To date, UNRWA has only received funding to reconstruct 200 (UNRWA, 24/03/2015).

Education

The last of the 83 schools damaged or destroyed has been restored (UNRWA, 24/03/2015). 90% of the 252 UNRWA schools in Gaza run on a double shift basis, and some on triple shifts, affecting some 400,000 students (UNRWA, 29/01/2015; OCHA, 12/02/2015).

Protection

18,000 Palestinians live in or near the 18% of the West Bank designated by the Israeli authorities as “firing zones”, areas of land claimed by the Israeli military for training and security purposes. Palestinians who live in these zones face severe access restrictions, recurrent demolition, and incidents of forced displacement and home demolition (OCHA, 12/01/2015). Most of the around 7,000 Palestinian Bedouins and herders, some 60% of them children, have demolition orders pending against their homes, and over 85% lack connection to the electricity and water networks. (OCHA, 23/09/2014).

Child Health

300,000 children are in need of direct and specialised psychosocial support in the Gaza Strip (UNICEF, 26/02/2015).
On 7 and 8 March four Palestinians were injured by ERW in separate incidences in Gaza in Rafah and Nuseirat (UNRWA, 12/03/2015). On 1 March, a Palestinian was killed and his brother injured by ERW east Rafah, Gaza OCHA, 02/03/2015). From January to February, ERW related incidents killed one and wounded 6 Palestinians, most of whom were children (AFP, 26/02/2015; UNICEF, 24/02/2015).

It is estimated that more than 1,900 ERW have yet to be secured (UNRWA, 23/09/2014). In 2014, ERW killed 31 civilians and injured ten in Gaza, and injured 18 in the West Bank (UNICEF, 23/10/2014; 27/10/2014; OCHA, 02/02/2015).

Journalists

It has been alleged that an increasing number of journalists are being targeted and injured by Israeli forces during clashes. Rubber bullet and live ammunition has been used. It is allegedly due to a policy change. Palestinian journalists have been the most affected (AFP, 08/04/2015).

Updated: 08/04/2015

PAKISTAN CONFLICT, FLOODS, DISPLACEMENT, EARTHQUAKE

OVERVIEW

Priority humanitarian needs are health, nutrition, and food assistance. The security situation remains volatile due to militant attacks in urban centres and military operations against the Taliban in the tribal areas.

Political Context

Opposition protests demanding a probe into allegations of vote rigging by Prime Minister Nawaz Sharif began in mid-August, led by Imran Khan’s Pakistan Tehreek-e-Insaf (PTI) and Tahirul Qadri’s Pakistan Awami Tehreek (PAT) (AFP, 10/12/2014). The PTI called off its opposition campaign following the 16 December attack on a school in Peshawar but warned of further protests (local media, 30/01/2015). The situation has remained calm since.

Security Context

Militant attacks have continued in the first quarter of 2015, including in Balochistan, while sectarian violence is mounting against Shi’ites, especially in Sindh. Government military operations in tribal areas have escalated, notably since the Taliban attack on an army-run school in Khyber Pakhtunkhwa on 16 December that killed 141 people, in retaliation for government operations in the region (ICG, 05/01/2015; BBC News, 17/12/2014). In March, militant attacks declined by 23% compared to February, with up to half taking place in FATA (DAWN, 02/04/2015; ACLED, 26/03/2015).

On 21 January three Islamic State (IS) recruiters were arrested in Lahore, raising fears of an IS infiltration in the region (Le Monde, 21/01/2015). In early September, a new branch of Al Qaeda was announced, covering Pakistan (Financial Times, 03/09/2014).

1,781 civilians were killed in terrorist violence in Pakistan in 2014, compared to 3,001 in 2013 (SATP, 01/01/2015).

Federrally Administered Tribal Areas (FATA) and Khyber Pakhtunkhwa

In June 2014, the Taliban vowed to start an all-out war against the Government, and the Government launched operation Zarb-e-Azb in North Waziristan Agency. A second operation began on 18 October in Khyber Agency, and was expanded mid-March to cover Landi Kotal, Jamrud and Bara districts. The military claims to have cleared two-thirds of the tribal regions (local media, 30/03/2015; 23/03/2015).

Three people were killed, including two children, after a bomb concealed inside a toy went off in the Swat Valley in Khyber Pakhtunkhwa on 17 March (AFP, 17/03/2015). A blast in Kurram Agency on 15 February killed one and injured 14 (DAWN, 15/02/2015). A Taliban attack targeting a Shi’ite mosque in Peshawar on 13 February killed at least 16 people and injured a further 62 (AFP, 13/02/2015).

Balochistan
The United Baloch Front (UBF) has opposed the alleged annexation of Balochistan since 1948. 2014 saw a sharp rise in acts of violence, but violence seems to have reduced in 2015. Attacks by Islamist armed groups are also a problem in the state.

One person was killed and one severely injured by a landmine explosion and an attack in Kech district on 11 March. Both attacks were reportedly targeting military administrative staff (DAWN, 11/03/2015). An explosion in Chaman – one of the two main crossing-points for supplies to international troops fighting the Taliban in Afghanistan – killed one and wounded seven on 24 February; another explosion on 22 February killed one and wounded six (DAWN, 24/02/2015; AFP, 22/02/2015).

Sindh

Extremist groups are increasingly active in the central and northern districts of Sindh, and sectarian violence against Shi’ites is mounting (USIP, 26/01/2015). Two people were killed and 13 wounded in an explosion targeting police in Karachi on 27 March (DAWN, 27/03/2015). An explosion targeting a Shi’ite mosque killed at least two people and wounded another seven in Karachi on 20 March (AFP, 20/03/2015). A bombing targeting a Shi’ite mosque in Shikarpur on 30 January killed more than 60 people (AFP, 30/01/2015).

Punjab

17 people were killed and more than 70 injured in twin Taliban suicide attacks on churches in Lahore in Punjab on 15 March, sparking protests which led to three more deaths, including two suspected militants (AFP, 16/03/2015). A Taliban attack near police headquarters in Lahore on 17 February killed five and injured 17; the attack was in retaliation for the execution of imprisoned Taliban members (AFP, 17/02/2015).

Islamabad

At least three people were killed and two others injured in an attack on a Shi’ite mosque in Islamabad on 18 February (AFP, 18/02/2015).

Humanitarian Context and Needs

Access

Access in Balochistan remains challenging due to insecurity (ECHO, 20/10/2014).

Security Incidents Involving Aid Workers

An explosion in South Waziristan on 4 April killed two bomb disposal technicians (local media, 06/04/2015). At least three peace volunteers were killed and a further two injured on 2 February in a bomb blast in Tirah Valley in Khyber Agency (DAWN, 03/02/2015).

A member of a polio vaccination team and a police guard were killed on 17 March during a vaccination campaign in Sheikhabad in Balochistan (AFP, 17/03/2015). Five people were killed in attacks on polio vaccination teams in Balochistan in February (AFP, 18/02/2015; AFP, 04/02/2015; DAWN, 05/02/2015). Three polio workers were attacked in January, including two killed (OCHA, 03/03/2015).

By November, 79 aid workers had been attacked in 2014 in 71 incidents mostly in Khyber Pakhtunkhwa, FATA, and Sindh, 51 of which were linked to polio (OCHA, 30/11/2014).

Disasters

Drought

As of 23 March, 211 children have died from malnutrition in Thar in 2015, as the area continues to suffer food shortages due to chronic drought conditions (local media, 23/03/2015). The drought situation is expected to worsen in the coming months (Government, 19/03/2015).

Drought in Tharparkar affected nearly 1.74 million people (259,946 families) in 2014 and killed 650, mostly children. Many families have migrated (USAID, 04/12/2014; Inter Press Service, 03/01/2015; DAWN, 16/02/2015). 50,585 hectares have been damaged in Dadu district, affecting around 50,000 people (DAWN, 21/01/2015).

Rains and Storms

Heavy rainfall affected northern and eastern Pakistan end February, disrupting transportation, electricity, and communication networks, and causing damage to buildings. At 3 March, 32 people had been killed and several others injured (ECHO, 03/03/2015). Another person was killed, ten were injured, and 350 left homeless by heavy rains and snowfall in Balochistan on 14 March (Local Media, 16/03/2015).

Five people were killed and 11 injured in rain-related accidents in Shikarpur in Sindh on 3 April (DAWN, 03/04/2015).

Strong winds and a hailstorm in Khyber Pakhtunkhwa and FATA killed four people and injured a six on 2 April.

A landslide near an Afghan refugee camp in Quetta, Balochistan, killed four the same day (DAWN, 02/04/2015).

Displacement

IDPs

As of 31 March, there were nearly 1.9 million IDPs (284,240 families) in FATA and Khyber Pakhtunkhwa, half of whom were displaced by the 2014 military operations. 30% of IDP families are in Bannu (85,730), another 27% in Peshawar (78,230), and 15% in Dera Ismail Khan (44,210). 3% are in three IDP camps in Khyber, Orakzai, and Kurram agencies in FATA (UNHCR, 31/03/2015). Lack of identification documents, education facilities and psychological support were reported as priority needs, according to a 2014 assessment (Protection Cluster, 31/12/2014).

Refugees in Pakistan
Returns of undocumented Afghans from Pakistan have increased in 2015 following security incidents in Pakistan, particularly the Taliban attack in Peshawar in December. As of 23 March, 55,000 undocumented Afghans had returned home in 2015 via the Torkham border crossing, twice as many as in all 2014, including 19,000 who have reportedly been deported (local media, 30/03/2015; 23/03/2015).

354,670 Afghans are registered as refugees in Pakistan as of end March (local media, 30/03/2015; 23/03/2015). At end December, 1.5 million Afghan refugees were estimated to live in Pakistan, mostly in Khyber Pakhtunkhwa, although numbers are difficult to ascertain. The majority live in host communities (UNHCR, 29/12/2014; 01/11/2014).

Returnees

The phased return of people displaced in FATA started mid-March. As of 31 March, more than 79,000 IDPs had returned to their areas of origin, including 57,360 to Khyber Agency, and 21,700 to South Waziristan (UNHCR, 31/03/2015). The return of 18,000 families from Mir Ali in North Waziristan began on 31 March and is expected to last until 24 April. Returning families require reconstruction support (DAWN, 31/03/2015; local media, 23/03/2015). A FATA Sustainable Return and Rehabilitation Strategy has been put into place for the first time to ensure safe and sustainable returns of IDPs (UN, 07/04/2015).

Pakistani Refugees in Neighbouring Countries

At 11 March, nearly 254,550 refugees (36,511 families) from Pakistan had arrived in Afghanistan’s Ghost and Paktika provinces since mid-June 2014 (UNHCR, 11/03/2015).

Food Security

1.83 million people are in need of food assistance (Food Security Cluster, 04/02/2015). Economic access to food continues to be the main limitation to household food security. Households in Tharparkar and surrounding districts in Sindh continue to be severely affected by persistent drought; they were in Emergency food insecurity (IPC Phase 4) at November (FAO, 20/03/2015; USAID, 04/11/2014).

According to the March–May 2014 IPC food assessment, 12 districts and agencies are in Emergency (IPC Phase 4) food security, including Tharparkar, parts of Balochistan, and parts of FATA, and 35 in Crisis (IPC Phase 3) (WFP, 31/12/2014).

Displaced populations in FATA are also still vulnerable due to insecurity (FAO, 20/03/2015). Most conflict-related IDPs rely on negative coping mechanisms and require support (ECHO, 20/10/2014).

Health and Nutrition

1.1 million people, including displaced populations, are in need of basic health and quality maternal and child health services (OCHA, 31/01/2015). The influx of IDPs has severely strained health facilities and the lack of medical staff to provide care for displaced women is a critical challenge (UN Population Fund, 03/10/2014). Concerns are rising over shortages of vaccines against tuberculosis (DAWN, 26/02/2015).

Polio

20 new polio cases have been reported so far in 2015 from Balochistan, Khyber Pakhtunkhwa, South Waziristan, and Sindh (local media, 23/03/2015).

Polio workers in Khyber Pakhtunkhwa warned that they would boycott an anti-polio campaign if their salaries, which have been withheld for several months, were not paid by 10 April (DAWN, 07/04/2015).

Over 16,400 families across the country refused to get their children vaccinated and 610,333 children were missed during the first two days of the third round of the 2015 National Polio Campaign initiated on 16 March (DAWN, 19/03/2015).

297 wild polio cases were reported in 2014 in Pakistan, from FATA, Khyber Pakhtunkhwa, Sindh, Balochistan, and Punjab; the previous peak was 199 cases in 2000 (Global Polio Eradication Initiative, 15/01/2015; DAWN, 01/01/2015).

Nutrition

An estimated 2.86 million children and pregnant and breastfeeding women are undernourished in Pakistan, including one million IDPs (OCHA, 31/01/2015). In Sindh, 1.1 million children under five are acutely malnourished; 400,000 of them are suffering from SAM (ECHO, 20/10/2014). In Dadu district, Sindh, 3.8% of children under five were found to suffer from severe acute malnutrition in December 2014 (ACF, 03/02/2015).

In Balochistan, maternal mortality rates have been increasing due to malnourishment and anaemia (DAWN, 29/11/2014).

WASH

1.1 million people are in need of WASH, including 500,000 IDPs (OCHA, 31/01/2015). Over 80% of water resources in Pakistan’s southern Tharparkar district have become unsafe for drinking due to the drought (Reuters, 02/02/2015).

Shelter and NFIs

1.1 million people are in need of emergency shelter, including 530,000 IDPs (OCHA, 31/01/2015). Inadequate shelter services, overcrowding, harsh weather conditions, and high rental charges are key challenges for the displaced (OCHA, 15/08/2014). 50% of the population in Tirah valley in FATA has been living in makeshift shelters after having been displaced in 2013 (IOM, 14/11/2014).

Education

450,000 children are in need of education, including 205,000 displaced children. Educational supplies are a major gap in the education response (OCHA, 31/01/2015).

Almost 275 schools in Khyber Pakhtunkhwa are non-functional, including 40 in Mansehra and 37 in Swat districts, due to lack of staff, land disputes, and security issues. Around
33% of children in Balochistan are also out of school (DAWN, 13/03/2015; 20/02/2015). The majority of school-aged Afghan refugees in camps in Pakistan are unable to attend school after sixth grade due to lack of means to attend private schools (Inter Press Service, 22/12/2014).

Protection

An estimated 1.08 million people are in need of protection, including 500,000 displaced people. This group largely consists of IDPs and returnees in KP and FATA. Women, children, the disabled, and the elderly need referral assistance and specialised protection in displacement and returnee areas (OCHA, 31/01/2015).

Gender-based violence (SGBV)

421 incidents of violence involving 534 women and girls were reported in Karachi province during the third quarter of the year (DAWN, 11/10/2014). In areas where the Taliban is active, over 500 girls’ schools have been bombed. In the south and southwest of the country, ethnic violence continues to curtail women’s freedom of movement.

