Gambella, Ethiopia

Displacement

**Need for international assistance**

<table>
<thead>
<tr>
<th>Not required</th>
<th>Low</th>
<th>Moderate</th>
<th>Significant</th>
<th>Urgent</th>
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<td>Major</td>
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**Expected impact**

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**Crisis Overview**

- Since the start of the conflict in South Sudan on 15 December 2013, more than 188,000 South Sudanese refugees have crossed into the western Gambella region of Ethiopia. This influx has stretched local capacity and several camps have reached full capacity.

- The refugees are arriving in dire condition, seriously lacking food and drinking water, and have been mostly concentrated at border points with limited assistance before being relocated to camps. 90% of the arriving population are women and children (WFP 12/08/2014).

- Without adequate and timely support, the capacity of the health system will weaken further. With the start of the rainy season, concerns for malaria, waterborne diseases and cholera outbreaks are increasing.

- GAM among children under five ranges from 25.8% in Leitchuor camp to 30.2% in Kule camp, close to double the emergency threshold.

- After months of a critical situation, access to drinking water has improved for refugees, but remains poor.

### Key findings

**Anticipated scope and scale**

An estimated 350,000 South Sudanese are expected to arrive in Gambella by the end of 2014. Current capacities are overstretched. Humanitarian actors are revising plans and funding with the expected caseload number.

**Priorities for humanitarian intervention**

- Main needs include health, food, and WASH.
- In mid-August, flooding and stagnant water had seriously affected refugees living in Leitchuor camp and Pagak reception centre.
- Rapid registration, relocation, and expanded camp capacity.

**Humanitarian constraints**

- Refugees have been arriving in an extremely remote location of western Ethiopia with very little infrastructure or services.
- Most camps are located across the Akobo River, and new arrivals require transportation.
- Absence of emergency procedures from the Ethiopian Government and significant constraints imposed on humanitarian actors delay response, contributing to high mortality and dire conditions.
Crisis Impact

Displacement
- As of 14 August, 188,416 South Sudanese refugees had crossed the border into the Gambella region since mid-December (UNHCR 12/08/2014); 90% are women and children (WFP 12/08/2014). The majority of refugees arrive from Upper Nile state and are predominantly from Gajaak, Gajik, and Luo-Nuer tribes. They have mainly been arriving through Pagak (50%), Akobo, and Burubiey entry points (ACAPS 12/08/2014).
- The influx has continued at an average daily arrival rate of 490 people (OCHA 18/08/2014). After a sharp decline in April, a peak was observed in May–June, with between 25,000 and 29,000 new arrivals per month (ACAPS 12/08/2014). In July, 23,159 South Sudanese arrived in Gambella (UNHCR 08/08/2014).
- Roads to Burubiey are unsafe and have impacted negatively the influx of refugees (ACAPS 12/08/2014).
- With the three newest refugee camps (Tierkidi, Kule, and Leitchuor) at full capacity, preparations for Nip Nip, the new camp with a capacity of over 20,000, are ongoing and relocations began on 15 August (OCHA 18/08/2014, WFP 15/08/2014). The existing Okugo refugee camp, in Dimma woreda, 400 kilometres away from Pagak camp, will also be expanded to accommodate an additional 35,000 people. In the interim, refugees in Pagak centre have been relocated to the new transit centre, Pamdong (OCHA 04/08/2014). As of 11 August, 17,335 new refugees awaited relocation to camps (OCHA 11/08/2014).

Food
- Refugees are arriving at entry points in a critical nutritional condition, seriously lacking food and drinking water (WFP 12/08/2014). While the first IDPs were fleeing violence, more recent arrivals have cited food insecurity as their main reason for flight (UNHCR 03/07/2014). Food distribution in the camps has been inconsistent (MSF 08/07/2014). A continued influx of refugees will create competition in the region for firewood, wild food, water, and other resources, likely increasing the food insecurity of the local population and stretching resources for services provided to refugees (FEWSNET 12/08/2014).

