Snapshot 28 January – 3 February 2015

**DRC:** 30,000 refugees have fled CAR for Equateur province since December. In North Kivu, 18,000 new IDPs need humanitarian assistance; another 21,000 are in need in South Kivu. Nationwide, food security is worsening: over one-third of territories are in Crisis or Emergency phases.

**South Sudan:** The number of Sudanese refugees arriving in Yida is more than double that of the same time last year, and 15,000 could arrive by June. In Unity state, 9,000 new IDPs registered in Bentiu Protection of Civilians site in less than a week due to renewed clashes.

**Sudan:** Attacks by the paramilitary Rapid Support Forces in North Darfur and fighting between government and opposition forces in Jebel Marra has resulted in up to 92,000 newly displaced. Further heavy bombing has since been reported in Jebel Marra.

Updated: 03/02/2015. Next update: 10/02/2015
LATEST DEVELOPMENTS

29 January: The CAR Government rejected a ceasefire deal made in Kenya between anti-balaka and ex-Seleka militants (Reuters, 29/01/2015), the signatories later appealed for international support in light of the government’s decision (AFP, 30/01/2015).

26 January: Ex-Seleka kidnapped eight members of an official government delegation in Mbres, Ouaka prefecture between 24 and 25 January and released on 26 January (AFP, 26/01/2015).

KEY CONCERNS
- Communal violence surged across the country in 2013, with attacks reported in nearly all prefectures. More than 5,000 people have died since December 2013 (Government, 16/09/2014, BBC, 07/01/2015).
- 2.7 million of 4.6 million people needed immediate assistance in December, half of them children (OCHA, 09/12/2014). 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, 19/12/2014).
- 166,045 IDPs are in displacement sites (OCHA, 08/12/2014) and 58,662 IDPs in Bangui (OCHA, 19/12/2014).
- 427,052 CAR refugees are registered in neighbouring countries since December 2013 (UNHCR, 23/01/2014).

OVERVIEW
Health, protection, food, and WASH continue to top priority needs, as violence, looting, and displacement have led to massive 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. The UN Commission of Inquiry into human rights concluded on 8 January 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.

In August 2014, a transitional government was formed. 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). In January, the CAR Government rejected a ceasefire deal made in Kenya between anti-balaka and ex-Seleka militants, the signatories later appealed for international support (Reuters, 29/01/2015; AFP, 30/01/2015).

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 since January 2014, including 31 in 2015 (OCHA, 21/01/2015).

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 therefore dubbed ‘ex-Seleka’. With the exception of 17,114 confined to three military camps in Bangui, most moved out of the capital and took control of most of the central and northern part of CAR in 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; a new
Anti-balaka: Though the main leaders and political programme of the anti-balaka remain unknown, the group of fighters formed in order to counter the Seleka. Approximately 75,000 militants make up the anti-balaka, though the numbers are contested (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 geographically close to Bangui (IRIN, 12/02/2014). An anti-balaka leader, Rodrigue Ngaibona, was arrested by UN peacekeepers on 17 January (Reuters, 18/01/2015).

LRA: Mbomou and Haut-Mbomou 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).

UN peacekeeping mission (MINUSCA): MINUSCA officially took over operations on 14 September 2014, under a one-year mandate. It numbers 6,500 troops and 1,000 police and is expected to expand to 12,000 by February 2015, replacing the 4,800-strong African Union peacekeeping force previously active in CAR (UN, 14/09/2014; Government, 16/09/2014).

French forces: Half of the French Sangaris peacekeeping mission of 2,000 is deployed in Bangui. Its mandate expires in April 2015, but President Catherine Samba-Panza has asked France to extend its military presence. Troops will stay until late 2015, with a reduced presence of 800 (international media, 14/01/2015).

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).

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

The first half of 2014 saw an increase in both ex-Seleka and anti-balaka activity, especially in Ouham, Ouham-Pendé, Dekoa, Kemo, Nana-Mambere, and Nana-Grebizi (AFP, 01/08/2014). In May, fighting and insecurity intensified in Ouaka; 100 died and at least 200 were injured in Bambari in the last six months of 2014 (AFP, 09/01/2015). As of January 2015, fighting is concentrated around eight central and western locations: Nola (Sangha-Mbaere), Mbres (Nana-Grebizi), Bambari (Ouaka), Yaloke (Ombella Mpoko), Bangui, Berberati and Carnot (Mambere-Kadei), and Batangafo (Ouham) (OCHA, 07/01/2015).

Unprecedented attacks against UN personnel in October killed two peacekeepers (UN, 28/11/2014).

Bangui: The security situation remains fragile, with periodic eruptions of violence. A deterioration in May 2014 saw dozens killed. Conflict escalated again end August, and a wave of violence beginning 7 October left at least 13 dead. Thousands of people were displaced, and serious violations of human rights were reported (OCHA, 23/10/2014).

Recent Incidents

Bangui: The situation remains tense around ex-Seleka military camp Beal, where ex-Seleka are threatening to detonate ammunition if the transitional Government does not meet financial demands and set up a reintegration programme (UNICEF, 08/01/2015). Shooting and looting in Bangui on 16 November led to international forces’ intervention (OCHA, 17/11/2014).

Haut-Mbomou: Violence between Muslim and Christian communities in Zémio over 5–19 November, leaving at least three people dead and 14 injured, and 50 houses destroyed, in the first major inter-community incident in the region since the crisis began in 2012 (UN, 24/11/2014).

Mambere-Kadei: A clash between anti-balaka and MINUSCA forces in Berberati resulted in the death of one civilian and one peacekeeper in December (UN, 23/12/2014).

Nana-Grebizi: On 30 January, attacks between armed Fulani (Peul) and ex-Seleka resulted in five deaths and several injured, with many fleeing towards Kaga Bandoro (AFP, 29/01/2015). Eight members of an official government delegation were kidnapped by ex-Seleka near Mbres between 24 and 25 January and released on Monday 26 January (AFP, 26/01/2015). On 19 December, an armed group attacked the village of Combo Bombo, resulting in 11 casualties and displacement into the bush (OCHA, 07/01/2015). On 16 December, fighting between ex-Seleka and anti-balaka in Mbres resulted in 28 deaths and dozens injured (OCHA 19/12/2014; AFP 18/12/2014).

Ouaka: Violence between rival militias between 6 and 7 January killed six in Bambari (AFP, 09/01/2015). Clashes between anti-balaka and ex-Seleka in Bambari on 20 December resulted in 20 deaths (AFP, 22/12/2014). Other clashes on 20 December caused the death of three ex-Seleka and four civilians, and injured four (UN, 23/12/2014).

Sangha-Mbaere: Attacks by armed Fulani herders in Gamboula and Nola towns on 21 December killed 18 (AFP, 23/12/2014).

Humanitarian Context and Needs

As of January 2015, 2.7 million of 4.6 million people need immediate assistance, half of them children (OCHA, 09/12/2014; 22/12/2014; 21/01/2015). There are 854,070 people of concern, including IDPs and CAR refugees in neighbouring countries (UNHCR, 05/12/2014).

Access

Security Constraints

Violent attacks, threats against aid workers, and roadblocks hinder the supply of
humanitarian assistance outside Bangui where there are 740,000 people, most in need of some sort of assistance (OCHA, 07/11/2014; 21/01/2015).

**Bangui:** Violence and obstruction by armed groups all impact humanitarian access (OCHA, 23/10/2014). Between 18 November and 1 December, IOM had to suspend assistance to areas in Bangui controlled by ex-Seleka due to insecurity (IOM, 01/12/2014). On 28 December, a WFP vehicle and materials were stolen from the compound (OCHA, 07/01/2015). WFP reported looting of food supplies at a storage facility in Ndüm, Ouham Pende, in November (USAID, 05/12/2014). Additionally, as of November, anti-balaka presence in the fourth district since end October has prevented Votogbo 2 IDP site from receiving humanitarian aid (UNICEF, 07/11/2014; IOM, 17/11/2014).

The insecurity caused by armed groups affects how easily aid gets delivered beyond Bangui: Paoua could not receive aid from Bangui, and distributions in Ndüm and Gaoundaye (Ouham Pende prefecture) were delayed (UNHCR, 24/10/2014).

**Bamingui-Bangoran:** Humanitarian actors suspended activities due to security incidents in September (Danish Refugee Council, 23/09/2014).

**Trapped Communities**

At 23 December, more than 36,000 people, mostly but not exclusively Muslim, are trapped in seven enclaves across CAR (UNHCR, 23/12/2014). As of 10 December, priority areas included Bangui’s PK5 neighbourhood, Yaloke in Ombella Mpoko, 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).

A Fulani group has been trapped for several months in Yaloke. 42 have died since they arrived in April 2014, escaping violence in several towns (UNHCR, 23/12/2014).

**Security Incidents Affecting Aid Workers**

18 humanitarian workers were killed and six wounded in 142 incidents in 2014 (OCHA, 23/01/2015; 07/11/2014; OCHA, 04/12/2014; USAID, 19/12/2014). So far in 2015, four security incidents involving humanitarian workers have been recorded (OCHA, 21/01/215). On 19 January, a female French charity worker was kidnapped in Bangui in retaliation for the arrest of the anti-balaka leader Rodrigue Ngaibona (Reuters, 19/01/2015).

**Displacement**

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

As of 23 January, there are 440,000 IDPs in CAR (OCHA, 23/01/2015), including 51,060 in 34 sites in Bangui, 125,080 people in 74 sites in the Bimbo area, 177,530 in 108 sites countrywide (including Bimbo and Bangui), 225,360 people living with host families and 35,650 people residing in the forest (OCHA, 07/01/2015).

**Bangui:** Relative improvements in the security conditions of some neighbourhoods outside Bangui has brought the number of IDPs in Bangui down to 51,060 in 33 sites (IOM, 01/12/2014; OCHA, 19/12/2014; OCHA, 07/01/2015). The largest camps in Bangui are Aéroport Mปoko (20,900 IDPs in October), Séminaire St. Marc (8,000), and Mission Carmel (6,775) (CCCM, 29/10/2014). In November, populations in Mปoko camp were in urgent need of food and shelter (UN, 20/11/2014). Mปoko site is planned to close by February 2015 (USAID, 05/12/2014) and those living there have yet to be relocated (Government, 20/01/2015).

7,500 people were displaced between 7 and 16 October (UN, 28/11/2014). Much of the newly displaced population originates from Bangui’s 3rd and 5th districts, with additional displacement in and around Bimbo, Ombella Mปoko (IOM, 21/10/2014). Priority needs include shelter and NFIs, WASH, and health (IOM, 05/01/2015).

**Kemo:** Around 2,175 (435 families) have been displaced to Sibut due to armed group violence in Kemo prefecture since August (ACF, 28/11/2014).

**Nana-Mambere:** The 19 November attack in Cantonnier displaced 2,000 people to Gamboula and 850 to Dilapoko. Food and NFIs support are priority needs (Aide Médicale Internationale, 02/12/2014).

**Ouham:** As of 18 December, 400 residents (80 households) had returned to Markounda and 270 to Gbangoro-Kotta village (OCHA, 18/12/2014). In Batangafo, 25,000 IDPs lack health services, water, education, and protection (UNICEF, 08/01/2015).

**Eastern CAR:** At least 3,000 displaced by the surge in violence in Zémio on 5 November need NFIs (OCHA, 04/12/2014). 26,520 people remain displaced by LRA activity (OCHA, 10/11/2014).

**Sangha-Mbaere:** In Nola, 600 Muslims sought refuge in areas close to the MINUSCA base and hundreds of women and children fled into the bush in late December (UNICEF, 08/01/2015).

**Refugees in CAR**

7,966 refugees and asylum seekers are living in CAR (UNHCR, 16/01/2015), including 1,700 South Sudanese refugees at 31 March 2014 (UNHCR). 4,241 Congolese refugees are in Haut-Mbomou (OCHA, 10/11/2014). On 22 December, 80 refugees of Congolese origin sought refuge in the Bishopric site in Berberati due to inter-ethnic violence (OCHA, 07/01/2015). Insecurity has affected Sudanese refugees in camps in Ouham and Ouaka.

**CAR Refugees in Neighbouring Countries**

As of 16 January, there are 425,977 CAR refugees in neighbouring countries, 189,802 of whom have arrived since December 2013 (UNHCR 16/01/2015). 241,231 are registered in Cameroon, 93,120 in Chad, 68,165 in DRC, and 21,554 in Congo (UNHCR, 05/12/2014).

Although the Chad–CAR border has been officially closed since 12 May, refugees continue to arrive at a number of border points and are considered vulnerable (UNHCR, 07/2014).
30,000 CAR refugees from Ouaka have arrived in Equateur province, DRC, since 16 December 2014 (AFP, 09/01/2015; Radio Okapi, 28/01/2015).

Evacuees

At 8 December, there had been 132,414 evacuees from CAR, including third-country nationals and returning migrants (OCHA, 08/12/2014).

Returnees

Over 5–11 January, 1,500 people (300 families) returned from Cameroon to Bocaranga in Ouham-Pendé (OCHA, 14/01/2015).

Food Security

As of 19 December, about 1.5 million people (33% of the total population) are in need of food assistance, the most insecure being households headed by women, displaced people or returnees, and those without financial resources (USAID, 19/12/2014; UN, 13/01/2015). 210,000 are in Bangui and 1.32 million in rural areas (IPC, 31/10/2014). 26% of households have inadequate food consumption, compared to 15% in 2013. The percentage of households resorting to negative coping mechanisms has risen from 27 to 30% (FAO, 17/11/2014).

Diminished quantity and diversity of food intake is raising serious nutrition and health concerns (FAO, 17/11/2014). The most affected regions are Oumah and most of Nana-Grebizi and Kemo prefectures, Ngaoundaye, Bocaranga, and Berberati sub-prefectures in the west, Boda and Bimbo sub-prefectures in the south, and Obo sub-prefecture in the east (FAO, 17/11/2014).

A study carried out between 18 November and 2 December in Ouham and Ouham-Pende, Nana-Mambere and Mambere-Kadeï prefectures found that food insecurity is high and transhumance has been negatively affected resulting in cattle theft, division of families, and poor agricultural sales (FAO, 08/12/2014).

Outlook

Most of the IDP population will face IPC Phase 3, or crisis, conditions, with a minority of households facing IPC Phase 4, emergency, conditions until May/June 2015 (FEWSNET, 29/01/2015). In Oumah and Ouham-Pende prefectures, the conflict and poor production will aggravate food insecurity until March 2015 (FEWSNET, 31/10/2014).

IPC Phase 3, or Crisis, conditions are projected for March–August, worse than the five-year average, due to insecurity and below-average crop production, food stock levels, and household incomes (FEWSNET, 22/01/2015).

Agriculture and Markets

Food crop production in 2014 is expected to be 58% below average, as a result of insecurity, erratic rainfall, and pest attacks (OCHA, 18/12/2014). Food stocks in rural areas are 40–50% below average due to recurring raids. Fish supply has fallen by 40% and cattle-breeding has fallen 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 increased 30–70% (OCHA, 18/12/2014; FAO, 29/10/2014). Cash crop production is down 80% compared to five years ago (Reuters, 08/01/2015).

Health and Nutrition

As of December 2014, two million people need access to health services (OCHA, 19/11/2014; OCHA 22/12/2014). Many health centres have been out of essential drugs for months due to access constraints (IFRC, 05/12/2014). Access to medicine in Yangolke, Embella-Mpoko, is particularly difficult (OCHA, 04/12/2014). 45% of health facilities outside Bangui were unable to provide basic health services at May (WHO, 30/09/2014). Lack of access to health services in IDP sites is of serious concern (WHO, 31/10/2014).

Cholera

14 cholera cases have been confirmed in two refugee camps along the CAR–Cameroon border (UNICEF, 03/12/2014).

Measles

Six measles cases were reported in Yongoro-Mbolaye in Nana Mambere, including two deaths, and two additional suspected cases were detected at the ‘S’ IDP site in Bambari (UNICEF, 03/12/2014).

Mental Health

550,000 children, about 45% of the children affected by the conflict, need psychosocial support (OCHA, 23/09/2014).

60% of parents whose children were admitted to Bangui’s paediatric hospital for SAM presented symptoms of post-traumatic stress disorder.

Nutrition

Based on a national survey, the country has an SAM prevalence of 6.5% (UNICEF, 08/01/2015). 28,000 children in remote villages suffer from SAM and 75,500 from MAM, among 840,000 malnourished children overall (OCHA, 04/12/2014; 19/11/2014; 18/12/2014). 195,790 people are in need of nutritional assistance (OCHA, 22/12/2014).

According to the preliminary results of the SMART survey in Bangui, there has been a reduction in GAM, from 8% in 2012 to around 5% in 2014, likely due to the concentration of humanitarian activities in Bangui (WFP, 23/09/2014).

WASH

2.3 million people do not have access to improved safe water or improved sanitation (OCHA, 23/09/2014; 22/12/2014). Western areas of CAR as well as Mbomou are most affected (OCHA, 31/10/2014).
The water supply has been cut off in some neighbourhoods in Bangui for several months, leaving many local residents and displaced people without safe drinking water (ICRC, 17/11/2014).

Shelter and NFIs

Nearly 442,000 people are in need of emergency shelter, while 703,975 need NFIs and 125,000 need reconstruction support (OCHA, 19/11/2014).

Education

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

The start of the 2014/2015 school year, scheduled for 3 November, has been delayed due to insecurity (Finn Church Aid, 03/11/2014). 109 attacks against schools were registered between February and November 2014 (UNICEF, 22/12/2014).

Protection

2.5 million people are in need of protection, particularly in Vakaga, Bamingui-Bangoran, Ouham, Ouaka, and Lobaye prefectures (OCHA, 19/11/2014; 31/10/2014; 18/12/2014).

Crimes against humanity and war crimes have been, and continued to be reported. ExSeleka 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).

490 women were subjected to sexual violence in 2014 (Government, 20/01/2015).

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 6,000–10,000, from 2,500 at the beginning of the crisis (The Guardian, 18/12/2014).

Updated: 02/02/2015

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

LATEST DEVELOPMENTS

31 January: 2,900 DRC returnees from CAR are living with host families in Ango territory, Orientale province and in need of humanitarian assistance (Radio Okapi).

29 January: More than 43,000 people need humanitarian assistance in Beni and Walikale territories, North Kivu (OCHA).

28 January: Seven territories in Katanga, Mniema, South Kivu, Orientale, and Equateur provinces are facing Emergency (IPC Phase 4) food insecurity with another 61 territories facing Crisis (IPC Phase 3) food insecurity (Integrated Food Security Phase Classification, 28/01/2015).

KEY CONCERNS

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

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

- 2.7 million IDPs (WFP, 06/01/2015). Katanga is of particular concern, with 582,700 people displaced across the province (OCHA, 14/11/2014).

- Over 2 million children under five are suffering from acute malnutrition (Radio Okapi, 04/11/2014).

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, although 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 inflighting between armed groups disrupt security and stability.

Political Context

Regional Context

The Peace, Security and Cooperation (PSC) Framework agreement for DRC and the region, aimed at consolidating state authority in DRC, was signed on 24 February 2013 by Angola, Burundi, the Central Africa Republic, DRC, Congo, Rwanda, South Africa, South Sudan, Tanzania, Uganda and Zambia. A report by the Secretary-General of the UN on 24 September 2014 noted that trust between neighbouring countries, activity of armed groups, and the lack of full implementation of the Nairobi Declarations, the peace deal between the DRC government and the M23 rebels, hinder the stability of eastern DRC (UN, 24/09/2014).

National Political Context

In September, 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, 42 people dies in
protests in Kinshasa, after a census was proposed, which could also potentially prolong President Joseph Kabila’s term beyond 2016 (AFP, 22/01/2015). Days later, Parliament voted against this legislation, but doubts remain over when in 2015 the preliminary local, provincial and senatorial polls will be held (AFP, 25/01/2015).

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 Mai-Mai groups), to secessionist groups, and forces first set up by fighters from Uganda (LRA and ADF/NALU), Rwanda (FDLR) and Burundi (FNL).

Democratic Forces for the Liberation of Rwanda (FDLR) are mainly Hutu Rwandans who were allegedly linked to the genocide. An estimated 3,000 fighters are active, primarily in the Kivu region (IRIN).

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. FARDC launched an operation in North Kivu to neutralise the group in January 2014 (IRIN 2014).

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).

Armed Forces of the DRC (FARDC) is composed of 120-130,000 fighters (Defence Web, 2013).

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 to protect civilians, stabilise the country and support implementation of the PSC Framework was extended to March 2015, and expanded, with the creation of an Intervention Brigade, charged with neutralising armed groups (RFI, 20/10/2014). The EU mission providing assistance to security sector reform (EUSEC) was also extended until 30 June 2015 (EU, 25/09/2014).

Conflict Developments

In early January 2015, MONUSCO was preparing to counter FDLR, after a six-month suspension of military operations to allow FDLR disarmament resulted in only 420 of an estimated 1,500-2,000 fighters surrendering. President Kabila has committed FARDC support (VOA, 13/01/2015; Reuters, 07/01/2015 AFP, 04/01/2015; dailymail, 07/01/2015).

On 30 January, the FDLR pledged to fully disarm (AFP, 30/01/2015). Violence intensified in eastern provinces in October, after a period of military operations by FARDC and MONUSCO. MONUSCO and FARDC launched an offensive in early January against the FNL militants in South Kivu, against ADF militants in North Kivu (Radio Okapi, 06/01/2015; 14/01/2015).

North Kivu

Following strategic gains by FARDC-MONUSCO in July 2014, North Kivu has experienced a resurgence of violence since October in Beni, Walikale, and Lubero territories, from ADF/NALU, Nduma Defence of Congo (NDC), FDLR, and Nyatura (OCHA, 15/10/2014; 16/10/2014; AFO, 30/07/2014). The insecurity has resulted in widespread displacement, and rape, kidnapping, and looting have all been reported (OCHA, 16/10/2014).

Beni territory: A wave of machete attacks October–December killed more than 260 civilians, leading to joint FARDC–MONUSCO operations to track ADF fighters beginning mid-December (AFP, 05/12/2014; Radio Okapi, 02/01/2015). Reportedly, ADF fighters are no longer present in a number of localities in Beni, including Abya, Mavume, and Pilote and Issa camps (UN, 12/01/2015). A curfew was imposed in Beni on 25 November. Civil unrest and violence from the local population towards MONUSCO assets and official buildings were also recorded (AFP, 02/11/2014).

Eringeti: Three people were killed in an ADF machete attack on 2 December (AFP, 02/12/2014).

Masisi: Threats and abuse by Raiya Mutomboki and Nyatura led to displacement towards the end of December (OCHA, 31/12/2014).

Walikale: On 31 December, FARDC began to reduce its presence in Walikale territory, raising concerns for the security of civilians, who have been displaced in fear of potential armed violence. There were reports that other troops would soon arrive (Radio Okapi, 06/01/2015). Clashes between two factions of Raiya Mutomboki over 13–17 December killed nine and displaced people from four villages to the Walosa-Uroba area (Radio Okapi, 17/12/2014). On 15 January, 50 Raiya Mutomboki d’Isangi militants surrendered to authorities (Radio Okapi, 18/01/2014). FDLR violence over 3–5 November caused 13 civilian deaths and cases of SGBV (Radio Okapi, 10/11/2014).

South Kivu

Security remains volatile in South Kivu as several armed groups continue to operate and trigger displacement. Four attacks by armed groups were reported over 2–3 January in Sange, engaging FARDC (Radio Okapi, 03/01/2015). An attack by unidentified armed men in Mukuwngwe, Walungu territory, killed eight and injured three on 22 December (Radio Okapi, 22/12/2014). FARDC operations removed Raiya Mutomboki from seven villages in Shabunda in mid-November (Radio Okapi, 26/11/2014). 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, and in mid-December, suspected ADF violence spread from North Kivu to
Orientale: seven people were killed and their villages burned. Attacks in Ndalya, straddling Orientale and North Kivu, on 26 December, killed 19 and injured a further eight; another 11 were killed and five injured in Ndume (OCHA, 31/12/2014; Radio Okapi, 27/12/2014).

On 15 January, fighting erupted between the FARDC and a militant group from Ituri after negotiations collapsed (AFP, 15/01/2015).

LRA: In the third quarter of 2014, 27 attacks, 15 deaths, and 55 abductions were reported, indicating a significant decrease in abductions and attacks, although only one death had been reported in the second quarter (OCHA, 10/11/2014). On 15 January, the LRA kidnapped 12 people in Bili (Radio Okapi, 16/01/2015). Three suspected LRA attacks were reported 29–31 December in Dungu, injuring two (Radio Okapi, 02/01/2015).

FRPI: FRPI resumed violent activities in Irumu territory at the beginning of October (OCHA, 11/11/2014). At 11 November, the leader of FRPI Cobra Matata and a hundred insurgents were said to have surrendered (Radio Okapi, 11/11/2014). 64 members of the FRPI surrendered in Bunia between 27 November and 3 December (OCHA, 03/12/2014). Cattle raids have continued in Irumu, however, with looting reported end November (Radio Okapi, 08/12/2014).