Updated: 08/04/2015

INDIA INTERNAL UNREST, FLOODS

LATEST DEVELOPMENTS

4 April: A landmine explosion at the Line of Control in Jammu and Kashmir’s Rajouri district killed three civilians and injured one (Government).

KEY CONCERNS

- Landslides and floods triggered by heavy monsoon rains in Jammu and Kashmir affected 1.9 million people and left 67,934 left homeless in September. Cyclone Hud Hud in October left close to 1 million people affected. In March 2015, fresh landslides are again have affected the area, causing the destruction of buildings and evacuations (Times of India, 30/09/2014; OCHA, 20/10/2014; Government, 30/03/2015).

- Over 33,877 cases of swine flu and 2,044 deaths have been confirmed since an outbreak began in mid-December (international media, 30/03/2015).

For more information, visit the ACAPS country analysis page.

Political Context

Despite general stability, pockets of the country experience insecurity and conflict. The Government of India, the Government of Pakistan, and Kashmiri insurgent groups have fought over control of the disputed region of Kashmir since the Indo-Pakistan War. Pakistan controls the northwest portion, India controls the central and southern portion and Ladakh, and China controls the northeastern portion (Aksai Chin and Trans-Karakoram Tract). Although thousands have died as a result of this conflict, the situation has become less deadly in recent years. UNHCR-supported elections in 2008 resulted in the creation of a pro-India Jammu and Kashmir National Conference, which formed a state government.

Security Context

Kashmir

Between August 2014 and January 2015, cross-border fighting between India and Pakistan left 23 dead, a majority of them civilians (AFP, 08/10/2014, 29/10/2014, 27/11/2014, 03/01/2015). More than 10,000 villagers were displaced in Samba and Kathua districts in Jammu and Kashmir, seeking refuge in Hariachak, Hiranagar, Plat, Kanha, Baniyari, and Chadwal (Times of India, 07/01/2014).

Humanitarian Context and Needs

Disasters

Avalanche

An avalanche triggered by heavy snowfall in Ladakh region, Kashmir, on 4 April killed four soldiers travelling through the Changla Pass (AFP, 04/04/2015).

Drought

Nine million farmers have been affected by drought in Maharashtra, particularly Marathwada and Vidarbha regions, following a delayed and inadequate monsoon season (Times of India, 06/02/2015).

Floods

Heavy rainfall in late March has caused landslides in Kashmir. According to local police, about 1,450 residents have been evacuated to safety (ACT Alliance, 01/04/2015; local media, 02/04/2015). As of 31 March, 17 people have been killed (local media, 31/03/2015). Access is reportedly very difficult as some roads have been destroyed (AFP, 30/03/2015).

Rain, lightning, and hailstorms killed 14 people and damaged crops in several areas of North India on 15 March, mainly in Rajasthan (Government, 15/03/2015).

In September, more than 1.9 million people were directly affected by flooding in Jammu and Kashmir (Caritas India, 25/09/2014). In October, severe cyclonic storm Hud Hud made landfall on India’s east coast. 920,000 people were affected, 41,200 houses and buildings were damaged in Andhra Pradesh, south Odisha, and Chhattisgarh (OCHA, 20/10/2014).

Health and Nutrition
As of 29 March, more than 33,877 cases of swine flu have been confirmed; 2,044 people have died since the outbreak began in mid-December. 6,507 cases, including 430 deaths have been reported in Gujarat, and 6,507 cases and 430 deaths in Rajasthan (international media, 30/03/2015). As of 2 March, 2,999 cases had been confirmed in Delhi (international media, 02/03/2015). Public gatherings in Ahmedabad, the largest city in Gujarat, have been restricted (local media, 25/03/2015). Government restrictions and licensing issues have made it difficult for hospitals to obtain adequate quantities of antivirals (Al Jazeera, 23/02/2015).

Protection

A landmine explosion on 4 April in the Line of Control in Jammu and Kashmir’s Rajouri district, killing three civilians and injuring one other (Government, 04/04/2015).

Updated: 08/04/2015

JORDAN DISPLACEMENT

LATEST DEVELOPMENTS

6 April: The health situation of Syrian refugees living outside camps is deteriorating. Maternal health is of particular concern, with half of pregnant women unable to afford antenatal care, and 60% of new mothers unable to afford postnatal care (CARE).

31 March: The population of Azraq camp in Zarqa rose to 16,900 at end March (UN).

KEY CONCERNS

- 627,300 Syrian refugees (UNHCR, 26/03/2015). Another 100,000–200,000 may be unregistered (PI, 12/11/2014).

- Syrians continue to face increasing difficulty accessing Jordan. Official border points have closed or become inaccessible, and entry restrictions have increased (RRP6, 2014-2015).

- Since early 2014, a more rigorous approach to the encampment policy of Syrian refugees has reportedly been implemented (PI, 08/01/2014).

- An estimated 52,000 other refugees are registered with UNHCR, mostly Iraqis (UNHCR, 15/03/2015).

Security Context

Concerns over spiralling crises in Iraq and Syria and extremist infiltration have increased since Jordan joined the US-led airstrikes against Islamic State in September, and reinforced its participation since the assassination of a captured Jordanian pilot on 3 February. Jordan may increasingly be the target of asymmetrical attacks against its civilians or security services, and social divisions amplify (ISW, 19/02/2015; Al Jazeera, 12/02/2015).

Jordan has a substantial home-grown extremist movement. Thousands of Jordanians are reportedly fighting for opposition groups with links to Al Qaeda, particularly Jabhat al Nusra (JAN) and IS, despite the military’s tight control of cross-border movements (NYT, 12/04/2014). The country is also home to several prominent extremist religious leaders of an older generation, linked to Al Qaeda ideology and who generally support JAN (Al Jazeera, 07/07/2014). Jordan has increased pressure on the Muslim Brotherhood, arresting one of its prominent leaders in November (Jordan Times, 22/11/2014).

Social tensions between refugees and host communities are a concern, primarily due to a sense of competition over housing, jobs, and assistance (Mercy Corps, 12/2014). Despite few notable incidents, refugees report widespread discrimination and harassment (The Guardian, 01/12/2014).

Humanitarian Context and Needs

The influx of Syrian refugees has placed significant additional stress on Jordan's already-strained public services. Public health and education services, which Syrians can access, are particularly affected, and water infrastructure, waste collection, and the cost to the national budget of subsidised goods are significant issues (Government, 12/2014).

Access

International NGOs working in Jordan are required to get all projects approved by the Government, and frustration persists among NGOs about the lengthy approval process, and lack of clear guidelines. Aid agencies assisting Syrians also need to include vulnerable Jordanians as 30% of their beneficiaries; some have faced pressure to increase this proportion to 50% (PI, 06/2014).

Tension between humanitarian agencies and the Government may increase, as the Jordan Response Plan (JRP) 2015–16 attempts to channel the bulk of international assistance to Syrians through government institutions, rather than humanitarian actors (JRP, 12/2014). At 17 March, only 5.5% of the funding for the JRP has been secured (Government, 17/03/2015).

Displacement

Syrian Refugees

As of 26 March, 627,300 Syrian refugees were registered with UNHCR in Jordan; 52% are children. Around 84% live in urban areas and the remainder in three camps (UNHCR, 26/03/2015; 14/03/2015). Another 100,000–200,000 refugees may be unregistered (PI, 12/11/2014). Nearly 1,430 Syrian refugees have reportedly arrived in Jordan between 10 and 19 March, increasingly from Dara’a governorate in Syria, which has witnessed a surge in fighting. On average, 250 Syrian refugees arrived daily between 15 and 19 March, a significant increase on recent months. The refugees have been transferred to camps
76,000 Syrian refugees have reportedly returned to their country since the beginning of the crisis (Jordan Times, 10/02/2015).

Palestinian Refugees from Syria (PRS)

UNRWA records 14,736 PRS who have approached the agency for support since the start of the Syrian conflict (UNRWA, 03/12/2014). 183 PRS, along with a similar number of Syrians, are held in the Cyber City facility near Ramtha, a government-appointed holding facility for Palestinian and Syrian refugees; this number has dropped from 201 at the start of October (UNRWA, 18/11/2014, 28/10/2014, 03/10/2014).

Since late 2012, the Government has explicitly stated that it would not allow PRS to enter Jordan. Those who do enter are subject to a number of protection issues, including refoulement, confiscation of documents and, for those with Jordanian citizenship, de-nationalisation (HRW 05/2014, 04/07/2012). UNRWA reports 106 cases of PRS deported in 2014, a 40% increase on 2013, but warns the actual number of deportations is likely much higher (UNRWA, 03/12/2014).

Non-Syrian Refugees

As of 15 March, UNHCR had registered around 52,000 refugees, including more than 46,000 Iraqis (UNHCR, 15/03/2015). A surge in the registration of Iraqi refugees was reported between September and December 2014, but new registration numbers have significantly decreased in 2015; no reason is known for the decrease (UNHCR, 23/09/2014; PI, 11/03/2015).

Food Security

In October 2014, WFP began to replace blanket food distribution with targeted distributions, and cut assistance to 37,000 urban refugees (WFP, 11/11/2014, CFSME, 07/08/2014). Of more than 6,400 appeals received so far, 847 have been approved, and 216 rejected; 29% of households will likely be re-included for assistance following their appeals (UNHCR, 13/01/2015; 10/03/2015).

Further changes will begin in April due to funding constraints. An additional 34,000 people living above Jordan's absolute poverty line will be removed from assistance; 239,000 living between the absolute and abject poverty lines will see the value of their food vouchers reduced from USD 18/person/month to USD 14; for the nearly 180,000 refugees living under the Jordan abject poverty line, assistance will be increased from USD 18/person/month to USD 28 (WFP, 19/03/2015).

Livelihoods

One in five Syrians in Jordan is supported by the social safety network (Government, 17/03/2015). Two in three refugee households live below the poverty line in Jordan. With an average expenditure 1.6 times greater than income, refugees increasingly resort to a range of coping strategies (UNHCR, 15/01/2015; UNICEF, 10/03/2015). Up to 87% of refugee families living outside camps in Jordan are in debt (UNHCR, 30/11/2014). 18% of the 3,300 beggars arrested in Jordan in 2014 were Syrian refugees (Jordan Times, 18/03/2015).

Health and Nutrition

The Government decision to halt free access to health services for refugees in November 2014 has led to a marked reduction in Syrians accessing such services, and increased returns to camps to receive healthcare. Three in ten families could not access health services when needed in the between October and March due to financial reasons. Maternal health is of particular concern: half of pregnant women were unable to afford antenatal care, and 60% of new mothers could not afford postnatal care (CARE, 06/04/2015). Mental health services, including severe emotional disorders, and lack of vaccination among many Syrian children are also of particular concern (IMC, 16/03/2015; UNHCR, 10/03/2015).

Shelter and NFIs

Refugees in Host Communities

Most of the 83% of Syrian refugees living outside camps are concentrated around the major urban areas of the northwest, such as Amman and Irbid. While 91% are renting homes, over half live in substandard shelter, and many are struggling to pay the bills.

A June 2014 REACH assessment found that the number of ITS in Mafraq increased fourfold December 2013 – June 2014; the number of ITS inhabitants more than doubled (REACH, 02/10/2014).

An urban verification exercise, which requires biometric registration of all Syrians outside camps and the reissuing of key documents, has been ongoing since 15 February. Non-participation could affect refugees’ legal status and limit their access to government services, although the impact on refugees’ access to protection is yet unknown (UNHCR, 10/03/2015; PI, 24/02/2015).

Zaatari camp hosts about 83,615 refugees (UN, 31/03/2015). At the beginning of 2015, significant numbers of refugees have been returning to the camp from urban areas, probably linked to the onset of cold weather and cuts to food and health assistance in urban areas. Since the camp was established in 2012, at least 320,000 refugees have left it through both official and unofficial channels (including returns to Syria).

An increasing number of refugees arrived in Azraq camp in Zarqa at the end of March, with the population rising by nearly 22% between 15 and 31 March, to 16,900 refugees (UN, 31/03/2015). There are also 5,110 refugees in the Emirati-Jordanian Camp (EJC). The EJC has received extensive support, primarily from the UAE Red Crescent; however, refugees have complained about limited freedom of movement in the camp (UNHCR, 15/03/2015; Financial Times, 2014).
While Jordan has an effective public water system, reports suggest these facilities are under significant strain in areas with high concentrations of Syrians. The per capita water share in the northern governorates has dropped from 110 litres/day to 84 litres (Government, 17/03/2015). Municipal sewage and garbage removal services are also under stress (REACH, 12/11/2014). Two out of five Syrian refugees live in poor sanitary conditions; people in informal shelters are particularly affected (UNHCR, 14/01/2015).

Education

59% of the roughly 220,000 Syrian school-aged children in Jordan are enrolled in the public school system. An additional 30,000 are attending informal forms of education, while the remaining 60,000 are not attending any form of education (UNICEF, 19/03/2015).

Barriers to attendance include distance, overcrowding, violence in schools, and harassment and violence on the way to schools (in both camps and urban areas) (IMC-UNICEF, 09/12/2014, REACH, 04/11/2014). A small proportion of children are reported not to attend because they need to work to support their families.

37.5% of Iraqi refugees were not enrolled in schools in 2014, and non-attendance was reported among 40% of those enrolled, mostly for financial reasons, fear of bullying, and level differences (UNHCR, 31/01/2015).

Protection

Entry restrictions

The average number of Syrians able to enter Jordan on a daily basis has significantly dropped since 2013 (RRP6, 2014–2015). The number and accessibility of entry points has been limited, and entry restrictions have increased, forcing Syrians to travel to remote informal crossing-points in the eastern desert (ICM, 2014). The border crossing leading to Syria’s Dar’a governorate was closed in March for reasons of insecurity (AFP, 01/04/2015).

There has been increasing evidence in the second part of 2014 that the Government is returning screened refugees to Syria. Jordanian officials maintain that the border is open to refugees, and that Jordan is simply instituting security measures to exclude people connected to “terrorist organisations” (Al Ghad, 14/12/2014; Jordan Times, 11/12/2014). Numbers are hard to estimate. The most vulnerable refugees likely include those without identity documents, or with forged documents, and those who had previously returned to Syria (PI, 29/09/2014).

Encampment

Since early 2014, the Government appears to be implementing a more rigorous approach to its encampment policy of Syrian refugees. Significant numbers of refugees are being forcibly returned to camps (NRC-IRC, 13/11/2014, PI, 03/12/2014, 12/11/2014).

Refugees living in urban areas are required to obtain a service card from the Ministry of Interior in order to access public health and education services, or register marriages, births or deaths. The Government has instructed humanitarian agencies not to provide assistance to Syrians who do not have service cards. There is no sign this decision has been enforced, but it creates a vulnerability (PI, 08/01/2014, 03/12/2014).

