



*This report is produced by OCHA Eastern Africa in collaboration with humanitarian partners. It is issued by OCHA in New York. It covers the period from 6 - 13 October. The next report will be issued on 20 October 2011.*

**I. HIGHLIGHTS/KEY PRIORITIES**

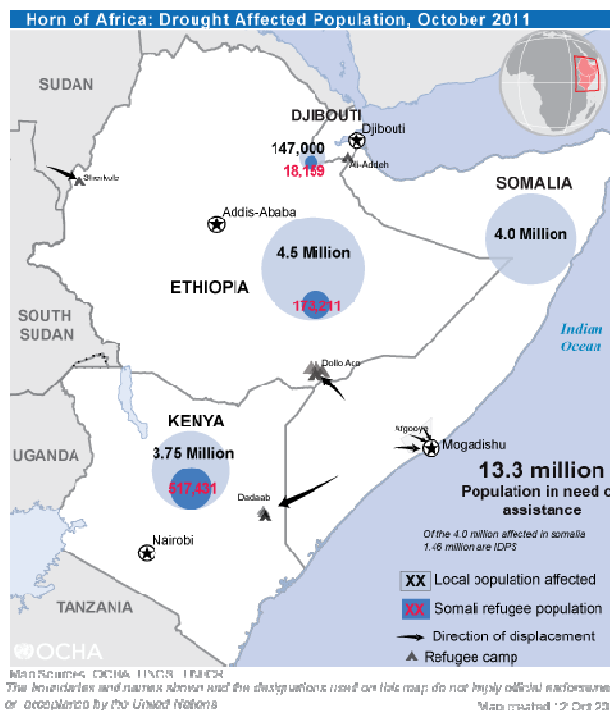
- October - December rains are underway in the region
- There is an increasing caseload of malaria/dengue fever in Kenya and measles in Somalia
- Flash floods have been reported along the Wabishabelle River in Ethiopia, affecting up to 18,000 people

**II. Situation Overview**

October to December rains are underway in the region, which should provide much needed relief for many areas affected by dryness. However rainfall may not be well-distributed during the next week. In southern Somalia, little to no rainfall has been observed which is expected to exacerbate drought conditions, resulting in unfavourable conditions for upcoming cropping activities and further depleting water resources. On the other hand, torrential rain has hit drought-displaced families living in camps in Mogadishu. During the next seven days, FEWS NET forecasts an increase in rainfall across East Africa. The heaviest rainfall amounts (> 50 mm) are expected across portions of south eastern Ethiopia, eastern and coastal Kenya and southern Somalia.

New disease outbreaks have been reported across the region, with an increase in malaria and dengue fever in the north of Kenya. There is also a reported increase in measles amongst refugees in Dadaab, eastern Kenya, and central and south Somalia.

UNHCR reports that a sustained level of internal displacement in Somalia is expected into 2012 due to the prolonged impact of drought, famine and lack of humanitarian access. An estimated 1.5 million people are displaced within Somalia at present. MSF report a deteriorating situation in and around Mogadishu, where medical needs currently far exceed available services. The population of the capital is estimated at more than 1 million, half being displaced persons. Over 906,000 Somalis have fled across the border to neighbouring countries and farther afield in the region.



The influx of Somali refugees into Kenya and Ethiopia continues, although the rate of daily arrivals to Kenya seems to be decreasing. In September, an average of 1,000 refugees arrived each day in Dadaab, down from the June peak of 1,600, while 572 refugees per day arrived in Kakuma, down from the July peak of 1,410. In Ethiopia, the rate of refugee arrivals increased from an average of 250 to an average of approximately 450 per day between 5 and 12 October, with a high of 724 on 10 October. However, UNHCR cautions that the increase is likely just a sign of the normal ebb-and-flow of the arrival rate considering the length of time it takes most refugees to arrive at the border with Ethiopia (about 10 days).

Insecurity and military clashes continue in south-central Somalia and Mogadishu.

### III. Humanitarian Needs and Response by Country

#### SOMALIA

The recent FSNAU/FEWSNET seasonal assessment indicates 4 million people remain in crisis, including 1.8 million in humanitarian emergency and 830,000 in an acute food and livelihood crisis. More than 1.5 million Somalis are internally displaced and over 900,000 Somali refugees are externally displaced in Kenya, Ethiopia, Djibouti and Yemen. A new family tracing and reunification programme has been launched to help reunite families separated by drought, famine and conflict.