Katanga

Active armed groups in Katanga include the Mayi Mayi Kata Katanga, the Mayi Mayi Gedeon, and the Corak Kata Katanga. At end October, 15,873 incidents had been reported in Katanga in 2014 (UNHCR, 30/10/2014). Interethnic conflict between Luba and pygmies, and Mayi-Mayi attacks, continue to affect Katanga’s Tanganyika district (Kabalo, Kalemie, Kongolo, Manono, Moba, and Nyunzu territories). Pygmies attacked Mazozo village in Manono territory on 29 November, leading to dozens killed and kidnapped. Mayi-Mayi Yakutumba, originating from South Kivu, have reportedly attacked villages in northeast Katembé repeatedly, despite the presence of FARDC along Lake Tanganyika since August (OCHA, 30/10/2014).

FARDC offensives were making gains against Mayi-Mayi Kata Katanga of Musumari as of 5 November (Radio Okapi, 05/11/2014). An attack in Katendeji in Pweto was reported on 4 December, causing displacement (Radio Okapi, 04/12/2014).

Equateur

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

Humanitarian Context and Needs

Around 4.1 million people are in urgent need of humanitarian assistance (FAO, 11/12/2014).

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. 188 incidents involved aid workers in 2014: six aid workers were killed (OCHA, 15/12/2014).

North Kivu:

The worsening state of the Kalembe–Pinga route and collapse of the Mutwanga–Mweso road means humanitarian aid access to 82,000 IDPs in Walikale and Masisi is constrained (OCHA, 16/12/2014; Radio Okapi, 24/12/2014). Humanitarian access is constrained in South Lubero due to damaged roads in Kaseshe and Alimbongo (OCHA, 09/12/2014). Humanitarian access along the Mbau–Kamango route and to Mutwanga health zone is hampered by insecurity (OCHA, 03/12/2014).

South Kivu:

Access to some 42,000 people in Fizi territory has been hampered by insecurity since June. A dozen security incidents against humanitarian workers were reported in Fizi territory between January and September 2014 (OCHA, 11/09/2014).

Orientale:

13 INGOs have withdrawn from Haut Uele and Bas Uele since mid-2013 due to lack of funding, leaving thousands of people without assistance, with the most recent withdrawal in September 2014. Several humanitarian organisations have suspended activities in South Irumu as FRPI has resumed activities (OCHA, 01/10/2014).

Katanga:

Growing insecurity is hindering the delivery of assistance to up to 500,000 displaced (OCHA, 06/2014; MSF, 09/01/2014).

Security Incidents Affecting Aid Workers

In 2014, 120 security incidents against humanitarian aid workers were registered in North Kivu, with a concentration in Gemma, Masisi territory (OCHA, 27/01/2015).

Disasters:

Floods

More than 5,000 homes were destroyed in Haut Lomami, Katanga province, after heavy rains in January, leaving people in need of assistance. Roads are blocked and crops damaged due to flooding (Radio Okapi, 22/01/2015).

300 people in Katogota, South Kivu, are in need of humanitarian assistance after heavy rains destroyed their homes on 6 January (Radio Okapi, 13/01/2015).

IDPs

In 2014, there were 2.7 million IDPs in DRC (WFP, 06/01/2015), including 609,600 displaced in 2014. 37,800 were displaced between October and December 2014, 45% fewer than in the previous quarter due to clashes between FARDC and the Raiya Mutomboki militia (OCHA, 21/01/2015). 95% were displaced by insecurity and armed conflict (UNHCR, 30/10/2014). 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 hosts 861,300 IDPs (OCHA, 23/01/2015): 242,920 IDPs in Masisi, 210,220 in Walikale, 158,340 in Lubero, and 128,540 in Beni (including 24,660 newly displaced since September) (UNHCR, 05/12/2014; OCHA, 09/12/2014). 212,054 IDPs are in 60 camps near Goma, which authorities have moved to close down for security reasons (AFP, 03/12/2014). So far, 2,300 IDPs have been forced to leave Kiwanja camp, and 90% now live in public spaces or with host families around Kiwanja and Rutshuru. Shelter and basic social services are urgent priorities (OCHA, 09/12/2014).

Beni: The population of Sulungwe fled to Mbau following attacks on 27 December (OCHA, 31/12/2014). 89,000 (17,700 families) were displaced along the Mbau–Oicha–Eringeti route between 14–21 November after attacks in Beni and needed multi-sectoral assistance; 2,100 people were displaced to Makumo (OCHA, 03/12/2014; 09/12/2014; UNHCR, 19/12/2014). More than 18,000 IDPs in Mamove and Samboko localities need multi-sectoral humanitarian assistance, according to an evaluation of 15–20 January (OCHA, 29/01/2015).

Lubero: Around 750 displaced families in Lepya-Mbughavinya in South Lubero and 1,386 families in Fatua need NFIs, food, and health support (OCHA, 24/12/2014).

Masisi: More than 500 families were displaced to Rubaya, Burora, and Kihuma following threats and abuse by Raiya Mutomboki and Nyatura in December (OCHA, 31/12/2014). Around 1,000 people fled to Luke, Katoyi and Katobotobo villages following clashes between FARDC and Nyatura in Bivumu (OCHA, 16/12/2014). 600 people have been displaced to Kitchanga due to insecurity and the threat of an offensive against FDLR (OCHA, 29/01/2015).

Walikale: 1,650 families returned to Pinga centre between 25 October and 16 December, while a further 1,700 families were displaced to Pinga during the same period from Kisimba, Masisi, and Ishana (OCHA, 24/12/2014). Around 5,400 people (1,081 families) have been displaced along the Bafianda–Okondo route since July; priority needs are for shelter, NFI, food, and health (NRC, 09/12/2014). On 20 January, Motto locality was abandoned after houses were burned by Raiya Mutomboki (OCHA, 29/01/2015). Additionally, 25,000 IDPs were displaced in Kashebere, Kibati, and Kibua localities between November and December (OCHA, 29/01/2015).

South Kivu

618,330 IDPs are in South Kivu (OCHA, 23/01/2015). The rate of displacement increased from 31,500 reported in the second quarter of 2014 to 68,200 in the third. 38% of IDPs are located in Kalehe (OCHA, 14/11/2014). On 5 January, 400 people fled Masiga for Kyamafunu due to fighting between FNL and FARDC (local media, 06/01/2015). 2,000 fled violence in Magunda and are living in Kakuku and Kihuha without shelter, surviving on food provided by the host community (local media, 09/12/2014). More than 1,500 IDPs in Buma, Talama and Kaziimiya who fled fighting in November are in urgent need of humanitarian assistance, particularly shelter (Radio Okapi, 13/12/2014). More than 21,600 IDPs (4,000 families) are in need of assistance in Walungu and Shabunda territories (OCHA, 28/01/2015).

Oriental

467,520 IDPs are hosted in Oriental province (OCHA, 23/01/2015).

Around 300,000 people are displaced in Ituri, including 60,000 IDPs from North Kivu (OCHA, 23/12/2014). Of the 60,000, 12,600 people displaced to Tchabi, Ituri, are living in poor conditions and in need of medicine; 60% are children who are not receiving education (Radio Okapi, 16/01/2015). Most of the new IDPs in Ituri are living with host families or in public buildings. WASH is the most pressing need (OCHA, 22/10/2014).

Over 14–19 December, ADF activity led to displacement from nine villages along the Komanda-Luna route to Bwanasura and Luna. Priority needs are for shelter, NFIs, and food support (OCHA, 23/12/2014). 15,000 displaced to Nyangabi, Getti, Kakado and Buna do not have any form of shelter or food and are in dire need of humanitarian assistance (Radio Okapi, 13/01/2015).

Katanga

Katanga hosts 551,300 IDPs since 2010, including 43,300 displaced in the fourth quarter of 2014; 71,500 new IDPs were recorded in the third quarter of 2014 (OCHA, 16/01/2015; 14/11/2014) . 80% of IDPs are living with host families. Displacement is triggered by armed attacks and by inter-communal violence.

Pweto territory hosts 178,000 IDPs (OCHA, 20/11/2014). Around 10,500 displaced populations along the Kishale–Kampagwe route, Manono, need NFIs, WASH, and food support, while 6,500 in Kisele, Mitwaba, need NFIs and health assistance (OCHA, 10/12/2014). 2,500 IDPs in Mwashi camp need food, shelter and health assistance (Jeune Afrique, 24/11/2014).

2,000 people displaced from South Kivu to Lamba Katenga and Mayanga over 17–25 November are living in precarious conditions (OCHA, 26/12/2014).

31,240 people returned home in Katanga in the third quarter of 2014, encouraged by FARDC presence, the upcoming harvest season, and the start of school year, including 600 people have been displaced along the Bafianda–Okondo route since July; priority needs are for shelter, NFI, food, and health (NRC, 09/12/2014).

Maniema

Maniema has 185,300 IDPs, including 20,000 newly displaced recorded in the third quarter of 2014. 30% of IDPs are located in Pangi, 26% in Punia, and 20% in Kasongo (OCHA, 14/11/2014).

Refugees in DRC

DRC hosts 120,567 refugees (UNHCR, 30/10/2014). 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 14 January, there were 68,000 CAR refugees in DRC, 32,210 of whom had arrived since December 2013. Another 30,000 have arrived in Equateur province.
since December 2014 (Radio Okapi, 28/01/2015).

From Rwanda: DRC is hosting 38,800 Rwandan refugees (UNHCR, 30/10/2014; UN 30/12/2014).

From Angola: 28,000 Angolan refugees remain registered in DRC, with thousands having been repatriated (Radio Okapi, 26/11/2014).

From Burundi: At 30 December, 9,000 Burundian refugees were in DRC (UN, 30/12/2014).

Returnees
At end October, 163,940 people had returned to DRC since January 2012 (UNHCR, 30/10//2014). During the fourth quarter of 2014, 86,795 new IDP returnees were counted in Katanga province, with a total of 361,900 returnees between July 2013 and December 2014 (OCHA, 16/01/2015).

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 (184,500) (UNHCR, 31/10/2014), 84,640 in Rwanda, 59,440 Tanzania, 23,200 in Congo (UNHCR 2015), 17,303 in Kenya (UNHCR, 01/01/2015), and 15,216 in South Sudan (UNHCR, 01/11/2014).

Food Security
6.5 million people are currently facing IPC Phase 3 or 4 food insecurity as a result of armed group activity, inter-communal violence, burning of villages and crop fields, and the movement of families toward protected areas (Integrated Food Security Phase Classification, 28/01/2015).

The food security situation in DRC is worsening with an increase of about 523,000 people under Emergency (IPC Phase 4). Seven territories are facing Emergency (IPC Phase 4), including Manono, Mitwaba, and Pweto territories in Katanga province; Punia territory in Maniema province; Shabunda territory in South Kivu; Irumu in Orientale; and Boente territory in Equateur. 61 other territories are facing Crisis (IPC Phase 3) (Integrated Food Security Phase Classification, 28/01/2015).

Agriculture and Markets
Lack of seeds from insufficient rains in Ruzizi, South Kivu, since November, is likely to negatively impact the next lean season (Radio Okapi, 17/12/2014).

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, where the profit is less (Radio Okapi, 18/01/2015).

Health and Nutrition
In North Kivu, systematic looting of health structures has been reported in various (OCHA, 01/10/2014). In addition, lack of funding has forced several health zones in south Masisi territory to interrupt activities, severely limiting healthcare access for 20,000 IDPs (OCHA, 04/11/2014).

Access to medicines and tuberculosis vaccines is reportedly limited in Katanga (Radio Okapi, 03/12/2014). 1,900 women were unable to receive maternal tetanus vaccination in Tanganyika district in November, due to clashes between Luba and Pygmies in Muzozo (OCHA, 17/12/2014).

Cholera
As of 7 December 2014, 17,630 cases of cholera were recorded and 233 deaths, compared to 26,440 cases in 2013 (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). In Katanga, over 7,000 cases including 300 deaths have been recorded, compared to 13,726 cases and 348 deaths in 2013; humanitarian personnel are insufficient to deal with the outbreak in parts of Katanga and in South Kivu (Radio Okapi, 07/11/2014; OCHA, 30/10/2014).

14 cases were reported in Kiliba, South Kivu, from 10 to 13 January (Radio Okapi, 13/01/2015).

Malaria
In December, health centres in Fizi in South Kivu and Nyembo Pungu in Katanga reported a lack of space and medicine to treat malaria patients. 200 cases, including five deaths, were reported in Fizi, while 17 children died from anaemia linked to malaria in two weeks in December in Nyembo Pungu (Radio Okapi, 23/12/2014; 30/12/2014). At least 13 children have died from malaria in Kilemwe, Lulenge territory, South Kivu, since the beginning of January 2015 (Radio Okapi, 23/01/2015).

Measles
In Katanga, measles caseloads in Bukama, Kabondo Dianda, Kilwa, Mufunga Sampwe, and Kalemie health zones have reached epidemic level. 12,150 measles cases, including 108 deaths, had been reported for 2014 by 7 December (OCHA, 17/12/2014). Insecurity has affected access to Kilwa health zone since July and hampered vaccination campaigns (OCHA, 12/11/2014).

In Orientale province, 11,098 measles cases, including 89 deaths, had been reported by
October. 10,400 had been reported in North Kivu (OCHA, 22/10/2014; 20/11/2014).

Nutrition

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

In Katanga, 50 children died from malnutrition in Changa-Changa IDP camp over September–December (Radio Okapi, 02/01/2015). 108 cases of malnutrition were recorded in Lubumbashi November–December due to shortages of therapeutic food (Radio Okapi, 20/12/2014).

WASH

As of July, access to water is below the emergency standard of 15L/person/day for most CAR refugees in Equateur and Orientale provinces and for host communities (UNHCR, 07/2014). North Kivu is one of the most vulnerable provinces for cholera with only 26% access to potable water (OCHA, 31/12/2014).

Education

Katanga: 70% of the 34,000 school-age IDP children in Pweto territory are not attending school (OCHA, 20/08/2014).

North Kivu: 48 schools have been damaged, occupied, or destroyed during FARDC operations against ADF-NALU militants (OCHA, 11/09/2014).

South Kivu: Insecurity in Shabunda and Fizi territories prevents children from attending school (Radio Okapi, 25/09/2014). 35 primary schools were shut down due to insecurity in January, affecting 6,800 students in Shabunda territory (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.

Child Protection

An estimated 3,700 children have been reported as associated with armed forces and groups (UNICEF cited by ECHO, 21/10/2014). From December 2014 to early January 2015, 112 children were released and reunited with their families (UN, 30/12/2014; local media, 09/01/2015). 63 children left Mayi-Mayi Simba in Mambasa territory, Orientale province in late January (Radio Okapi, 27/01/2015). 1,380 children left armed groups in North Kivu in the third quarter of 2014 (OCHA, 31/12/2014).

SGBV

Between 25 September and 30 December 2014, 61 cases of sexual violence in conflict were reported (UN, 30/12/2014).

More than 2,900 cases of sexual violence – over half of which were rape – were recorded in Katanga between January and November in 2014, compared to over 5,100 in 2013 (Radio Okapi, 31/12/2014, Protection Cluster, 05/2014). 2,012 were reported in Orientale province, and 1,123 in Bas-Congo (80% rape) (OCHA, 10/12/2014, 03/12/2014; Radio Okapi, 27/11/2014).

Updated: 02/02/2015

NIGERIA CONFLICT, FOOD INSECURITY, EPIDEMIC, DISPLACEMENT

LATEST DEVELOPMENTS

25 January: Boko Haram attacked Maiduguri, but was forced to retreat by security forces. More than 200 combatants were killed, mainly BH. Further attacks on Maiduguri are expected (The Guardian/AFP, 26/01/2015).

23–24 January: BH released about 190 captives, who returned to their village, Katarko, in Yobe state (Reuters, 24/01/2015).

23 January: BH killed 15 people as it attacked and burned the village of Kambari during its advance on Maiduguri (AFP, 24/01/2015).

23 January: BH launched a series of attacks and raids on villages in Michika local government area, Adamawa state, which is under its control. Several people were killed. According to local officials, some residents who fled the attacks are trapped on mountains due to insecurity and need rescue. A number of youths and women were reportedly kidnapped (local media, 25/01/2015).

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). Over 1–11 January, Boko Haram killed 2,146 people (ACLED, 12/01/2015). ACLED estimates Boko Haram fatalities may be at least over 1,000 per month over 2015–2016 (ACLED, 12/01/2015).

- 9 million people affected by violence in the northeast, with three million acutely needing humanitarian assistance (OCHA, 10/2014).

- There are 1.5 million IDPs in the northeast (IRIN, 28/11/2014).

- 4.8 million people are food insecure (UNHCR, 17/12/2014). 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).
- 628,000 children under five suffer from severe acute malnutrition (OCHA, 30/09/2014).
- Nearly half the population does not have access to safe water (UNICEF).
- 35,909 cholera cases and 753 deaths were reported in 2014 (UNICEF, 12/01/2014).

OVERVIEW

Up to nine million people are in need of humanitarian assistance across the country; three million are in acute need in the northeast. Violence has displaced around 1.1 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 health services, protection, food, and water.

Political Context

On 20 November, the state of emergency for Adamawa, Borno and Yobe state ended, after its extension had been rejected by the House of Representatives and the Senate (AllAfrica, 09/01/2015). It has been put in place in May 2013.

2015 Elections

The 2015 election is expected to exacerbate violence in Nigeria (OCHA, 08/2014). President Goodluck Jonathan is standing, although, according to the opposition, his re-election would violate the unwritten rule that governance should rotate between the Muslim north and the Christian south every two terms. The candidate for the main opposition All Progressives Congress (APC) is former president and military ruler Muhammadu Buhari, who comes from the north (AFP, 11/12/2014).

Under Nigeria's constitution, a candidate must win a majority of over 50% and 25% of votes cast in two-thirds of the country. However, there are concerns about the feasibility of holding elections in the former SoE states (US Institute of Peace, 09/01/2015). On 14 January, the Independent National Electoral Commission (INEC) admitted that it was unlikely that elections would go ahead in insurgent-controlled areas of the states (AFP, 14/01/2015). The governors of Yobe, Borno, and Adamawa states have requested the deployment of extra troops (Reuters, 06/01/2015). In addition, current law in Nigeria does not allow displaced citizens to vote outside their own precincts, and no action has been taken to amend that restriction.

Security Context

The frequency and fatality of attacks are at their highest levels since the state of emergency (SoE) was imposed in 2013. Over 1–11 January, Boko Haram killed 2,146 people (ACLED, 12/01/2015). ACLED estimates Boko Haram fatalities may be at least over 1,000 per month over 2015–2016 (ACLED, 12/01/2015).

In 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).

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/animator 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). Over 2014, around 1,700 people died in inter-communal violence; 200 people died in September alone (ACLED, 2014; ICG, 01/10/2014).

Stakeholders

Boko Haram

The insurgent group dubbed 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.

Regional Involvement

In April 2012, the mandate of the Multinational Joint Task Force (MJTF) was expanded to include the fight against terrorism (Sahara Reporters 07/05/2013). Since Chad's announcement in January 2015 that it will militarily support Cameroon against BH, there have been calls for a viable and effective operationalisation of the MJTF (Reuters 13/01/2015; Al Jazeera 20/01/2015).

Conflict Developments

Common BH targets remain rural communities, markets, schools, and highways, however, the group's tactics changed in August 2014, from attacking villages and withdrawing, to seizing control. Some reports indicate that BH has taken control of 40%, or even 70%, of Borno state, though it is difficult to verify (US Institute of Peace, 09/01/2015). According to government officials, Boko Haram now controls Baga, on Lake Chad, and 16 neighbouring towns.

In neighbouring states, BH fighters have reportedly taken control of three towns in Yobe's Gujba local government area (Sahara Reporters, 10/08/2014). In Adamawa, Boko Haram was advancing, but media reports indicated that the military recaptured a number of towns in October (OCHA, 08/10/2014; AFP, 08/09/2014). BH was ousted from Mubi on 14 November, although the insurgents then overran the neighbouring towns of Gombe and Hong (AFP, 13/11/2014; 14/11/2014). Attacks on Kano began again in May, after a lull of several months, and have become more frequent.

Efforts to crush the insurgency are ongoing, although Nigerian soldiers have at times
reportedly refused to deploy because of inadequate equipment, or fled from operations (AFP, 22/08/2014). Amnesty International has reported mass extrajudicial executions by the military (Washington Post, 05/08/2014). Civilians have formed vigilante groups or self-defence militias, reportedly with the tacit backing of the Nigerian Government.

Recent Incidents

**Borno state:** 20 of 27 local government areas are reported as partially controlled by Boko Haram (IFRC, 23/01/2015). Over December 2014, Boko Haram-related violence led to over 400 fatalities and the abduction of at least 225 civilians; 188 were killed in BH attacks in November (ACLED, 20/01/2015; AFP, 16/11/2014). Over 2014, more than 4,400 BH-related deaths were recorded by media sources, around half of them civilians (ACLED, 22/01/2015).

On 25 January, BN attacked state capital Maiduguri, but were forced to withdraw by security forces. More than 200 combatants were killed, mainly BH. Further attacks on Maiduguri are expected (The Guardian/AFP, 26/01/2015). On the same day, BH militants captured the town of Monguno, including a military base, after clashes with security forces (AFP, 25/01/2015). BH fighters also attacked an artillery base at Jintili village, 6km from Maiduguri, and an air force base close to Maiduguri. The Nigerian military has responded with airstrikes and moved tanks and troops to the area. Civilians reportedly fled towards Maiduguri (Amnesty International/The Telegraph, 25/01/2015). On 23 January, BH attacked and burned the village of Kambari on its way to Maiduguri; 15 people were killed (AFP, 24/01/2015). On 9 January, a child carried out a suicide attack on a market in Maiduguri, killing at least 19 people (BBC, 10/01/2015).

On 3 January, BH seized a Multinational Joint Task Force military base outside Baga town, near Lake Chad, housing troops from Nigeria, Chad, and Niger (international media, 04/01/2014). On 7 January, BH took control of Baga town and razed at least 16 surrounding settlements. Amnesty International cited reports indicating that as many as 2,000 people were killed (The Guardian, 10/01/2015). Local government officials said up to 20,000 people fled their homes, while 560 were thought to be stranded on an island on Lake Chad (AFP, 09/01/2015).

**Yobe state:** On 18 January, a suicide attack on a bus station in Potiskum killed four and wounded 48 (AFP, 18/01/2015). On 10 January, a child suicide attack in Potiskum left three people dead and 26 wounded (The Guardian, 12/01/2015). On 9 January, BH attacked the state capital Damaturu; according to government officials, troops had repelled the insurgents by 10 January (AFP, 09/01/2015; local media, 11/01/2015). More than 150 people were killed in an attack on the town in December (international media, 01/12/2014; 03/12/2014). On 3 January, the town of Babban Gida was raided (international media, 04/01/2015).

In December, seven people died in a bus explosion near Potiskum, and suspected BH stormed Geidam, Bajoga, and Ashaka towns (international media, 01/01/2015; international media, 22/12/2014; AFP, 04/12/2014). In November, two suicide attacks in Potiskum resulted in 61 dead and 130 injured (OCHA, 14/11/2014; AFP, 06/11/2014). Over 2014, 508 BH-related deaths were reported by media sources (ACLED, 22/01/2014).

**Adamawa state:** On 23 January, BH launched a series of attacks and raids on six villages in Michika local government area, which is under its control. Several people were killed. A number of youths and women were reportedly kidnapped (local media, 25/01/2015).

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

**Gombe state:** On 16 January, a suicide attack killed at least five people and injured 11 near a marketplace in Gombe city (AFP, 16/01/2015). On 1 January, several people were injured in a suicide bombing outside a church in the city (international media, 01/01/2015). Attacks in the city in December killed 20 and injured 18 (international media, 01/01/2015; international media, 22/12/2014).

**Bauchi state:** On 22 December, seven were killed and 25 injured in an explosion at a market in Bauchi city (22/12/2014).

**Kano state:** On 10 December, suicide attacks at a market in Kano city killed at least four people. A 13-year-old girl was apprehended carrying explosives (AFP, 10/12/2014; 11/12/2014). On 28 November, at least 120 people were killed and 270 other wounded by two suicide bombers and gunmen at the Grand Mosque (AFP, 28/11/2014).

**Plateau state:** Over January–November 2014, 442 deaths due to BH-related violence were reported by media sources (CFR, 15/12/2014). Most were killed in Jos and Bachi.

**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).

Populations are in urgent need of protection, food, and basic medical and WASH services as very few international actors are operating in the northeast (OCHA, 31/08/2014 and 01/07/2014).

**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 both security forces and non-state actors (OCHA, 05/2014).

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 Maiduguri and northern Borno state (CHO, 13/01/2015). Maiduguri airport is closed to commercial flights. BH insurgents are suspected of blowing up a major bridge in Gamboru Ngala district, Borno state, disrupting transport links with Cameroon (BBC, 27/07/2014).

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).
There are up to 1.5 million IDPs since May 2013 in the six northeast states, according to the Presidential Initiative for the North East, a significant increase on the 646,700 IDPs reported from an inter-agency assessment in May (OCHA, 24/09/2014; IRIN, 28/11/2014). The displaced apprehensive about returning to their communities, even those that have been recaptured by security forces (IFRC, 23/01/2015).