Refugees in camps and who wish to move to urban areas must obtain “bail” from the government. However, large numbers of refugees have left the camps without obtaining bail. The Government has asked UNHCR not to issue asylum-seeker certificates to Syrians in urban areas who left the camp after 14 July 2014 and who did not obtain bail (PI 16/07/2014 R1, PI 07/2014 R1). These requests may impact refugees’ ability to maintain regular status and access services.

Child Protection

There are reports of recruitment of child soldiers in Syrian refugee camps in Jordan (Norwegian Peacebuilding Resource Centre, 16/02/2015).

Women and Girls

In the first quarter of 2014, about 32% of all registered Syrian marriages were classified as early marriages, compared to 25% in 2013 and 11% in 2011. Early marriage is perceived as a form of security among Syrian refugees, but also as a way to circumnavigate government restrictions, such as the bailout rules in camps (which require a close relative for sponsorship).

Updated: 08/04/2015

MYANMAR INTERNAL UNREST, FLOODS, DISPLACEMENT

KEY CONCERNS

- Repeated bloodshed between Buddhists and Muslims in Rakhine state since 2012, with human rights abuses reported against the Muslim minority (UN).
- 244,000 IDPs, resulting from years of internal conflict, including mainly Rohingya Muslim 146,400 IDPs in Rakhine state (OCHA, 27/02/2014).

Political Context

Myanmar’s first democratic elections in 25 years are scheduled for October or November 2015 (local media, 21/10/2014). Foreign observers will be invited to monitor the election (Reuters, 24/03/2015). On 12 February, the President approved a law allowing a referendum on changes to the constitution. This move could lift Suu Kyi’s ban from the presidency (Reuters, 12/02/2015). Unprecedented talks were held between President Thein Sein and his political rivals, including Aung San Suu Kyi, as well as senior military and election officials, in 2014. Nonetheless, local activists report that the prosecution of
dissidents continues (HRW, 17/10/2014).

Peace Negotiations

In 2013, the Government made peace deals with a number of ethnic groups involved in armed insurgency, with the exception of the Kachin Independence Army (the armed wing of the Kachin Independence Organisation, or KIO), and the ethnic Ta’ang army (TNLA). On 12 February, four ethnic armed groups signed a Deed of Commitment for Peace and National Reconciliation, agreeing to build a union based on democratic and federal principles and a nationwide ceasefire, ahead of the 2015 elections (local media, 13/01/2015).

On 17 March, the KIO met with the President and affirmed its commitment to the ongoing peace process (Government, 17/03/2015).

Security Context

Despite peace negotiations, the security situation remains tense in parts of Myanmar. The Government came under criticism in October 2014, for what has been perceived as a series of offensives against ethnic armed groups in Kachin, Karen, Mon, and Shan states (local media, 20/10/2014). In early December, the United Nationalities Federal Council, the largest coalition of ethnic armed organisations, announced the establishment of the Federal Union Army, an umbrella group that has been trying to negotiate a nationwide ceasefire between ethnic minorities and the national military. It is unclear if this establishment will help or hinder the peace process (VoA, 02/12/2014).

In the west, massive human rights infringements against the Rohingya Muslim minority in Rakhine state continue to be reported.

Kachin State

The KIO still has administrative control over several key areas of Kachin, and there are intermittent clashes between its army, the KIA, and the Myanmar army (local media, 06/10/2014). On 15 January, there was fighting in the area of Hpakan (KIA took the state transport minister and three police hostage, releasing them on 20 January (AFP, 15/01/2015; local media, 20/01/2015). On 26 January, a bomb exploded in Hpakan township, injuring two people. No group has yet claimed responsibility for the attack (local media, 27/01/2014). There were reports of shelling by government forces near Laiza and Mai Ja Yang in November 2014 (OCHA, 24/11/2014). An attack on a KIA camp near Laiza killed 23 members of militias affiliated to the KIA (local media, 28/11/2014).

Kayah State

According to reports from early December by local activists, government military forces have been expanding their presence in Kayah state by various measures, including the confiscation of land (local media, 08/12/2014).

Kayin and Mon States

In November, fighting between a Karen armed group and the military displaced 700 people (WFP, 15/11/2014). Fighting in October reportedly displaced 2,000 people towards Thailand (local media, 08/11/2014). In September, in some of the worst fighting since 2012, mortar fire and rocket-propelled grenades were reported in Mon state’s Kyaimayaw township and near Kayin state’s Myawaddy town (local media, 29/09/2014).

 Shan State

Fighting broke out in early February between Myanmar’s army and Myanmar National Democratic Alliance Army (MNDAA), an insurgent group in Kokang area of Shan state, near the Chinese border, displaced tens of thousands of people (AFP, 10/02/2015; Radio Free Asia, 23/02/2015).

On 18 February, the President declared a 90-day state of emergency and imposed martial law in the Kokang region. This is the first time military rule has been invoked under Myanmar’s 2008 constitution (Reuters, 18/02/2015; AP, 21/02/2015). Other groups have joined the fight, including the KIA, the Ta’ang National Liberation Army, the Arakan Army and the Shan State Army-North, as well as former Chinese soldiers (Deutsche Welle, 13/02/2014; Al Jazeera, 21/02/2015). 61 soldiers from Myanmar’s military and more than 70 MNDAA soldiers were reported dead on 21 February (international media, 21/02/2015). A prison convoy was attacked, injuring 45 (AFP, 24/02/2015). On 10 March, two children and more than 10 people were injured after a shell exploded at a crowded market in Laukkai (Radio Free Asia, 10/03/2015). The conflict has spilled over across the border in China, with warplanes from Myanmar killing four people and injuring nine others in China. Both parties blame each other for the incident. China’s air force is patrolling the border (Radio Free Asia, 14/03/2015).

Prior to the most recent fighting, clashes between the same parties had been reported in July, October and December 2014. In 2009, serious clashes between MNDAA and the army almost wiped out the MNDAA (Deutsche Welle, 13/02/2015).

On 28 February, fighting broke out after a member of Shan State Army-South (SSA-S) accused government troops of staging an attack on the SSA-S base in Mauk Mae township. No casualties were reported. The SSA-S was a signatory to February’s the Deed of Commitment for Peace and National Reconciliation (local media, 03/03/2015).

Humanitarian Context and Needs

Access

According to local NGOs, the delivery of aid to conflict-affected communities in remote areas within Shan and Kachin states is hampered by the categorisation of some areas as “black zones” by the Myanmar army, restricting foreign groups’ access (IRIN, 08/10/2014). Insecurity also impedes access.

Kachin state: There has been no cross-line humanitarian assistance to non-government-controlled areas in Kachin state since September, due to the volatile security situation and delays in government authorisation – more than 50,000 IDPs are living in camps under KIO management (local media, 05/12/2014).

Rakhine state: Access to services is impeded by tension and restrictions on freedom of
movement. As of mid-July 2014, a vulnerability mapping exercise showed that 36,000
Rohingya Muslims in 113 isolated villages in Rakhine state have no or limited access to
basic services, including markets, education, and healthcare (OCHA). Buddhist Rakhine
activists and politicians have campaigned to restrict healthcare and other aid for Rohingya.

International media reports from the end of July indicate that access to northern Rakhine
state along the Myanmar–Bangladesh border is tightly restricted. NGOs and UN agencies
say the limited space allocated to them in Sittwe’s Southern Quarter is a key constraint to
operating at full capacity (USAID 02/07/2014).

Shan state: Roadblocks and border closures are restricting the movement of civilians
fleeing fighting between government troops and MNDA. Chinese government officials
have increased border controls (Radio Free Asia, 25/02/2015). The Government intensified
airstrikes in early March, and recaptured some strategic hills, which has improved access
between Laukkai and Chinsawhaw, a town near the Chinese border. Many displaced
persons in Laukkai are fleeing to China (Xinhua, 9/03/2015).

Security Incidents Involving Aid Workers

On 17 February, unknown attackers shot and wounded two people in a convoy of eight
Myanmar Red Cross Society vehicles in the Kokang area, Shan state. The vehicles were
carrying civilians displaced by fighting in Laukkai (Reuters, 17/02/2015). On 22 February,
five more people were wounded in an attack on a local aid organisation’s vehicle.
Government troops blamed MNDA for both the attacks; the group has denied
responsibility (AFP, 22/02/2015).

Displacement

Nearly 90,000 civilians in northeastern Myanmar are believed to have fled clashes between
troops and MNDA, and allied insurgent groups. 40,000 people, mainly ethnic Chinese
Kokang, have crossed the border into China (AFP, 18/02/2015).

IDPs

An estimated 244,000 people are displaced and living in camps in Rakhine, Shan, and
Kachin states (OCHA, 27/02/2015). As of February 2015, more than half of the 98,500
IDPs in Kachin and Shan states were living in areas where government services are not
available (OCHA, 12/14; OCHA, 27/02/2015).

Shan: An unconfirmed but estimated 62,000 people are internally displaced from
Kokang region; about 13,000 have fled to central Myanmar through Lashio; another
40,000 people, mainly ethnic Chinese, have crossed the border into China (OCHA, 27/02/2015; AFP, 18/02/2015; WFP, 03/02/2015).

Rakhine: 146,000 Rohingya Muslims live in closed camps following inter-communal
violence in 2012 (OCHA, 27/02/2015).

Kachin: 560 people were displaced in Hpakant, after fighting at the end of 2014 (OCHA,
27/02/2015). An estimated 20,000 IDPs live with host communities in Kachin (OCHA,
27/02/2015).

Returnees

Land taken by the military, the state, and companies close to the Government impedes the
orderly future return of refugees, particularly from Thailand, and the resettlement of IDPs
to their home communities or new sites (Center for International and Strategic Studies,
22/10/2014).

Refugees from Myanmar

According to UNHCR as of late March, over 415,000 refugees originate from Myanmar. In
early November, UNHCR reported that an increasing number of people, mainly Rohingya,
are setting out to sea on smuggling boats; many capsize. As of end November, the number
of Rohingya to have fled since early October was thought to have reached 19,000 (AFP,
30/11/2014).

China: Since early February, according to unconfirmed media reports, an estimated
40,000–100,000 people, mainly ethnic Chinese, have fled fighting into Nansan, in
Yunnan province, China (AFP, 18/02/2015; local media, 25/02/2015). The Chinese
Government has yet to release official figures (AFP, 10/02/2015). Refugees are moving
back and forth across the border to seek shelter, food, and employment, according
to aid agencies (RFA, 23/03/2015).

Bangladesh: Most Rohingya are denied refugee status by the Bangladeshi authorities.
200,000 reside in unofficial camps or villages where they get little or no humanitarian
assistance and almost no protection from human rights abuse. An estimated 30,000
Rohingya Muslims in official camps and receive assistance from aid agencies. In
November 2014, the Bangladeshi Government announced that Rohingya refugees will be
relocated from the existing camps, as the area will be developed for tourism (local media,
09/11/2014).

Malaysia: As of end November, over 40,000 Rohingya registered with the UN are in
Malaysia. Rohingya activists say a roughly equal number are unregistered (AFP,
30/11/2014).

Thailand: Since June 2014, movement restrictions have been more strictly enforced;
Myanmar refugees are banned from leaving camps, confined to their homes 1800–0600,
and threatened with deportation if they do not comply (Refugees International 29/08/2014).
In July, the Thai authorities pledged to send about 100,000 of the 120,000 refugees living in
border camps back to Myanmar (UNHCR has registered 76,000 refugees). According to
senior Thai military officials, measures are in place to deter boats from approaching
the country’s shores (Reuters, 15/11/2014). Rohingya Muslims are reportedly subject to

Food Security

Overall, the food security situation has improved, although recurrent inter-communal
tensions have negatively impacted the situation, mainly for IDPs (FAO, 24/09/2014).
70,000 people are food insecure in Rakhine state (OCHA, 31/10/2014).

Livelihoods
The trend for poppy cultivation in Shan state, which was on course to be wiped out ten years ago, has reversed. Poppy cultivation has tripled since 2006, with close to 60,700 hectares of poppy farms, according to UN surveys (NYT, 03/01/2015).

Rohingya fishermen of Maungdaw township, Rakhine state, have been barred from fishing since 7 November (local media, 10/11/2014).

Health and Nutrition

Access to healthcare is a major challenge in Rakhine (OCHA, 30/09/2014). If Rohingya camp residents wish to leave their camp to see a doctor, they must first obtain a referral by a government doctor and reportedly must also often bribe the security guards (Center for International and Strategic Studies, 22/10/2014). Only patients in the most critical condition tend to reach hospital.

Nutrition

In Rakhine state, GAM is above 20% in some areas (UNICEF, 01/02/2015). In June 2014, 2.1% SAM and 6.8% MAM was found among 32,000 children under five screened in Rakhine, indicating a deterioration in parts of the state since March. Severely malnourished children are being referred to Sittwe hospital; fewer referral services, high transportation costs, and fear of travelling to Sittwe are preventing many children from receiving medical care (OCHA 30/06/2014).

Shelter and NFIs

In Rakhine state, 15,000 people are in urgent need of assistance to repair shelters. In Kachin, there is a major need to scale up maintenance and repair work, to reduce the need for reconstruction (OCHA, 31/10/2014).

Displaced people and vulnerable communities in Rakhine have limited access to cooking fuel and energy. The situation is particularly difficult for over 80,000 IDPs who have been in camps in Sittwe Township for over two years. Households in camps and isolated villages are using shelter materials or unsustainable and hazardous materials as fuel, the exchange of food rations for fuel, and over-exploitation of surrounding forest and woodland (OCHA, 30/11/2014).

WASH

In Rakhine state, a general deterioration in the WASH situation in camps is aggravating health problems and increasing the risk of waterborne disease (OCHA, 11/09/2014).

Education

In Rakhine state, 28,000 vulnerable children require education support. 60,000 adolescents in isolated communities are without any education opportunities (OCHA, 08/2014).

Protection

About 200 Shan people are alleged to have been forcibly recruited into the Kachin Independence Army since the start of armed clashes with the army in June 2011 (local media, 11/11/2014). Local media has accused government troops of rape, beatings, and shooting of unarmed civilians in the Kokang region, Shan state (RFA, 25/03/2015).

Legal Status of Rohingya Muslims

On 11 February, the Myanmar Government said that temporary identity cards issued to those without full citizenship, including Rohingya Muslims, will expire at the end of March 2015. These identity cards were part of a citizenship application process. This move came after dozens of protesters gathered in Yangon to call on the Government not to allow people without full citizenship to vote in the referendum on amending the constitution (AFP, 11/02/2015).

Over 800,000 people are estimated to be without citizenship in the northern part of Rakhine state, mostly Rohingya Muslims (UNHCR). Myanmar continues officially to state that the Rohingya Muslims are migrants from neighbouring Bangladesh, thus excluded from citizenship under the 1982 Citizenship Law. The Government has drafted a plan which would force Rohingya Muslims either to register as Bengalis or be detained. Rakhine authorities would construct temporary camps for people who refuse to be registered or who are without adequate documents (local media, 12/10/2015). Rights advocates say this could put thousands of Rohingya at risk of indefinite detention. Accepting the term Bengali could leave the Rohingya vulnerable if authorities class them as illegal immigrants and attempt to send them to Bangladesh (Reuters, 27/09/2014).