WASH
After several months of critically insufficient drinking water for the refugees, well below emergency standards, the situation has improved but remains poor. In Kule camp (former Kule 1), refugees receive 14 litres of water per person per day (L/p/d), in Leitchuor camp 10 L/p/d, and in Kule camp only 8 L/p/d. Sanitation and hygiene are a priority (MSF 08/07/2014). The ratio of latrines to people varies greatly in the refugee camps: 1:217 in Burubiey; 1:78 in Kule; and 1:55 in Tierkidi (former Kule 2); 1:47 in Leitchuor; and 1:26 in Pugnido (UNHCR 03/07/2014).

Health
A survey of South Sudanese refugees in Ethiopia indicates a serious public health emergency (WFP 31/07/2014). Monitoring in Gambella region has shown “critical gaps” in medical personnel and supplies, as well as funds for public health clusters (OCHA 11/08/2014). Without adequate and timely support, the health system’s capacity will likely weaken further, given the increasing refugee influx and growing public health challenges amongst the refugee community (OCHA 11/08/2014). Anaemia prevalence among children under five in all camps has exceeded 40%, indicating a problem of high public health significance (WFP 12/08/2014). Mental health is a priority area for intervention. Health facilities are unable to provide adequate treatment and care for mental, neurological, and substance abuse disorders. Health staff are insufficiently trained and lack supervision, and psychotropic medications are scarce (WHO 17/05/2014).

With the start of the rainy season, concerns have been increasing regarding malaria and waterborne disease outbreaks in the overcrowded camps and border crossing points (UNICEF 25/07/2014).
- A measles epidemic in Gambella ended in May. It is mainly South Sudanese who just arrived who are now being diagnosed with measles (MSF 08/07/2014). Close to 4,235 measles cases have been recorded in Gambella, Amhara, Oromia, SNNP and Somali regions since mid-January 2014 (WHO 04/08/2014). Joint measles and polio vaccination campaign was started on 3 May, targeting up to 210,000 children among the host community and refugee camps in Gambella (UNICEF 07/05/2014).
- Others risks include cholera, with an epidemic currently happening in South Sudan. A cholera immunisation campaign for a target population of 130,000 people, including refugees and residents, is planned (MSF 08/07/2014). Although there has been high mortality due to malaria in Kule, Leitchuor and Tierkidi camps, no figures had been released as of mid-August (ACAPS 12/08/2014). A hepatitis E outbreak is confirmed in the refugee camps and at entry points. As of 8 August, there have been 367 cases in Leitchuor, Kule and Tierkidi camps since April (UNHCR 08/08/2014). Suspected cases of yellow fever are also being reported. There is a high risk of an acute watery diarrhoea outbreak, and the poor nutritional status of the refugees increases the risk of contracting diseases (OCHA 11/08/2014).

Nutrition
New arrivals to Kule and Tierkidi camps are malnourished. GAM among children under five ranges from 25.8% in Leitchuor camp to 30.2% in Kule camp, almost double the emergency threshold. SAM ranges from 5.7% in Leitchuor camp to 10% in Kule camp. Crude mortality rates in Kule camp were 1.47/10,000/day and Leitchuor camp 1.03/10,000/day. Under-five mortality rates at Kule camp were 5/10,000/day and Leitchuor camp 2.73/10,000/day (UNICEF 15/07/2014). As of February 2014, priority districts in terms of nutrition were located along the South Sudan border in Gambella (OCHA 02/2014).
Shelter
Although proper tents have been distributed to refugees in Kule, Tierkidi, and Leitchuor camps, many people in Kule and Leitchuor still only have plastic sheeting to protect against the rain (MSF 08/07/2014).

Protection
- Having witnessed insecurity, violence and killings, the prevalence of mental, neurological, and substance use disorders are expected to be high among the refugee population, which mainly consists of women and children.
- Widespread sexual and gender-based violence is a contributing factor to the increase in mental health conditions (WHO 17/05/2014).