In January 2015, NEMA reported almost one million IDPs in the country: 66,000 as a consequence of natural disasters and 886,000 due to the insurgency in the northeast. 123,600 are in Adamawa, 126,000 in Yobe, 11,500 in Gombe, 46,400 in Bauchi and 81,800 in Taraba states (NEMA, 15/01/2015). As of 24 November, about 400,000 IDPs were registered in Borno state (NEMA, 26/11/2014). A large number of IDP households are headed by women who have been widowed during attacks.

According to NEMA, 108,000 IDPs are in camps in Adamawa, Yobe, Gombe, Bauchi and Taraba states, while 802,148 were being hosted by communities. NEMA currently manages 20 protected IDPs camps in the North (NEMA, 15/01/2015). IDPs who do not reside with host families or in camps, often take shelter in public buildings such as schools (OCHA, 06/2014; UNHCR, 31/10/2014).

As of 14 January, attacks on Baga and neighbouring villages in Borno state had displaced 150,000, according to the State Emergency Management Authority (SEMA). Hundreds of people from villages near Baga were later forced to flee after BH told them to leave or face consequences (AFP, 20/01/2015). Maiduguri continued to receive high numbers of IDPs, seeking refuge in both camps and host communities (OCHA/SEMA, 14/01/2015). On 12 January, NEMA reported 3,200 IDPs in Maiduguri who had fled the Baga area. NEMA reportedly operates 11 IDP camps in Borno state (Government, 12/01/2015).

On 23 January, following raids on six villages in Michika local government area, some residents who fled the attacks are trapped on mountains and need rescue, according to local officials (local media, 25/01/2015).

The burden is overstretched already scarce resources and aggravating poverty and including food insecurity (UNHCR and OCHA, 01/07/2014). IDPs in host communities are in urgent need of shelter and non-food items. Food, health, protection, and WASH are all priority needs in host communities (OCHA, 02/10/2014).

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: The authorities in Niger estimate that more than 100,000 people, both Nigerian refugees and Niger nationals, have arrived from north-eastern Nigeria. In 2015, the violence has led to an exodus of 19,000 people (UNHCR, 16/01/2015). September and

November saw spikes in refugee flows to Niger, with 25,000 and 10,000 people respectively fleeing after BH attacks (OCHA, 27/11/2014; OCHA, 14/10/2014). Concentrated in the Diffa region, most refugees are staying with local communities, and food and water resources are limited (UNHCR, 15/06/2014).

Cameroon: 50,000 Nigerians have fled to northern Cameroon (UNHCR, 22/01/2015). About 70% of new arrivals are women and children who need immediate assistance. Aid and infrastructure projects in the Far North region have been suspended due to high insecurity (AlertNet, 08/07/2014).

Chad: 11,300 Nigerian refugees are in Chad as of 9 January, some 10,000 of whom arrived in January (OCHA, 12/01/2015; BBC, 10/01/2015).

Food Security

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

Conflict-affected households will remain in Crisis (IPC Phase 3) levels of food insecurity until at least September. Most IDPs continue to need assistance to meet their food needs (FEWSNET, 07/01/2015).

The 2013/14 agricultural season has been severely impeded. Vast areas of southern Yobe and Borno and northern Adamawa were undercultivated or not harvested during the main farming season of May to December. According to government officials, the violence has affected 273,000 farmers and led to the destruction of 550,000 metric tons of crops in Adamawa state, as farmland has been abandoned, and (local media, 24/01/2015). Off-season farming and fishing in the first half of 2015 are also expected to be reduced (FEWSNET, 07/01/2015).

A number of factors make market purchase difficult for households that would typically offset low production with increased market purchase: most markets in conflict areas are closed or at reduced levels following attacks, supplies of locally produced commodities are low, physical access is limited for traders from outside the region, and functioning markets continue to report high prices for staple foods. Retail millet and sorghum prices for Maiduguri in December were about 30% higher than in neighbouring Kano (FEWSNET, 07/01/2015).

Health and Nutrition

3,000 health facilities in the northeast are closed or have been partially destroyed (OCHA, 08/10/2014). Healthcare services have collapsed in the northern part of Borno state as health workers have fled (OCHA, 19/08/2014). 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,
Cholera

35,909 cholera cases, including 753 deaths (2.1% case fatality rate) were reported January–November 2014. Reported numbers decreased from 792 cases in the last week of October 2014 to 35 in the last week of November 2014 (UNICEF, 12/01/2015).

Nutrition

As of September 2014, 628,000 children under five suffer from severe acute malnutrition (OCHA, 30/09/2014). A February–May SMART survey revealed poorer nutritional status among the population of Adamawa, Borno, and Yobe states (UNICEF, 06/2014). 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).

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).

Polio

In 2014, 29 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 in 2012, 102 (GPEI, UNICEF). 72% of cases in 2013 were recorded in Borno, Yobe, and Kano states.

WASH

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).

According to reports from UNICEF, nearly half the Nigerian population does not have access to safe water, and a third does not have access to sanitation services.

Education

10.5 million children are out of school in Nigeria; 60% in the northern part of the country (UNICEF cited by OCHA, 07/2014). One in every three primary school children and one in every four secondary school children are out of school in the northeast.

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

Maintaining the civilian nature of places of asylum or displacement is of concern.

Abduction, Torture, and Forced Recruitment

In a report in September, Amnesty International said Nigeria’s police and military routinely torture women, men, and children, using a wide range of methods including beatings, shootings and rape (BBC, 18/09/2014).

Over 23–24 January, BH released about 190 captives who returned to their village, in Gujba local council, Yobe state (Reuters/Sahara Reporters, 24/01/2015).

Kidnappings of groups of women and girls by BH continue, and more than 200 schoolgirls are still being held captive (OCHA, 01/07/2014). Young men are being forcibly recruited (ECHO, 20/09/2014). 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: 27/01/2015

SIERRA LEONE FOOD INSECURITY, EPIDEMIC

LATEST DEVELOPMENTS

26 January: 10,491 Ebola cases have been reported, including 3,195 deaths (WHO, 26/01/2015).

23–24 January: The Government lifted nationwide travel bans and eased restrictions on trading hours, due to the declining incidence of Ebola cases (AFP, 23/01/2015).

22 January: The Government announced it would end the "risk allowances" to healthcare workers delivering the Ebola response by the end of March (AFP, 22/01/2015).

19 January: The second phase of the Western Area Surge began on 19 January, and will continue until 1 February (local media, 19/01/2015).

KEY CONCERNS

- The total cumulative number of reported cases across the region has reached 21,924, including 8,737 deaths (Liberia, Guinea and Sierra Leone) (WHO, 26/01/2015). The numbers of registered cases and deaths are largely inaccurate, underestimating the gravity of the situation on the ground.

- About 450,000 people, or 7.5% of the population, were estimated to be severely food insecure.
insecure as of December 2014, the impact of EVD accounting for more than a quarter of the food insecure. By March 2015, these numbers are projected to increase to 610,000, and 280,000, respectively. 2.1 million people were estimated to be vulnerable to food insecurity (FAO, 17/12/2014).

- The national public health system is overstretched and struggling to deliver non-EVD care (UNMEER, 10/12/2014). On 24 November, burial workers in Kenema city went on strike in protest over inadequate equipment to fight the Ebola epidemic (AFP, 24/12/2014). 

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

Political Context

On 4 November, a journalist in Freetown was arrested, under emergency measures introduced to fight the Ebola epidemic, after a guest on his radio show criticised the President’s handling of the Ebola outbreak (Reuters, 04/11/2014).

International Response

About 800 UK soldiers are on the ground (international media, 15/12/2014). Cuba has sent 465 health workers to West Africa (international media, 20/10/2014). On 18 September, the UN Security Council adopted a resolution establishing a special mission to lead the global response to Ebola (UN, 18/09/2014).

The Ebola outbreak in West Africa has been declared a Grade 3 Emergency under WHO’s Emergency Response Framework (ECHO, 29/07/2014). WHO declared the epidemic a Public Health Emergency of International Concern (PHEIC).

Unrest

Strikes and tensions related to pay and incentives continue to be reported across the country (UNMEER, 18/01/2015). On 6 January, the hospital in Magbenteh, Makeni, reopened after staff ended a strike over risk payments that began on 24 December (The Guardian, 06/01/2015; 24/12/2014). On 8 December, doctors at Freetown’s main hospital went on strike in protest over inadequate equipment to fight the Ebola epidemic (AFP, 08/12/2014; UNMEER, 10/12/2014). On 24 November, burial workers in Kenema city abandoned 15 bodies at the city’s main hospital, protesting at non-payment of allowances for October and November (BBC, 25/11/2014).

Humanitarian Context and Needs

Access

Delays in getting visas and security clearances for cargo and planes, as well as high customs fees, are hampering humanitarian access and supply distribution (international media, 06/10/2014).

Poor coordination between agencies and road access issues remain major challenges in rural areas, making it sometimes impossible to reach families in need of food within 24 hours of being placed under quarantine (UNMEER, 30/11/2014). In addition, poor mobile phone coverage in Koinadugu, Kailahun, and Pujehun, as well as the movement of people suspected to have Ebola across districts and chiefdoms, impedes surveillance efforts (UNMEER, 18/01/2015).

Displacement

Since the outbreak of EVD, fear of being infected or quarantined has triggered displacement. It was reported in October that half of the people who left Kenema and Kailahun districts since June did so because of Ebola. Some Ebola survivors have had to relocate because of strong stigmatisation after their return from hospital (DHWH, 06/10/2014). Information on the exact number of displaced in lacking, but there does not seem to be any large scale displacement.

Food Security

About 450,000 people, or 7.5% of the population, were estimated to be severely food insecure as of December 2014, the impact of EVD accounting for more than a quarter of the food insecure. About 76% of the Ebola-related food-insecure individuals live in rural areas. The number of food insecure is projected to increase to 610,000 by March 2015, 280,000 of whom are attributed to EVD. 2.1 million people are estimated to be vulnerable to food insecurity (FAO, 17/12/2014; WFP 05/01/2015).

Households are continuing to rely on high levels of negative coping mechanisms in Kailahun and Kono, areas that were food secure before the Ebola outbreak (WFP, 18/12/2014). Three-quarters of people surveyed in the country by WFP have begun to reduce the number of daily meals and portion sizes (IRIN, 20/10/2014).

Agriculture and Markets

Total food production for 2014 is estimated to be 5% lower than in 2013 (WFP, 24/12/2014). 2014 rice production is estimated to decline by 8% (WFP, 05/01/2015). Labour shortages caused by movement restrictions and bans on group activity, as well as the restrictions placed on markets, are cited as a major causes of disruption to farming activities and the loss of income (FAO, 17/12/2014; 22/01/2015).

Up to 40% of farms have been abandoned in the most affected areas, according to the International Fund for Agricultural Development (UN, 13/10/2014). Rice production is expected to dip by 17% in Kailahun, which is usually one of the country’s most productive agricultural areas but has been heavily affected by Ebola (FAO, 17/12/2014).

According to the mVAM survey from WFP, markets are the main source of food (FAO, 11/12/2014; WFP 09/2014). In the northern, eastern and southern regions, prices have increased, whereas they declined in the western region (UNDP, 14/11/2014). Rural areas have been more affected by price fluctuations. In December, the price of local rice dropped by over 10% in the southern and eastern provinces (WFP, 18/12/2014). Palm oil prices fell 8–12% compared to November in eastern and southern Provinces; they typically increase at this time of year (WFP, 18/12/2014). In November, imported rice prices were stable or had increased by less than 10% (FEWSENSET, 27/11/2014). Price increases ranged from 13% for imported rice to over 40% for fish in October. Other commodities affected include...
cassava, groundnuts, and palm oil (FAO, 22/10/2014).

As of 22 December, 27% of weekly markets were open and functioning normally, 45% were open but operating at reduced levels, and 28% were closed according to an SMS-based trader survey (FEWSNET, 07/01/2015). The reduction in trader activity will be particularly harmful for farmers relying on cash crops such as cocoa and coffee. Only 20% of rice farmers are selling their surplus: in Kailahun and Kenema, there were 69% fewer domestic rice traders than in 2012 (WFP 05/01/2015; International Growth Centre, 13/11/2014).

Below-average stock levels on markets are reported due mostly to travel restrictions and high transportation costs (FEWSNET, 15/12/2014). Poor food availability (over 50%) was observed in Bo, Kenema, Kono, Moyamba, Port Loko, and Pujehun; the lowest percentage was in Kailahun (FEWSNET, 31/12/2014).

Livelihoods

Economic growth was 4% in 2014, compared to an expected 11.3% before the Ebola outbreak (World Bank, 20/01/2015). Many businesses are reporting an average 40% decrease in revenue since July/August 2014 (UNMEER, 18/01/2015). Household income had dropped by 30% as of October (UNDP, 14/11/2014). Wages have improved in the southeast, but in eastern districts remain 8% to 20% below those reported in other areas of the country (UNMEER, 21/12/2014). An estimated 179,000 people have stopped working outside of the agriculture sector, mostly due to efforts to limit the spread of the disease and to the general economic disruption caused by the epidemic (World Bank, 12/01/2015).

Health and Nutrition

The national public health system is overstretched and struggling to deliver non-EVD care, leading to an increase in non-Ebola-related morbidity and mortality (UNMEER, 16/11/2014). Between May and October, the median number of admissions dropped by 70%. An estimated 35,000 sick in Sierra Leone may have been excluded from inpatient care from mid-May to December 2014 (international organisation, 19/12/2014).

In Kenema district, a sharp decline in facility use for routine health services was reported due to fear of contracting Ebola at a facility. Antenatal and postnatal visits decreased significantly between May and July 2014 (CDC, 02/01/2015).

Ebola

As of 26 January, 10,491 Ebola cases, including 3,195 deaths, have been reported in Sierra Leone (WHO, 26/01/2015). Reliable data collection remains a major challenge, and it is suspected that about 50% of cases are not being reported across the country (UNMEER, 02/11/2014). One in ten of the country’s health workers have died of Ebola (MSF, 26/01/2015).

117 cases where reported from 12 to 19 January. (WHO, 21/01/2015). All districts of Sierra Leone have reported at least one probable or confirmed case since the start of the outbreak. The capital, Freetown, reported 30 new confirmed cases, and the neighbouring districts of Port Loko and Western Rural region reported 31 and 17 new confirmed cases, respectively. In the east of the country, on the border with Guinea, Kono reported 13 confirmed cases during the reporting period. Kambia, which borders Port Loko and the Guinean district of Forecaria, reported eight confirmed cases, as did Bombali. Kailahun, which borders Guinea’s Guéckédou, has reported no confirmed cases for 37 days (WHO, 21/01/2015).

The high number of walk-in cases in the latter point to the fact that case finding is still falling short. A major issue in Port Loko has been the relatively long wait for lab results from Bo and Kenema. Patients can wait in holding centres for weeks. Ongoing transmission in Kono has overwhelmed the district hospital, with a very high death rate among admitted cases. In Tonkolili, transmission has been intense; burials are still taking place in secret and health worker infection is a concern, with four infections during the first week of December. In Bonthe, all cases are imported. The burial team is overwhelmed due to the challenging terrain and hard-to-reach communities (WHO, 07/01/2015; 12/01/2015; 21/01/2015, UNMEER, 04/01/2015). In January, Pujehun, in the southeast, was the first district to be declared Ebola-free, after 42 days with zero recorded cases of the virus (ECHO, 11/01/2015).

Concerns have been raised about the sexual transmission of Ebola in the period after discharge of male survivors from treatment centres. An increase has been reported in the number of patients believed to have contracted the disease through sexual transmission. Some survivors are not following the recommended 90 days of abstinence, and education on condom use is lacking (international media, 17/01/2015, CDC, 18/01/2015).

Healthcare provision: A major challenge is to make labs accessible to all districts: more reliable sample transportation networks need to be put in place. Proper storage capacity and maintenance of blood samples also need to be established in several districts (UNMEER, 18/01/2015). 200,000 personal protective equipment (PPE) sets are needed every month (UNMEER, 30/12/2014). The Ministry of Health and Sanitation distributed anti-malaria medicine to 2.5 million people in hotspot areas in the districts of Bombali, Kambia, Koinadugu, Moyamba, Port Loko, Tonkolili, and in all the Western Area in order to better identify Ebola cases, as the symptoms are similar (UNICEF, 12/11/2014). Another mass distribution started on 16 January (Government, 12/01/2015; UNICEF, 15/10/2015). On 22 January, the Government announced it was ending the risk allowances paid to healthcare workers participating in Ebola response. The additional payment of 500,000 leones (USD 118) a week would stop by the end of March (AFP, 22/01/2015).

Containment measures: Lokomasama and Kaffu Bullo chieftaindom remain locked down as they, in addition to Masimera chieftaindom, are the origin of 80% of Ebola cases in Port Loko district (WFP, 22/01/2015). An increase in cases among inhabitants of Kaffu Bullo chieftaindom, close to Lungi International Airport, has led to increased scrutiny of procedures for airport workers (IOM, 16/01/2015). Additional screening measures at Freetown International airport were imposed by the Government earlier in January (AFP, 04/01/2015).

On 9 January, the Western Area surge operation, launched by the President on 17 December, to identify suspected EVD cases in Freetown and Western Area and refer patients to treatment, was extended for two more weeks. The second phase of the surge...
began on 19 January, and will continue until 1 February (international media, 09/01/2015; Government, 17/12/2014, local media, 19/01/2015). On 23 January, the Government lifted nationwide travel bans and on 24 January eased restrictions on trading hours (AFP, 23/01/2015).

On 10 December, authorities imposed a two-week lockdown on the eastern district of Kono, following reports of new Ebola cases (AFP, 10/12/2014). On 2 December, the quarantine was extended at least until 19 January, and Tonkolili was added to the list of districts under quarantine (Government, 02/12/2014, AFP, 04/01/2015). On 25 September, Port Loko, Bombali, and Moyamba were put under quarantine. Kenema and Kailahun have been quarantined since 7 August (IFRC, 12/11/2014). In June, Sierra Leone closed its borders with Guinea and Liberia, and closed schools, cinemas, and nightclubs in border areas (OCHA, 07/2014). 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).

Regional Outbreak

The total cumulative number of reported cases across the region has reached 21,924, including 8,737 deaths (Liberia, Guinea and Sierra Leone) (WHO, 26/01/2015). On 19 January, Mali was declared Ebola-free after 42 days without reporting any new cases (international media, 19/01/2015).

HIV

8,000 people with HIV, or 80% of people previously on antiretroviral treatment, are no longer receiving treatment due to health staff shortages (UNDP, 30/11/2014).

Maternal Health

Information on the use of non-Ebola related maternity services is contradictory. In a study conducted between May and July 2014, CDC reported that use of antenatal and postnatal services was more affected by the Ebola outbreak than delivery in health facilities in Kenema district. While according to a World Bank phone survey conducted in November, the decrease in use of maternal health services, notably antenatal visits, is most pronounced in Freetown, and there appears to be little evidence for a decrease in usage of these services in the rest of the country (CDC, 02/1/2015; WB, 12/01/2015).

UNMEER reported that women in the three most-affected countries are no longer giving birth in health facilities due to EVD (UNMEER, 03/11/2014). In addition, Ebola-infected pregnant women are often not permitted in the Ebola treatment units because of the high risk of contamination during delivery, resulting in a probable higher maternal death rate in the three most affected countries (UNFPA, international media 29/10/2014). On 9 January, in Kissy, on the outskirts of Freetown, MSF opened the first Ebola treatment unit to focus on maternal cases, providing both Ebola care and obstetric services to pregnant women with, or suspected to have Ebola (MSF, 09/01/2015).

Child Protection

According to the Deputy Minister of Gender and Children Affairs, gender-based violence had dramatically increased within the last year (international media, 09/01/2015). As of 21 January, 15,623 children have been identified as directly affected by the consequences of Ebola, including 8,019 children who have lost one or both parents to Ebola and 5,655 unaccompanied or separated from their caregiver (UNICEF, 21/01/2015). With two million children not attending school, UNICEF warns of an increase in vulnerability, leading to a potential increase in child labour, and in teen pregnancy (UNICEF, 16/10/2014).

Updated: 27/01/2015

Vaccination rates for measles dropped from 99% in January to 76% in July, since mass vaccination campaigns have been suspended (UNICEF, 03/11/2014).

Mental Health

According to a recent assessment, trauma due to the Ebola crisis has put people at risk of mental health problems, due to reduced access to community support systems and normal coping strategies (International Medical Corps, 09/01/2015).

WASH

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

Education

As of 28 November, 100 teachers are currently under quarantine (UNICEF, 28/11/2014). Schools remain closed and nearly two million children are not attending school. According to the Minister of Education, schools are not likely to reopen until March 2015 (UNICEF, 16/10/2014).

Protection

There are reports that male survivors in northern districts are being publicly persecuted by their communities (UNMEER, 18/01/2015). There are reports of contacts being forcibly quarantined in their homes by the authorities and, at times, experiencing shortages of food or water. These quarantine measures can discourage families from seeking early treatment for fear of being locked in their homes (MSF, 26/01/2015). Following the launch of the Western Area surge, health authorities have raised concerns about patients being abandoned by their families at hospitals, even after testing negative for Ebola (international media, 05/01/2015). According to a survey conducted by UNICEF, 96% of Ebola survivors in Sierra Leone have experienced some sort of discrimination. More than three-quarters of respondents said they would not welcome back an Ebola survivor into their community (IRIN, 31/10/2014).

Child Protection

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Updated: 27/01/2015

SOMALIA CONFLICT, FOOD INSECURITY
**LATEST DEVELOPMENTS**

**2 February:** Several people were killed, including four civilians, in an airstrike in southwestern Somalia (AFP, 01/02/2015).

**29 January:** People in Bari, northern and southern Mudug, Middle and Lower Juba, and Banadir regions are the most affected by food insecurity. 76% of those who face acute food insecurity are IDPs, 12% live in rural areas, and 12% are the urban poor (FEWSNET, FSNAU).

**29 January:** Current GAM levels are 12% and SAM levels are 1.9%, a decrease from previous numbers (14.9% and 2.6%, respectively) (FEWSNET, FSNAU).

**27 January:** Access to water remain a major need in Bakool, Bay, Bari, Gedo, Galgaduud, Hiraan, Mudug, Nugaal, Sanaag, and Sool. Displaced populations as a result of the AMISOM offensive in Bay, Bakool, Galgaduud, Gedo and Hiraan require emergency interventions (OCHA).

**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).
- 3.17 million are estimated to need emergency health services (OCHA, 05/12/2014).
- 731,000 people are at Crisis and Emergency levels of food insecurity (FEWSNET, 29/01/2015). 2.3 million people experience Stressed levels of food insecurity.
- More than 202,600 acutely malnourished children under five have been reported, mainly in south-central Somalia (OCHA, 23/01/2015).

**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 three million people living in seven regions affected by the Somalia–African Union military offensive: Bakool, Gedo, Lower Shabelle, Hiraan, Bay, Banadir, and Lower Juba (OCHA, 05/2014). The UN warns of a looming humanitarian emergency (UN, 15/06/2014).

**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. Prime Minister Omar Abdirashid Ali Sharmarke was appointed in December – he had held the role several year previously (UN, 24/12/2014). 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).

Nonetheless, the formation of regional administrations is slowly taking shape; an agreement has been brokered with the regional state of Galmudug, and in November, the Interim South West Administration (ISWA), which encompasses Bay, Bakool, and Lower Shabelle, was formed (UNSC, 23/09/2014; AMISOM, 19/11/2014).

**Puntland:** On 8 January, former Prime Minister Abdiweli Mohamed Ali Gaas was elected President of the self-declared semi-autonomous region. In September, there was an escalation in tensions between Puntland and Somaliland, which included the deployment of military forces to border areas (UNSC, 25/09/2014). A number of media sources in Puntland were closed by the Somali Government in December (Reporters sans Frontieres, 11/12/2014).

**Somaliland:** Protests began in November after the ruling Kulmiye party planned to unseat the Speaker of Somaliland. Police fired on demonstrators: one was killed and eight injured. 22 police officers were injured (PI, 15/11/2014).

**Security Context**

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). Security is said to have deteriorated since March, and the launch of the Somali National Armed Forces (SNAF) and African Union Mission in Somalia (AMISOM) military offensive against Al Shabaab-held areas. The number of attacks and fatalities had decreased between 2010 and 2013.

**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. 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. Following the death of Ahmed Abdi Godane in a US drone attack in September, Ahmad Umar (also known as Abu Ubaidah) has been named the new leader (AFP, 06/09/2014). 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. Al Shabaab is reportedly fleeing south and northeast as the SNAF-AMISOM offensive advances. 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).

In November and December, Al Shabaab carried out two attack in Mandera, Kenya, killing 36 workers at a quarry and 28 non-Muslims on a bus to Nairobi (BBC, 02/12/2014). The Kenyan military launched two operations on Al Shabaab camps in Somalia, reportedly killing 115 militants (BBC, The Guardian, 24/11/2014).

On 5 December, Al Shabaab carried out a twin bomb attack in Baidoa, killing 15 (AFP, UN, 05/12/2014).

**Mogadishu:** On 25 December, three AU soldiers and a civilian were killed after a gunfight in the AMISOM headquarters (AFP, 25/12/2014). On 4 January, a suicide car bomb killed four people (AFP, 04/01/2015). On 18 January, an EID killed the mayor of Afgoi district, Ali Jamili, in the outskirts of Mogadishu (Local Media, 19/01/2014). On 22 January, Al Shabaab attacked a hotel in Mogadishu, killing five, on the eve of a visit by the President of Turkey (AFP, 22/01/2015; PI, 22/01/2015).