Children

42 children were released from the armed forces on 24 January. In 2014, 376 children were released (AFP, 24/01/2014).

SGBV

In 2014, the Women’s League of Burma released a report that documented more than 118 victims of sexual violence at the hands of the Myanmar army since Thein Sein’s government took power (local media, 26/11/2014). Assessments in northern Shan state indicate that domestic violence is prevalent in IDP camps. Drug consumption and other negative coping mechanisms among men were identified by the women as a contributing factor. Adolescent girls are exposed to particular protection risks, according to the assessment findings. Cross-border trafficking for the purposes of domestic servitude, sexual exploitation, and forced marriage was identified as a major protection concern by respondents (OCHA, 30/11/2014).

Mines and ERW

Around five million people in Myanmar live in mine-contaminated areas (Mines Advisory Group, 05/2014). In Kayah state, around 15–20 people are injured annually, although the number of fatalities is unknown. More than 34,000 IDPs are at greatest risk due to their being in unfamiliar areas.
An assessment in Kachin and Northern Shan states concluded that the majority of reported landmine victims over the second half of 2014 were male farmers, and 56% were displaced people. Most of the accidents registered happened while people were travelling on foot to areas they visit often, such as fields. More than 25% of landmine victims knew the area was dangerous before entering it (UNICEF, 30/11/2014).

According to local media, citing intelligence reports by the Bangladeshi border security forces, Myanmar security forces have planted mines along the border between Myanmar and Bangladesh (local media, 23/11/2014). Myanmar has previously denied this practice, while Bangladesh has claimed to have found and removed mines in the border area.

Updated: 09/04/2015

PHILIPPINES CONFLICT, FLOODS, TYPHOON

LATEST DEVELOPMENTS

5 April: Typhoon Maysak, locally known as Chedeng, weakened into a tropical storm as it made landfall on in the Dinapigue municipality, Isabela province, in north Luzon (OCHA, 06/04/2015). 2,800 people are affected; around 24,000 residents of Aurora province were evacuated (OCHA, AFP).

31 March: Priority needs for 125,000 IDPs in Maguindanao include food, clean water, medical supplies, emergency shelter, and psychosocial and protection support. 100,390 are staying in 78 evacuation centres (Government, OCHA).

KEY CONCERNS

- Over 26,000 people remain displaced ten months after Typhoon Haiyan and more than two million lack adequate shelter or housing (FAO, 09/10/2014).

- 30,000 people who fled fighting in Zamboanga in September 2013 are still displaced (AFC, 20/03/2015).

- The Philippines is one of the most hazard-prone countries in the world, experiencing several large-scale natural hazards a year.

- Tensions in Maguindanao continue as fighting has erupted in January and February between government forces, Moro Islamic Liberation Front (MILF) and Bangsamoro Islamic Freedom Fighters (BIFF) fighters. 125,000 people have been displaced (IRIN, 20/03/2015).

OVERVIEW

A series of natural disasters, most significantly Typhoon Haiyan in November 2013, has caused widespread damage across the Philippines and affected millions. The overall political situation had been relatively stable until January 2015, when fighting broke out in Maguindanao. Although tensions remain high, the peace deal with MILF has not derailed.

For more information, visit the ACAPS country analysis page.

Political Context

Since October 2012, the Government has been engaged in finalising a lengthy peace process with the Moro Islamic Liberation Front (MILF), the country’s largest Muslim separatist group. Draft legislation for the 2014 March Comprehensive Agreement on Bangsamoro, which gives MILF, as a political group, rule over a new autonomous region, replacing the current Autonomous Region in Muslim Mindanao (ARMM), was submitted to Congress in September (AFP, 10/09/2014). The deal excludes important stakeholders, including the Bangsamoro Islamic Freedom Fighters (BIFF), Abu Sayyaf, and Khalifa Islamiyah Mindanao. The agreement paves the way for the creation of a new Muslim autonomous entity called Bangsamoro. The government aims to setup the region by 2016. The agreement allows for a Muslim self-rule area in southern Philippines in exchange for the decommissioning of MILF forces.

The disarmament process for Philippine Muslim opposition groups started in September 2014. The decommissioning of a first batch of firearms was scheduled for late 2014 (AFP, 28/09/2014). The parties met on 30 January and signed the protocol for its implementation (Government, 28/01/2015; local media, 31/01/2015). The Independent Decommissioning Body has not yet reported on the process.

Security Context

Splinter groups on Mindanao and smaller neighbouring islands continue their violent opposition to the Government. Increased violence between the Government and opposition groups was reported in November and later in January as a consequence of government efforts to capture outlaws.

On 25 January Philippine security forces entered the remote village of Mamasapano, in Maguindanao, which is held by MILF. However, they had not coordinated with MILF beforehand, as required under the ceasefire agreement. In the worst fighting since the peace agreement of 2014, 44 police officers, 11 militants and two civilians were killed (AFP, 26/01/2015, ECHO, 28/01/2015; OCHA, 02/02/2015).

On 9 February, a feud erupted between families reportedly associated with MILF and BIFF in Pagalungan (Maguindanao province) and Pikit (Cotabato province), causing displacement (ECHO, 24/02/2015). The national army launched an offensive and took Pikit town back from BIFF (local media, 22/02/2015). On 26 February, troops were sent to fight BIFF in Cotabato, Sultan Kudarat, and Maguindanao. Over 23–29 March, armed conflict left two civilians injured, and three BIFF fighters and four national army soldiers dead (OCHA, 30/03/2015; local media 30/03/2015). On 30 March the Philippines military chief announced that the offensive had ended. 139 insurgents have been killed, 12 captured, and bomb-making bases have been seized (AP, 30/03/2015). As of 31 March, government reports...
indicated that 132,870 people have been affected (Government, 31/03/2015).

BIFF split from MILF in 2008. Thousands were displaced by fighting between the Philippine army and BIFF in 2014 (IRIN, 22/07/2014; OCHA).

**Humanitarian Context and Needs**

**Access**

Insecurity in parts of Mindanao and nearby areas is limiting humanitarian access. Concurrent natural disasters have hampered further aid delivery to affected populations.

**Disasters**

Typhoon Maysak, locally known as Chedeng, weakened into a tropical storm as it made landfall on 5 April in Dinagupi municipality, Isabela province in north Luzon (OCHA, 06/04/2015). 2,800 people are affected in Isabela and Aurora provinces and around 24,000 coastal residents of Aurora were evacuated (AFP, 04/04/2015; OCHA, 06/04/2015).

Category 5 Typhoon Hagupit, locally known as Ruby, made landfall on 6 December 2014 in Eastern Samar province (Eastern Philippines). (GDACS, 06/12/2014). 3.8 million people were affected across nine regions (WFP, 15/12/2014). Around 38,100 houses were destroyed and 203,600 partially damaged (OCHA, 15/12/2014).

**Displacement**

As of February 2015, reports suggest that nearly 500,000 people are displaced. Around 80% of the 3 million displaced in 2014 fled natural disasters. An estimated 95,000 fled conflict and violence in Mindanao. The total number of people displaced by conflict and violence reached its lowest level since 2011 (IDMC, 10/02/2015).

**Maguindanao**

Fighting in Maguindanao since late January has caused the displacement of 125,000 people. **100,390 are staying in 78 evacuation centres, including schools and madrassas, the rest with friends and family.** Evacuation centres in Pikit have closed, but 8,145 people have opted to stay with relatives (Government, 31/03/2015). On 30 March, the Philippine military chief reported that 30,000 had returned home, although these figures have not been independently confirmed (AP, 03/03/2015). **Food, clean water, medical supplies, emergency shelter and psychosocial and protection support have been identified as priority needs (OCHA, 31/03/2015).**

**Typhoon Haiyan**

Resettlement has begun for families in Tacloban still living in tents. Nearly 1,500 people have moved to relocation sites. A further 200 families living in tents in Tanauan municipality are also being relocated (OCHA, 31/10/2014). Larger shelter gaps persist in Western Leyte (EU Red Cross, 20/03/2015). Little information is available about progress towards solutions for the approximately four million people who have returned home, although it is believed that livelihood, food, and housing needs remain considerable in Typhoon Haiyan-affected areas (IDMC, 10/02/2015). Longer-term assistance is required, such as supporting self-recovery, assisting households in no-build zones, helping with safer reconstruction, and enabling access to healthcare, schools, public transportation, and livelihood opportunities (UNHCR, 30/09/2014).

**Zamboanga**

18 months after fighting in the city, **32,000 people are still in evacuation centres or transit sites, including 15,000 who are staying with host families (OCHA, 31/03/2015).** Those in evacuation centres are in tents or makeshift huts made of wood and tarpaulin (ACF, 20/03/2015). In late 2014, disease outbreaks and sanitary conditions were a main concern (OCHA, 09/09/2014). Protection concerns remain critical; women and children in particular are at risk of abuse and exploitation (OCHA, 01/10/2014).

**Fires**

Almost 50,000 people have been affected after a number of fires broke out in Parola compound in Tondo, northwest Manila, on 2 March. 800 houses have been severely damaged. Around 25,000 people are being housed in six evacuation centres (IFRC, 08/03/2015).

**Food Security**

Food remains a priority need for people affected by typhoon Haiyan, more than a year after the event. Food prices are inflated and thousands of people still do not have the means to buy food or have sufficient access to markets (EU Red Cross, 20/03/2015).

**Health**

**Dengue:** As of 7 March, 14,672 cases of dengue and 39 deaths have been reported in 2015. Since mid-February, the weekly number of dengue cases reported in the country has declined (WHO, 24/03/2015). According to the Health Cluster, diarrhoea cases have been rising in several areas of Ormoc and Leyte since 30 November 2014 (EU Red Cross, 20/03/2015).

**Nutrition**

A SMART survey of displaced communities of Zamboanga indicated high malnutrition rates among children under five (ACF, 20/03/2015).

**Education**

Schooling in Pagalungan (Maguindanao province) and Pikit (Cotabato province) has been suspended following the fighting (ECHO, 24/02/2015). Almost 50 schools, and 20,630 children, have been affected (Government, 13/03/2015).

**Protection**

BIFF continues to actively recruit and train child soldiers.
DEMOCRATIC PEOPLE'S REPUBLIC OF KOREA  FLOODS, FOOD INSECURITY, EPIDEMIC

LATEST DEVELOPMENTS

No significant developments this week, 09/04/2015. Last update: 19/02/2015

No current data on child mortality, food security, food price levels, or the general magnitude of humanitarian needs is available. Therefore, DPRK is not included in the Global Overview prioritisation.

KEY CONCERNS

- Massive human rights infringements, including against prisoners in prison camps who face starvation and torture, continue to be reported. Humanitarian access remains extremely limited (UN).

- Information on the food security situation remains limited. As of August, an estimated 16 million people (almost 65% of DPRK’s population) are chronically food insecure and an estimated 2.4 million people need food assistance (OCHA).

- As of August, malnutrition rates, particularly in the northwest, were extremely high with global chronic malnutrition (stunting) at almost 28% and global acute malnutrition (wasting) at 4% among children under five (OCHA).

- DPRK is disaster prone, regularly experiencing seasonal flooding that, for instance, affected over 800,000 people in summer 2013 (OCHA).

Political Context

In November 2014, the UN General Assembly approved a resolution condemning DPRK for human rights abuses and recommending the prosecution of its leaders for crimes against humanity at the International Criminal Court (international media, 19/11/2014).

Security Context

DPRK–South Korea

In February 2014, Seoul and Pyongyang held their first high-level talks in seven years, in the Panmunjom truce village. However relations subsequently deteriorated. In April, South Korean officials said that DPRK had completed all steps required prior to a potential nuclear test, as Pyongyang conducted a scheduled military exercise near the border.

Humanitarian Context and Needs

Access

Humanitarian access is extremely limited. On 1 May, the UN Human Rights Council’s recommendations to the Government as part of the Universal Periodic Review included unrestricted access to prisons and prison camps for humanitarian organisations, and close collaboration with humanitarian organisations to ensure the transparent distribution of aid.

Food Security

Information on food security remains limited. An estimated 16 million people, of a total population of 24.6 million, are chronically food insecure. An estimated 2.4 million people need food assistance (OCHA). The food system in DPRK remains highly vulnerable to shocks and serious shortages exist, particularly in the production of protein-rich crops. According to FAO, food production remained stagnant in 2014, after an improvement of the harvest in previous years. FAO estimates that the food security situation for 2015 is likely to remain similar to 2014 (FAO, 03/02/2015).

WFP reports that 45% of households have borderline and 30% poor food consumption. People in central mountainous areas do not have access to sufficient food from the public distribution centre and have to rely on planting hillside crops to supplement their daily diet, despite poor seed quality, shallow soil, accelerated erosion, low yield expectations, and the fact that most of the hillside cultivators do not necessarily have an agricultural background (US State Department, 22/09/2014).

Livelihoods

In May 2014, the Central Committee of the Worker’s Party and the cabinet of ministers signed a set of market-oriented reforms, which appear to liberalise the economy. These reforms could improve food security, as farmers now work for a share of crops, instead of receiving fixed rations (international media, 21/01/2015).

Health and Nutrition

More than six million people need access to essential health services, including vaccines and other medicines (OCHA citing WHO, 11/02/2015).

Nutrition

Chronic child malnutrition and poor dietary diversity among children, women, and households are a major concern. Super cereals, biscuits, pulses and oil are needed to supplement the poor dietary intake among targeted vulnerable groups (WFP 06/2014).

Reviewed: 09/04/2015
LATEST DEVELOPMENTS

11-12 April: Intensive fighting was reported in Shyrokyne and around Donetsk city; casualty numbers are unspecified, as access to the areas is severely constrained (OSCE).

1 April: All Crimean Tatar media outlets except one were shut down for failing to re-register under a Russian law, despite several applications having been submitted on time (local media).

31 March: At least 109 children are reported to have been injured and 42 killed by landmines and UXO in Donetsk and Luhansk regions since March 2014 (UNICEF).

KEY CONCERNS

- Nearly five million people are affected by the crisis in Ukraine, and more than 1.6 million are in need of humanitarian support. The situation is most severe in non-government-controlled areas (MSNA, 30/03/2015).
- More than 1.2 million people have been displaced internally and over 777,250 externally. It is difficult for civilians to escape contested areas (UNHCR, 23/03).
- Availability of food but also of health services and medicine, are key concerns. Access to safe water is also an issue (MSNA, 30/03/2015).
- Bureaucratic, security and financial restrictions are impeding access and response (OCHA, 26/12/2014; MSF, 23/01/2015).