**Food:** The cluster is providing food assistance to 2.2 million of 4 million food insecure (including 372,000 in Mogadishu and 1.33 million in the rest of the south). Only 75 per cent of the cluster members are currently reporting hence the number of beneficiaries could be higher. Interventions include provision of household food rations, vouchers for households to purchase food on the market, daily meals and nutrition interventions for children under five. There is a need for greater coordination and information sharing to ensure all gaps are being addressed and operational locations are identified.

**Nutrition:** Out of the 450,000 malnourished children under five years in Somalia, 348,335 children have been admitted for treatment for severe and moderate acute malnutrition in stabilisation centres, targeted supplementary feeding centres and outpatient therapeutic programmes since January. Since August, the cluster has also provided Blanket Supplementary Feeding to families with malnourished children under age 5, reaching an estimated 436,314 people in Bay, Bakool, Hiraan, Lower and Middle Shabelle and Middle Juba. The wet feeding programme has been suspended in Dhobley following a diarrhoea outbreak. Key challenges include insecurity hampering easy movement of staff for monitoring and outreach activities, pipeline inefficiency and partner capacity for a quick scale-up.

**Health:** Measles is on the rise with estimated 7,000 – 8,000 cases in central and southern Somalia. Since the start of the emergency vaccination campaign in south central Somalia in July, over 1 million children between 6 months and 15 years have been immunized in the emergency vaccination campaign (including polio and measles vaccinations, de-worming tablets and vitamin A supplements) in Banadir, Bakool, Bay, Gido, Hiraan and Lower Juba. However, unvaccinated populations on the move in Mogadishu pose challenges in the control of the measles outbreak. Non-state armed groups are refusing to permit mass public immunization campaigns. WHO and partners continue to negotiate with local authorities to conduct vaccination campaigns. Health cluster partners are operating 24 mobile clinics across Somalia, but no data is yet available on the number of beneficiaries.

**WASH:** Out of the estimated 3.3 million in need of access to safe water and sanitation, the cluster has provided 1.1 million people with sustainable water access and 1.7 million with temporary water access since January, of whom 1.5 million are in the south. A further 490,000 people are accessing latrines and 1.1 million have benefited from hygiene promotion and non-food item packages.

**Agriculture and Livelihoods:** Pasture availability is significantly below average. Since January, over 890,000 people have been and/or continue to be involved in cluster interventions including agricultural inputs, cash relief, food vouchers, income generating activities, food for work interventions, training, emergency livestock interventions and animal vaccinations. The cluster's CAP requirement is only 43 per cent funded, limiting the cluster's availability to carry out planned interventions.

**Education:** The cluster estimates that 380,000 children are benefiting from Education Cluster-supported interventions. Among the interventions are 104 child friendly spaces targeting 5,210 children without access to school in Bakool, Banadir, Bay and Lower Shabelle with essential services include mine risk education, HIV/AIDS awareness campaigns and vaccination campaigns.

**Emergency Shelter and NFI:** Since January, 582,342 people have received emergency assistance packages, 44 per cent of the target. EAPs that were held in Mogadishu port have been cleared and in a warehouse awaiting distribution to beneficiaries. In addition, 33,678 people throughout Somalia have benefited from transitional shelter since January.

**Protection:** The Protection Cluster's Population Movement Tracking has recorded an influx of 100 new IDPs to Mogadishu this week and 4,500 new displacements in Somalia. 251 people were reportedly affected by protection violations. Since January, cluster partners have provided 12,942 survivors of protection violations with psychosocial, legal and medical support. Additional cluster interventions include advocacy initiatives on illegal detention, IDP and child rights and GBV, capacity-building activities on mitigating protection risks, clinical management of rape and protection monitoring and reporting. As of October 11, a new family tracing and reunification programme was launched to help teams based in Mogadishu, Afgooye and Jowhar (areas with the highest number of IDPs).

**Logistics:** Cargo is being offloaded and Mogadishu port and airport but Mombasa port still faces serious congestion with waiting times of 3 to 7 days. The cluster has finalised arrangements for interagency storage space in Mogadishu with more than 1000 m<sup>3</sup> storage capacity.

## KENYA

**Food:** Of the 3.75 million food insecure, WFP is assisting approximately 1.4 million people and 550,000 refugees. The Government of Kenya has been assisting an additional 780,000 people, which WFP is now planning to take over, aiming to reach a total of 2.8 million beneficiaries by the end of the month.