**SNAF-AMISOM Offensive**

In November 2013, the AMISOM force was increased to 22,000 from 17,600. Its mandate has been extended until 30 November 2015 (UNSC, 25/09/2014). The first SNAF-AMISOM offensive was launched in early March 2014 to recover Al Shabaab-controlled areas of southern and central Somalia: Bakool, Gedo, Lower Shabelle, Hiraan, Bay, Banadir, and Lower Juba regions (OCHA, 05/2014). The second phase of the offensive began in late August. About 1.5 million people live in areas that could be directly affected by the offensive (OCHA, 19/09/2014). In November, there was an increase in retaliatory attacks against AMISOM and government troops, with tensions high in Bay, Gedo and Hiraan (WFP, 24/11/2014).

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).

On 25 August, reports suggested AU and Somali government troops had seized Tiyeeglow in Bakool region, giving the Somali Government full control of all major towns in Bakool (AOV, 25/08/2014). On 6 October, international media reported that Somali troops had regained control of Barawe, a port town in Lower Shabelle that had been under Al Shabaab control for more than 20 years (AFP, BBC, 06/10/2014). On 8 November, Al Shabaab had reportedly retaken control of Kidha Island, 70km off the coast of Kismayo, giving access to trade routes (Garowe, 08/11/2014; local media, 09/11/2014; All Africa, 07/11/2014).

**Inter-communal Violence**

On 20 January, at least 25 people were killed and more than 50 injured during fighting between Dir and Xawadle clan militias near Deefow, in Hiraan region. The conflict was reportedly triggered by a land dispute (PI, 20/01/2015) (AFP, 22/01/2015; UN, 21/01/2015).

**Humanitarian Context and Needs**

**Access**

As of 15 January, 826 returnees had arrived in Kismayo.

Outside Mogadishu, insecurity on the main roads to newly recovered areas makes needs assessments, 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 Beletweyne, Hudur, and Elbarde. The Logistics Cluster reported in late November that roads in Bulu Burde, Baidoa, and Wajid also remain extremely unstable (WFP, 30/11/2014). Reports in January suggest that an Al Shabaab blockade in Wajid, Bakool region, has spurred acute food shortages and severe malnutrition (Local Media, 19/01/2015). 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 (PI, 08/01/2015).

**Security Incidents Involving Aid Workers**

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). Aid workers have reportedly been targeted by armed groups for arrest and detention in Bakool, Bay, Gedo, and Lower and Middle Juba. On 18 May, 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 December 2014, 893,000 in the south-central region, 130,000 in Puntland, and 85,000 in Somaliland (UNHCR, 12/2014). 369,000 IDPs live in makeshift camps in Mogadishu. 80,000 were displaced due to the SNAF-AMISOM offensive in 2014 (OCHA, 04/12/2014).

**Mogadishu:** As of August, a significant and increasing number of rural families were moving to Mogadishu, fleeing conflict or food insecurity (UNICEF, 20/08/2014). More than 42,900 IDPs were unlawfully evicted from Mogadishu in late August and early September, mainly from Daynile and Hodan, according to UNHCR (WFP, 24/11/2014). The evicted have moved to the outskirts of Mogadishu and remote areas, where they lack physical security and access to basic services (OCHA, 19/09/2014).

**Returnees**

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: Luuq, Baidowa, and Kismayo. Only 3,000 refugees have registered to return, compared to the original target of 10,000. (UNHCR, 08/12/2014). 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, 11/08/2014). As of 15 January, 826 returnees had arrived in Kismayo.
Returnees are receiving a return support package comprising of unconditional cash grants, essential travel and hygiene kits, tools, food and other basic needs assistance (UNHCR, 15/01/2015).

Refugees in Somalia

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

Somali Refugees in Neighbouring Countries

984,222 Somalis are refugees in neighbouring countries: 441,229 in Kenya, 250,474 in Ethiopia, and 236,803 in Yemen, 24,040 in Uganda, 19,745 in Djibouti, 3,049 in Eritrea, and 150 in Tanzania (UNHCR, 30/12/2014).

Kenya: On 18 December, Kenya passed the Security Amendment Act, which states that the number of refugees and asylum seekers permitted to stay in Kenya shall not exceed 150,000; human rights groups fear that the new security law will result in the forced return of large numbers of refugees (IRIN, 05/01/2015).

Drought

Six districts in southern and central Somalia have been affected by drought. Gede is the most severely affected, with 70% of the population being impacted (OCHA, 17/11/2014).

Floods

Heavy rains in south-central Somalia, in upper parts of the Shabelle basin along the Somalia–Ethiopia border, have caused flooding along both the Shabelle and Juba Rivers. An estimated 50,000 people have been affected across six regions (OCHA, 24/11/2014), and from 1 September to 16 November, 30,323 have been displaced in Lower Shabelle, 6,274 in Hiraan, 2,033 in Lower Juba, and 120 in Banadir (UNHCR, 16/11/2014).

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, despite improvement due to the dyaar harvest, improved livestock conditionsm and mostly stable staple food prices (FEWSNET, FSNAU, 29/01/2015).

About 1 million people need lifesaving food assistance, and an additional 2.1 million remain highly vulnerable to shocks (OCHA, 23/01/2015). About 76% of those who face acute food insecurity are IDPs, 12% live in rural areas, and 12% are the urban poor. People in Bari, northern and southern Mudug, Middle and Lower Juba, and Banadir regions are the most affected by food insecurity (FEWSNET, FSNAU, 29/01/2015).

Agriculture and Markets

In most of Middle Juba, and parts of Gede, Lower Juba, Lower Shabelle, Hiraan, and central regions, dyaar rains ended three weeks early in December, and cool, dry winds accelerated the depletion of water sources and the deterioration of pasture (FEWSNET, 24/12/2014). In January 2015, dyaar crops were reported to be below average (FAO, 09/01/2015).

An OCHA report in late November indicated that in parts of Lower Shabelle, drought, coupled with limited or no access to functioning boreholes, has led to price rises and limited employment opportunities (OCHA, 21/11/2014).

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 El Barde, Wajid, and Hudur (Bakool region); Luuq (Gede): Bulo Burde and Jalawsi (Hiraan); and Marka and Woryoley (Lower Shabelle) (USAID, 30/09/2014).

Although cereal prices started to decline in January 2015, they remain high in most markets (FAO, 09/01/2015). Cereal production has fallen 30% below the five-year average (FAO, 31/10/2014).

Health and Nutrition

Around 3.17 million people are in need emergency health services (OCHA, 27/01/2015). 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).

Nutrition

A survey conducted October–December 2014 indicates that 202,600 children under five are acutely malnourished. 38,200 are severely acutely malnourished, a slight decrease from previous surveys (FEWSNET, FSNAU, 29/01/2015). Current GAM levels are 12% and SAM levels 1.9%, also a decrease from previous numbers (which were 14.9% and 2.6%, respectively) (FEWSNET, FSNAU, 29/01/2015).

756,000 people are in need of quality nutrition services (OCHA, 23/01/2015). 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, Bossasso IDPs in Bari region, Garowe IDPs in Nugal region, and Galkayo IDPs in Mudug region (FEWSNET, FSNAU, 29/01/2015).

Measles

9,190 measles cases were recorded in 2014; double the number recorded in 2013 (OCHA, 24/11/2014, UNICEF, 01/12/2014). Only one-third of children have been vaccinated. In some parts of south-central Somalia, measles immunisation coverage is as low as 15% (OCHA, 24/11/2014). Increased population movement and overcrowded IDP settlements have increased the risk of infection (UNICEF, 01/12/0214).

Polio
198 polio cases were confirmed in 2014 (WHO, UNICEF 22/07/2014). Large, insecure areas of south-central Somalia have not conducted immunisation campaigns since 2009, leaving 600,000 children vulnerable, according to the Global Polio Eradication Initiative.

**Education**

In south-central Somalia, there is no functioning national education system, and around 1.7 million children are out of school (OCHA, 23/01/2015; 04/12/2014).

**WASH**

2.75 million people need safe water. Access to water remain a major need in Bakool, Bay, Bari, Gedo, Galgadud, Hiraan, Mudug, Nugaal, Sanaag and Sool. Populations displaced by the AMISOM offensive in Bay, Bakool, Galgadud, Gedo, and Hiraan require emergency interventions (OCHA, 27/01/2014).

**Protection**

The major protection issues in Somalia are physical insecurity during the first 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).

**Executions**

Reports on 7 January indicate that Al Shabaab executed four people in Bardhere, in the Gedo region, accused of spying for the United States and Ethiopia (AFP, 07/01/2015). On 11 December, following the beheading of two women by Al Shabaab, five women were executed in a revenge attack in Bakool (AFP, 11/12/2014).

**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 have been reported so far this year (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).

**Media Workers**

Journalists continue to be targeted. In December, a bomb attack in Baidoa killed 15 people, including two journalists (IFJ, 15/12/2014). On 13 December, and Independent Expert on Human Rights in Somalia called on government authorities to ensure the safety of journalists (AMISOM, 13/12/2014).

**SOUTH SUDAN**

**CONFLICT, FLOODS, FOOD INSECURITY, DISPLACEMENT**

**LATEST DEVELOPMENTS**

**2 February:** A new ceasefire was signed between the Government and SPLM-in-Opposition. The parties are expected to reach a final accord by the end of March (Reuters).

**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 has distanced itself from the SPLM-in-Opposition (local media, 29/01/2015).

**27 January:** The release of 3,000 child soldiers was secured by UNICEF (NYTimes, 27/01/2015).

**19–25 January:** 9,000 new IDPs were registered at the Bentiu PoC site (IOM, 31/01/2015).

**23 December–January:** More than 3,000 refugees from South Kordofan and Blue Nile states have arrived in Yida town, Unity state. Arrival rates exceed 500 people per week, which is double the rate compared to the same period in 2013. Nearly 70% are children (UNHCR, 30/01/2015).

**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).

- 2.5 million people expected to be in Crisis or Emergency Phase of food insecurity January–March 2015, including nearly half of the population of Jonglei, Unity, and Upper Nile (IPC, 02/2015).

- 1.5 million IDPs since December 2013 (OCHA, 01/2015). Almost 103,000 are in UNMISS bases (UNMISS, 31/12/2014). 68% of IDPs are estimated to live in flood-prone areas (OCHA, 08/2014).

- 249,000 refugees in South Sudan (mainly from Sudan, DRC, Ethiopia and CAR).
Over 500,000 South Sudanese refugees since December 2013 (UNHCR 01/2015)

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 has exacerbated tensions, with additional concerns in Khartoum regarding an influx of refugees and arms, as well as disruption of oil flow. In April, Sudan accused that South Sudan of using Sudanese militia groups to fight insurgents. South Sudan made similar accusations in return.

A UN report indicated the presence of SPLM forces in Abyei in February and March 2014, in violation of the 2011 Agreement on Temporary Security and Administrative Arrangements for Abyei. Pro-government Sudanese militias and Sudanese Armed Forces have also been reported in the area.

National Context

Since violence broke out in December 2013, President Kiir’s government forces (SPLM), 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), along with ethnic Nuer militia forces. Despite a significant reduction in intensity from January 2014, violence persists.

Talks, mediated by the Intergovernmental Authority on Development (IGAD), an East African regional bloc, began on 3 January 2014. Various steps were taken between August and November, indicating progress, although Unity and Upper Nile states saw renewed fighting. IGAD condemned the violence in early January 2015, and at the end of the month the African Union threatened sanctions on all warring parties (IGAD, 02/01/2015; AP, 31/01/2015). On 21 January, President Kiir and Riek Machar signed a pact in Arusha, Tanzania (AFP, 21/01/2015). On 2 February, they agreed another ceasefire, which according to media reports, included a power-sharing agreement that appoints Riek Machar as vice-president (local 2/2/2015). The parties are expected to reach a final accord by the end of March (Reuters, 2/2/2015).

REMNASA

On 19 January, a group of former SPLA soldiers attacked the SPLA production unit at Mankakara 2, near Maridi town, Western Bahr el-Ghazal state. 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; it has distanced itself from the SPLM-in-Opposition (local media, 29/01/2015).

Security Context

Most violence is occurring in the oil-rich northeastern states of Unity, Upper Nile, and Jonglei, violence between government and opposition forces escalated in Unity and Upper Nile states in April–May 2014. It calmed during the rainy season, then recommenced at the start of the dry season, at the end of October, as mobility increased.

In January 2014, the death toll was estimated at 10,000 since violence broke out the previous December. A new estimate indicates 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, according to local media, representatives of the Nuer community stated that over 17,000 Nuer had been killed by pro-government forces since December. Over 5,900 people had sought treatment for gunshot wounds between mid-December 2013 and 12 March 2014, according to humanitarian partners.

International Military Presence

In March, South Sudan approved the deployment of a regional force drawn from IGAD member states. The size, mandate, command, and deployment time frame of the contingent are still under discussion.

The UN Security Council voted on 24 December 2013 to increase the number of peacekeepers in the country from 10,000 to 12,500.

Border tensions with Sudan

Bombs were reportedly dropped in Maban county of Upper Nile state, and Raga county, Western Bahr el-Ghazal state in November 2014. However, Sudan has denied the reports (AFP, 14/11/2014; VoA 03/11/2014).

Clashes between the Government and SPLM-in-Opposition

Jonglei

Since early November, heavy fighting has been frequently reported in Khorfulus areas of Canal/Pigi and Fangak counties, with displacement of tens of thousands into Ayod county and New Fangak areas (OCHA, 07/11/2014).
On 31 January, fresh clashes were reported in Mayom county (local media, 02/02/2015). Mayom county is an SPLA stronghold and provides strategic access to routes to Warrap state. The county had been relatively free of clashes since August 2014 (Small Arms Survey, 29/01/2015).

Renewed fighting between government and opposition forces was reported 2–3 January near Bentiu, killing six civilians (Reuters, 04/01/2014). There were reports of rockets on Unity oil fields at the end of December (OCHA, 1/1/2015). Heavy fighting occurred between government and opposition forces in Bentiu and Rubkona between 27 and 29 October, and in November (AFP, 10/11/2014).

Upper Nile

On 8 January, renewed fighting between SPLA and opposition forces killed 50 fighters from both sides in an area northeast of Malakal. According to the SPLA spokesperson, 2,000 opposition fighters attacked SPLA bases and positions (VoA, 15/01/2015).

On 23 January, OCHA reported escalated fighting in Jammam and Renk, causing displacement in neighbouring counties.

At the end of January, there were reports of shelling across the Sobat River in Nasir (OCHA, 31/01/2015). On 1 January, small arms, rocket-propelled grenade, and indirect fire were reported in Nasir (OCHA, 01/01/2015).

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.

Central Equatoria

Eleven people were reportedly killed and three wounded in Kwarijik, outside Juba, in clashes over 18–22 January. Some villagers were reportedly seeking refuge in a primary school, while others fled to Gondokoro (OCHA, 23/01/2014).

Lakes

Inter-communal violence has been reported in counties across Lakes state since September 2014. At the end of December, 44 fatalities were reported due to fighting in Rumbek East.

Eastern Equatoria

In December, 24 people were killed in tribal clashes between Loroyo and Idali villages in Torit county (local media, 09/12/2014). Over 500 people crossed into Uganda on 8 December (WFP, 11/12/2014).

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 of the attack (AFP, 26/01/2015).

Humanitarian Context and Needs

Access

As of 30 October, 3.8 million people are in need of humanitarian assistance; 3.5 million had been reached (OCHA, 30/10/2014). The delivery of aid is restricted by heavy fighting, logistical constraints, and administrative impediments.

According to local media, humanitarian assistance has been blocked by armed groups in Old Fangak town, Jonglei (26/01/2015).

Administrative Constraints

On 2 July, international media reported that authorities prevented four UN staff from taking a plane, and confiscated their passports.

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).

Roads across the country are beginning to dry out, though some delays continue due to rains and poor maintenance. As of 30 January, WFP reported that road access was impossible between Bentiu (Unity) and Rumbek (Lakes); GuelGuk, Mathiang, Maiwut and Pagak (Upper Nile); Ayod and Malakal (Jonglei); Bor, Gadiang, and Akobo (Jonglei); Bor and Akobo (Jonglei); Pochala, Boma and Narus (Jonglei); Akobo and Walgak (Jonglei).

Security Constraints

Incidents against humanitarian personnel and assets reported in 2014 included assault, burglary, harassment and ambush in Central Equatoria, and arrest, detention, and threats in Unity and Jonglei. In December 2014, Lakes state reported 12 access incidents, the highest in the country, related to insecurity and inter-communal tensions (OCHA, 31/12/2014). Increased insecurity in Lakes led to suspension of activities by humanitarian organisations for several weeks from October (OCHA, 20/10/2014). A WFP staff member and one UNMISS contractor is still being held after abduction in Malakal in October (UNMISS 17/10/2014; WFP, 17/10/2014).
As of 31 December, over 1.44 million South Sudanese had been displaced internally and over 488,000 South Sudanese refugees had moved across borders since December 2013 (OCHA, 31/12/2014). Fluid displacement patterns and limited access to rural areas make numbers difficult to verify (UNHCR 11/07/2014).

Between 24 November and 16 December 2014, 3,139 South Sudanese crossed into Uganda at the Nimule border crossing and registered as refugees – a significant spike in daily arrival rates to more than 140 from 10 in October. The main driver of displacement seems to be fear of insecurity, rather than actual worsening of security (UNHCR, 16/12/2014).

IDPs

As of 1 January 2015, 1.5 million people were displaced in South Sudan: 621,000 in Jonglei, 345,000 in Unity, 258,600 in Upper Nile, and 158,400 in Lakes (OCHA, 01/01/2015). An estimated 748,000 IDPs are under 18 (UNICEF, 02/01/2015). Displacement patterns remain fluid, driven by violence, floods, and the search for emergency assistance (IOM, 03/09/2014).

875,000 IDPs live in flood-prone areas (OCHA, 15/08/2014).

103,000 IDPs are sheltering in ten Protection of Civilians (PoC) sites on UNMISS bases: 43,000 in Bentiu, 34,000 in Juba UN House, 21,000 in Malakal, and 2,600 in Bor (UNMISS 16/01/2015). Between 19 and 25 January, 9,000 new IDPs were registered at Bentiu PoC site (IOM, 31/01/2015). The new arrivals are reported to be from Guit and Koch county, Unity State fleeing armed violence and lack of food and health services (OCHA, 29/01/2015).

Heavy fighting in Khorfulus areas of Canal/Pigi and Fangak counties, Jonglei state since early November has displaced approximately 100,000 people in northern Jonglei, primarily in Ayod county and New Fangak areas (USAID, 05/01/2015). In early December, an estimated 25,000 were newly displaced from New Fangak and Pigi/Canal and another 43,200 people displaced in Old Fangak town (OCHA 12/12/2014).

An escalation of conflict in Jamman and Renk, Upper Nile, has reportedly displaced people in Maban, Kilo 10 (Melut), and Renk. Displaced people are also reportedly arriving at Malakal town and the PoC site from northern Jonglei (OCHA, 23/01/2014). Assessments are under way (OCHA, 23/01/2015).

Refugees in South Sudan

249,270 refugees are in South Sudan: 226,000 from Sudan, 15,500 from DRC, 4,900 from Ethiopia, and 2,040 from CAR. Over 132,000 refugees are based in Upper Nile and around 85,000 in Unity (UNHCR, 14/01/2015). Most of the Sudanese refugees in Upper Nile state reside in four refugee camps in Maban county (OCHA, 03/04/2014).

Since 23 December 2014, more than 3,000 refugees from South Kordofan and Blue Nile states have arrived in Yida town, Unity state. Arrival rates exceed 500 people per

week, double the rate during the same period a year ago. Nearly 70% are children. Refugees cited aerial bombardments, ground attacks and lack of livelihood and education opportunities as reasons for leaving. (UNHCR, 30/01/2015).

Returnees

As of 28 August, 186,000 people have 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). This is a downward revision from 227,000 returnees reported in July (OCHA, 29/07/2014).

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

South Sudan Refugees in Other Countries

Over 488,000 South Sudanese have sought refuge in neighbouring countries since the onset of the conflict (UNHCR, 31/12/2014).

Sudan: 120,000 South Sudanese nationals have arrived in Sudan since 15 December 2013. In December, more than 2,000 were registered per week but since mid-January the numbers have increased less drastically (UNHCR, 29/01/2015).

As of late March, the Sudanese Government has refused to recognise South Sudanese nationals as refugees and instead considers them to be Sudanese citizens (UNHCR, 03/04/2014). UNHCR has declared that this constitutes an obstacle to access to humanitarian assistance.

Ethiopia: 195,000 South Sudanese refugees (UNHCR, 27/01/2014). The rate of arrival saw a sharp decline in the rainy season, from an average of 2,000 per day in May to 92 in the first week of October (WFP, 10/10/2014).

Uganda: 140,000 refugees (UNHCR, 29/01/2015).

Kenya: 45,000 refugees (UNHCR, 12/01/2015).

Food Security

The number of people in Crisis and Emergency phases (Phase 3 and 4) of food insecurity dropped to 1 million from 3.9 million in September 2014 for October through December 2014, following normal rainfall, good conditions for crops, and humanitarian response (FEWSNET, 11/2014).

Renewed conflict and displacement in early 2015 will limit the coping capacity of households in conflict-affected areas. Food security is expected to worsen in February–March, with an early onset of the lean season, and needs will peak from May to July (FEWSNET, 11/2014).

From January to March 2015, 2.5 million people are projected to be in Crisis or Emergency Phase, including nearly half the population of Jonglei, Unity, and Upper Nile (IPC, 09/2014). 890,000 will be in Phase 4 and 1.63 million in Phase 3 (IPC, 09/2014). 515,000 people will be in Phase 3 or 4 in Jonglei; 525,000 in Unity; 530,000 in Upper Nile; 320,000 in Northern Bahr el Ghazal; 200,000 in Lakes; 145,000 in Warrap; 80,000 in Eastern
Equatoria; 20,000 in Western Bahr el Ghazal, 180,000 in Central Equatoria (IPC, 09/2014). According to WFP’s Vulnerability Analysis Mapping, 15% of households in Warrap state, which lies outside the conflict zone, are severely food insecure, the highest percentage in South Sudan (WFP, 12/2014).

Conflict is affecting major supply routes, displacing traders, and leading to a rise in food and fuel prices (FAO, 04/06/2014). 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.

Livestock are moving into agricultural areas, rather than conflict-affected pastoral zones. This has destroyed crops, and 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).

**Health and Nutrition**

5.8 million people need health assistance, 3.4 million of whom have been reached since January 2014. Waterborne diseases in flooded areas, as well as kala azar (visceral leishmaniasis) in Jonglei, are the most pressing health concerns (WHO, 10/2014).

**Cholera**

6,421 cholera cases, including 167 deaths (case fatality rate 2.6%), had been reported across the country as of 2 December, more than two-thirds in Eastern Equatoria and Upper Nile (UNICEF, 02/12/2014; UNICEF, 12/08/2014). No new cases have been reported since 23 November 2014 (WHO, 02/01/2014).

**Hepatitis E**

One new hepatitis E virus case was reported from Mingkaman IDP settlement in the first week of December 2014. The cumulative caseload in Mingkaman for 2014 is 128, including four deaths (CFR 3.23%) (WHO, 28/12/2014).

**Maternal Health**

200,000 pregnant women were estimated to need urgent care in 2014; 30,000 of them at risk of dying of complications (UNFPA, 15/05/2014).

**Measles**

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

**Nutrition**

The screening of over 600,000 children across the country in 2014 found an SAM rate of 6.7% and an MAM rate of 12.6% (UNICEF, 19/08/2014). 675,000 children are estimated to be moderately malnourished and 235,000 severely malnourished (OCHA, 29/07/2014). Twice as many will need treatment for SAM this year than in 2013 (UNICEF 15/07/2014).

GAM levels are above the emergency threshold of 15% in conflict states of Upper Nile (15.2%) and Jonglei (16.2%). 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 rates GAM 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).

**Polio**

Two vaccine-derived polio virus cases were confirmed in Bentiu PoC site (WHO, 03/11/2014).

**Visceral Leishmaniasis**

By end November, 7,204 cases of kala azar (visceral leishmaniasis) and 199 deaths had been 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). No new cases have been reported since end November. Kala azar is a chronic and potentially fatal parasitic disease transmitted by the bite of infected sandflies (Sudan Tribune, 07/09/2014).

**WASH**

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 the PoC sites (OCHA, 14/11/2014).

In 40% of sites, IDPs rely on unimproved or surface water sources (IOM 15/07/2014). Water access in the Bentiu PoC site was 13.2L per person in early January 2015 (OCHA, 02/01/2015). Latrine provision has improved from 99 to 69 persons per latrine (UNICEF, 20/11/2014).

**Shelter and NFIs**

Living conditions in the PoC site in Malakal are dire, with two families (eight people) living in one tent, for lack of space for additional tents (OCHA, 26/10/2014).

Bad road conditions and insecurity in Jalhak (Upper Nile) is delaying the delivery of NFI support to the area (OCHA, 26/10/2014).