Security Context

As of 10 April, at least 6,110 people had been killed in the conflict and 15,450 wounded, though the death toll may be higher, since access to conflict-affected areas is restricted (OCHA, 10/04/2015).

Armed groups control most of eastern Donetsk region, including Donetsk’s airport and Debaltseve, and a small area of southern Luhansk region (Government, 13/01/2015; international media, 22/01/2015). Non-government forces reportedly comprise around 35,000 to 40,000 fighters, including up to 10,000 Russian fighters (AFP, 23/03/2015).

Violence has abated since the February roadmap, but fighting continues in certain locations, notably in and around Donetsk airport and to the east of Mariupol. Intensive fighting was reported in Shyrokyne and around Donetsk city on 11–12 April; casualty numbers are unspecified, as access to the areas is severely constrained (OSCE, 12/04/2015). The escalation of fighting in Shyrokyne, and the gathering of non-government forces along the front line, have raised fears of a new offensive in Mariupol (AFP, 23/03/2015).

Humanitarian Context and Needs

Nearly five million people are affected by the crisis in Ukraine, including 3.6 million in non-government-controlled areas, 954,000 in government-controlled areas in Donetsk and Luhansk, and 310,000 in Dnipropetrovsk, Kharkiv and Zaparizhia regions, the main IDP reception areas. More than 1.6 million are in need of humanitarian support (MSNA, 30/03/2015). At 3 April, 18% of the December 2014 humanitarian plan has been funded (OCHA, 03/04/2015).

Access

Getting in and out of the conflict zone is becoming more difficult (MSF, 23/01/2015). Lack of available and affordable transport, insecurity along exit routes and administrative barriers are preventing civilians from reaching safety (UNHCR, 10/03/2015). Only four international humanitarian organisations are operating in conflict zones (OCHA, 16/03/2015).
The dismissal of key government representatives end March, including members of the emergency services, upon allegations of corruption, puts additional pressure on the delivery of humanitarian assistance (OCHA, 27/03/2015).

Administrative Constraints

Administrative requirements are increasingly complicated, and entry is most difficult for humanitarian organisations (Logistics Cluster, 06/03/2015). Obligatory permits to cross the lines separating government- from opposition-controlled areas have been enforced since 21 January but are inconsistently applied. The permit is not easy to acquire and corruption is reported (UNHCR, 20/03/2015; OCHA, 06/03/2015). Since the ceasefire, many instances of extensive delays or refused permission to aid trucks to enter non-government areas have been reported (UNHCR, 20/03/2015). Volunteer organisations working in both self-declared republics have made similar reports (HRW, 13/03/2015).

Customs procedures are also tightly controlled and complicated, reportedly hampering operations (Logistics Cluster, 16/02/2015).

Logistical Constraints

The Government has decided to halt public transportation in non-government areas, hampering humanitarian access (OCHA, 09/01/2015). Months of conflict have severely damaged Donetsk international airport (international media, 01/12/2014).

Luhansk region is difficult to access due to deteriorated road conditions, a UXO and IEDs, and damage to the Stanytsia Luhanska bridge, which can now only support small vehicles (OCHA, 27/02/2015).

Bus connections and private vehicles crossing the administrative border to and from Crimea are often delayed for several days (UNHCR, 06/02/2015). International shipping has been prohibited from the ports of Yevpatoria, Kerch, Sevastopol, Theodosia, and Yalta, on the Crimea peninsula, since 15 July (GARD, 17/07/2014).

Trapped and Hard-to-Reach Communities

Many civilians remain stranded in hard-to-reach areas in conflict and non-government controlled areas. 500,000 people are living in underground shelters in conflict areas, with little or no access to humanitarian aid (OCHA, 16/03/2015). 150,000 remain in non-government- controlled Horlivka in Donetsk (OSCE, 17/03/2015). 5,000 civilians are estimated to be trapped in Debaltseve as of 20 February. 4,000 people remain in 21 institutional care facilities in hard-to-reach areas not controlled by the Government (ICRC, 22/02/2015; OCHA, 06/03/2015). 3,000 people remain in Kulybyshhevskyi district in Donetsk city and have not been reached by humanitarian aid; priority needs are for shelter, water and health support (OCHA, 22/03/2015).

Displacement

IDPs

By 10 April, more than 1.21 million IDPs had been registered in eastern Ukraine since March 2014, including 152,700 children and 50,600 disabled people. 60% are pensioners; the proportion rises to 72% and 74% in Luhansk and Donetsk regions, respectively. Key reception areas are areas under government control in Donetsk (438,200) and Luhansk regions (155,400), and Kharkiv (157,800), Zaparizhia (85,600), Kyiv (84,600), and Dnipropetrovsk regions (72,800) (UNHCR, 10/04/2015). 19,000 people are estimated to be displaced within Crimea (IDMC, 31/10/2014).

Many pensioners have registered as IDPs solely to be able to access their pension payments, and then moved back home (UNHCR, 06/02/2015). The discrepancy between the real and registered numbers of IDPs is a major issue hampering delivery of assistance (OCHA, 30/01/2015).

IDPs need information, notably regarding evacuation, safe roads, travel permits, markets, laws and regulations, and where to access humanitarian aid (IO, 02/2015).

The Government is encouraging IDPs to move west, to ease pressure on accommodation, but coordination is lacking (OCHA, 13/02/2015; UNHCR, 06/02/2015).

Returnees

IDPs and affected populations continue to commute to their areas of origin, to register for pensions, receive assistance, or scope out damage to their homes (OCHA, 22/03/2015). Some IDPs are reportedly returning to conflict areas, as the devaluation of the national currency has limited their ability to afford basic living expenses, including rent and food (OCHA, 06/03/2015).

Refugees in Neighbouring Countries

777,250 Ukrainians are seeking asylum or other forms of legal stay in neighbouring countries, including 636,640 in Russia and 80,900 in Belarus (UNHCR, 10/04/2015). Since July, Russian authorities have prevented Ukrainians from obtaining refugee status in several regions, including border areas and major cities such as Moscow. Most asylum seekers have been unable to collect the required documents and access refugee status (IO, 09/12/2014).

Food Security

More than 1.3 million people are in need of food assistance, including nearly 1.1 million in non-government areas, and 200,000 in government areas in Donetsk and Luhansk. 673,290 people with a poor food consumption score should be prioritised for assistance (MSNA, 30/03/2015). Food shortages have been reported especially in Luhansk, significantly affecting IDPs (OCHA, 10/04/2015; FAO, 26/01/2015).

A 36% year-on-year rise in the national food price index was reported in February (WFP, 31/03/2015). In the east, prices for items such as bread and milk have gone up 30% in a year, and meat and cheese have gone up 75–80%; shortages of meat and oil are reported in some non-government areas in Donetsk (WFP, 31/03/2015; 19/02/2015). Increased food prices, disrupted transport systems, high insecurity, remoteness and lack of hard currency limit access to markets for at least 20% of the population in Luhansk, Donetsk, Kharkiv, Dnipropetrovsk and Zaparizhia (HNO, 12/2014).
Agriculture

Insecurity, damaged infrastructure, landmines, and lack of resources are delaying agricultural activity in many conflict areas (OCHA, 10/04/2015). Some farming enterprises close to the conflict zone have reportedly lost up to 30% of their winter harvest. 80,250 people living in small farming households in rural areas need assistance in the next six months, particularly animal feed and spring and vegetable fertilisers, which they cannot afford (FAO, 31/01/2015).

13% of wheat, barley, and maize, and up to 30% of sunflower crops were not harvested in 2014 due to displacement, corresponding to losses of 530,000 and 400,000 metric tons (FAO, 31/01/2015).

Livelihoods

Households’ poor financial situation is the main driver of need (MSNA, 30/03/2015). 2.7 million people are in need of a livelihood (OCHA, 24/02/2015). Access to social services, such as pensions and salaries, remains suspended in many conflict and non-government-controlled areas; teachers’ salaries have been reduced in Mariupol in Donetsk and in non-government areas (OCHA, 10/04/2015).

IDPs from Crimea are often unable to transfer their pensions to mainland Ukraine since banks ceased the use of electronic banking (UNHCR, 06/02/2015).

As of 10 October, nearly 40,000 small and medium businesses in the Donetsk and Luhansk regions had ceased activity (OCHA, 10/10/2014). Industrial production had declined 60% in Donetsk region and 85% in Luhansk by September 2014 (OCHA, 08/12/2014).

Health and Nutrition

More than 1.5 million people are in need of health support, including nearly 1.1 million in non-government areas, and 300,000 in government areas in Donetsk and Luhansk (MSNA, 30/03/2015). The devaluation of the Ukrainian currency means the health budget for 2015 will only cover an estimated 30% of needs (OCHA, 24/02/2015).

There are critical shortages of basic and specialised medicines and medical supplies in eastern Ukraine, especially in conflict areas in Donetsk region, and many people cut off from medical care in non-government areas. The average vaccination coverage in the country is well under 50%, while a significant increase in medicine prices affects access to basic medication and treatment for chronic illnesses (OCHA, 21/03/2015; MSF, 04/03/2015; WHO, 16/01/2015).

More than 100 health facilities in Donetsk and Luhansk regions have been destroyed or damaged, while 30% and 70% of health workers are no longer at their posts in the respective regions (OCHA, 21/03/2015; WHO, 16/01/2015). The safety and security of health workers remains a major concern in conflict areas; targeted attacks on ambulances have been reported (OCHA, 17/10/2014; IMC, 31/01/2015).

More than 148,000 in Dnipropetrovsk, Kharkiv and Zaparizhia regions (MSNA, 30/03/2015). The devaluation of the Ukrainian currency means the health budget for 2015 will only cover an estimated 30% of needs (OCHA, 24/02/2015).

Hospitals in eastern Ukraine have insufficient medicine and diagnostic equipment to treat HIV, tuberculosis, and viral hepatitis. Over 16,000 people are living with HIV/AIDS in non-government areas, including over 7,000 people receiving antiretroviral therapy, whose treatment is endangered (HRW, 13/03/2015). Over 800 babies born to HIV-positive mothers in non-government areas are in urgent need of replacement feed (OCHA, 10/04/2015).

Opioid Substitution Treatment (OST)

Restrictions on the delivery of narcotic drugs since December 2014 for people undergoing OST in Donetsk and Luhansk regions has resulted in discontinuation of treatment for more than 300 of the 899 patients residing in the area (OCHA, 23/01/2015).

Mental Health

Children are showing signs of stress and anxiety in all areas; 200,000 kindergarten and school-aged children are affected, especially in Donetsk region (UNICEF, 03/04/2015; MSNA, 30/03/2015). Soldiers’ access to psychological services is reportedly severely insufficient in Lviv region (OCHA, 22/03/2015).

Tuberculosis (TB)

At least 2,400 people in non-government areas with TB, including 530 people with multidrug-resistant TB, lack consistent treatment provision and follow-up, and are at risk of treatment interruption (HRW, 13/03/2015). In areas under government control, stocks of drug supplies for HIV and TB patients were used up in March 2015 (OCHA, 23/01/2015).

New TB cases are estimated to have increased by 5% in non-government areas of Donetsk, mainly among the elderly and combatants (OCHA, 06/02/2015).

Shelter and NFIs

Nearly 600,000 people are estimated to be in need of shelter assistance, including 270,000 in government areas in Donetsk and Luhansk, 179,000 in non-government areas, and 148,000 in Dnipropetrovsk, Kharkiv and Zaparizhia regions (MSNA, 30/03/2015).

IDPs

Housing solutions are provided to only 3–5% of IDPs in temporary collective centres (UNHCR, 20/03/2015). 95% of IDPs are in private accommodation and are often excluded from humanitarian assistance (OCHA, 24/02/2015; UNHCR, 06/02/2015). The absorption capacity within host communities is exhausted in high reception areas and in Odessa. Tensions are rising between the host population and IDPs. A likely increased influx of IDPs to Kiev could further increase social tensions (OCHA, 16/03/2015; 06/02/2015).

Conflict Areas

People left in cities where shelling is ongoing are living in underground shelters, in acute need of basic NFIs (OCHA, 30/01/2015). In Debaltseve and near Donetsk airport, people
are living in shelters or basements without access to electricity or running water (MSF, 03/03/2015). 60% of Shyrokyne’s buildings have been destroyed by shelling (OSCE, 27/03/2015). Priority needs in Debaltseve and surrounding villages are for gas, shelter, food, health and NFIs (OCHA, 06/03/2015).

In Luhansk region, more than 10,000 houses need emergency repair (OCHA, 13/03/2015). 30,000 in Donbas are without electricity (OCHA, 03/04/2015). 1,522 social facilities are in need of restoration (OCHA, 10/04/2015).

**WASH**

More than 1.3 million people need WASH assistance, including nearly 1.2 million in non-government areas (MSNA, 30/03/2015). More than 2,000km of pipelines have reportedly been damaged in Donbas, significantly hampering water supply (OCHA, 10/04/2015).

Numerous cases of intestinal diseases have been reported in Horlivka, Donetsk region, due to lack of access to clean water (OCHA, 13/02/2015). WASH needs are increasing in health structures, schools and other social facilities in conflict zones (OCHA, 27/03/2015).

**Education**

600,000 people in Donetsk and Luhansk need education support (OCHA, 24/02/2015). The conflict has disrupted the education of up to 25,000 children in Donetsk and Luhansk cities (OCHA, 13/03/2015). Lack of transportation, mines, and overcrowding are main barriers to school attendance in Donetsk (UNICEF, 20/03/2015; 09/01/2015).

50% of teachers are thought to have left non-government areas (OCHA, 27/03/2015). 7,000 students in non-government areas are unable to access their final high school examination, which may lead to displacement (UNHCR, 10/04/2015).

16% of schools in non-government areas have been damaged, and 20% of those in government areas in Donetsk and Luhansk (UNICEF, 03/04/2015; MSNA, 30/03/2015).

**Protection**

A fourth wave of military mobilisation has been launched. Men of military-draft need permission from local military commissions to leave the country (OCHA, 06/02/2015). There are concerns that military-age men are not registering as IDPs for fear of being drafted to the army (OCHA, 10/04/2015).

Human rights abuses by armed groups continued to be reported, including abduction, torture and ill-treatment, unlawful detention, execution, forced mobilisation of civilians, and seizure and occupation of public buildings (Amnesty, 09/04/2015; OHCHR, 15/11/2014).

The requirement to register as an IDP in government-controlled areas to be eligible for social payments and pensions is causing displacement and confusing overall IDP numbers. People who have not registered are at risk of financial and other hardship (UNHCR 31/12/2014; 23/01/2015). IDPs from Crimea are particularly vulnerable and transport communications to Crimea have ceased (UNHCR, 31/01/2015).

An increasing number of unlawful refusals of registration and financial assistance, violations of employment rights, and limited access to social benefits is reported among IDPs (OCHA, 13/03/2015). A mechanism for verifying current IDP addresses could lead to 20–30% IDPs losing their status and benefits; 3,000 IDPs who were not found at their registered address in Dnipropetrovsk have reportedly lost their status (UNHCR, 10/04/2015).