**Nutrition:** Of the estimated 385,000 cases of severe and moderate acute malnutrition, 208,635 are being targeted for assistance and 147,471 have been admitted to nutrition centres for treatment<sup>1</sup>. 16,533 children under five have been admitted for treatment for severe acute malnutrition (SAM) in 72 in-patient stabilization centres and 899 outpatient-feeding programmes. 67,374 children have been admitted for treatment for moderate acute malnutrition (MAM) in 542 outreach sites and 655 supplementary feeding sites in drought-affected areas. New nutrition survey results have been released for Isiolo and Laikipia in central Kenya. In Isiolo, new nutrition survey results indicate global acute malnutrition (GAM) rates of 18.6 per cent and SAM rates of 3 per cent, above emergency thresholds but not significantly higher than those recorded a year ago when GAM was 14.2 per cent and SAM was 1.5 per cent. In Laikipia, results indicate GAM rates of 10 per cent and SAM rates of 1.8 per cent. The next round of nutrition surveys are expected to begin next week in Mandera, Turkana and Wajir.

**Health:** An estimated 10,000 people are now affected by the dengue fever outbreak in Mandera, northeast Kenya. The government and partners are heightening surveillance and case management. A household community based assessment is ongoing in Mandera to establish an accurate caseload. This week, one case has also been reported in Wajir district (northeast Kenya). Flooding in Turkana and Pokot areas (northwest Kenya) has caused a spread of malaria in the Upper Rift Valley, with outbreaks in Turkana, Kakuma and surrounding districts. All health facilities in the drought-affected areas of Eastern, North Eastern and Rift Valley provinces are using prepositioned anti-malarial drugs and supplies. WHO is working with the Government to develop a new malaria control strategy. A polio vaccination campaign which began on 24 September targeting one million children is ongoing in Nyanza and surrounding districts in southwest Kenya.

**WASH:** The sector is focusing on hygiene and sanitation promotion for 2.5 million people throughout the country. A hygiene promotion intervention is ongoing since two weeks in Turkana, targeting 75 health facilities (63 per cent of all facilities in Turkana). By the end of September, the intervention was completed in 10 health facilities; 250 community health workers were trained in hygiene and sanitation; and promotion for approximately 10,000 households had been undertaken. Sanitation activity is still low relative to water and

<sup>1</sup> These figures have been newly updated based on additional reports from partners.

<http://www.unocha.org/crisis/horn-africa-crisis>

hygiene activities. The response mapping exercise for September showed that sanitation activities contributed only 3.6 per cent of total activities, with most interventions (61 per cent) being water-related.

**Protection:** A consultant has been identified to draft the IDP Bill and the draft legislation will be available by end October 2011. On 30 September, the President signed the Female Genital Mutilation/Cutting (FGM/C) Bill into law establishing legislation that prohibits the practice of female genital mutilation and safeguards against violation of a person's mental or physical integrity through FGM/C.

**Agriculture and Livestock:** Whilst there has been significant rainfall in the west of the country, the northeast remains very dry, with livestock constrained to dry season grazing areas. According to the Kenyan Government, eight million livestock have been lost. The climate forecast of average to above average rains across Kenya increases the risk of flooding and diseases related to floods, in particular, the Rift Valley Fever. FAO is in the process of delivering veterinary drugs, cold chain equipment and supporting increased disease surveillance for Rift Valley Fever.

**Multi Sector Assistance to Refugees:** The total number of registered refugees by UNHCR in Kenya is 599,035. The majority of Somali arrivals on the outskirts of Dadaab camp have been relocated to Ifo II and Kambioos. The current population of Ifo 2 West exceeds 40,000; Ifo 2 East nearly 30,000; and Kambioos, where relocation started much later, nearly 10,000. **Food and Nutrition:** General food distribution, blanket and target supplementary feeding and school feeding are ongoing in the camps for the entire refugee population. **Health:** According to UNHCR, there has been an increase in the number of medical consultations in Ifo camp to an average of 65 consultations registered per clinician per day and MSF Spain is registering up to 115 consultations per clinician per day. UNHCR report that the capacity of Ifo hospital needs to be increased to cater for a population of nearly 200,000. Measles claimed five deaths and 113 cases were reported during the last week of September. In addition, seven cases of cholera have been confirmed, with one case in Hagadera camp acquired locally. One case of dengue fever was also confirmed in Dadaab town (a Kenyan national who had returned from a visit to Mandera). **WASH:** The level of WASH service provision in Ifo II and Kambioos has not matched the pace of the relocation. For example, Oxfam reports a delay in the supply of construction materials for latrines and CRS has been approached to bridge the gap. **Education:** Access to education remains a challenge in Ifo II and Kambioos, with the pupil-teacher ratio below minimum standards. In Ifo II, 18 classes are fully occupied, with only 8 teachers available.