Education
As of 14 April, according to the Education Cluster, 30,000—40,000 children were in immediate need of education intervention in Gambella region (ACAPS 12/08/2014).

Vulnerable Groups Affected
Most refugees who have crossed the border are weak and in critical nutritional condition. A majority of the new arrivals are women and children previously identified as particularly vulnerable and disproportionately impacted by problems of security and protection (WFP 12/08/2014; GenocideWatch 2006).

Humanitarian Constraints
- Access to the Gambella region, and particularly to Akobo woreda (district), which is only accessible by boat from Matar town, the journey taking about 8 to 12 hours, has been a main challenge. This has been compounded by Gambella being the least developed region of Ethiopia and lacking in most services and infrastructure (IOM 05/08/2014). Moreover, the proximity to the conflict area has threatened the safety of both refugees and humanitarian workers (UNHCR 07/2014).
- Rainy season: Heavy rains have resulted in the flooding of the Baro River, which has made conditions at Burubiy challenging (IOM 05/08/2014).
- Closure of entry points due to insecurity: At the beginning of the South Sudan crisis, there was a steady influx of refugees through nine entry points. Six entry points have since been closed due to insecurity and refugees are only being processed through Abrahamu, Tongo and Bambasi (IOM 05/08/2014).

Potential Aggravating Factors

Disasters
Due to the overflow of the Awash River, floods were reported during the second week of August in the Afar woredas of Amibara, Awash Fentale, Buremudaitu and Gewane, seriously affecting refugees living in Leitchuor camp and Pagak centre. An alert was issued on 18 August urging the Government and humanitarian actors on the ground to implement flood prevention and preparedness measures to limit the impact (OCHA 18/08/2014).

Other Factors of Vulnerability in Gambella
- Outbreaks of measles are frequent in Ethiopia. Since January, humanitarian actors on the ground have responded to more than 200 outbreaks of measles (OCHA 11/08/2014).
- There are concerns that a long-lasting conflict in South Sudan would complicate and even sharpen the political divide between the Nuer and Anuak ethnic groups living in Ethiopia’s Gambella region (ISS 26/05/2014).
- The regional Ethiopian state council elected Gatluak Tut Koat, ethnic Nuer, as President in an extraordinary session on 16 April 2013. Though the Nuer make up the majority at a regional level, Anuak refugees from South Sudan predominantly reside in most of Gambella’s woredas, which heightens the risk of unrest along ethnic lines between groups of refugees (Horn Affairs, 27/04/2013). The Nuer and the Anuak populations have been relocated to separate camps (IOM 25/02/2014).

Key Information

Current Conflict in South Sudan
- Since mid-December 2013, 1.1 million people have been displaced and over 436,000 South Sudanese had moved across borders as of 1 August (OCHA 31/07/2014; UNHCR 01/08/2014).
- Violence broke out in Juba on 15 December 2013 between government and opposition forces and quickly spread to other locations in South Sudan. Eight months later, the situation remains tense, with ongoing violence causing further deterioration of the humanitarian situation. The death toll from fighting was estimated at 10,000 in January since December 2013, although access restrictions make numbers hard to verify (International Crisis Group 10/04/2014). No updated figure has been released so far.
- There are high levels of food insecurity in South Sudan and humanitarian agencies are warning of the possibility of famine (ACAPS 06/08/2014).
• Jonglei state, the origin of most refugees crossing into Ethiopia, is home to six ethnic groups, and has a long history of sporadic inter-ethnic violence (OCHA 30/01/2014). The current conflict predominantly stands opposes members of the Dinka and Anuak tribes against Nuer (International Crisis Group 10/04/2014).