**Minorities**

Minority issues have become highly politicised since the start of the unrest. The situation of minority communities in Crimea, including Crimean Tatars and ethnic Ukrainians, among others, is of concern, while there has been an apparent escalation of anti-Roma sentiment in the country (UN, 27/01/2015). An estimated 260,000 Roma live in Ukraine.

In Crimea, at least nine people have reportedly been abducted; intimidation and restrictive laws have been used to silence the media and NGOs, and public protests have been banned since annexation (UNHCR, 31/01/2015; Amnesty, 17/03/2015). All Crimean Tatar media outlets except one were shut down on 1 April for not having re-registered under a Russian law, despite several applications having been submitted on time (local media, 01/04/2015).

The 48,000 disabled people in eastern Ukraine constitute the most vulnerable in the population (MSNA, 30/03/2015; UNHCR, 20/03/2015).

50% of state and municipal institutions for the care and guardianship of minors in Donetsk and Luhansk regions are not functioning (international media, 07/10/2014). There are also concerns over militarisation of children in non-government areas (Protection Cluster, 04/03/2015).

The situation for older people in Donetsk and Luhansk is worsening, and particularly alarming in remote rural areas and areas with active military conflicts. Lack of pension income means they cannot meet basic needs. Access to food and medicine is almost non-existent for many who are not mobile (OCHA, 20/02/2015). Almost 4,000 remain in nursing homes in non-government areas and need NFI support (Protection Cluster, 28/01/2015; OCHA, 13/03/2015). Members of armed groups are not allowing their evacuation to government areas (HelpAge, 25/02/2015; OCHA, 20/02/2015).

**Mines and ERW**

At least 109 children have been injured and 42 killed by landmines and UXO in Donetsk and Luhansk regions since March 2014 (UNICEF, 31/03/2015). Contamination of agricultural land is a major concern as the planting season begins: 30,000
hectares of land along the frontline in Novoazovskyi and Artemivskyi districts in Donetsk region are reportedly contaminated (UNHCR, 10/04/2015).

Use of cluster munitions by government and non-government forces was reported in seven villages in eastern Ukraine in January and February, killing at least 13 civilians (HRW, 19/03/2015).

Updated: 13/04/2015

1.5 million people and 73% of the country’s territory have been affected by drought (SESAN MAGA quoted by WFP, 07/11/2014; UNHCR, 12/12/2014; UN Country Team, 28/08/2014; Government, 24/02/2015). 944,000 people in the Dry Corridor are particularly affected, as they are highly dependent on subsistence farming (ACT Alliance, 15/10/2014).

98% of harvests have been lost in Chiquimula, El Progreso, and Zacapa (Government, 28/08/2014). 56% of affected communities were left with no possibility of planting, and 99,600 people with no income opportunities (ACTED, 28/08/2014; Government, 11/09/2014).

The current crisis is preceded by two years of bad harvests and aggravated by the impact of reduced employment in the coffee bean sector, caused by the coffee leaf rust epidemic of the last two harvests (UN Country Team, 28/08/2014).

A decrease in rain in 2015 is forecast for Central America’s dry corridor due to the possibility of El Niño (local media, 12/02/2015). Drought has affected 2.5 million people across Central America: Nicaragua, Honduras, and El Salvador are also affected (Government of Honduras, 13/01/2015).

Floods

Heavy rains over the May–December season affected 655,200 people and damaged 9,610 houses. (local media, 03/12/2014). Zapaca department was the most affected (Siglo XXI, 19/10/2014). 9,989 people are in 15 shelters throughout the entire affected area as of 26 February (Government, 26/02/2015).

Food Security

Guatemala is projected to be at IPC Phase 3, Crisis, February–August 2015, higher than the same period in 2014 and the five-year average (FEWSNET, 13/03/2015). 874,000 people are affected by moderate and severe food insecurity (OCHA, 23/02/2015).

Two million people in Nicaragua, Guatemala, El Salvador, and Honduras are in need of food assistance due to the drought (UN, 06/02/2015). A coffee leaf rust epidemic which began in 2012 is affecting all Central America and still impacting Guatemala’s food security and livelihoods with a loss of 100,000 jobs (Save the Children, 29/09/2014). Households in the western part of the country affected by the coffee rust epidemic are facing IPC Phase 3, Crisis, if most have finished food reserves (FEWSNET, 02/2015).

Agricultural Outlook

70% of small-scale and subsistence farmers suffered losses due to the drought. 47% of households affected depend on basic crop production (WFP, 07/11/2014). In 2014, 75% of the maize and bean harvests were lost (FEWSNET, 18/11/2014, OCHA, 10/12/2014) and households most affected by drought decided not to plant crops in the second planting season, which typically runs from August-September. For the subsistence farmers who decided not to plant, the scenario is very uncertain until the next harvest in August 2015 (OCHA, 10/12/2014).
Health and Nutrition

Provision of primary healthcare has been interrupted in rural areas of several municipalities due to budget limitations (Government, 12/10/2014).

Chikungunya

Between end December 2014 and mid-February 2015, 588 chikungunya cases were reported in San Jorge, Usumatlan, Gualan and Estanzuela de Zacapa departments (local media, 28/02/2015).

Nutrition

116 children died from malnutrition in 2014. Between January and November, 2,320 cases of acute malnutrition have been recorded among children under five in Guatemala as of March 2015 (Government, 21/03/2015). The highest rate of acute malnutrition was identified in the eastern part of the country, at 5.4% (OCHA, 10/12/2014).

WASH

23% of households in drought-affected areas are estimated not to have access to safe drinkable water (SESAN quoted by OCHA, 03/11/2014).

1.6 million people in Guatemala lack access to basic WASH services, including 830,000 who lack access to water (local media, 07/02/2014).

Reviewed: 09/04/2015

HAITI FOOD INSECURITY, EPIDEMIC, HURRICANE

LATEST DEVELOPMENTS

26 March: Hundreds of Haitians living irregularly in the Dominican Republic, and more than 300,000 Dominicans of Haitian descent, will be at risk of forced expulsion from 16 June (OCHA).

26 March: 20 communes are on red alert for cholera as the rainy season approaches (Alter Press).

KEY CONCERNS

- Ongoing severe dryness, particularly in the southern peninsula and the Central Plateau, and below-average rainfall through December, is likely to result in the second consecutive below-average harvest and increase food insecurity (FEWSNET, 18/12/2014).

- Despite a progressive decrease in cholera cases since January 2013, a spike in cases was reported over the September–November rainy season, and has continued at the beginning of 2015 (PAHO, 03/03/2015; 02/12/2014).

OVERVIEW

An estimated three million Haitians have both chronic and acute humanitarian needs, and are facing displacement, food insecurity, and malnutrition. Haiti’s political and economic situation is extremely fragile, and the country is vulnerable to natural disasters, including hurricanes, floods, earthquakes, landslides, and droughts. The resilience of the population is extremely low.

Political Context

President Martelly appointed a unity government on 19 January, and on 22 January the new Prime Minister set up a new electoral council. Tensions with opposition demonstrators are expected to persist, however, as new ministers have been reshuffled from the previous Government (AFP, 19/01/2015, 22/01/2015). A calendar for legislative, presidential, and local elections was formally presented on 12 March; the first round is scheduled to start in August. Elections have been delayed since 2011 (UN, 18/03/2015).

Armed criminal violence is reportedly increasing in the country (Alter Press, 24/02/2015). While the UN stabilisation mission, MINUSTAH, maintains police in regions, the Haitian National Police are not yet fully capable of dealing with civil unrest (OCHA, 31/07/2014).

Humanitarian Context and Needs

Access

The number of humanitarian actors has continued to decrease, from 512 in 2010 to 147 by the end of 2014, and government capacity has not always improved, creating critical sectoral gaps (OCHA/UN, 31/12/2014). The UN launched a Transitional Appeal Process in March, requiring USD 401 million, in an effort to address basic development challenges that result in persistent humanitarian needs and risks (OCHA/UNCT, 11/03/2015).

Displacement

IDPs

As of early January, 79,400 IDPs remain in 105 camps as a result of the 2010 earthquake, including 62,637 not targeted by any return or relocation programme (IOM, 09/01/2015; OCHA/UN, 31/12/2014).
Population numbers in open camps grew over the first six months of 2014, as other camps closed, and insecurity elsewhere has increased (OHCHR, MINUSTAH, Protection Cluster, 30/06/2014). 56 camps are targeted for closure, affecting 16,760 IDPs (CCCM, 27/01/2015). Basic services in camps have declined faster than the pace of return or relocation. Only one-third of camps have access to water and access to healthcare is problematic due to lack of infrastructure and funding (OCHA/UN, 31/12/2014).

Food Security

605,000 Haitians are food insecure, including 165,000 in Crisis (IPC Phase 3) food security due to early exhaustion of food stocks as a result of the drought (OCHA/UN, 31/12/2014).

Food prices are reportedly on the rise as a result of below-average food stocks.

Agricultural Outlook

Urgent agricultural support, including seeds, is required, especially in Cap-Haitien, Gonaives and Ouansanthin, Thomazeau, and Plateau Central (Alter Press, 25/03/2015). Around 67,500 people (16,000 families) are reportedly affected by the drop in cereal production in Central Plateau, Nord-Ouest, Sud-Est, and Ouest departments (FAO, 02/12/2014).

Prolonged drought conditions over Haiti in January are reducing the availability of water for irrigation systems; Nord-Ouest, Artibonite, Nord, Grand’Anse and Sud departments are most affected (FEWSNET, 19/01/2015).

Health and Nutrition

Five million Haitians (half of the total population) lack access to basic health services (UN, 27/10/2014). Some hospitals have not been fully rehabilitated since the earthquake (MSF, 08/01/2015). Lack of mental health support is also reported (Alter Press, 10/01/2015).

Cholera

The upward trend in incidence continues at the beginning of 2015, with 28,000 people likely to be affected in 2015 (OCHA/UNCT, 11/03/2015). 20 communes are on red alert as the rainy season approaches, with Port au Prince, St March, Cabaret and Tabarre of special concern. By 26 February, there were 7,225 cholera cases reported in 2015, including 86 deaths (Alter Press, 26/03/2015; ECHO, 16/01/2015; PAHO, 03/03/2015).

27,753 suspected cases of cholera and 296 deaths were recorded in 2014, a 53% and 50% reduction on 2013, respectively; an increase was reported over September–November however, with 918 weekly cases on average, compared to 251 in the previous months. The departments of Artibonite, Centre, Ouest, and Nord are most affected (PAHO, 30/01/2015; 02/12/2014).

731,880 suspected cholera cases and 8,741 deaths have been reported since the start of the epidemic in October 2010 (PAHO, 03/03/2015).

Nutrition

At March, 85,000 children suffered from acute malnutrition, including 17,000 requiring immediate assistance (OCHA/UNCT, 11/03/2015).

Malnutrition rates in IDP camps are of great concern. In May, GAM in 20 camps stood at 12.5% (OCHA, 20/08/2014).

WASH

More than 3.4 million Haitians lack access to safe water (one-third of the total population and 47% of the rural population) (UN, 30/09/2014). 38% do not have access to improved water sources and 69% lack access to improved sanitation (World Bank, 30/09/2014). 60% of schools have no toilets and more than three-quarters lack access to water (HRW, 08/10/2014). Waterborne diseases are one of the main causes of infant mortality (World Bank, 09/10/2014).

Access to water sources in Belladere in Centre department is reportedly limited (Alter Press, 14/01/2015). As of June, 50% of camps lack adequate sanitation facilities; only one-third have a water point.

Shelter

94% of people left homeless by the 2010 earthquake have been relocated outside camps. Their living conditions are poorer than before the earthquake (UN, 27/10/2014).

Overall, 3.5 million people live in precarious neighbourhoods and informal settlements in urban areas in Haiti, suffering from socio-economic deprivation, and elevated risk of disaster impacts and forced eviction. Around a third do not have legitimate status/rights for the land they occupy. Land disputes and tensions are common and have been accompanied by coercion, violence and forced eviction (OCHA/UNCT, 11/03/2015). 22,810 people in 21 camps are considered at risk of forced eviction, especially in Port-au-Prince, Delmas, Croix des Bouquets, as landowners seek to reclaim their land (OCHA/UN, 31/12/2014).

Education

17% of IDPs in camps surveyed in 2014 have not received any education services (OHCHR, MINUSTAH and Protection Cluster, 30/06/2014).

Protection

Children

Five years since the earthquake, many children still show signs of emotional and psychological stress and remain in need of protection; minors in camps are particularly at risk of exploitation, with sexual violence commonplace (Save the Children, 08/01/2015).

Risk of Deportation

Hundreds of Haitians living irregularly in the Dominican Republic, and more than
300,000 Dominicans of Haitian descent, are at risk of forced expulsion from 16 June, when the regularisation process will end (OCHA, 26/03/2015).

In total, an estimated 600,000 Haitian nationals or people of Haitian descent face an elevated risk of forced expulsion and deportations from countries of the Caribbean region. Most of them are unable to obtain birth certificates and have their civil status has been affected by national policies (OCHA/UNCT, 11/03/2015). 892 irregular migrants have been repatriated to Haiti in 2015 and returns are expected to rise in the coming months (GARR, 06/03/2015).

Sexual and Gender-based Violence

The number of rapes reported in the first half of 2014 is double that of the same period in 2013. More than two-thirds of the rapes reported involved minors (OHCHR and Protection Cluster, 30/06/2014). Gender-based violence continues to be of great concern in IDP camps (OHCHR, MINUSTAH and Protection Cluster, 30/06/2014).

Updated, 01/04/2015

HONDURAS DROUGHT, FOOD INSECURITY

LATEST DEVELOPMENTS

No significant developments this week, 09/04/2015. Last update 07/01/2015.

KEY CONCERNS

- 930,000 people in 165 departments have been affected by drought (Government, 13/01/2015).
- 682,000 people are affected by moderate and severe food insecurity (OCHA, 23/02/2015).

Humanitarian Context and Needs

Disasters

Drought

930,000 people in 165 departments have been affected by drought (Government, 13/01/2015). Choluteca, Valle, El Paraiso, Francisco Morazán, Intibuca, and Lempira departments are most affected (EU, 20/08/2014).

Drought has affected 2.5 million people in Central America (Government, 13/01/2015).

Food Security

According to assessments, 682,000 people are affected by moderate and severe food insecurity (OCHA, 23/02/2015). Due to the losses in the first primera harvest of 2014, the increase of food prices, and lack of job opportunities, the majority of poor households are at IPC Phase 2 (Stressed) in February and March (FEWSNET, 02/2015).

Parts of Honduras are projected to be at IPC Phase 3 (Crisis) over April–September 2015, higher than the same period in 2014 and the five-year average, due to a lack of food reserves and an increase in grain prices (FEWSNET, 13/03/2015).