**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). Many schools remain closed in Jonglei, Unity, and Upper Nile. 94 schools have been occupied by armed groups or IDPs (OCHA, 15/01/2014).
In Warrap state, 60 schools are reportedly occupied by IDPs displaced by flooding, while 271 schools in the state were destroyed (OCHA, 07/11/2014). Flooding forced 500 children out of school in Mvolo county, Western Equatoria state (OCHA, 21/11/2014). Six schools were closed in October in Rumbek East, Lakes state, due to insecurity (OCHA, 30/10/2014).

**Protection**

**Children**

A new report by the UN Security Council suggests that all parties to the conflict since December 2013 are 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 27 January, UNICEF secured the release of 3,000 child soldiers recruited by the South Sudan Democratic Army (SSDA) Cobra Faction, the largest ever demobilisation of children (UNICEF, 27/01/2015).

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 in the area (OCHA, 26/10/2014). Escalated tension in Malakal has increased vulnerability of women and girls to SGBV and interrupted access to reproductive health services and psychosocial support services (UNFPA, 07/11/2014).

**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 scheduled for 13 April (AFP, 31/12/2015). On 11 January, President Omar al Bashir launched his bid for re-election. It is unclear whether anyone will challenge Bashir (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.

The Sudanese Government has accused Juba of using Sudanese militia groups. The South Sudanese army (SPLA) has accused Khartoum of supporting the Sudan People's Liberation Movement (SPLM)-in-Opposition. Both the opposition and Khartoum denied this accusation.

In November, 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).

**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).

The Darfur peace process is stalled, and does not include the SRF members, who have consistently rejected the process. SRF has said it is ready to join the national cooperation with Khartoum and enhance its cooperation with the UN–AU Mission in Darfur (UNAMID), provided the Government lifts the state of emergency and allows unimpeded humanitarian access to war zones. To date, no settlement has taken place.

**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, 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. On 11 April 2014, local media reported that the Sudanese Defence Minister had stated that continued armed opposition would be crushed by a military offensive in 2014. 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.

**UN Peacekeeping Mission**

On 30 November, President Omar al-Bashir called for a “clear programme” for the exit of the UNAMID mission in Darfur, saying that the peacekeepers have become a burden. Relations deteriorated following the Sudanese Government’s refusal to allow a UNAMID investigation of mass rape in Tabit, North Darfur (AFP, 30/11/2014).

**Armed Conflict and Violence in Darfur**

Security in Darfur has reportedly deteriorated significantly since late December 2013, with almost daily air strikes from the Sudanese Air Force (SAF). Attacks on IDPs and villages, their shelters, and commercial convoys, are frequent. IDPs in camps across Darfur have requested protection (local sources, 12/03/2014).

In early January, 15 villages were burned and another 30 abandoned during fighting between government forces and armed groups in Tawila locality, North Darfur, with thousands displaced (OCHA, 08/01/2015; local media, 06/01/2015). On 14 January, the Sudanese paramilitary Rapid Support Forces (RSF) continued raids on villages in Tawila and Um Baru in North Darfur, reportedly plundering goods and large numbers of livestock (local media, 15/01/2015).

Raid attacks by pro-government forces were reported in North Darfur, South Darfur, and Central Darfur in September and October 2014 (OCHA, 26/10/2014; local media, 13/10/2014, 29/10/2014, 23/10/2014, 14/10/2014, 5/09/2014).

**Jebel Marra:** In early January, government and opposition forces were reported to be fighting for control over Jebel Marra region. According to the army, Sudanese troops had driven insurgents out of the Fanga area in the Jebel Marra region on 1 January. SLMM denied these reports (AFP, 2/1/2015). 21 villages in Fanga have been attacked and burned by armed groups. Up to 50,000 people could have been displaced, according to community leaders (OCHA, 08/01/2015). On 28 January, bombing injured seven people in the area of Darsa and Sur Reng, an SLM-AW stronghold (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:** In late November, several days of fighting over land among the Missiriya left more than 133 people dead in the oil-rich West Kordofan region (AFP, 27/11/2014). According to Sudan’s Humanitarian Aid Commission (HAC), 14,000 people are estimated displaced and may require humanitarian assistance. An assessment with the UN has been planned (OCHA, 17/12/2014). Earlier 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).

**Armed Violence and Conflict in 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 on 23 May 2014. There were reports of an SAF offensive in North Kordofan in April, intensified bombings in the region in May, bombardments in South Kordofan in September and October, and in Blue Nile state in November (OCHA, 22/10/2014; local media, 25/11/2014).
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, 940,000 need assistance in government-controlled areas (OCHA), and 540,000 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).

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.

Security Incidents Involving Aid Workers

On 25 January, SPLM-N shot at a WFP helicopter, east of Kadugli, South Kordofan, forcing it to land. SPLM-N stated that six crew members are unhurt and ready for immediate release (local media, 26/01/2015). On 20 January, a hospital operated by Médecins Sans Frontières (MSF) in Frandala, South Kordofan, was directly targeted and bombed by SAF. One staff member and one patient were injured. All medical activities have been suspended (MSF, 22/01/2015). On 14 January, a national staff member working for an international NGO was abducted by armed men in Nyala, South Darfur (OCHA, 22/01/2015).

25 aid workers were abducted in Darfur in 2014, the highest number of abduction cases recorded since 2004 (OCHA, 22/01/2015).

Darfur

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

Blue Nile and South Kordofan

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.

Disasters

Winter

At least ten people, including six children, died of cold between 5 and 11 January, local media reported, citing an IDP organisation. Most were people in Darfur, newly displaced by fighting around the Jebel Marra region, according to a spokesperson for the Darfur Displaced and Refugees Association (OCHA, 15/01/2015).

Displacement

IDPs in Darfur

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.

457,000 people were displaced in Darfur January–December 2014, more than in any year since 2004: 316,000 remain displaced and 141,000 people reportedly returned (OCHA 31/12/2014; 20/07/2014). OCHA reported in June that government policy to prevent the creation of new camps is an obstacle to the verification and registration of IDPs.

36,170 newly displaced have been verified in North Darfur, with an additional 56,150 reported but not verified in North and Central Darfur, including Jebel Marra since early January 2015 (OCHA, 29/01/2015).

North Darfur: 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 20,712 newly displaced: 9,060 in Zamzam camp; 1,338 in Rwanda camp; 10,888 in Shagra A, B, C, Behair, and Um Hajaleed towns; 4,587 in Tawila town; 4,566 in Argo camp; 4,479 in Um Baru UNAMID site; 850 in Majdab town; and 448 in Nifasha camp (OCHA, 29/01/2015). Militia in Kutum locality were reported to be imposing protection fees on displaced farmers in September 2014 (local media, 21/09/2014).

South Darfur: 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: 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). Some 50,000 IDPs are thought to have arrived in Wara and Niscam villages in January, according to estimates by community leaders (OCHA, 08/01/2015). Over 1,700 people fled to central Jebel Marra and are in need of food, water, health services, and NFIs (OCHA, 08/01/2015).

East Darfur: 35,000 IDPs as of end November (OCHA, 31/12/2014). 331 villages destroyed December 2013–April 2014 (DRA cited by local media 16/07/2014).
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, 540,000 are estimated displaced in SPLM-N territory (OCHA, 17/11/2014). With no presence in SPLM-N controlled areas, 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). According to the HAC in South Kordofan, a large but unknown number of displaced people are expected to arrive in Kadugli, El Abassiya, Rashad, Talodi and Gadier localities from areas controlled by SPLM-N (08/01/2015).

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

Refugees in Sudan

As of 29 January 2015, more than 120,000 South Sudanese nationals had arrived in Sudan since 15 December 2013, with more than 2,000 registered per week (UNHCR). An estimated 66,000 refugees live in White Nile, 32,000 in Khartoum, 14,000 in South Kordofan, 3,800 in West Kordofan, 3,600 in Blue Nile (UNHCR, 29/01/2015). 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).

In White Nile, arrival rates increased from 500–600 people per week to around 1,000 in September, due to a surge in violence in South Sudan (ECHO, 23/09/2014). 71% of all individuals registered in White Nile are children (UNHCR, 16/12/2014). 91% of households are female-headed (UNHCR, 29/1/2015). All sites in White Nile state are currently beyond capacity. Access for aid workers is a concern (ECHO, 23/09/2014).

On 1 June, Sudan was hosting 157,000 refugees, mainly from Eritrea, with smaller numbers from Chad, Ethiopia, Somalia, according to February UNHCR figures. On 12 October, UNHCR reported 1,700 refugees from CAR in Nyalia, South Darfur. These refugees will be relocated to Um Shalaya refugee camp in Central Darfur (OCHA, 15/10/2014).

Returnees

6,000 Sudanese have returned from CAR to Um Dafug town, South Darfur. Needs include registration and verification, and health and WASH services (OCHA, 23/11/2014).

Sudanese Refugees in Other Countries

As of January 2015, OCHA reported that there were 367,000 Sudanese refugees in Chad, 226,000 in South Sudan, 33,000 in Ethiopia, and 5,500 in Central African Republic (UNHCR).

3,000 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, 01/02/2014).

Food availability has otherwise improved country-wide. 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. Staple food prices continue to decline in most markets, increasing access for poor households. From October to November, sorghum, millet and local wheat prices decreased by 8–30% in most markets (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. Health clinics in El Redis and Al Alagaya relocation sites, White Nile state have reported a shortage of drugs. In El Redis clinic, lack of lighting, refrigeration, and an ambulance, severely hinder the delivery of health (OCHA, 17/11/2014).

There are indications that the health situation in Darfur is deteriorating; many have no access to healthcare. Local reports indicate that schistosomiasis, visceral leishmaniasis, scabies, and ringworm have increased since 2012.

Dengue

WHO and the State Ministry of Health reported that between 28 August and 14 December 2014, 132 cases (three deaths) of haemorrhagic fever had been registered in North Darfur since late August: 20 cases were confirmed as dengue, including three fatalities (OCHA, 17/11/2014).

Measles

593 cases of measles have been confirmed in 12 localities of Gedaref and Kassale states (UNICEF, 20/01/2014).

Nutrition

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

WASH

500,000 will have been severely malnourished in 2014 (OCHA, 24/08/2014). An estimated
WASH support to schools in relocation sites in White Nile state remains critical; no water is currently available (UNHCR, 05/12/2014). In the Al Alagaya relocation site for South Sudanese refugees in White Nile state, the construction of 800 latrines has been delayed due to lack of space, despite the allocation of resources and staff (OCHA, 17/11/2014).

Education

In White Nile state, poor incentives for community teachers interrupt refugees’ education. Many classrooms are occupied by refugees due to lack of alternative space (UNHCR, 14/11/2014). Overcrowding remains a concern in relocation sites in White Nile state (UNHCR, 05/12/2014).

According to local media in July, insecurity in Darfur is affecting the supply of teaching staff, with thousands of teachers in Nyala, requesting transfers. In North Darfur, IDP camps in Saraf Omra locality lack educational services, and IDP children cannot afford fees to attend other schools in the area.

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 heavilymined area of Sudan, according to the Landmine and Cluster Munition Monitor.

Sexual and Gender-based Violence

More than 75 cases of rape were reported by local media in North, South and Central Darfur and Jebel Marra between March and September 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 late March, 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: 03/02/2014

CAMEROON FOOD INSECURITY, EPIDEMIC, DISPLACEMENT

LATEST DEVELOPMENTS

No significant developments this week, 26/01/2015. Last update 19/01/2015.

KEY CONCERNS

- 2.1 million people are in need of humanitarian assistance (OCHA, 17/12/2014).
- 134,106 refugees have arrived and been registered from CAR since January 2014 (UNHCR, 28/12/2014).
- Cameroon hosts approximately 48,000 Nigerian refugees (UNHCR, 30/12/2014).
- The 2011–2012 drought impact continues, with 615,000 people in the north at risk of food insecurity and malnutrition (WFP, 2014).

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. 2.1 million people, 10 % of the population, are in need of humanitarian assistance, primarily in the Far North, North, Adamawa, and East regions (OCHA, 17/12/2014).

Security Context

Boko Haram Attacks

The armed Islamist group Boko Haram (BH), based in Nigeria, has intensified attacks in neighbouring Cameroon since the beginning of the dry season at the end of December (ECHO, 06/01/2015). The number of security incidents had already increased drastically over 2013–2014, 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. Authorities in the Far North region have imposed a curfew and banned vehicle and motorcycle movement at night (IRIN, 15/08/2014). BH began its campaign of armed violence in northeastern Nigeria in 2009.

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). 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). 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).

Cameroon has deployed around 2,000 soldiers in the north (AFP, 20/11/2014). 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**

At least 80 people were kidnapped and three killed in a cross-border raid on 18 January, with 24 hostages subsequently freed. The raid was in response to Chad’s troop deployment to combat BH (Aljazeera, 19/01/2015). On 11 January, at least 143 BH fighters were killed during an attack on a military camp in Cameroon (Reuters, 13/01/2015). On 3 January, Boko Haram attacked a bus in the department of Logone-et-Chari, killing at least 11 people and injuring ten (VOA, 03/01/2015).

**CAR Crisis**

The security situation is unstable in East region due to the conflict in CAR. Armed violence between anti-balaka militia from CAR and Cameroonian forces in late November, caused displacement. Frequent security incidents led to the closure of the CAR–Cameroon border over 19–27 November (OCHA, 04/12/2014; local media, 21/11/2014). As of early December, the humanitarian situation continued to deteriorate in the border area.

**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.

Congestion at the port in Douala delayed the arrival of food and has impacted its delivery to CAR refugees (WFP, 17/09/2014).

**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).

There were reports in November of several thousands of Nigerian refugees stranded at the border (ECHO, 25/11/2014).

**Displacement**

As of September, there are 291,000 refugees in Cameroon (OCHA, UNHCR, and partners, 09/2014). As attacks increase, population displacements toward central Cameroon (OCHA, 06/01/2015). It is estimated that due to the increment of recent attacks, 50,000 people have been displaced in the Northern regions (OCHA, 14/01/2015).

**Refugees from the Central African Republic**

As of 12 December, 241,469 CAR refugees are in Cameroon: 135,093 have arrived since December 2013 (WFP, 18/12/2014; UNHCR, 16/01/2015). At least 17,670 third-country nationals and returnees have also arrived (UNHCR, 07/2014 and IOM, 25/07/2014). But the border is open and extensive, and there are refugees who cross without being registered. During the week of 12 January, there were 12 arrivals in Mbié camp in Kadey Department (UNHCR, 16/01/2015).

In January 2015, it was reported that the influx of CAR refugees has dropped from 10,000 per week to 8,000. The drop in numbers has been attributed to the dire physical condition of CAR refugees preventing them reaching the border (VoA, 06/01/2015). MSF said in August that most new arrivals were in critical need of medical attention (VOA, 13/08/2014).

Close to 60% of newly arrived refugees are children, 20% of whom are under five years of age. 96% of refugees are Muslim. The refugees are spread across the East (95,075), Adamawa (23,060), Douala (3,820), Yaoundé (3,540), and the North (3,540) (UNHCR, 31/08/2014).

59,160 refugees have been transferred to sites. In the East: 10,750 in Lolo, 17,540 in Gado, 9,700 in Mbilié, 5,900 in Timangolo, and 760 in Ngari-Singo. In Adamawa: 11,380 in Borgop and 3,120 in Ngam (UNHCR, 19/09/2014).

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).

Security is a concern: local authorities reported the presence of armed anti-balaka in the village of Diel, and have doubled the number of soldiers guarding the border and patrolling the village (UNHCR, 22/08/2014).

**Refugees from Nigeria**

50,000 Nigerians are estimated to have fled to northern Cameroon since May 2013 (UNHCR, 22/01/2015). As of September, 18,475 Nigerian refugees have been registered in the Far North region, primarily in the districts of Mayo Tsanaga (7,685), Mayo-Sava (1,966), and Logone-et-Chari (8,824). Another 1,530 refugees are in the Southwest region (UNHCR, 09/2014).

28,552 refugees have been registered in Minawao camp, in the Far North region, 2,100 of whom arrived between 5 and 8 January (ECHO, 25/11/2014; ECHO, 06/01/2015; UNHCR, 22/01/2015). The camp’s maximum capacity is 15,000, and the population was only 6,000 in August. The rapid growth in population has put services under severe strain (UNHCR cited by IRIN 06/10/2014; AFP, 15/11/2014; FAO, 05/11/2014). About 70% of new arrivals are women and children who need immediate food, shelter and medical care (AFP, 15/11/2014).
People living outside the camp do not receive humanitarian assistance and lack of identification is a concern. The needs among refugees are largely WASH, health, and nutrition-related.

**Food Security**

Cameroon is facing several food emergencies, due to dryness in the Sahel belt, and the strain of hosting more than 200,000 refugees (ECHO, 06/11/2015).

As of 17 December, 1,078,000 people are food insecure, mostly in the Far North, North, Adamawa and East regions (OCHA, 17/12/2014). 54% of households in the Far North and North regions face shortages. An estimated 34.4% of refugee households from CAR are food insecure, especially in the North and Far North regions (FAO, 11/12/2014).

As of 14 December 2014, 19.8 million people are suffering from food insecurity in the Sahel (OCHA, 17/12/2014). In July 2014, more than 20 million people in the Sahel (Burkina Faso, north Cameroon, Chad, the Gambia, Mali, Mauritania, Niger, north Nigeria, and Senegal) were suffering from food insecurity (Donor, 24/09/2014).

**Agricultural Outlook**

A prolonged dry spell in July had a negative impact on vegetation conditions of the main season maize crops. Average to above-average rainfall in August and September reduced moisture deficits, but another dry spell in October may have negatively impacted germination and establishment of second season crops (FAO, 11/12/2014).

**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. 45.7% of health centres do not have access to electricity and 70% do not have piped water (Inter Press Service, 19/08/2014).

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.

**Meningitis**

1,030 meningitis cases were reported in 2014, including 17 cases reported between 3 and 20 November (WHO, 30/11/2014).

**Cholera**

In 2014, 3,344 cases of cholera and 178 deaths were reported, compared to 29 cases in 2013 (UNICEF, 24/12/2014). The outbreak is concentrated in the north, with Mogodé, in the Far North region, worst hit (IFRC, 20/10/2014). The first case was reported in April, in a Nigerian refugee family (IRIN, 06/08/2014).

Along the CAR–Cameroon border, 14 cholera cases were confirmed between 1 and 20 November. 13 were reported in Gado village in Garoua Boulai, home to CAR refugees, and one case in Timangolo refugee camp, along the border with CAR’s Mambere-Kadei (OCHA, 20/11/2014).

**Ebola**

A Cameroonian government spokesperson announced in August that all borders between Cameroon and Nigeria had been closed in order to prevent the spread of Ebola (AFP, 19/08/2014).

**Nutrition**

As of September, there have been 63,000 cases of severe acute malnutrition among children under five in 2014 (OCHA, 30/09/2014). In August, 48,780 children under five were suffering from SAM in Far North, North, Adamawa, and East regions and targeted for assistance. This includes new refugees from CAR and Nigeria (UNICEF, 08/2014).

As of June, up to 30% of refugees from CAR under the age of five were suffering from acute malnutrition (UNHCR, UNICEF, WFP): 7–8% of cases were infants under six months and 18% children over five years.

**Polio**

An epidemic of wild poliovirus centred in Cameroon and Equatorial Guinea is spreading. Nine cases have been confirmed in Cameroon since the onset of the outbreak in October 2013 (UNICEF, 11/09/2014). On 17 March, WHO elevated the risk assessment of international spread of polio from central Africa, particularly Cameroon, to very high. Wild polio had not been reported since 2009.

**WASH**

As of September, 2 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). In Gado and Mbié (East region), and Borgop (Adamawa) the quantity of water provided per day to refugees remains below 15 litres (UNHCR, 07/2014).

**Education**

At least 130 schools have been closed near the country’s northern border with Nigeria, according to the Government. In 2014, more than 200 trained teachers did not take up their posts in the Far North region (IRIN, 01/12/2014). Most students have left the area for safer places in the country’s interior (VoA, 25/11/2014). With some schools either destroyed or occupied by BH, the Government has said it will relocate populations to more secure areas (Voice of America, 08/09/2014).

Approximately 50% of the 36,000 child refugees who arrived from CAR in the first six months of 2014 had not attended school for extended periods of time. Only a small number of CAR refugee children reportedly attend public schools in host communities (UNHCR,
In April 2014, Cameroonian police reported that an estimated 200 young people (aged 15–19) from Kolofata area in the Far North region have been recruited by Boko Haram since February and transferred to training camps in the Nigerian bush. Early August, police sources confirmed that hundreds of children continued to be forcibly recruited (AFP, 06/08/2014).

Updated: 26/01/2015

CHAD FOOD INSECURITY, DISPLACEMENT

LATEST DEVELOPMENTS

19 January: 13,000 Nigerians have entered Chad since the attacks on Baga on 3 January, including approximately 7,000 who are stranded on islands on Lake Chad (OCHA, 19/01/2015).

KEY CONCERNS
- 5.5 million affected by a humanitarian crisis, including 2.2 million children (UNICEF, 10/11/2014).
- 460,000 refugees in Chad, including 30,000 from Nigeria since mid-December and 13,000 since 3 Janur, and 459 from DRC (UNHCR, 02/11/2014; 19/12/2014; Reuters, 08/01/2015).
- 2.6 million Chadians are food insecure. 681,000 were considered to be severely food insecure during the lean season (OCHA, 15/10/2014; 30/09/2014).

Security Context

Regional Military Involvement

Chad withdrew its troops from the African Union Peacekeeping Force in CAR in April, after accusations of violence against civilians. Chad denies the charges. Due to the rise in Boko Haram activity in the region, the Chadian Government has pledged to support Cameroon in fighting BH (Daily Mail, 14/01/2015).

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).

Humanitarian Context and Needs

5.5 million people are affected by humanitarian crisis, including 2.2 million children and 3.2 million people in need of humanitarian aid (UNICEF, 10/11/2014; OCHA, 31/08/2014).

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.

Displacement

IDPs

Nearly 90,000 IDPs are living in protracted displacement in the east, facing difficulties in 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).

Refugees

As of 2 November, Chad hosts 463,421 refugees: 366,915 are from Sudan, 93,474 from CAR (including 20,000 since December 2013), more than 26,000 from Nigeria (including 3,000 since mid-December and 13,000 since 3 Janur), and 459 from DRC (UNHCR, 02/11/2014; 19/12/2014; Reuters, 08/01/2015).

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 Chari (UNHCR, 02/11/2014). 412 CAR refugees refused to be transferred from Sido transit camp to Belom camp early December, settling on lands provided by inhabitants instead (UNHCR, 05/12/2014).

Nigerian Refugees

The Chadian Prime Minister has appealed for international aid for the Nigerian refugees fleeing Boko Haram attacks (Reuters, 08/01/2015). More than 13,000 have entered Chad since the 3 January BH attacks in Baga (Reuters, 13/01/2015; OCHA, 19/01/2015), including 7,000 still stranded on islands on Lake Chad (OCHA, 19/01/2015). 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).

Returnees

There are approximately 230,000 returnees in Chad, including 130,000 from CAR and 100,000 Chadian migrants returning from Libya (OCHA, 31/12/2014). 543 Chadian returnees have arrived from Nigeria since mid-December due to BH attacks (international media, 08/01/2015).

Evacuees/Returnees from CAR
As of 2 October, there are 113,086 evacuees from CAR without refugee status (IOM, 06/10/2014). 92% of arrivals lack any form of identity documentation (OCHA, 16/07/2014).

Although the Chad–CAR border remains officially closed, people continue to arrive at a number of points and are in a very vulnerable condition (UNHCR, 07/2014). 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).

**Transit sites:** The situation in southern transit sites is critical. As of end September, 41,550 people were located in the transit sites of Sido and Doyaba (Moyen Chari), Kobitey and Mbitoye (Logone Oriental) and Djako (Logone Occidental) (OCHA, 30/09/2014).

Sanitation and hygiene were major concerns for the 17,300 returnees in Sido transit site in October (OCHA, 15/10/2014; OCHA, 30/09/2014).

Relocation, notably from Doyaba and Sido transit sites to Maingama temporary site, is ongoing (UNHCR, 07/11/2014). At 1 December, almost 5,900 returnees were still waiting to be relocated from Doyaba (IOM, 01/12/2014).

7,600 people are estimated to be in Kobitey transit site (IOM, 06/10/2014). Urgent humanitarian needs are reported in all sectors; 1,200 shelters need to be built (OCHA, 15/10/2014).

**Temporary sites:** 21,231 people are in temporary sites in Chad (OCHA, 30/09/2014).

Maingama temporary camp, in Moyen Chari, does not have sufficient shelter and WASH capacity to host the entire population of Doyaba and Sido sites, although relocations are ongoing (OCHA, 18/09/2014; 25/10/2014). At 1 December, Maingama holds 12,170 Chadian returnees (IOM, 01/12/2014). Work is under way to increase the hosting capacity to 30,000 people (OCHA, 30/09/2014).

Danamadjia temporary site, in Logone Oriental, has reached its current maximum capacity with over 11,000 inhabitants, although only 40% of the camp is completed. In July, humanitarian actors were in discussion with authorities to prepare a new site, a few kilometres from Goré and Danamadjia (OCHA, 16/07/2014).

30% extra shelters are needed in Gaoui sites, in Zafaye, close to N’Djamena, where 4,250 returnees were hosted as of mid-October (OCHA, 30/09/2014; 15/10/2014).