## ETHIOPIA

The Ethiopian National Meteorological Agency (NMA) forecast for October 2011 to January 2012 confirms the re-emergence of weak *La Niña* conditions, which could delay the onset of recovery in the most drought-affected areas of the country from December 2011 to April 2012. Near normal to above normal rainfall is predicted across western, eastern and northern parts of the country in the coming months, and near normal to below normal rainfall across southern and south eastern parts of the country. While timely onset of the *deyr / hagaya* (October-December pastoralist rains) is expected to improve food security conditions across the drought-affected parts of the country, there is also an increased likelihood that the *deyr / hagaya* will withdraw early, extending the January to March *jilal* dry season. Reports of the onset of the *deyr / hagaya* rains have been received from many parts of southern Somali and Oromia regions – the most drought-affected parts of the country – in the past week.

Meanwhile, late season meher and karma rains (June to September long rains in highland parts of the country and the lowlands of Afar and northern Somali Regions) have been reported over parts of Afar, Oromia, northern Somali and Tigray regions in the past weeks. Reports have been received of increasing water levels in the Wabishabelle River which runs through the drought-affected southern Somali Region, raising concerns about the potential for flooding. Localized flash floods have already been reported in areas along the Wabishabelle, affecting up to 18,000 people with damage to crops and livestock. Localized flooding has also been reported in parts of the Southern Nations, Nationalities and Peoples Region (SNNPR), affecting an estimated 800 households (approximately 4,800 people).

<http://www.unocha.org/crisis/horn-africa-crisis>

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**Food:** Faced with continued shortages of relief food commodities, including pulses and oil, the Government, WFP and the NGO consortium Joint Emergency Operation (JEOP) have agreed to cover gaps by borrowing from each other's stocks. This will allow JEOP to provide a full ration in the seventh round of food distributions, while WFP and the Government will continue to allocate reduced rations (WFP reduced pulse rations; Government no pulse rations). Of the 4.56 million people identified as requiring food assistance in the second half of 2011, the JEOP covers the needs of 1 million people, while WFP directly covers 1.2 million people in the Somali Region and supports the Government to cover an additional 2.3 million people in other parts of the country. Allocations for the seventh round of food distributions began on 11 October.

**Nutrition:** The latest update from the Ethiopian Emergency Nutrition Coordination Unit (ENCU) indicates that, while elevated levels of severe acute malnutrition (SAM) continue to be reported in drought-affected areas, new admissions of severely malnourished children to therapeutic feeding programmes countrywide dropped by an estimated 6 per cent in August over July due to the start of the delayed belg harvest. The gradually decreasing trend is expected to have continued through September, although localized increasing trends have been reported from some of the most drought-affected parts of Somali and Oromia Regions in September. Between July and December 2011, an estimated 159,220 children under 5 in food insecure areas are expected to require treatment for SAM according to the ENCU.

**WASH:** The Government and partners continue to monitor rainfall status and its impact on water sources across the country in order to regularly update water trucking requirements. As of 10 October, an estimated 162 trucks were required for water trucking operations in Somali, Oromia, Afar and Tigray Regions, with 137 trucks currently operational, reaching an approximate population of 274,000. This leaves a gap of 25 trucks (to cover the needs of approximately 50,000 people). As a result of the WASH cluster's two-pronged strategy of water trucking and borehole maintenance in drought-affected areas, 90 per cent of boreholes in Somali, 81 per cent in Oromia, and 70 per cent in Afar regions are now functional. WASH Cluster partners also continue to support targeted acute watery diarrhoea (AWD) preparedness activities in different regions. Hygiene promotion training and community outreach activities continue in Kebridehar, Somali region, where an AWD outbreak is ongoing.