Two million people in Nicaragua, Guatemala, El Salvador, and Honduras are in need of food assistance due to the drought (UN, 06/02/2015).

Agriculture and Markets

Delayed posotera sowing due to moisture deficits in August will result in stepped production. The price of maize and beans will be higher than in 2013 (FEWSNET, 12/2014).

The coffee leaf rust epidemic, which began in 2012 over the entire Central American region, has a persistent impact on the livelihoods of small-scale farmers and day labourers. (WFP, 15/10/2014).

Health and Nutrition

Limited access to water due to drought is having a negative impact on hygiene, in turn increasing health risks, especially acute diarrhoeal diseases. Health services in rural areas do not have sufficient capacity to meet the needs of the affected population and there is a 50% shortage of medicine stocks (OCHA, 10/12/2014).

Chikungunya

7,400 cases of chikungunya have been reported since October 2014 (local media, 23/02/2015).

Nutrition

3.4% of children under five are suffering from acute malnutrition, the proportion is greater among girls (5.6%). At least 19,559 children are malnourished as a direct consequence of the drought (OCHA, 10/12/2014).

Reviewed: 09/04/2015

NICARAGUA DROUGHT, FOOD INSECURITY

LATEST DEVELOPMENTS

No significant developments this week, 09/04/2015. Last update 18/03/2015.

KEY CONCERNS

- 930,000 people in 165 departments have been affected by drought (Government, 13/01/2015).
- 682,000 people are affected by moderate and severe food insecurity (OCHA, 23/02/2015).
Humanitarian Context and Needs

Disasters

Drought

A drought that began in July 2014, the worst in 30 years, affected an estimated 460,000 people (WFP, 02/2015). The most affected areas were the northern departments of Nueva Segovia, Madriz, and Esteli, bordering Honduras. Drought has affected 2.5 million people in Central America (Government, 13/01/2015). The agricultural impact included the death of 5,000 cattle and loss of one million bushels of rice and maize (local news, 11/02/215).

Winds

3,050 people have been affected by heavy winds in Managua, Chinandega, Carazo, Rivas, Leon and Esteli departments (Government, 10/03/2015).

Food Security

An estimated 460,000 people are affected by moderate and severe food insecurity (OCHA 23/02/2015). Poor households in northwestern areas will be at Stressed levels of food insecurity (IPC Phase 2) February–April 2015 due to production losses in the 2014 primera harvest, higher prices for basic food products, and reduced income opportunities. Other parts of the country are projected to be in Emergency levels of food insecurity (IPC Phase 3) May–September 2015 due to lack of food reserves, high grain prices, and lack of rain in coffee production (FEWSNET, 18/11/2014; 31/01/2015; 13/03/2015).

Agricultural Outlook

In Esteli, Madriz, Nueva Segovia, Matagalpa, León and Chinandega departments, farmers waited until the end of September to sow postrera seeds due to insufficient rainfall, which will result in decreased production.

The coffee leaf rust epidemic, affecting the entire Central American region, has had a persistent effect on the livelihoods of small-scale farmers and day labourers, though it is expected to be less harsh than in previous years (Government, 05/01/2015). Additionally, a dry start to apante season, which lasts from mid-December to the end of March, could negatively affect cropping activities (FEWSNET, 27/02/2015).

Health and Nutrition

Chikungunya

As of 24 February, 3,096 cases of chikungunya have been reported since July 2014, with 136 recorded during the weekend of 21–22 February (local media, 24/02/2015).

Reviewed: 09/04/2015
Recovery work has been made more difficult by the high tides, as a lot of coastal infrastructure has been affected (international media, 24/03/2015).

Food Security

Seawater has heavily impacted food crops and other valuable plants, and salinization means large areas cannot now be cultivated. Food crops at the shoreline were uprooted or wiped out. The impact on food security is significant, as most families cultivate fruit trees and food plants around their homes (FAO, 23/03/2015).

Health

The Betio national hospital and maternity ward on Tarawa atoll was damaged and patients had to be temporarily relocated to the gym on Bairiki (UNICEF, 15/03/2015; 17/03/2015; OCHA, 18/03/2015; Red Cross Movement, 16/03/2015). Some ten days after the storm the hospital was running again at its usual location, but much of its equipment has been damaged (international media, 24/03/2015).

Shelter and NFIs

On Tamana and Arorae islands, the damage appears much worse than has been reported so far. Hundreds of homes have been destroyed, leaving about half the communities on both islands displaced (international media, 24/03/2015). On the southern island of Tamana, 68 houses were reportedly destroyed. Affected families are staying with host families and relocating inland (UNICEF, 24/03/2015).

In many villages seawalls have collapsed, allowing high tides and storm surges to flood and damage property (UNICEF, 14/03/2015; international media, 12/03/2015; international media, 16/03/2015). Strong winds have also caused damage, prompting families to relocate (Red Cross Movement, 16/03/2015).

WASH

Local sources report the main concerns on Tamana and Arorae Islands are fresh water and sanitation (international media, 24/03/2015). Freshwater wells have filled with seawater (UNICEF, 24/03/2015).

Education

Schools are open but lack of transportation means a lot of children cannot reach school (UNICEF, 17/03/2015).

Reviewed 08/04/2015.

VANUATU DISPLACEMENT, CYCLONE

LATEST DEVELOPMENTS

31 March: No food markets are functioning in Tanna, Emae and other Shepherd Islands in Shefa province. Rural markets are not functioning in Erromango, (Tafea province), Tongoa (Shefa), and Paama and southeast Ambrym (Malampa) (WFP 31/03/2015).

31 March: Access is being restored; roads are being cleared and maritime transport corridors with Port Vila are re-established (WFP, 31/03/2015).

For more information, visit the ACAPS country analysis page.

Humanitarian Context and Needs

Disasters

Category five Tropical Cyclone Pam hit Vanuatu in the evening of 13 March 2015, with winds of more than 250km/hr. It has affected the entire country, but particularly the central and southern provinces. 166,000 people on 22 islands were affected by the cyclone and are in need of assistance (UNICEF, 01/04/2015). 11 people died (Le Monde with AFP, 20/03/2015). Damage is widespread and severe. The worst impacted provinces include Shefa, Tafea, Malampa and Penama (Government, 16/03/2015). Other reports also indicate that Tanna Island has been severely hit. On 1 April, the Government extended the state of emergency for an additional 14 days (Radio New Zealand, 01/04/2015).

Access

Access has since improved significantly: most roads have been cleared and are accessible by truck, although trucking capacity remains a constraint on Efate and Tanna. Maritime transport corridors with Port Vila are rapidly being re-established (WFP, 31/03/2015, Logistic cluster 05/04/2015). Mobile communications have also been re-established (Logistic cluster, 08/04/2015)

Provincial disaster committees, responsible for disaster response, still need fuel to transport humanitarian relief on the islands of Epi, Emae, Tongoa, Shefa province, Tanna, Tafea province, and North Pentecost, Penama province (OCHA, 03/04/2015).

An estimated 80% of power lines were cut throughout the capital and may not be fully restored for a few weeks (GDACS Virtual OSSOC, 14/03/2015).

Food Security

Food shortages are a serious concern for the majority of the population. In all provinces, much of the population will be without local staple food supply from the end of March until at least mid-June, when fast-growing crops can be harvested if replanting starts immediately (FAO, 23/03/2015).

In Porta Vila the poor population has largely ceased consuming fruit and vegetable. Most households are only eating rice and tinned foods. Households lacking sufficient food are skipping meals, and reducing portion size (WFP, 31/03/2015)

Agriculture

96% of crops have been destroyed in the affected areas, and around 80% of the population relies on agriculture for their livelihoods; 70% of the rural population...
depends on subsistence farming (OCHA, 02/04/2015; WFP, 31/03/2015; FAO, 23/03/2015).

Tanna and Erromango, Tafea province, and the Shepherd islands, Shefa province, are severely affected by loss of livelihoods and Ambrym and Paama, Malampa province, and Epi, Shefa province, are highly impacted. In these places, the majority of fruit trees have been either destroyed, or completely stripped of all fruit. Garden root crops (yam, manioc, and taro) have mostly been lost or badly damaged. More than half of the cattle population (pigs, cows, chickens) perished (WFP, 31/03/2015). 90–95% of farming and fishing equipment has been destroyed in the Shepherd Islands and the outer islands surrounding Efate (OCHA, 02/04/2015).

Markets

In Tanna, Emae and other Shepherd Islands, no market activity is currently taking place because of the lack of surplus, damaged market infrastructure, and the lack of purchasing power. (WFP, 31/03/2015).

In Erromango, Tongoa, Paama and South East Ambrym, rural markets are not functioning and local food shops have limited stocks of imported items. Prices have increased (WFP, 31/03/2015).

Health and Nutrition

Part of the country’s main hospital, Vila Central, has been destroyed, according to the National Disaster Management Office (international media 13/03/2015).

53 of the 61 health facilities (not including first aid posts) assessed in affected areas are functioning; 43 have sustained some damage (Government, 03/04/2015).

It is expected that at least 50% of children under five (17,000 children) will be at risk of worsening childhood illnesses and nutritional status (OCHA 15/03/2015). Measles is present in Vanuatu, and a breakdown in sanitation could facilitate transmission (UNICEF 15/03/2015). Immunisation and child nutrition are priorities (OCHA 15/03/2015).

Nutrition

Adequate nutrition is required for over 160,000 affected people, in particular nutritional support for pregnant and lactating women and children under five years (OCHA, 03/04/2015).

Shelter and NFIs

Approximately 13,410 houses were damaged (OCHA 03/04/2015). More than 70% of houses on Tanna, Erromango and Emae have been destroyed or seriously damaged. Between 40% and 70% of houses have been destroyed or seriously damaged in East Ambrym, Paama and the Shepherd Islands (WFP, 31/03/2015). As of 1 April, OCHA estimates that 75,000 people are in need of shelter assistance (OCHA, 01/04/2015).

WASH

The provision of WASH services in evacuation areas is urgent. 110,000 people are in need of clean drinking water (OCHA, 03/04/2015). A tenfold increase in WASH supplies will be needed for the next 2–3 months (OCHA 15/03/2015).

The most severely affected areas are South East Ambrym, North Erromango and Tanna where water tanks have been destroyed and safe drinking water is in short supply. In South Erromango and other highly affected areas, water tanks are polluted and water is undrinkable. Tanks need cleaning and water supply systems need to be restored (WFP 31/03/2015).

Port Vila’s water supply has been reconnected in some areas. There are concerns for areas out of the network as well as the safety of drinking water (NDMO Sitrep 14/03/2015).

Education

On 30 March, schools reopened (UNICEF 02/04/2015). An estimated 70% of early childhood centres and primary and secondary schools have been affected, and approximately 30,000 school-aged children (UNICEF, 01/04/2015). The cyclone affected half the schools in Shefa province, including the outer islands of Efate Island: one school was destroyed and nine were severely damaged. In Penama province, one school was destroyed. Materials and resources in many schools have been damaged and are needed in addition to regular supplies (OCHA, 01/04/2015).

Updated: 08/04/2015

SOUTH AMERICA

COLOMBIA CONFLICT, DROUGHT, DISPLACEMENT, INSECURITY

LATEST DEVELOPMENTS

No significant developments this week, 07/04/2015. Last update 24/03/2015.

KEY CONCERNS
Five decades of armed violence coupled with the country’s frequent natural disasters have had serious humanitarian consequences. Forced displacement, landmine contamination, and gender-based violence are among the major concerns. For rural communities, movement restrictions by armed groups limit access to basic health services, crops and labour markets, especially in the country’s Pacific region.

For more information, visit the ACAPS country analysis page.

**OVERVIEW**

Colombia’s armed conflict has spanned five decades, pitting the central government against armed groups such as the Armed Revolutionary Forces of Colombia – People’s Army (FARC-EP) and the National Liberation Army (ELN). Created by landless peasants, the FARC-EP stated aim is to “end social, political, and economic inequalities”. The ELN was founded on Marxist-Leninist ideals (In Sight Crime). Attempts at peace negotiations in the 1980s and 1998-2000 failed. The latest FARC-EP–Government peace negotiations began in November 2012 in Havana, Cuba. Agreements have been reached on agrarian reform, political participation, and illicit drugs. Negotiations resumed on 2 February and will focus on the end of the armed conflict (World Bulletin, 20/01/2014; AFP, 02/02/2015). Another round of peace talks began on 25 February prior to the arrival of former UN Secretary General, Kofi Annan, to Cuba (international media, 25/02/2015). On 3 March, the FARC-EP declared a peace agreement wouldn’t be signed if its members were to be tried and jailed (AFP, 03/03/2015).

**Security Context**

The intensity of the armed conflict has decreased substantially since peace negotiations began in 2012. Disarmament, demobilisation and reintegration programmes have been operational since 2003: 56,903 people have been demobilised from armed groups, including 47,770 people who have gone through reintegration programmes with the Colombian Reintegration Agency (Government, 16/12/2014).

Nonetheless, violence and insecurity persist, including kidnappings and extortion by armed groups and BACRIM.

**FARC-EP**

The Revolutionary Armed Forces of Colombia – People’s Army (FARC-EP) is the oldest left-wing militant group in Colombia. It was formed in 1964 by the Colombian Communist Party as a result of rural unrest from fighting between the liberal and conservative parties. Approximately 7,000 fighters make up the FARC-EP today, which allegedly makes between USD 500 and 600 million in profits from the illicit drug trade (UNRIC 2013; BBC 29/08/2013). The FARC-EP has been active throughout the country, but especially in Arauca, Meta, Norte de Santander, Cauca and Antioquia. In November 2012, the group joined peace negotiations with the Government.

**ELN**

The National Liberation Army is a left-wing militant group formed in 1965 and composed of 1,500 fighters. On 7 January, it stated that it intended to join the peace talks and would consider disarmament (AFP, 07/01/2015; BBC, 07/01/2015). The ELN has been active in Arauca, Norte de Santander, Nariño and Cauca Departments (Kienyke, 2013). The Colombian army said they killed six ELN fighters in Catatumbo, Norte de Santander department following a number of recent attacks and kidnappings by the group (local media, 22/02/2015).

**Government forces**

The Government of Colombia’s strategies to combat non-state armed groups have been closely linked to eliminating the cultivation of illicit crops in the country, which finance the armed groups.

**BACRIM and post-demobilised armed groups**

Criminal gangs (bandas criminales) under the names Black Eagles, Erpac, and Rastrojos, among others, are generally made up of former paramilitary fighters and another former armed group, the United Armed Forces of Colombia (AUC). They are involved in drug-trafficking and extortion throughout the country as well as in Venezuela and Panama, but are particularly active in Antioquia department as well as the Pacific and Caribbean regions (BBC 29/08/2013).