**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 Béthar 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 (20% of the population), 428,000 of whom are severely food insecure (OCHA, 31/12/2014).

Early exhaustion of food stocks due to deficits in Wadi Fira, Guera, east Batha, Kanem, and Bahr El Ghazel in the Sahel strip, are likely to put poor households in these areas in Stressed conditions (IPC Phase 2) from February (FEWSNET, 25/10/2014).

**Refugees:** Funding difficulties and cuts to transport budgets have forced WFP and UNHCR to severely cut food rations for refugees since 1 July 2014 (international media, 12/09/2014; WFP, 14/08/2014). Some 300,000 refugees, primarily from Darfur and CAR, are reported to be among the worst affected.

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

As of 14 December, 19.8 million people are suffering from food insecurity in the Sahel (OCHA, 17/12/2014). As of 29 October, some 6.5 million people had moved from being moderately food insecure to facing an acute food and livelihood crisis, an increase of four million since January 2014 (IRIN, 29/10/2014).

### Health and Nutrition

2.5 million people are in need of healthcare (OCHA, 31/08/2014). 30 of the 102 health districts are considered non-functional by the Ministry of Health due to lack of resources. Access to quality healthcare is a concern for over 330,000 people in Kanem region due to particularly high malnutrition rates (OCHA, 19/09/2014).

Vaccination coverage is weak despite efforts to scale up routine immunisation. Only 34% of children under one have been vaccinated in returnee sites in eastern Chad (UNICEF, 10/11/2014).

**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

152,000 children were severely malnourished and 310,000 moderately malnourished as of 31 October (OCHA, 31/10/2014). Kanem, Bahr El-Ghazel, Gera, and Wadi Fira all report GAM above the emergency threshold of 15% (OCHA, 19/09/2014).

**WASH**

1.3 million people are in need of WASH assistance: only 50% of the population has access to safe water and 12% to adequate sanitation (OCHA, 31/08/2014).
Education
Access to primary and secondary education is a need in Danamadja, Kobitey, and Djako sites (OCHA, 31/10/2014).

Protection
Gender and Gender-based Violence
A trend of increasing SGBV incidents has been noted in Doyaba, Maingama, and Kobitey camps; 28 incidents were recorded 15 September–15 October 2014.

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

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: 26/01/2015

DJIBOUTI DROUGHT, FOOD INSECURITY

LATEST DEVELOPMENTS
No new significant developments this week, 26/01/2015. Last update: 20/01/2015.

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 restoring peace in Somalia. This has led to infrequent 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 additional 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, while the rest are usually Somali.

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.

Refugees in Djibouti
24,430 refugees, the majority of Somali origin (20,520), are registered in Djibouti (OCHA, 30/11/2014, UNHCR, 31/12/2014). There are also 4,220 asylum-seekers, mostly from Ethiopia (3,230). They reside in two camps: Holl Holl and Ali Addeh (UNHCR).

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, while 56,000 are in IPC Phase 2. The region with the highest food insecurity rate is Obock (58.1%), followed by Dhiuhil (42.3%), Arta (32.5%), Tadjourah 25.6%), and Ali Sabieh (23.8%) (WFP, 13/01/2015).

Health and Nutrition
In 2014, OCHA reported that 300,000 people are in need of healthcare services. There is a high rate of communicable diseases, such as diarrhoeal diseases.

Nutrition
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). WHO reported in May that malnutrition rates among children in the most affected areas had surpassed the organisation's emergency thresholds (FEWSNET, 05/2014).

Protection
During transit, migrants/refugees are exposed to theft by criminal gangs, and detention by authorities (Regional Mixed Migration Secretariat, 31/05/2014). In 2014, 241 migrants were reported dead or missing, compared to 15 in 2013 (IOM, UNHCR, 21/11/2014).
ETHIOPIA FLOODS, FOOD INSECURITY

LATEST DEVELOPMENTS

23 January: Food security conditions have improved nationwide as newly-harvested meher crops are available for consumption, except for some communities in Amhara, Oromia and Tigray, who have started adopting negative coping mechanisms (FAO) (USAID).

23 January: Below average xays/dada rains have affected pasture conditions in northern Afar (FAO).

22 January: Water supply in Tierkidi refugee camp is at 13L/person/day, below UNHCR standards (UNHCR).

21 January: Communities in Amhara, Oromia and Tigray regions affected by food insecurity have started adopting negative coping mechanisms (USAID).

KEY CONCERNS

- Armed insurgencies continue to affect Ogaden region, with inter-communal tensions contributing to frequent violence.

- 2.7 million are in IPC Phase 3 and 4 of food insecurity. The most affected regions are Oromia, Somali, Amhara, Tigray, and Afar (15/12/2014, FAO).

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

- There are 656,199 refugees, mainly from Somalia and South Sudan (UNCHR, 12/01/2015). Over 250,000 South Sudanese refugees are in Gambella region; 90% are women and children, 68% children under 18 (WFP, UNICEF, 15/08/2014)

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

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.

Protests against projects to expand the boundaries of Addis Ababa into lands currently hosting the Oromo community, which has reportedly been marginalised by successive Governments, began on 25 April. In May, local sources reported dozens killed in violence across the region.

Elections are scheduled for May 2015 (Amnesty International, 22/09/2014). Four opposition party members were arrested in July 2014 for alleged connections with terrorist organisations (Crisis Watch, 01/08/2014). In September, Amnesty International reported violations of civil and political rights. In January, 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).

After severe flooding affected the region in August, maintenance of the road between Gambella and Nyinyan began on 18 December (UNHCR, 18/12/2014).

Security conditions have made some camps in Benishangul-Gumuz inaccessible (IOM, 07/01/2014).

Disasters: Floods

The majority of refugees displaced by heavy rains in August and September, which flooded 95% of Leitchuor and most of Nip Nip, self-relocated in different parts of Nyinyang and along Nip Nip–Jakawo corridor and Gambella–Matar highway (UNICEF, 15/08/2014; UNHCR, 10/11/2014). Leitchuor and Nip Nip way station were dismantled due to the continued risk of flooding and are being rehabilitated.
Heavy rains in September also caused flooding in areas of Afar, SNNP, and Somali regions (OCHA, 27/10/2014). More than 100,000 people were affected in Somali region, particularly in Adadle, Argele, Berano, Dollo Ado, Dolo Bay, East and West Imy, Ferfer, Korah, Kelafo and Mustahil woredas (OCHA, 10/11/2014).

Displacement

IDPs

As of September, Ethiopia had 426,700 IDPs (OCHA, 30/11/2014).

Refugees in Ethiopia

Ethiopia is now the largest refugee-hosting country in Africa (UNHCR, 19/08/2014). As of 31 December, Ethiopia hosts up to 656,199 refugees; mainly Somalis, South Sudanese, Eritreans, and Sudanese (UNHCR, 31/12/2014). 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 22 January, 194,847 South Sudanese have sought asylum in Ethiopia since December 2013 (UNHCR, 23/01/2015). 46,362 South Sudanese refugees were in Ethiopia before 2013. The majority of arrivals come from Upper Nile state and are predominantly from Gajaak, Gajiok, and Luo-Nuer tribes (UNHCR, 03/07/2014). At August, 90% were women and children, and almost 68% under 18 years old, and arriving in critical nutritional conditions (WFP, UNICEF, 15/08/2014).

As of 16 January, 8,689 of 15,000 refugees had been transferred from Matar to Pugnido (UNHCR, 16/01/2015). The number of refugees volunteering for relocation has been decreasing daily (IOM, 07/01/2015).

Okugo camp, located in southern Gambella, can only absorb 29,000 refugees in addition to the current population of 6,000 (IOM). As of January, two sites, Koben, with a capacity of 50,000 and Cholan, with a capacity of 20,000, near Gambella, have been identified and approved for development as refugee camps (UNHCR, 09/01/2015, 15/01/2015).

Eritrean Refugees

As of 30 November, Ethiopia hosts 107,000 Eritrean refugees (OCHA, 30/11/2014). There was a spike in daily arrivals in September, with more than 200 Eritreans crossing the border each day. About 5,000 refugees, mainly from Asmara, arrived in Ethiopia during October, and an additional 3,588 in November (OCHA, 24/11/2014). New arrivals are transferred to Hitsat camp, which is now hosting 27,560 people (OCHA, 24/11/2014). The recent spike has led to a shortage of health services, shelter, and core relief items. UNHRH has highlighted that the large number of unaccompanied minors is cause for grave protection concern (OCHA, 30/11/2014).

Somali Refugees

As of December 2014, there are 250,474 Somali refugees in Ethiopia. 4,621 of them arrived in the country throughout 2014 (UNHCR, 31/12/2014).

Ethiopian Refugees in Neighbouring Countries

As of 1 July, there are 30,343 Ethiopian refugees in Kenya (10/07/2014, UNHCR).

An estimated 6,820 Ethiopians made their way to Yemen in May, a 31% increase on the number who arrived in May 2013. They left predominantly for economic reasons and fear of persecution. New arrivals in Yemen have reported cases of arbitrary detention and torture as a result of perceived affiliation to the Oromo Liberation Front (OLF), and repression premised on political affiliation, given that general elections are scheduled for 2015 in Ethiopia (RMMS, 31/05/2014).

Food Security

In June, an estimated 2.7 million people were in Phase 3 and Phase 4 food insecurity (WFP, 06/2014). This is a 12% increase compared to the first half of 2013. The most affected regions are Oromia (897,000 people in need of humanitarian assistance), Somali (690,970), Amhara (548,000), Tigray (321,400), and Afar (152,600). According to UNICEF, 3.2 million people in Ethiopia required emergency food assistance in 2014 (UNICEF, 30/10/2014).

Food security conditions have improved as newly harvested meher crops are available for consumption (FAO, 23/01/2014). Parts of Tigray, Amhara, Oromia, SNNPR, and western areas have improved to Minimal food insecurity (IPC Phase 1) (FEWSNET, 10/12/2014). However, below-average production of maize and sorghum is expected in areas of eastern Amhara and southern Tigray, central and eastern Oromia, and areas along the Rift Valley in SNNPR, causing these areas to either remain Stressed (IPC Phase 2) or move into Crisis (IPC Phase 3) between December and March, as households exhaust their food stocks (FEWSNET, 10/12/2014). Some of these communities have adopted negative coping mechanisms, including sale of household and productive assets (CRS though USAID, 21/01/2015).

Flooding in September along the Shabelle River destroyed and limited access to grazing conditions, and diminished household access to food and income (FEWSNET, 24/11/2014).

Agriculture and Markets

In southern and southeastern pastoral areas deyr/hagaya rains were generally below average at the end of 2014, and ended earlier than usual. Below average xays/dada rains have affected pasture conditions in northern Afar (FAO, 23/01/2015).

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). A survey among South Sudanese refugees residing in Ethiopia indicated a serious public health emergency...
There has been a decline in the incidence of malaria in all refugee camps following the end of the rainy season (UNHCR, 01/01/2015).

**Measles**

15,500 suspected measles cases were reported in 2014; more than double the incidence of 2013 (OCHA, 29/12/2014).

**Nutrition**

264,298 children required treatment for severe acute malnutrition between January and October 2014 (UNICEF, 31/10/2014).

As of 1 January, GAM in Leitchuor, Kule, and Tierkidi camps was 25.8%, 28%, and 30.3%, respectively; SAM rates were 5.7%, 7.8%, and 10%, respectively (UNHCR, 01/01/2015). GAM and SAM levels are well above UNHCR’s emergency threshold, yet show no change from previous numbers. Crude mortality rates in Kule 1 were 1.47/10,000/day and Leitchuor 1.03/10,000/day. Under-five mortality rates at Kule 1 were 5/10,000/day and Leitchuor 2.73/10,000/day (WFP, 15/08/2014; UNICEF, 15/07/2014).

**Polio**

Ten polio cases have been reported in Ethiopia since May 2013: the last case was reported 17 March. All cases were reported in areas that share borders with Somalia, where the regional polio outbreak started.

**WASH**

1.2 million people are in need of improved access to safe water and water sources (UNICEF, 31/10/2014). Seasonal rains have recently improved water availability in Oromia, and water trucking has commenced in Borena, Bale, East Hararge and West Hararge woredas (OCHA, 08/12/2014).

The ratio of latrines per person in Leitchuor is 1:76, in Pagak 1:76, and in Burbiey 1:103, considerably higher than the UNHCR standard of 1:50 (UNHCR, 01/11/2014). The water supply is meeting UNHCR standards of 20:1 ratio (20 litters per person), except Tierkidi, where water supply is at 13:1 (UNHCR, 22/01/2014).

**Protection**

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).

In mid-February 2014, human rights NGOs reported that a government-run land clearance plan had affected an estimated 7,000 indigenous people in the lower Omo Valley in the southwest. This raises concerns over indigenous people’s livelihoods. Forced resettlement of indigenous people in the area has also been reported. A government land development plan to allow sugar-cane plantations, dam construction, and commercial agriculture is expected to relocate 150,000 indigenous people into permanent sedentary villages.

Updated: 26/01/2014

**KEY CONCERNS**

- Almost 290,000 people are in need of healthcare (OCHA, 31/08/2014).
- 202,500 people are food insecure and in need of food assistance. 49,000 children are acutely malnourished (OCHA, 31/08/2014).

**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). Gambian security forces went door-to-door in the capital in search of coup participants (AFP, 01/01/2015).

**Humanitarian Context and Needs**

289,200 people are in need of humanitarian assistance, given increasing commodity prices, resurgence of epidemics, and limited access to basic social services (OCHA, 31/08/2014).

**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**

202,500 people are food insecure (OCHA, 31/08/2014). Agencies are warning about the increase in food and fuel prices, which may constitute a high food security risk to rural and urban households (OCHA, 31/08/2014).
Growing conditions for cereal crops and pastures have been poor in several parts of the country, mostly in central and western regions, due to irregular rains at the beginning of the cropping season in May/June, which delayed planting, and subsequent erratic precipitation in July and August. Aggregate cereal production in 2014 will drop by 75% compared to 2013, to about 57,000 metric tons. Production of groundnut, the main cash crop, is anticipated to decline by over 80%. Access to food will further be restrained by high prices of cereals and the 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 affected tourism, a significant source of income (Reuters, 01/10/2014).

Sahel Food Crisis: Regional Overview

19.8 million people in the Sahel (Burkina Faso, north Cameroon, Chad, the Gambia, Mali, Mauritania, Niger, north Nigeria, and Senegal) are suffering from food insecurity as of December 2014 (OCHA, 17/12/2014). Food insecurity in 2014 has risen dramatically compared to 2013, when 11.3 million people had inadequate food (OCHA, 03/02/2014).

Health and Nutrition

Around 290,000 people are in need of healthcare, over 15% of the population. The supply of essential drugs is low, as is laboratory capacity. Staff and equipment are not sufficient to meet the most urgent needs (OCHA, 31/08/2014).

There have been sporadic outbreaks of meningitis in all regions, but particularly in the east of the country; in the Upper, Lower, and Central River regions (OCHA, 31/08/2014).

Nutrition

Around 49,000 children are reported to be acutely malnourished, of whom 7,800 children suffer SAM (OCHA 31/08/2014). This represents 3,000 more SAM cases than in July 2013 (OCHA 25/07/2014). The nutrition situation is particularly dire in Central and Upper River regions, with GAM rates above the 10% serious threshold (OCHA, 31/0809/2014).

WASH

287,000 people are in need of WASH assistance. Inadequate access to safe drinking water, basic sanitation, and poor hygiene practices continue to be an issue. 20% of deaths among under-fives are WASH-related (OCHA, 31/08/2014).

Reviewed: 28/01/2015

GUINEA FOOD INSECURITY, EPIDEMIC

LATEST DEVELOPMENTS

26 January: Senegal reopened its land border with Guinea (international media).

24 January: 2,909 Ebola cases and 1,906 deaths have been reported in Guinea (WHO).

KEY CONCERNS

- 21,924 cumulative reported cases across the region, including 8,737 deaths (Liberia, Guinea and Sierra Leone each reported over 20–24 January) (WHO, 26/01/2015). The numbers of registered cases and deaths are largely inaccurate, underestimating the gravity of the situation on the ground.

- 970,000 people, or 9% of the population, were estimated to be severely food insecure in December 2014; EVD effects account for 230,000. 3 million individuals are estimated to be vulnerable to food insecurity. 1.2 million are projected to be food-insecure in March 2015; 470,000 Ebola-driven (FAO, 17/12/2014).

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

Political Context

President Condé has suggested delaying presidential elections, due in 2015, because of the EVD crisis (International Crisis Group, 01/11/2014). The opposition demanded electoral reforms by 15 December, threatening countrywide protests otherwise. However, on 26 November, President Conde stated that protests will not be tolerated during the Ebola outbreak (International Crisis Group, 01/12/2014).

International Response

On 15 November, France announced it will coordinate Ebola containment efforts in Guinea, at the UN’s request (AFP, 15/11/2014). Cuba has sent 465 health workers to West Africa (international media, 20/10/2014). The UN Security Council adopted a resolution establishing a special mission to lead the global response to contain Ebola on 18 September (UN, 18/09/2014). The Ebola outbreak in West Africa has also been declared a Grade 3 Emergency under WHO’s Emergency Response Framework (ECHO, 29/07/2014). WHO declared the epidemic a Public Health Emergency of International Concern (PHEIC).

Unrest

On 6 January, trade unions launched a general strike throughout the country, mainly over salary. Limited demonstrations and road closures were reported in Conakry (UNMEER, 06/01/2015). On 8 January, an agreement was reached with the Government (UNMEER, 08/01/2015).

Security Context
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).

Resistance to the Ebola response

In the week to 14 January, response efforts faced resistance in 27 sub-prefectures: mainly in the Forest areas, in the prefectures neighbouring Conakry, and in northern and western Guinea (UNICEF, 14/01/2015; WHO, 31/12/2014).

On 20 January, three people were assaulted in Kabac, Forecariah prefecture, as residents suspected they were health workers who would expose them to the Ebola virus (international media, 20/01/2015).

On 10 January, two men were killed by villagers of Dar es-Salaam, Forecariah prefecture, as they were accused of spreading Ebola (local media, 14/01/2015; UNMEER, 15/01/2015). 26 people were arrested and tension remains high in the prefecture, with several villages inaccessible (international media, 18/01/2015; UNMEER, 15/01/2015). Strong resistance has prevented suspected case transport and safe burials in Forecariah prefecture (USAID, 07/01/2015). As of 11 January, Forecariah is one of the prefectures most affected by EVD (WHO, 14/01/2015).

On 23 January, medical kits sent by the government to school children were destroyed by villagers in Ourekaba, southern Guinea (international media, 23/01/2015). On 6 January, a community transit centre was burned down in Bossou, Lola prefecture (UNMEER, 07/01/2015). On 3 and 4 January, response teams were attacked in Coyah. On 1 January, a safe burial team was assaulted in Kindia prefecture, resulting in one injured and the intervention of the military (UNMEER, 05/01/2015). The Red Cross has suspended its operations in Koropara for security reasons (UNMEER, 25/11/2014).

Humanitarian Context and Needs

Access

Poor road infrastructure means many communities outside the capital are inaccessible (OCHA, 16/09/2014).

Food Security

Based on WFP estimates, 970,000 people, or 9% of the population, were estimated to be severely food insecure in December 2014; EVD effects account for 230,000. Almost 90% of the Ebola-driven food insecure live in rural areas. 3 million people were estimated to be vulnerable to food insecurity.

The number of food insecure is projected to increase to 1.2 million in March 2015, 470,000 due to Ebola. (FAO, 17/12/2014). 57% of Guinean households were already food insecure or at risk of food insecurity before the EVD outbreak (WFP, 29/10/2014).

As of late December, most households are consuming their own crop production and are facing Minimal (IPC phase 1) acute food insecurity (FEWSNET, 31/12/2014). A survey of the Forest region by WFP and FAO showed that 74% of affected communities are reducing the number of meals per day and 59% have resorted to eating seeds (WFP and FAO, 31/12/2014). In Nzerekore and Conakry, poor households are facing Stressed (IPC phase 2) food insecurity and have difficulties affording certain essential non-food items (FEWSNET, 31/12/2014).

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. The largest production declines compared to 2013 levels were estimated for Nzerekore (-8%), while other regions are projected to experience only slight decreases (up to -3%) (FEWSNET, 31/12/2014). Overall, rice production is estimated to decline by 3.7%, with a relatively localised impact: most disruption will be in the Forest region (WFP, 05/01/2015). National cocoa production is estimated to have fallen by a third, coffee production by 50%, and palm oil by 75%. Corn production has declined by 25% (World Bank, 02/12/2014; UNECA, 15/12/2014; UNDP, 19/12/2014). Fish exports have fallen by more than 40% (World Bank, 02/12/2014).

Based on commercial forecasts, Guinea has a rice import gap of about 44,000 metric tons (WFP, 05/01/2015).

Livelihoods

UNDP estimates that household income has dropped by 12.7% in Guinea as of October, due to the consequences of the Ebola outbreak (UNDP, 14/11/2014). In the regions of Nzerekore and Conakry, many poor households are facing below-average incomes and decreased purchasing power, despite stable or declining food prices (FEWSNET, 31/12/2014). In the Forest region, 91% of communities surveyed by WFP and FAO indicate that the availability of labour has decreased, and its cost has increased (WFP and FAP, 31/12/2014).

Prices for local rice declined between 3% and 10% in December; prices of palm oil also fell (WFP, 18/12/2014). In Guinea and Senegal border areas, palm oil prices increased 40% and coffee prices increased 50% in less than four weeks. Traders indicate a 50% drop in market activities (WFP, 15/09/2014).

In the central Fouta Djallon region, potato exports to Senegal dropped to 22 metric tons in 2014, from 250 in 2013. In August 2014 the wholesale price for a kilogram of potatoes fell to 200 Guinean francs from 3,500 (local media, 15/01/2015). The closure of the Senegalese border has reportedly meant the spoiling of potato crops in Labé, in some cases exceeding 50%. Similar issues have been reported by fruit and tomato producers in Kindia, who typically export to Senegal. To cope, certain producers have increased exports to Conakry although local demand is not sufficient to completely absorb the excess supply (FEWSNET, 31/12/2014).

Health and Nutrition

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%.
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).

An estimated 400,000 children were due for routine vaccinations in 2014. However, there has been almost 50% reduction in the numbers of children vaccinated due to Ebola. From 27 November to 3 December 2014, a catch-up campaign covered the 20 districts with no Ebola cases or declared Ebola-free for 42 days (UNICEF, 17/12/2014).

**Ebola**

As of 24 January, 2,909 Ebola cases, including 1,906 deaths, have been reported in Guinea (WHO, 26/01/2015). However, 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).

EVD transmission has decreased since December. **20 cases were reported 12–19 January. Eight districts continue to report cases. Dubreka, with five confirmed cases, was the worst-affected district, followed by Conakry and Boffa, each with four confirmed cases (WHO, 21/01/2015).** Four of the 33 prefectures are still considered “active” (MSF, 26/01/2015).

The incidence of health worker infections rose in Guinea throughout December. As of 19 January, 162 health workers have been infected, 100 of whom have died (WHO, 21/01/2015).

There has been a geographical expansion in transmission: there was over October to early January from 9 to 19 districts reporting an infection during the past three weeks (WHO, 03/12/2014; 31/12/2014; 07/01/2015).

**Containment measures:** On 9 January, the “Zero Ebola in 60 days” campaign, launched a week earlier, was put on hold due to local communities’ persistent resistance to the Ebola response (UNMEER, 09/01/2015). The Prime Minister has announced measures against resistance, especially in Coyah district, including prosecution of those who hide patients from medical teams or those who hold medical teams hostage (International media, 12/01/2015).

Guinea declared the Ebola outbreak a health emergency on 13 August. President Alpha Condé announced a series of measures including strict controls at border points, travel restrictions, and a ban on moving bodies from one town to another until the end of the epidemic. All suspected victims will automatically be hospitalised until they are cleared of infection (AFP, 14/08/2014). On 1 August, West African Ebola-hit nations agreed to impose a cross-border isolation zone at the epicentre of the outbreak (AFP). On 26 January, Senegal reopened its land border with Guinea (international media, 27/01/2015).

**Healthcare provision:** In the Forest region, insufficient supply of thermo-flash thermometers, lack of equipment and electricity, and weak coordination among response partners are hampering response (UNMEER, 30/12/2014).

The total cumulative number of reported cases across the region has reached 21,924, including 8,737 deaths (Liberia, Guinea, and Sierra Leone each reported 20–24 January) (WHO, 26/01/2015). On 19 January, Mali was declared Ebola-free after 42 days without reporting any new cases (international media, 19/01/2015).

**HIV**

80% of people living with HIV in the three most Ebola-affected countries have not been able to access treatment (UNDP, 14/11/2014). Around 217,000 people are estimated to be living with HIV in Guinea, Liberia and Sierra Leone (international organisation, 20/10/2014).

**Malaria**

44% of Guineans, about five million people, are affected by malaria each year; the disease kills at least ten people every week. The recent gains from the past ten years in reducing malaria mortality by 50% have been seriously hampered by the EVD outbreak (International media, 14/11/2014).