**Education:** School registration figures from Oromia Region suggest that current enrolment is much lower than during the last academic year: in some areas, enrolment is as low as 20 per cent. Drought-affected families have reportedly either migrated or face economic challenges that prevent them from returning their children to school. The Government has appointed a new Education in Emergency expert to coordinate the education sector with support from the cluster co-leads, UNICEF and Save the Children UK.

**Refugees:** Some 129,979 refugees from Somalia were hosted in the Dollo Ado camps as of 13 October, with 4,968 new arrivals registered since the beginning of the month. Decentralization continues to help strengthen health and nutrition service provision, with the crude mortality rate (CMR) in Kobe down to 0.4 deaths per 10,000 people per day this week (from 1.1/10,000/day at end September). In Hilaweyn, the CMR is 1.2/10,000/day, slightly up from 1.0/10,000/day the previous week. Continued monitoring and control measures are required to maintain the CMR below the 1/10,000/day international threshold.

On the other side of the country, the number of Sudanese refugees arriving at the border with Ethiopia continues to increase. UNHCR and ARRA's planning figure for new arrivals is 50,000 people through the end of 2011. More than 3,000 Sudanese refugees have been transferred to Sherhole camp in Beneshangul Gumuz to date and the camp has reached its full capacity. Transfers to the Tongo camp (which opened on 5 October) continue, with 1,425 refugees relocated to date as of 12 October. As a large number of unaccompanied minors have reportedly crossed the border, UNHCR has sent 13 social workers to the area to support the refugee registration process. Meanwhile, a joint food, health and nutrition assessment is ongoing in the area along the border, with preliminary findings indicating that new arrivals are in relatively good health. Measles immunization was completed at the entry point at Kurmuk at the end of last week, reaching 100 per cent of the target population, or 438 children, including some from the host community.



## DJIBOUTI

The 63 per cent rise in staple food price, combined with drought, has pushed about 147,000 people into chronic food insecurity. The rate of Somali refugee arrivals in Ali Addeh camp is declining.

**Agriculture and Livelihoods:** FAO is supporting the Ministry of Agriculture to improve the efficiency of water catchment in pastoral areas by constructing/rehabilitating 12 cisterns, providing fodder to drought-affected livestock and strengthening the disaster risk management platform, putting in place an early warning system and increasing capacity of domestic institutions to respond more rapidly.

**Food:** WFP is supporting 130,000 people countrywide through general food distribution and supplementary feeding. In the capital, rations, which feed a family of six, are being distributed monthly to 7,000 families with moderately malnourished children under age 5. The school feeding programme provides on-site feeding daily and take-home rations to 13,500 children in all primary schools. WFP is also reaching 18,200 refugees in Ali Addeh camp with general food distributions and targeted supplementary feeding programmes.

**Nutrition:** UNICEF is treating 4,800 children for SAM and 16,686 for MAM out of an estimated 31,006 in need of treatment (78 per cent). Admissions to the six ACF outpatient therapeutic programmes in urban areas almost doubled last month, from 232 admissions in August to 430 admissions in September, bringing the total number of admissions to 830. ACF technical support to the Ministry of Health in more than 40 health centres includes training of government health workers to diagnose and treat acute malnutrition.

**Refugees:** 20,611 refugees have been registered at Ali Addeh camp, meaning it is 14,000 people over capacity. At 18,159, Somalis make up most of the refugee population. The new refugee camp Holl Holl, due to open this month, is over 50 per cent completed.

### IV. Coordination

Humanitarian Country Teams in Djibouti, Kenya and Somalia are working on their consolidated appeals processes for 2012 to determine sectoral needs and funding requirements. In Ethiopia, where the annual Humanitarian Requirements Document (HRD) is produced instead of a Consolidated Appeal, planning for the joint bi-annual national needs assessment that underpins the analysis contained in the HRD is underway.

### V. Funding

The Kenya Emergency Humanitarian Response Plan is 68 per cent funded. Protection, education and health continue to record very low funding of 7, 16, and 17 per cent respectively. Somalia's CAP is 80 per cent funded, but Agriculture and Livelihoods and Protection still remain 43 per cent and 14 per cent underfunded respectively. The Djibouti and Ethiopia Drought Appeals are 56 per cent and 73 per cent funded respectively. Details: <http://fts.unocha.org>

**2.4 billion  
requested (US\$)**

**75%  
funded**

***All humanitarian partners including donors and recipient agencies are encouraged to inform FTS of cash and in-kind contributions by sending an e-mail to: [fts@un.org](mailto:fts@un.org).***

### VI. Contact

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