Past Displacement in Ethiopia

• While most refugees in Gambella prior to the current crisis were protracted since 2006-2008, inter-ethnic violence in 2012 and 2013 has caused sporadic displacement from South Sudan. The majority of previous refugees are Nuer (UNHCR 2012, UNHCR 2013).
• There were 56,362 registered South Sudanese refugees in Gambella region prior to the current crisis, most of them were housed in Pugnido camp. Significant numbers have also settled in the border areas of Raad and Wanthowa as a result of recurring ethnic clashes in 2013. This population is either accommodated in the host community, or has been registered and relocated to Okugo or Pugnido camps, where they have received basic essential services and protection (UNHCR 07/2014).
• As of mid-August Ethiopia hosts close to 630,000 refugees from 13 countries, making Ethiopia the largest refugee-hosting country in Africa (UNHCR 19/08/2014).

Key Characteristics of Host Population and Area

<table>
<thead>
<tr>
<th>Key indicators</th>
<th>Gambella</th>
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<tbody>
<tr>
<td>Total population</td>
<td>259,000 (July 2008)</td>
</tr>
<tr>
<td>Ethnic make-up</td>
<td>40% Nuer, 27% Anuak, 8% Amhara, 6% Oromo</td>
</tr>
<tr>
<td>Distribution of population</td>
<td>48% women (July 2008)</td>
</tr>
<tr>
<td>21–22% migrants (2012)</td>
<td></td>
</tr>
<tr>
<td>Rural population</td>
<td>90%</td>
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<tr>
<td>Region capital</td>
<td>Gambella</td>
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<tr>
<td>Infant mortality</td>
<td>76 per 1,000 live births (2011)</td>
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<tr>
<td>Literacy rate: Female</td>
<td>53.2% (2012)</td>
</tr>
<tr>
<td>Literacy rate: Male</td>
<td>74.5% (2012)</td>
</tr>
</tbody>
</table>

Key sources: Ethiopian demography and health 2013, Central Statistical Agency of Ethiopia 2012, Knoema 2011

Response Capacity

Local and National Response Capacity

• The Administration for Refugee and Returnee Affairs (ARRA) has been coordinating overall humanitarian assistance (UNICEF 15/07/2014).

• While the Government has vast experience in dealing with refugee situations, procedures and processes has proven complex and slow to respond effectively to sudden-onset crises, increasing risk for the populations.

International Response Capacity

• There are currently several INGOs and agencies present in Gambella. UNHCR is coordinating the overall humanitarian response in collaboration with ARRA, and with support from multiple partners (UNHCR 01/08/2014).
• While the Government of Ethiopia, NGOs, and the UN have been providing humanitarian assistance and planning for a possible caseload of 350,000 refugees in the coming months, only 29% of the required funds had been provided as of 8 August (FEWSNET 12/08/2014, UNHCR 08/08/2014).

Information Gaps and Needs

• Vulnerable groups (elders, minorities, children etc.) have specific needs, and there are gaps in humanitarian services in camps.
• Information on displacement outside camps, unregistered displaced population, refugees residing among host population and their needs.
• Host population coping mechanisms to deal with the influx of refugees.
• Cohabitation between Nuer and Anuak.
• Monitoring of health, nutrition and mortality indicators.
• WASH figures.
• Child protection including family separation, sexual and physical abuse and psychosocial distress.

Lessons Learned

• Gambella region has seen large displacements from South Sudan before, notably in 2008 and more sporadically in 2011-2013. However, while there has been general preparedness with established mechanisms in place for responding to displacement crises, unexpectedly large influxes have proven difficult to handle (ACAPS 13/03/2014).
• The lack of preparedness in previous crises has resulted in reliance on host communities sharing resources. Local communities were already struggling to meet needs and are now further challenged, a repetition of previous shocks (UNHCR 2012).
• Rapid relocation of refugees from vulnerable host communities, entry points, and temporary shelters, combined with expanded camp capacity were identified as key factors to a better response from previous crises.
• Access constraints require significant logistical efforts by all responding actors.