**Maternal Health**

Women in the three most-affected countries are no longer giving birth in health facilities (UNMEER, 03/11/2014). In addition, Ebola-infected pregnant women are often not permitted in Ebola treatment centres because of the high risk of contamination during delivery, likely resulting in a higher maternal death rate in the three most affected countries (UNFPA, International media 29/10/2014).

**Education**

On 19 January schools in Guinea reopened. Initial attendance was low, as the announcement the preceding week had taken many people by surprise. Schools had been closed because of the Ebola epidemic (international media, 14/01/2015; 16/01/2015; 19/01/2015).

**Protection**

As of 21 January, 4,113 children who lost one or both parents to Ebola have been identified (UNICEF, 21/01/2015).

**Health workers and survivors are stigmatised** (MSF, 26/01/2015).

**Updated:** 26/01/2015

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**KENYA**

**FOOD INSECURITY, INSECURITY**

**LATEST DEVELOPMENTS**

25 January: 17,600 people displaced due to inter-communal violence in Baringo, eastern Kenya, are facing acute food shortages (local media).
A growth in the population of both people and livestock has led to more frequent cattle raiding and violence, fed by the availability of small arms. As of the end of November, inter-communal violence in Kenya had caused 310 deaths, 214 injuries and displaced 220,200 in 2014 (OCHA, 31/11/2014). The areas most affected by inter-communal violence are the northern Rift Valley and northeastern regions.

On 7 December, 25 houses were burned down and several acres of plantations destroyed in Kakamega county, following tribal clashes between Nandis and Kabras (Kenya Daily Nation, 08/12/2014). On 20 November, five villagers were killed and 12 injured in North Horr, Marsabit, after fighting between Gabbra and Dassanach communities (Kenya Daily Nation, 20/11/2014).

Conflict in Mandera and Wajir

In May and June, and then August–September, clashes between Garre and Degodia communities in Mandera and on the border between Wajir and Mandera resulted in 110 deaths. Some 75,000 were displaced in the first bout of violence, and 19,000 later (OCHA, 23/06/2014; Kenya Red Cross, 05/09/2014). The Garre and Degodia Somali clans have been feuding over natural resources since March 2012.

Despite the deployment of additional security forces, reports suggest that tensions in
Baringo and Turkana remain high. People fled raids Baringo North in December (Kenya Daily Nation, 18/12/2014).

Humanitarian Context and Needs

Disasters

Drought

An alert has been issued over droughts in part of Meru county, specifically Tigania West and Tigania East. All subcounties in Meru have recorded a decline in vegetation 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 these areas.

Marsabit county, in northern Kenya, is suffering from acute food and water shortages due to inadequate rains in the past three years (local media, 19/01/2015). In the past, food insecurity has been the cause of inter-clan violence in these areas.

Floods

On 5 December, over 300 people were displaced as mudslides and floods destroyed their homes in Jomvu, Mombasa (Kenya Daily Nation, 05/12/2014).

Displacement

IDPs

On 1 December, Kenya had 309,200 IDPs (OCHA, 31/11/2014).

As of 31 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 throughout the year.

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).

Refugees

As of 1 December, Kenya is hosting more than 586,100 refugees and asylum-seekers. 179,552 are located in Kakuma, 227,953 in Dabaab, 129,392 in Amino, and 51,296 in Nairobi (UNHCR, 31/12/2014). Somalis make up 75% of refugees, South Sudanese 13% (UNHCR, 30/07/2014).

From Somalia: As of December 2014, 451,226 Somali refugees are in Kenya. 13,162 of these arrived since January 2014 (UNHCR, 31/12/2014), indicating a considerable drop in arrivals in 2014. Most are in the northeastern Dadaab and Amino refugee camp complex, which in July hosted 340,000 Somali refugees. 55,468 Somali refugees are in Kakuma camp, Turkana, and 32,014 are in Nairobi (UNHCR, 01/07/2014).

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 15 January, 826 returnees had arrived in Somalia (UNHCR, 15/01/2015).

From South Sudan: As of 15 January, more than 44,790 South Sudanese refugees have crossed into Kenya through Nadapal border since mid-December 2013 (UNHCR, 15/01/2015). 87,957 South Sudanese refugees are in Kakuma camp, Turkana county (UNHCR, 01/01/2015).

There is a critical need for land to accommodate refugees. Kakuma camp hosts 179,550 refugees, surpassing its capacity of 150,000 (UNHCR, 23/01/2015). The overpopulation in Kakuma is causing friction among refugee communities, and security forces are finding it more difficult to manage situations (UNHCR, 14/11/2014). Regular relocations from the reception centre, which started in late November stalled as a result of rains and flooding, and the need for dry, safe areas is urgent (UNHCR, 09/01/2015). Humanitarian actors on the ground continue negotiations with local authorities for a new site in Turkana county (WFP, 14/01/2015).

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

Pockets of northeastern pastoral areas will deteriorate to Crisis food insecurity (IPC Phase 3) until March: Isiolo, Dadaab subcounty in Garissa, and Hadado and Sebule subcounties in Wajir (FEWSNET, 31/12/2014). Food security will remain Stressed (IPC Phase 2) until March in southeastern marginal agricultural areas, as short rains harvests are expected to be below average.

Agriculture and Markets

October to December rainfall was below average. The driest areas are reportedly in the northeast pastoral zone: Isiolo, Garissa and Wajir. Crops have so far not developed to normal levels in southern marginal agricultural areas (FEWSNET, 31/12/2014).

Health and Nutrition

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).

Malaria

1,164 new malaria cases were reported in the second week of November, compared to 1,009 in the week before (UNHCR, 14/11/2014). The number of new cases is likely to increase exponentially due to the high camp population and ongoing rains (UNHCR, 26/11/2014).
Nutrition

SAM rates among South Sudanese refugees arriving in Kakuma between 14 and 20 October were at 15.4%, up from 10% among new arrivals in May. GAM was at 29.3%, up from 16.3% in May (UNHCR, 23/05/2014, 23/10/2014).

Education

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 Mandra 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. The law also stipulates that the number of refugees and asylum seekers permitted to stay in Kenya shall not exceed 150,000 (IRIN, 05/01/2014). On 2 January, Kenya’s High Court suspended eight sections of the law, until a legal challenge mounted by the opposition and rights groups is heard (BBC, 02/01/2015). The measures have been widely criticised by human rights group (Human Rights Watch, Kenya Daily Nation, 14/12/2014).

Since December 2013, 2,719 unaccompanied minors and 11,783 separated children have arrived in Kakuma camp (UNHCR, 23/01/2014). 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).

It has been reported that Kenyan immigration officials have been charging visa fees to asylum seekers at the border crossing points in Kakuma, in contravention of international humanitarian law (UNHCR, 31/12/2014).

Updated: 26/01/2014

LIBERIA FOOD INSECURITY, EPIDEMIC

LATEST DEVELOPMENTS

24 January: 52,000 children are estimated to be at risk of severe acute malnutrition (UNICEF).

20 January: A total of 8,524 cumulative Ebola cases reported, including 3,636 deaths (WHO, 26/01/2015).

KEY CONCERNS

- The total cumulative number of reported cases across the region has reached 21,924, including 8,737 deaths (Guinea, Liberia and Sierra Leone each reported over 20–24 January) (WHO, 23/01/2015).
- About 630,000 people, or 14% of the population, were estimated to be severely food insecure in November 2014; the EVD impacts accounting for 170,000 people. These numbers are projected to increase to 750,000 and 290,000, respectively, by March 2015. 1.1 million people were estimated to be vulnerable to food insecurity (FAO, 05/01/2015).
- Non-Ebola medical needs cannot be met, 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

The opposition won most seats in the 20 December senatorial elections. Turnout was less than 30% (international media, 24/12/2014; BBC, 23/12/2014).

On 30 September, the Ministry of Health and Social Welfare released an order requiring journalists wanting to visit an Ebola healthcare facility first to get written permission from the health ministry (international media, 06/10/2014). The Press Union of Liberia had raised concerns about violations of freedom of information (Reporters Sans Frontières, 08/09/2014).

International Response

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).

By 8 January, 1,829 US troops were in Monrovia to contribute to the Ebola response (US Government, 08/01/2015). Cuba has sent 465 health workers to West Africa (international media, 20/10/2014).

On 18 September, the UN Security Council adopted a resolution establishing a special mission to lead the global response to Ebola (UN, 18/09/2014). The outbreak in West Africa has been declared a Grade 3 Emergency under WHO’s Emergency Response Framework (ECHO, 29/07/2014). WHO declared the epidemic a Public Health Emergency of International Concern (PHEIC).

Security Context

In the poorest parts of Monrovia and Nimba county, armed attacks and opportunistic crime have increased (DRC, 24/09/2014; UNMEER, 12/11/2014). Several police stations in Monrovia have closed after officers became ill or died of Ebola (AFP, 30/09/2014; UNMEER, 12/11/2014).
Resistance to the Ebola Response

Pockets of resistance to the Ebola response are being fuelled by rumours that the Ebola crisis is over as the state of emergency has ended. The senatorial election campaigns of December 2014 strengthened this view (UNMEER, 11/01/2015).

Community resistance to health workers and treatment remains a concern in Bomi, Grand Cape Mount, Grand Kru, and Gbarpolu counties (UNMEER, 28/11/2014; UNICEF, 03/12/2014). On 13 January, burial teams were reportedly chased away by communities in Konton, Garwula district, Grand Cape Mount (UNMEER, 15/01/2015).

Humanitarian Context and Needs

Access

The humanitarian response remains hampered by transportation problems, including a lack of vehicles in good condition, and poor road network due to heavy rains (UNICEF, 07/01/2015; UNMEER, 11/01/2015). Since November, Gleyansia town in Gbarpolu county has been experiencing food shortages and lacking some basic medical supplies due to the bad condition of the roads (UNMEER, 14/12/2014). In Grand Bassa county, canoes have been banned from crossing the Timbo River, cutting residents off from neighbouring towns (international media, 25/11/2014).

Displacement

In October–December about 18% of households indicated that a household member had left since the Ebola outbreak, with approximately a third leaving the county, predominantly for Monrovia (World Bank, 19/11/2014; 12/01/2015). The migration patterns are similar to standard patterns prior to the EVD crisis. A joint assessment conducted in November demonstrates that EVD does not seem to have led to any major population movements. Many local chiefs have forbidden community members from spending the night outside the village (Joint assessment by UN, Government, and Food Security Cluster, 30/11/2014).

Food Security

In November 2014, about 630,000 people, or 14% of the population, were estimated to be severely food insecure; EVD impact accounting for 170,000 people. 1.1 million were estimated vulnerable to food insecurity. The number of food insecure is projected to increase to 750,000 by March 2015, 290,000 of whom due to EVD. Rural areas account for about 76% of EVD-related food insecurity.

Results of the mobile Vulnerability Analysis and Mapping (mVam) indicate that, as of October 2014, all areas of Liberia are affected by food insecurity (WFP, 10/11/2014). In November, households are using severe coping strategies in Lofa, Gbarpolu and Bomi counties. In central Liberia, households were using fewer negative coping strategies in December compared to November, but still more than average (WFP, 18/12/2014). Even in counties less affected by EVD, people have withdrawn their savings, borrowed food, and reduced portions or frequency of meals (Joint assessment by UN, government and Food Security Cluster, 30/11/2014). About two-thirds of households surveyed by the World Bank in December reported not being able to buy enough rice to meet their needs. 80% of those households indicated a lack of money as the main reason (World Bank, 12/01/2015).

Agriculture and Markets

Quarantine has disrupted trade throughout the country. Inadequate food supplies are reported in Bomi, Bong, Margibi, Montserrado, and Sinoe counties (FEWSNET, 31/12/2014). In rural areas, community members had very limited access to food supplies, as the cost of transportation has risen (joint assessment by UN, Government and Food Security Cluster, 30/11/2014).

Most weekly markets have reportedly reopened. 60% of weekly markets in Liberia were open and functioning normally in the week of 22 December. 37% were open but functioning at reduced levels, and 4% were closed, according to a FEWSNET survey. Inadequate food availability on markets was reported by 25–50% of traders in Lofa, Gbapolu, Montserrado, Margibi, Bong, Nimba and Grand Gedeh counties. In other counties less than 25% of traders reported inadequate availability (FEWSNET 07/01/2015).

A recent survey by the World Bank reported that rice prices are 40% above the January baseline (World Bank, 12/01/2015). The same increase was also reported by UNDP and ECHO in December (an average increase of 41% in more than seven of Liberia’s 15 counties, with the largest increase in Lofa). This is attributed to the interruption of trade as a consequence of Ebola, as well as the devaluation of the Liberian dollar (UNDP, 24/12/2014; ECHO, 31/12/2014).

Nationally, rice production in 2014 is estimated to have declined by 12%. In Lofa and Margibi, a 20% decrease in rice production has been reported because of limited maintenance of the fields (Joint assessment by UN, Government and Food Security Cluster, 30/11/2014; FAO, 05/01/2015). There has been a substantial return to agriculture since early October (World Bank, 19/11/2014). Based on commercial forecasts, there is a rice import gap of 90,000 metric tons, which is exacerbating national food insecurity (FAO, 05/01/2015).

Livelihoods

Household income had dropped by 35% in Liberia as of October, due to the consequences of the Ebola outbreak (UNDP, 14/11/2014). The self-employed have been hardest hit. Before the crisis, over 30% of working household heads was self-employed; this has dropped to just above 10%. Only 50% of people working in the wage employment sector are still working, because of business or government office closures (World Bank, 19/11/2014). Women are particularly vulnerable since they work disproportionately in non-farm self-employment. 60% of women who were working before the crisis are currently not working, compared to 40% of men (World Bank, 12/01/2015).

According to a joint survey, the numbers of employees in businesses has decreased by 33% in all sectors and locations. 31% of businesses that use transportation reported an increase in transportation costs during September 2014. The number of businesses reporting falling client numbers in the past month increased by 130% between January 2013–July 2014 and the September and October 2014. 10% of businesses surveyed had closed in relation to the Ebola crisis (Building Markets,
Wage rates have dropped 12–20% since November in all monitored areas, as demand for labour declined in the post-harvest period. The drop is steeper in western counties (-33%), possibly as a consequence of the increased EVD caseload (WFP, 18/12/2014). In counties severely affected by EVD, household incomes have decreased since food sales have been affected (Joint assessment by UN, government and Food Security Cluster, 30/11/2014).

Health and Nutrition

Only 44% of routine health services are reported to be operational by the Ministry of Health, despite a large number of health facilities being listed as open (Government, 30/11/2014; UNMEER, 12/12/2014). Only 27% of routine health facilities reported carrying out triage (UNMEER, 29/12/2014).

Ebola

As of 20 January, 8,524 Ebola cases, including 3,636 deaths, have been reported (WHO, 26/01/2015). 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 (CDC, 09/2014; international media, 20/11/2014). Between 12 and 19 January, eight confirmed cases were reported in Liberia: six confirmed and 11 suspected cases in Montserrado county, and two confirmed cases in Grand Cape Mount county (WHO, 21/01/2015). 12 districts in Liberia did not report any confirmed cases during the five days to 2 January, indicating that the geographical reach of the outbreak is contained to a limited number of districts (WHO, 10/12/2014; 31/12/2014; international media, 29/12/2014; WHO, 07/01/2015). No confirmed cases have been reported in January in Bong, Nimba and Lofa counties, but cross-border surveillance needs to be strengthened as the neighbouring prefectures of Macenta and Nzerekore in Guinea are consistently reporting cases (Liberia Information Management System, 16/01/2015). All districts in Liberia have reported at least one case of EVD since the start of the outbreak.

As the number of reported Ebola cases is slowing, Liberia has entered a new phase of the epidemic that requires a rethinking of the response to new cases. 95% of people entering ETUs do not have Ebola, yet contact tracing begins immediately. On 9 January, more than 5,000 contacts were being tracked and potentially subject to stigmatisation, yet only 63 patients were in ETUs, and roughly half of new cases do not have a link to a contact, indicating that hidden cases are causing transmission (PI, 09/01/2015).

Healthcare provision: County health teams report inadequate training in case investigation, contact tracing and collecting and handling patient specimens. They reported limited supply of PPEs, no training in its proper use, and lack of essential drugs, as well as challenges because of poor transportation and communication networks (CDC, 19/12/2014). There are shortages of ambulances, vehicles for case investigations, and thermometers (international media, 20/11/2014). There is shortage of mouth swabs for the collection of samples from dead bodies in Grand Cape Mount (Government, 03/12/2014). The lack of basic supplies and of payment of incentives is leading to difficulties retaining medical staff in Cestos City, Rivercess county (UNMEER, 21/01/2015).

Storage capacity for medical supplies remains a main constraint, causing major delays in distribution to health facilities (UNICEF, 07/01/2015).

Containment measures: The chairman of the National Council of Chiefs and Elders asked all traditional spiritual healers to stop activities and bush schools until Liberia is declared Ebola-free (international organisation, 26/01/2015).

On 9 January, it was reported that the county health team in Bong county intercepted 11 dead bodies that were being transported from Monrovia, indicating a need to control migration of EVD cases from other parts of the country (UNMEER, 09/01/2015). On 29 December, 2,000 people were quarantined in Lofe town, Margibi county after a corpse transported for burial was confirmed infected with Ebola (international media, 29/12/2014). All or parts of Lofa, Bomi, Bong, Gbarpolu and Grand Cape Mount counties have been under quarantine since 8 August and Montserrado, Margibi, Grand Bassa and Grand Gedeh counties since 14 August (IFRC, 12/11/2014).

On 13 November, the Liberian President lifted the state of emergency, declared on 6 August, and reduced the curfew (Government, 13/11/2014).

On 3 October, Parliament criminalised the deliberate concealment of information about people with contagious diseases such as Ebola and HIV, after a similar law was passed in Sierra Leone (UN, 04/10/2014).

Liberia closed its borders on 29 July, with the exception of major entry points and the airport (ECHO, 29/07/2014). On 23 October, the President announced strict checks on Liberia's borders with neighbouring Guinea and Sierra Leone (AFP, 23/10/2014). However, there are more than 55 illegal crossing points between Grand Cape Mount county and the neighbouring districts of Pujehun and Kenema in Sierra Leone, and movement of goods and people continues to facilitate contamination (UNICEF, 07/01/2015). On 1 August, West African Ebola-hit nations agreed at an emergency summit to impose a cross-border isolation zone at the epicentre of the outbreak (AFP).

Regional Ebola Outbreak

The total cumulative number of reported cases across the region has reached 21,924, including 8,737 deaths (Liberia, Guinea and Sierra Leone each reported 20–24 January) (WHO, 26/01/2015). Mali has been declared Ebola Free (WHO, 19/01/2015).

HIV

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 (UNMEER, 03/11/2014). In addition, Ebola-infected pregnant women are often not
permitted in Ebola treatment centres because of the high risk of contamination during delivery. **So far, only two pregnant women have survived EVD in Liberia.** The situation is likely resulting in a higher maternal death rate in the three most affected countries (international media 29/10/2014; UNFPA, 29/10/2014; 23/01/2015).

**Measles**

In response to the measles outbreak in Lofa county, periodic intensification of routine immunisation is being implemented for measles and other vaccinations for children under one year who missed their routine vaccination (UNICEF, 17/12/2014). 551,364 children in 15 counties have been targeted (UNICEF, 07/01/2015).

**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 “no-touch” policy has prevented screenings. 73 acute malnutrition treatment sites remain open. Rapid nutrition assessments are planned end of February (UNICEF, 24/01/2015).

**WASH**

Half of the population have no access to toilets (UNMEER, 20/11/2014). Two million people are in need of WASH, being directly or indirectly affected by the EVD epidemic (UNMEER, 12/12/2014). The supply of buckets and chlorine water solution for hand washing is inadequate (UNMEER, 16/01/2015). **WASH services in the Ebola treatment centres have been prioritised, leading to regular acute shortages of safe water supply among communities (PI, 24/01/2015).**

Challenges remain regarding on-site and off-site management of liquid waste from some of the first Ebola treatment units constructed (UNICEF, 07/01/2015).

**Education**

Liberia plans to reopen schools on 2 February, but the majority of schools in Grand Cape Mount will not be ready to open on time, and there is concern that other schools may not be prepared to meet the deadline (UNMEER, 15/01/2015; international media, 06/01/2015). Infection prevention and control protocols, which require regular access to safe water, need to be established in each school, but 54% of schools have no access to water (PI, 09/01/2015). In addition, school feeding programmes will not be in place in time, which will likely impact attendance (Liberia Information Management System, 16/01/2015).

**Protection**

Traditional coping mechanisms and social bonds are breaking down, as people who exhibit symptoms of Ebola or are related to sick people are being rejected from communities (CARE, 30/09/2014). 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).

Liberia’s Institute of Statistics estimates that over two million children are affected by the consequences of the Ebola outbreak in Liberia, about 600,000 of whom are under five (UNICEF, 19/11/2014). **4,519 children have been registered as orphaned by EVD.** However, it is estimated that up to 7,500 children are orphaned by EVD (UNICEF, 07/01/2015; 21/01/2015). **There are not enough orphanages to admit all unaccompanied children, and short-term emergency projects cannot meet the long-term needs of these orphans (Caritas, 21/01/2015).** 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).

**LIBYA DISPLACEMENT, CIVIL WAR, POLITICAL UNREST**

**LATEST DEVELOPMENTS**

**27 January:** In an IS-claimed attack in Tripoli, gunmen stormed a luxury hotel in Tripoli, killing nine people, including an American, a French citizen, a South Korean, and two Filipinas, before blowing themselves up (AFP, 29/01/2015).

**26-27 January:** Following another round of peace talks in Geneva, it was agreed that future peace talks should be held in Libya, after which the GNC stated it would end its boycott of the peace talks (Reuters, 29/01/2015).

**KEY CONCERNS**

- The conflict has affected more than two million people (UN, 03/09/2014)

- There are 393,420 IDPs in 35 cities and towns in Libya (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 fighting deepened the humanitarian needs of IDPs and communities affected by the fighting. The price of food and basic items, such as cooking fuel and wheat flour, have doubled.

Most displaced people are living in schools and host communities under growing strain from the influx. Access is difficult, with blocked roads preventing the delivery of food and medical supplies to areas most affected by conflict.

**Political Context**

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 and Prime Minister Al Thani's Government was sworn in on 28 September. It moved to Tobruk in early August and towards the end of 2014 to the town of Shahat (AFP, 12/11/2014). In October, Libya's 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).

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.

**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 peace talks, opposing factions have agreed on a roadmap to form a unity government. A provisional ceasefire was later agreed by the main warring factions, beginning on 18 January (NYT, 18/01/2015). Libya Dawn was not at the negotiations, but agreed to a unilateral provisional ceasefire (AFP, 15/01/2015; BBC, 22/01/2015). Fighting has since been reported in several locations, potentially jeopardising the ceasefire and durable solutions to the crisis. (AFP, 16/01/2015).

Another round of peace talks was held in Geneva over 26–27 January, without key representatives from the GNC. It was agreed that future peace talks should be held in Libya, and the GNC stated it would therefore end its boycott of the talks (Reuters, 29/01/2015).

**Security Context**

The surge in violence since mid-July has affected more than two million people (UN, 03/09/2014). In 2014, there were 2,383 reported fatalities from battles and remote violence (ACLED, 15/01/2015). Fighting was concentrated mainly in Tripoli and Benghazi. 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. Analysts believe the fighting to be rooted in struggles about patronage, control over wealth and resources and influence in the central government, rather than ideological rifts between Islamists and anti-Islamists (ACLED, 15/01/2015; NYT, 21/01/2015).

**Main Stakeholders**

The Libya Shield brigades, tied to the city of Misrata, are allied to Islamist political forces, as are the Shura Council of Benghaziology Revolutionaries (SCBR), a Benghaziology-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 the Libya Dawn.

Ansar al Sharia has declared an Islamic emirate in the eastern city of Derna and pledged allegiance to Islamic State (Al Arabiya, 06/10/2014).

The Al Qa‘qa’ and Al Sawaiq brigades, allied with the city of Zintan, and fighters from the Warshefana region west of Tripoli, back the House of Representatives, as does former General Khalifa Haftar, supported by units of Libya's regular armed forces. Haftar launched Operation Dignity in May, aiming to break the strongholds of Islamist forces. At end October, the House of Representatives declared a formal alliance with former General Haftar (Reuters, 20/10/2014). Operation Dignity and its supporters are now called the Libyan National Army (ICG, 05/01/2014). On 5 January, the House of Representatives appealed to the international community for more weapons (AFP, 05/01/2014).

**Regional Involvement**

In October, Egypt, Tunisia, and Algeria were all concerned that the violence will spill into their territories (Reuters, 11/10/2014). In August, the United States said Egypt and the United Arab Emirates secretly bombed Islamist militia positions near Tripoli's airport (AFP, 08/10/2014). On 8 October, Prime Minister Al Thani announced that Egypt would help to train the Libyan army.

According to intelligence sources, Islamist groups operating in northern Africa have set up three secret training camps in southern Libya. Islamist fighters pushed out of Mali following French intervention are also 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). Islamic State (IS) has set up training camps in eastern Libya for several hundred fighters, according to US officials (BBC, 04/12/2014).

Palestinian, Sudanese, and Syrian nationals have been banned from entering Libya. The Interior Minister stated he had received intelligence reports indicating that nationals of these countries were heading to Libya to join opposition forces in the west (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

On 28 November, former General Haftar announced an offensive to retake Tripoli. He vowed to recapture Benghazi within two weeks and Tripoli within three months (AFP, 29/11/2014).