**Conflict Developments**

During the fourth quarter of 2014, Antioquia, Cauca, Arauca, Meta, and Norte de Santander departments were the most affected by armed activity (OCHA, 07/01/2015). But since FARC-EP’s unilateral ceasefire in mid-December, the number of violent incidents related to the armed conflict has dropped to levels not seen since the 1980s (Missionary groups and BACRIM.

During the fourth quarter of 2014, FARC-EP announced a unilateral ceasefire (Washington Office on Latin America, 2014). On 7 February, the FARC-EP stated that it would be ready to give up its arms and become a political party if the Colombian Government meets its side of recent agreements, which include a bilateral ceasefire, the suspension of investments in mining projects, and the reform of armed forces and state security (El Espectador, 07/02/2015). A month later, the Colombian Government and FARC-EP agreed to remove landmines and explosives, with a target of 2025 to complete demining (Reuters, 09/03/2015). On 10 March, the Colombian Government declared it would halt bombing raids against FARC-EP for one month (Al Jazeera, 11/03/2015; BBC, 11/03/2015). On 19 March, the FARC-EP threatened to end the unilateral ceasefire unless the President calls off all attacks, stating that while air raids have stopped, other offensive manoeuvres have continued (Reuters, 19/03/2015).
International Service News Agency, 12/01/2015). Three FARC-EP fighters and one soldier were killed on 22 March when members of the FARC-EP were caught collecting an extortion payment from a farmer (local media, 23/03/2015).

On 6 April, three police officers were killed by an unidentified armed group in Norte de Santander department, bordering Venezuela (Colombia Reports, 06/04/2015).

A suspected ELN attack against the police in Bogotá in March resulted in eight injured (local media, 12/03/2015). In February, the Colombian army said they killed six ELN fighters in Catatumbo, Norte de Santander department, following a number of attacks and kidnappings by the group (local media, 22/02/2015).

Humanitarian Context and Needs

4.2 million people are in need of humanitarian assistance in Colombia, including 1.5 million affected by natural disasters and 262,000 in trapped communities, primarily in Chocó department and made up mostly of indigenous communities and Afro-Colombians (OCHA 2014; 20/01/2015).

Access

Trapped Communities

Approximately 262,000 people are trapped and need assistance due to ongoing conflict where they live (OCHA 20/01/2015). Almost 25,000 people suffered movement restrictions in January and February 2015 due to armed violence (OCHA, 28/02/2015). Since end February, movement has been restricted and humanitarian assistance blocked for 1,200 members of indigenous and farming communities in Caceres, Antioquia department, due to fear of potential clashes between ELN and a ‘demobilised’ armed group (OCHA, 11/03/2015). A community of 912 Eperera Siapidara, an indigenous people, are confined to a rural zone in Timbiquí, Cauca department, due to security threats – cancelling all school and putting a stop to daily activities (OCHA, 19/03/2015).

Disasters

From January 2014 to February 2015, 1.3 million people were affected by natural disasters in Colombia (OCHA, 24/02/2015). During the month of February, 17,700 people in Alto Baudó and Medio Baudó, Chocó department, were affected by natural disasters (OCHA, 24/02/2015).

Drought

In January and February 2015, the prolonged drought, primarily in the Caribbean coast, affected 86,500 people. It limited access to water, affected food security, health services, and education because classes were cancelled (OCHA, 28/02/2015). Six forest fires have been reported in the department of Antioquia (Ituango, Anzá, Urrao, Caicedo, Itagui and Medellín municipalities). 24 of the southwestern municipalities are on red alert (PAHO, 13/03/2015).

In Chocó department, 206 Embera Katio, an indigenous people, will return to Pueblo Rico municipality in

On 21 March, 100 people were affected by a landslide in Bogotá. Also, on 22 and 23 March, three people were injured and 150 houses were damaged (ECHO, 27/03/2015).

Earthquake

On 10 March, a 6.6 magnitude earthquake at a depth of 147km occurred in Santander department in the north. 200 households were affected as well as some roads and buildings (ECHO, 11/03/2015; Government, 11/03/2015).

Displacement

IDPs

Colombia has 5.7 million IDPs (IDMC, 10/2014). In 2014, there were 224,300 new IDPs (OCHA, 20/01/2015), compared to 228,526 in 2013 (Reuters, 25/02/2015). 39% of the IDP caseload between 2012 and June 2014 was concentrated in the Pacific region. In 2014, new displacement was primarily concentrated in Cauca and Chocó (OCHA, 07/01/2015).

655 people were displaced at end February from rural communities in Bajo Baudó, Chocó department due to clashes between the ELN and a post-demobilised armed group. More than 1,000 others are trapped and at risk of displacement. Access to the region is difficult, and populations have limited access to food, water, education, and health services (OCHA, 04/03/2015).

Two minority groups, the Nukak (120 people), at risk of extinction, and the Jiw (136 people), who were displaced 2001–2005, are in Guaviare and Meta departments, respectively, and require assistance with shelter, WASH, and education. The Jiw community in Puerto Concordia, Meta, also needs seeds for food security and livelihoods (OCHA, 21/03/2015; 31/02/2015).

Returnees

2,000 IDPs have returned to Meta department (Government, 26/02/2015).

39% of the IDP caseload between 2012 and June 2014 was concentrated in the Pacific region. In 2014, new displacement was primarily concentrated in Cauca and Chocó (OCHA, 07/01/2015).
Colombian Refugees in Neighbouring Countries

400,000 Colombians have sought refuge in neighbouring countries. 900–1,000 are arriving in Ecuador every month; the rate has dropped by 30% since 2012 (Nuevo Municipio, 26/11/2014).

Food Security

1.2 million people are food insecure, due to in part to low food production, poverty and internal displacement from conflict (OCHA, 20/01/2015; USAID). 557,000 require food assistance. Indigenous communities in Nariño are among the most affected (OCHA, 20/01/2015).

Health and Nutrition

Only 30% of victims of armed conflict have access to healthcare (OCHA, 20/01/2015).

Chikungunya

At least 213,000 people have been infected with chikungunya, including 90,000 who are predicted to suffer from long-term arthritis as a side-effect of the disease. The outbreak began in September 2014 (local media, 19/03/2015; 12/03/2015). The Caribbean region is the most affected (local media, 19/03/2015).

WASH

1.1 million people are in need of WASH (OCHA, 20/01/2015). Only 35.5% of the population consumes safe drinking water, with only 15% of rural areas consuming treated water (OCHA, 20/01/2015).

Flooding in Quibdo, Bojaya, and Alto Baudo (Choco department), has caused river sedimentation, cutting off access to water (OCHA, 03/02/2015).

Shelter and NFIs

916,000 people need shelter (OCHA, 20/01/2015). Many of those displaced by armed conflict come from rural areas and have difficulty re-obtaining rights to their homes upon their return. A legal process is in place in the departments of Atlantico and Magdalena in northern Colombia, though some claimants have received threats from paramilitary groups (Amnesty, 23/01/2015).

Education

One million school-aged children are in need of education; 70% in rural regions and 30% in urban areas (OCHA, 20/01/2015; Enseña por Colombia, 2015).

Protection

Afro-Colombians and indigenous peoples are highly vulnerable groups, as they are minorities and generally live in areas more likely to be trapped by conflict (NRC, 09/2014).

In 2014, there were 626 registered attacks against human rights defenders, a 147% increase compared to 2013. 73% of attacks were carried out by post-demobilised armed groups. Many local NGOs are concerned that successful peace negotiations may not result in a decrease in such attacks (OCHA, 28/02/2015).

Child Protection

Reports show that since peace negotiations began in 2012, 76% of children fighting with the FARC-EP and 18% with the ELN have been reintegrated into society (UNICEF, 2014).

Sexual and Gender-based Violence

52% of displaced women have suffered some type of sexual violence after displacement, according to a study by OHCHR. Women in the Pacific region are particularly affected (NRC, 09/2014).

Mines and ERW

In the municipality of San Miguel, Putumayo department, pamphlets distributed by the FARC-EP warn citizens of antipersonnel mines; 1,284 people are unable to fish, hunt, or work regular hours (OCHA, 16/01/2015).

BOLIVIA DROUGHT, FLOODS, FOOD INSECURITY

LATEST DEVELOPMENTS

No significant developments this week, 07/04/2015. Last update 18/03/2015.

KEY CONCERNS

- 146,300 people affected by heavy rains (OCHA, 23/03/2015).
- Around 130,000 affected by drought (Government, Media, 10/12/2014).
- A series of natural disasters has affected Bolivia since the beginning of the rainy season in October 2013 and has had a severe impact on livelihoods and food security.

Humanitarian Context and Needs

Disasters

Drought

Around 130,000 people have been affected by drought, including an estimated 20,000 farmers (Government, 05/01/2015).
Estimates indicate that close to 63,000 hectares of crops, including rice, maize, and cassava, have been negatively impacted. Another 120,000 hectares of soy have been lost in Cuatro Canadas and Pailon, Santa Cruz (local media, 22/02/2015). It is estimated that 20,000 farmers in 20 municipalities in Cochabamba are affected (Government, 05/01/2015).

**Heavy Rainfall and Floods**

Three rivers in the amazon basin are in red alert with a risk of overflowing: the Mamore, Yacuma, and Ibare. The Beni, Madre de Dios, Orthon, Abuna, Mamore, Itenez, Itonomas, Blanco and Madera rivers are on orange alert (local government, 03/04/2015).

Since October 2014, heavy rains have affected 146,300 people in 97 municipalities of La Paz, Cochabamba, Oruro, Santa Cruz, Potosí, and Beni departments. 30 people have died (OCHA, 23/03/2015; 16/03/2015; 09/03/2015). 19,000 hectares of crops have been affected (UN, 05/03/2015; RedHum, 10/03/2015).

Chuquisaca is worst hit, with 30,100 people affected in 13 districts (Government, 23/01/2015). In Pando department, the Acre River overflowed, affecting 2,400 people (OCHA, 23/02/2015). Access to Ixiamas and San Buenaventura, La Paz department, is limited due to floods (local media, 06/02/2015). The overflow of the Ibare River in Beni department flooded Puerto Varador and forced families to find alternative shelter (Government, 05/03/2015). On 5 March, 19 people were evacuated due to the overflow of Tahuamanu River in Pando department (Government, 05/03/2015).

The floods in Bolivia’s Amazon valleys, lowlands, and plains during the October 2013 –March 2014 rains were the worst in 60 years, affecting an estimated 325,000 people (OCHA 06/2014; ACT Alliance, 24/09/2014). In September, 146 of 339 communities were still affected (Government).

**Landslides**

258 people were evacuated from the centre of Huanuni, Oruro department following a landslide on 14 February (Government, 15/02/2015).

**Cold Wave**

Cold waves have affected 2,200 people in three municipalities of Oruro department (local media, 27/02/2015).

**Access**

Two bridges were destroyed in Quiabaya and Warisata communities, La Paz department, due to heavy rains, limiting access to approximately 8,600 people (Government, 24/02/2015). On 27 February, a bridge connecting Cochabamba to Santa Cruz was destroyed. Reconstruction of this bridge will take six months, and metal bridges will be set up in the meantime (Government, 05/03/2015). Heavy rains on 27 March required the temporary bridge to be blocked (local media, 28/03/2015). As of 27 March, there were three routes closed to traffic: Siles-Paraiso in Beni department; Route 4 in Espiritu Santo II and Villa Tunari in Cochabamba department; and Route 25 Abra Poea-Licoma in La Paz department (local media, 28/03/2015). In Chuquisaca department, heavy rains and landslides have damaged numerous roads in the Heredia stretch of San Juan del Pirai (Government, 09/03/2015).

**Food Security**

Despite losses in the department of Beni, harvest prospects for 2014’s verano season (November to March) are favourable, since the main cereal-producing departments of Santa Cruz, La Paz, and Cochabamba were less severely affected by drought, and the abundant rains may have benefited the developing crops in some places (OCHA, 26/01/2015; 09/02/2015; 23/02/2015). In Azurduy municipality, Chuquisaca department, more than 2,000 families have missed the planting season due to heavy rains and (local media, 02/02/2015).

**Health and Nutrition**

There have been 328 reported cases of chikungunya in Santa Cruz department (Redhum, 26/03/2015).

Between January and February 2015, 25 cases of dengue were reported in Beni department and 206 suspected cases exist (Government, 24/02/2015).

**WASH**

Water is still cut off in municipalities affected by the rains (UN, 05/03/2015). Shelters do not have proper waste collection and the number of functioning latrines is limited (UN, 05/03/2015).

*Updated: 07/04/2015*
Introduction to the Global Emergency Overview Update

The Global Emergency Overview is a weekly update that provides a snapshot of current humanitarian priorities and recent events. The Global Emergency Overview collates information from a wide range of sources, including Reliefweb and media sources, and displays this information in a manner that allows for quick comparison of different humanitarian crises. The primary objective of the Global Emergency Overview is to rapidly inform humanitarian decision makers by presenting a summary of major humanitarian crises, both recent and protracted. It is designed to provide answers to four questions:

1. Which humanitarian crises currently exist? (World map)
2. What has happened in the last seven days? (Highlights and Snapshot)
3. What is the situation in the country affected by a crisis? (Highlights Box and Narrative)
4. Which countries could be prioritised in terms of humanitarian response? (Prioritisation)

The Global Emergency Overview consists of three main sections:

First, the world map provides an overview of how the countries are prioritised, indicated by different shades of blue. The countries are subdivided by four priority levels: “on watch”, “situation of concern”, “humanitarian crisis”, and “severe humanitarian crisis”.

The priority levels are assigned on the basis of:
- the number of people affected by recent disasters
- the level of access to the affected population
- the <5 mortality rate
- the level of development of the country
- the number of protracted IDPs and refugees.

If a country experienced a disaster in the seven days prior to an update or witnessed an escalation of an on-going crisis, a country is highlighted by a yellow dot on the map.

Second, the snapshot briefly describes what has happened in the last seven days from the date of publication, by outlining the crises that have occurred in the different highlighted countries.

Third, narratives for each country included in the Global Emergency Overview reflect major developments and underlying vulnerabilities of a country over the last months. Narratives are written based on secondary data. For each country, a specific highlights box is also added to put emphasis on the major developments that happened over the past 10 days.

The Global Emergency Overview is a mobile application.

To download the mobile application for Android phones click here.


To download the mobile application for iOS phones click here.


Update

The Global Emergency Overview will be updated once a week and the results will be available every Tuesday before midday (Central European Time/Central European Summer Time). In case of major new humanitarian events or an escalation of an on-going crisis which triggers a change of prioritisation, the Global Overview will be updated on an ad-hoc basis.

Disclaimer

While ACAPS has defined a methodology striving to ensure accuracy, the information provided is indicative and should not be used in isolation from alternate sources of information for any decision making. ACAPS is not responsible for any damage or loss resulting from the use of the information presented on this website.

More information on the Global Emergency Overview Methodology can be found in the Global Overview Methodology Brief and the Frequently Asked Questions.