El Sharara oilfield in the south of the country was attacked and shut down by gunmen supporting Libya Dawn in early November; Libya Dawn has taken control of the field by early December (Reuters, 11/11/2014; Daily Mail, 08/12/2014).

Tripoli and Western Libya

Tripoli has witnessed continuous violence since 13 July, when Operation Dawn was launched. Tripoli has largely been under the control of Operation Dawn.

On 27 January, gunmen killed nine people in a hotel in Tripoli before blowing themselves up. The attack was claimed by Islamic State’s Tripoli branch. 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).

In November, clashes and airstrikes by Operation Dignity forced the temporary closure of Mitiga Airport, the last functioning airport in the capital. Operation Dignity also reportedly targeted Dawn strongholds in Zwarra, 110km from Tripoli, and close to the Tunisian border, in early December (AFP, 16/11/2014; NYT, 24/11/2014; AFP, 02/12/2014; Al Jazeera, 03/12/2014; Reuters, 04/12/2014, 05/12/2014; Asharq Al Awsat, 6/12/2014; Libya Herald, 07/12/2014).

Operation Dawn expanded south into the Nafusa mountain region in November, with factional fighting taking place between Zintan militia and Misrata and other tribal and city-based militia groups (ACLED, 24/11/2014). 170 people were killed and hundreds were injured (Reuters, 23/12/2014).

Over 11–12 October, militias from Zintan attacked the neighbouring town of Kekla, which supports Libya Dawn (AFP, 13/10/2014), leading to recurrent clashes. By 24 November, authorities had confirmed 140 deaths and more than 450 injured (WHO, 24/11/2014).

Fighting in Warshefana killed an estimated 100 people and 500 were wounded between August and early October (Reuters, 23/12/2014).

State forces raided Misrata after the Libya Dawn attack on the Ras Lanuf oil terminal (AFP, 30/12/2014, 05/01/2015).

On 18 December, fighting was reported between Misrata militias, part of the Libya Dawn coalition, and security guards at Al Ghani oilfield, near Zillah (IHS Jane, 18/12/2014).

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). Since mid-October, 600 people in Benghazi have been killed due to fighting, according to medical staff (Reuters, 18/01/2015).

By 1 November, pro-LNA forces had recaptured parts of the city, including the east, and were advancing in the south (AFP, 01/11/2014). In early January, the Libyan National Army claimed to have almost full control of Benghazi’s Laithi district, which had been a key Ansar Al Sharia stronghold (Libya Herald, 06/01/2015). In December, Ansar al Sharia was reported to be firing missiles indiscriminately into Benghazi (Libya Herald, 07/12/2014). On 18 December, Libya Dawn forces had reportedly withdrawn from the area between Sirte and Benghazi. 30 militia fighters were killed and 270 wounded in the fighting, according to Operation Dignity sources (ANSAmed, 18/12/2014).

In December, Libya Dawn announced a campaign for the control of oilfields and terminals (The Telegraph, 14/12/2014). As Sidr, Libya’s biggest oilfield, and Ras Lanuf oil terminal, between Sirte and Benghazi, were closed following clashes. On 20 January, renewed Libya Dawn–LNA clashes were reported near As Sidr (Reuters, 20/01/2015). 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).

On 30 December, a suicide bomber outside the headquarters of the House of Representatives wounded 18 people, including three lawmakers (AFP, 30/12/2014).

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 has seen armed clashes between the Tebu (allied with the House of Representatives) and Tuareg (allied with Libya Dawn) communities since mid-September. Fighting in Ubari has resulted in significant displacement of Tuareg families, seeking shelter and medical aid outside the city (WHO, 24/11/2014). Tebu and Tuareg militants clashed repeatedly in December (ICG, 05/01/2014).

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.

Access to areas most affected by conflict is difficult, with security constraints and blocked roads preventing the delivery of food and medical supplies. Armed groups lack knowledge of humanitarian organisations and restrict their access to people in need. Following the provisional ceasefire agreement, Libya Dawn announced it would ensure safe passages to channel humanitarian aid, particularly to Benghazi (AFP, 18/01/2015). Parts of Benghazi have been inaccessible and entire neighbourhoods devastated by shelling: on 8 December Libyan Red Crescent Society said its staff and volunteers had been forced to relocate to safer areas because of fighting (UNHCR, 14/11/2014; The Guardian, 08/12/2014). As of November, the closure of the Gharyan–Kikla road means supplies cannot be delivered to Kikla, where authorities have described the humanitarian situation as catastrophic (WHO, 24/11/2014).
Most humanitarian agencies have left. Even before the worsening security situation, there were few humanitarian agencies with staff on the ground in Libya. The lack of available cooperating partners is a major challenge for aid delivery (IRIN, 30/09/2014). The national agency tasked with leading the humanitarian response evaluates its own response capacity as almost non-existent (IRIN 07/08/2014).

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).

Security Incidents Involving Aid Workers

On 4 June, an ICRC staff member was assassinated in Sirte, prompting the ICRC to suspend its work in the country (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 of up to 19 hours a day in Tripoli were impeding communications (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 also been damaged (UNSMIL, 04/09/2014).

Displacement

IDPs

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

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).

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). 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 Tawergha camps since February 2014. While 10,000 Tawergha 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 Tawergha 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 an increasing 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

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

In August, 6,000 people were crossing from Libya into Tunisia every day; most were third-country nationals (TCNs) (ICRC, 22/09/2014).

Main departure points to Europe have shifted from Tripoli towards Benghazi, from where the journey is longer and more dangerous (IRIN, 06/08/2014). According to estimates, more than 3,000 migrants have died trying to cross the Mediterranean between January and September 2014, more than double the previous peak in 2011 (IOM, cited in AFP 02/10/2014). 2,200 died between the beginning of June and 15 September (AI, 30/09/2014). The vast majority of refugees and migrants who arrived in Italy in 2014 had departed from Libya (AI, 30/09/2014).

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.

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). Al Jala hospital was occupied for several weeks by Ansar al Sharia, and closed in October after fighting when locals tried to remove Ansar al Sharia forces (IRIN, 02/09/2014; Libya Herald, 04/10/2014).

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 have been reported (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).

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). Peace activists as well as senior army officers and journalists were killed in ten coordinated assassinations on 19 September (The Guardian, 20/09/2014). In Tripoli, a number of activists and other public figures have been abducted, received threats or had their homes looted or burned (UNHCR, 14/10/2014).

According to the UN, threats and intimidation have been used by people claiming affiliation with Libya Dawn against Libya’s national human rights institution in Tripoli (UN, 24/10/2014).

Abduction and Detention

On 4 January, Ansar Al Sharia reportedly abducted 13 Egyptian Christians, after having kidnapped another seven over previous days (AFP, 05/01/2015). A group claiming affiliation with Islamic State has published pictures of Egyptian Christians it says it has abducted. The group claims to have 21 Coptic Egyptians seized from various places in the Tripoli province, which includes Sirte (Libya Herald, 14/01/2015).

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 Islamists seized Tripoli airport on 24 August (HRW, 05/11/2014).

Updated: 29/01/2015

MALAWI

FLOODS

LATEST DEVELOPMENTS

No significant developments this week, 26/01/2015. Last update, 19/01/2015.

KEY CONCERNS

- 638,000 affected by rains and floods in January, in urgent need of food, shelter and NFI, health, WASH and protection support (Government/OCHA, 22/01/2015).
- At November, 640,000 people food insecure; poor households in Middle Shire Valley and Phalombe Plain are in Crisis (IPC Phase 3) (FEWSNET, 29/11/2014).
HIV prevalence is 12% among people aged 15–49 (UNAIDS, 03/2014).
Up to 43% of people have experienced some form of gender-based violence; women represent more than 50% of victims.

Humanitarian Context and Needs

Access
Access to the worst-hit flood areas has been constrained by damaged roads and bridges (WFP, 23/01/2015). Around 20,000 people living in remote areas of the south and affected by floods remained cut off from assistance at 22 January (MSF, 22/01/2015).

Disasters: Floods
Heavy rain since early January has led to severe flooding across Malawi and caused great damage to crops, livestock, food stocks, and infrastructure (ACT, 15/01/2015). The southern districts of Nsanje, Chikwawa, Phalombe, and Zomba are most affected, and 15 districts declared a state of emergency.

At 23 January, 174,000 people have been displaced, 79 have died and 153 are missing in Nsanje district. Around 638,000 people have been affected overall and 3,650 evacuated to temporary sites in Chikwawa (Government/UN, 23/01/2015). Priority needs are for food, shelter and NFIs, WASH and protection (Government/OCHA, 22/01/2015).

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

Flood-affected IDPs
The majority of the displaced have sought shelter with relatives, and are living in precarious and unsanitary conditions; camps have also been set up (MSF, 16/01/2015). At 19 January, there were 11 IDP sites in Phalombe, six in Nsanje, and eight in Makanga, mostly in schools (UNDAC, 19/01/2015).

Food Security
Some 370,000 people are in need of urgent food assistance in the 15 flood-affected districts (WFP, 23/01/2015). 65,531 hectares of land have been submerged as of 23 January, including 35,000 hectares of cropland, affecting 116,000 farmers (Government/UN, 23/01/2015; Government/OCHA, 22/01/2015).

At November, 640,000 people in 19 districts were food insecure. Most of the country was facing Minimal (IPC Phase 1) acute food insecurity outcomes, although poor households in Middle Shire Valley (Balaka, Neno, Mwanza, and Blantyre districts) and Phalombe plain (Mulanje and Phalombe districts) were in Crisis (IPC Phase 3). These outcomes are linked to a reduced 2013/14 production due to dryness, along with significant reductions in income-generating opportunities and above-average maize prices, leading to constrained food access (FEWSNET, 29/11/2014).

Health and Nutrition
Health facilities in affected districts have been damaged by floods; lack of personnel and medical supplies to cope with the needs of the displaced populations is also an issue (Government/UN, 23/01/2015). The spread of waterborne diseases is a major concern due to overcrowding in shelters, shortage of WASH services, and stagnant waters (IFRC, 22/01/2015). 25,313 children aged 6–59 months were suffering from SAM as of July (UNICEF, 27/09/2014).

WASH
Poor sanitary and drainage conditions at relocation sites is a concern for displaced flood-affected populations, as it may facilitate disease outbreaks (Government, 18/01/2015). 42% of the population lacks access to sanitation facilities (OCHA, 01/09/2014).

Shelter and NFIs
More than 3,500 tents are needed for the displaced populations, as is plastic sheeting for repairing and reinforcing damaged houses (Government, 18/01/2015).

Education
415 schools have been affected by floods, and 181 schools are being used as camps (Government, 18/01/2015). An estimated 200,000 students are not able to attend school as a result. 800 tents are needed to host schools, as are school kits and psychological support for children (Government, 17/01/2015).

Protection
108 unaccompanied minors have been identified in Zomba and Nsanje as a result of floods (Government/UN, 23/01/2015). Nine attempts of sexual abuse of children and women were reported in Zomba (UNICEF, 21/01/2015). Up to 55% of girls and more than 70% of boys experienced some form of violence while growing up. Two in five girls and two out of three boys experience physical violence, while one in five girls and one in three boys experience emotional and sexual violence (UNICEF, 30/06/2014).

Reviewed: 26/01/2015
LATEST DEVELOPMENTS

28 January: A suicide attack in Tabankort, Gao, killed at least five people (Reuters).

27 January: Three civilians were killed and several seriously injured in a protest against MINUSMA in Gao (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 is of particular concern.
- 136,000 children suffer from severe acute malnutrition (OCHA, 07/10/2014).
- 263,000 people are in IPC Phase 3 and more than 1.6 million people are in IPC Phase 2 (Cadre Harmonise, 09/11/2014).
- 2.5 million people are in need of healthcare and one million people are in need of WASH (OCHA, 10/09/2014).

Political Context

The state lost control of the north of the country in 2012, after Tuareg groups from the northern region known as Azawad began a campaign for greater autonomy, and a separate coup d'état further destabilised the country. However, the fragile alliance between Tuareg and Islamists was quickly broken, and Islamists took control of key northern cities. Civilian rule was re-established in mid-2013, with the aid of French and African Union troops, and a UN mission, MINUSMA, was set up, but Mali continues to face security and political challenges. The truce in the north remains fragile, and key government institutions need strengthening. Limited access to basic social services and the poor capacity of public administration are key drivers of the crisis.

On 15 June 2014, the Azawad Movement Coalition – comprising the National Movement for the Liberation of Azawad (MNLA), the High Council for the Unity of Azawad (HCUA), and the Arab Movement of Azawad (MAA) – signed the Algiers Declaration with the Government of Mali. The coalition has agreed to engage with the Government on a path of dialogue and negotiation after several bouts of violence broke the June 2013 peace agreement (AFP, 01/09/2014).

However, continued violence put the peace talks on shaky ground (UN, 07/08/2014). On 28 October 2014, the Azawad Movements Coalition announced united military efforts to stem insecurity in the north (ICG, 01/11/2014). A third round of negotiations began on 20 November, but was suspended on 1 December. Negotiations are set to resume in January 2015 (Reuters, 20/11/2014; Crisis Watch, 05/01/2015). However, after UN forces destroyed a vehicle linked to the Azawad movements on 21 January, the Coordination of Azawad Movements has said it will maintain the ceasefire, but all collaboration with MINUSMA will be suspended.

 Hundreds of people occupied the airport of Kidal in protest against UN air strikes on Tuareg opposition forces on 21 January (local media, 21/01/2015; international media). On 27 January, three civilians died and several were severely injured as thousands protested against MINUSMA in Gao. The Azawad Movements Coalition and MINUSMA had agreed to make Tabankort, Gao, a buffer zone, which requires the disarmament of pro-government militias – protesters were opposing the weakening of these militia. Following the protest, the UN mission announced the withdrawal of the document, and opened an inquiry (international media, 26/01/2015; local media, 27/01/2015).

Security Context

Violence has increased since late 2014, with attacks from both Islamist and Tuareg groups. Landmines and IEDs are a particular threat. Attacks on MINUSMA vehicles, camps, and peacekeepers have spiked since mid-August 2014 (AFP, 21/09/2014).

The situation in Kidal and Gao remains tense since Tuareg and Arab insurgents took Kidal and the smaller settlement of Menaka in May 2014. Clashes were reported between pro-government militia GATIA and a coalition of MNLA and CPA 16 October 2014 in Intillit, Gao region (ECHO, 19/10/2014).

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, French forces, MINUSMA, and the EU military training mission (EUTM) are all present, mainly in Bamako (53% of forces) and in northern cities such as Kidal, Gao, Timbuktu, and Menaka (28%) (OCHA, 31/05/2014).

MINUSMA is to set up a military headquarters in Kidal, while French forces have increased their presence in northeast Mali near Tessalit and Angueldoc, and set up a military base in Madama, at the Nigeria border, since late October (AFP, 23/10/2014). 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 28 January, a suicide attack by pro-government militia against separatist Tuareg groups killed between five and 13 people in Tabankort, Gao (international media, 28/01/2015).

However, the main targets of attacks have been army bases and MINUSMA troops. On 21 January, several people were killed and injured when UN forces destroyed a vehicle linked
to the Azawad movements in an air strike during clashes over a separate town (local media, 21/01/2015; international media, 21/01/2015). On 17 January, suspected Islamist militants attacked a UN base in the city of Kidal, killing one member of the peacekeeping force and injuring at least one other. On 9 January, seven MINUSMA soldiers were wounded as an IED exploded near their car, close to Kidal airport (international media, 09/01/2015).

On 16 January, separatist groups attacked the town of Tenenkou, Mopti, killing at least three people in the clashes with the government (international media, 17/01/2015). On 7 January, Islamist insurgents attacked the town of Djoura, close to the Mauritanian border, and set fire to the town hall. One civilian was killed (local media, 07/01/2015). In the first week of January, more than ten people were killed and six UN peacekeepers wounded in attacks by Islamist militants and clashes between rival Tuareg groups in the regions of Ségou, Gao, and Kidal (AFP, 05/01/2015; AFP, 04/01/2015; Reuters, 03/01/2015; AFP, 29/12/2014).

**Humanitarian Context and Needs**

**Access**

Though insecurity in the north limits humanitarian access to certain regions, no movement restrictions exist in Mali (OCHA, 15/01/2015). Security incidents involving NGOs almost tripled over the course of 2014 (Première Urgence - Aide Médicale Internationale, 10/10/2014). Several humanitarian organisations suspended their activities in the Intillit area, Gao, following violent clashes on 16 October 2014, and six INGOs preventively evacuated part of their staff from the Timbuktu region fearing the spread of the conflict (ECHO, 19/10/2014; OCHA, 24/10/2014).

Certain areas requiring assistance in Mopti region, such as Tenenkou and Youwarou villages, remain inaccessible due to insecurity and poor infrastructure (WFP, 01/10/2014).

**Displacement**

**IDPs**

As of 4 December 2014, about 86,000 people are internally displaced as a consequence of the 2012 conflict, a decrease from 101,300 recorded in August. In northern Mali these include 11,944 IDPs in Timbuktu, 12,025 in Kidal, and 7,070 in Gao. In addition, 31,146 IDPs have been registered in Bamako, 13,111 in Koulikoro, 4,665 in Mopti, 4,716 in Ségou, and several hundred in Kayes and Sikasso (OCHA, 04/12/2014). In September 2014, around 9,700 IDPs were considered vulnerable (IOM, 10/09/2014). 55% of IDPs in the south are children (IOM, 08/2014).

**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).

**Returnees**

361,000 IDP returnees have been identified in Gao, Timbuktu, Kidal, and Mopti (IOM, 10/09/2014). 35,800 IDPs went back to their place of origin between June and September 2014 (IOM, 10/09/2014). The arrival of returnees has exacerbated needs in the north (OCHA, 10/09/2014). The majority of people displaced within Gao since 2012 have returned, although fighting in October led to some new displacement (IOM, 16/10/2014).

In 2014, more than 31,000 Malian refugees have returned: more than 10,000 from Burkina Faso; about 12,000 from Niger; around 7,300 from Mauritania; and 2,200 from Algeria (UNHCR, 14/08/2014).

**Malian Refugees in Neighbouring Countries**

As of 30 November 2014, an estimated 143,500 Malians refugees are recorded in neighbouring countries (OCHA, 04/12/2014). As of 9 September, 54,000 Malians were recorded in Mauritania, 50,000 in Niger, 32,000 in Burkina Faso, and 1,500 in Algeria (OCHA, 10/09/2014; UNHCR, 30/11/2014).

**Food Security**

As of October 2014, 263,000 people are in IPC Phase 3 (Crisis) food insecurity. 60% of them live in Gao, Mopti, Kidal and Timbuktu. More than 1.6 million people are in IPC Phase 2 according to the Cadre Harmonisé, fewer than in 2013 (FEWSNET, 09/11/2014).

The harvest will improve food security conditions from October 2014 to March 2015. As of January 2015, cereal prices are average or below-average, increasing household access to food. Nonetheless, there are pockets of deficit in some regions of Timbuktu, Gao, Mopti, and Kayes, where under-average harvests and livestock products are expected (FEWSNET, 25/10/2014; Food Security Cluster, 27/10/2014; international organisation, 19/01/2015). Provisional early end of stock is expected in Gao, Bourem, Goundam, Niafunké, and in some areas north of Koulikoro, Kayes, and Douentza. Poor households from agro-pastoral areas are likely to remain in IPC Phase 1 (FEWSNET, 25/10/2014). In north riverine areas, vulnerable households are likely to reach Crisis levels of food insecurity (IPC Phase 3) as of April 2015 (FEWSNET, 16/11/2014; international organisation, 19/01/2015).

**Agricultural Outlook**

Rainfall has improved the situation in northeast and central Mali, inducing reconstitution of water reserves and pastoral vegetation (WFP, 30/09/2014; Food Security Cluster, 27/10/2014).

However, livestock farming conditions are likely to worsen as of February 2015 in agro-pastoral areas previously affected by rain deficits in May-October 2014, and those which recorded high cattle mortality impairing farmers’ livelihoods (Food Security Cluster, 27/10/2014).

**Livelihoods**

A combination of overfishing and the use of illegal fishing gear has seen fish stocks in Lake Malawi diminishing to the point that local people’s livelihoods and food security are...
Sahel Food Crisis: Regional Overview

Since September 2014, the number of people suffering from food insecurity in the Sahel has decreased from 24.7 million to 19.8 million as of December 2014. At least 2.6 million have crossed the emergency threshold and require urgent food assistance. The situation has improved in some areas and deteriorated in others (OCHA, 17/12/2014).

Health and Nutrition

2.1 million people are considered to be in need of healthcare (OCHA, 17/11/2014).

Ebola

On 18 January, Mali was declared Ebola-free by the Government and WHO, after 42 days without reporting any new cases (WHO, 18/01/2015).

Nutrition

As of 30 September 2014, 136,000 children suffer from severe acute malnutrition, and 360,000 suffer from moderate acute malnutrition (OCHA, 07/10/2014). According to a nutritional survey, GAM rates are particularly concerning in Yelimane, Kayes, and relatively high in most of the country, apart from Sikasso and some areas of Mopti and Kayes (OCHA, 27/08/2014).

Severe acute malnutrition among children is projected to increase 181,000 over the course of 2015 (OCHA, 15/01/2015).

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. 350 schools are still closed (OCHA, 15/01/205).

Protection

Explosive remnants of war caused 101 casualties from 2012 to June 2014 (OCHA, 28/01/2015). In early May 2014, a UN report on the situation of children in Mali noted grave violations by armed groups active in the north and, to a lesser extent, by Malian armed forces and pro-government militias, including killings, sexual violence, and recruitment (UN Security Council, 15/05/2014). Allegedly carrying out forced recruitment, suspected Islamist fighters kidnapped ten children and killed two who tried to escape on 22 November, near Aguelhoc and Kidal (Reuters, 22/11/2014).

Updated: 28/01/2015

MAURITANIA FOOD INSECURITY, DISPLACEMENT

LATEST DEVELOPMENTS

No significant developments this week 28/01/2015. Last update 21/01/2015.

KEY CONCERNS

- 384,000 people estimated to needing humanitarian assistance in 2014 (OCHA, 08/2014).
- 800,000 people are estimated to be food insecure, of whom 190,000 are severely food insecure (OCHA, 02/2014).
- 31,000 SAM cases up to March 2014 mean that acute malnutrition level has already surpassed the estimated caseload for the year (UNICEF, 03/2014).
- Security challenges continue to be a problem in Mbera refugee camp on the border with Mali. Mauritania is the largest recipient of refugees fleeing the conflict in Mali (UNHCR, 06/2014 and OCHA, 04/2014).

Political Context

National Political Context

On 21 June, President Mohamed Ould Abdel Aziz was elected for another five-year term. Most opposition parties boycotted the poll, citing a lack of electoral reform.

The first legislative elections since 2006 were held in 2013, and the country’s ruling Union for the Republic and its allies won 76 of 147 seats. The National Electoral Commission announced a record turnout of 75% of 1.2 million registered voters. However, the vote was boycotted by most opposition parties. 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 services.

On 15 January, three anti-slavery activists were sentenced to two years in prison, one of whom was the candidate in the 2014 presidential election. Police used tear gas and batons to disperse condemning the judgement. Police used tear gas and batons to disperse...
protestors condemning the judgement. The practice of slavery was officially designated a punishable crime in 2007 (AFP, 15/01/2015).

**Humanitarian Context and Needs**

**Displacement**

**Malian Refugees**

Mauritania hosts almost 55,000 Malian refugees as of 1 September (OCHA, 08/09/2014). Almost all refugees 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 the inaccessibility of areas of northern Mali make it difficult to obtain return figures. A tripartite agreement is being prepared between UNHCR, Mali, and Mauritania to facilitate the safe return of refugees.

**Food Security**

Poor households in northwestern areas of the agropastoral zone will continue to have difficulty maintaining regular food access and will remain Stressed (IPC Phase 2) through December (FEWSNET, 09/2014). Access to food is difficult for some due to high prices of coarse grains such as sorghum and wheat. Sorghum prices in Nouakchott increased by 57% between February and August (FAO, 11/2014).

In February, nearly 800,000 people, a fifth of the total population, were food insecure, including 190,000 severely food insecure (OCHA, 02/2014).

**Agriculture**

Delays in replanting have been recorded as a result of delayed and below-average rainfall in some parts of the country (FEWSNET, 14/10/2014).

**Outlook**

In February/March 2015, more than 300,000 poor households in affected areas of the Senegal River Valley (near the border between Mauritania and Senegal) and western agropastoral zones (southwestern Mauritania) will begin to face food consumption gaps. Without additional, well-targeted emergency assistance, more than 600,000 households could face Crisis (IPC Phase 3) acute food insecurity by June. An Emergency (IPC Phase 4) is possible by September 2015 in the absence of emergency response (FEWSNET, 18/11/2014).

Poor rainfall during the June to October season in south-central Mauritania will result in significantly below-average main and off-season harvests, reduced seasonal labour incomes, and reduced income from livestock sales. Prices of sorghum are also expected to rise above the five-year average due to below-average local production and atypically low trade flows (FEWSNET, 17/11/2014). Erratic rains have affected pasture regeneration and level of water points in several pastoral areas of the country, particularly in Hodh el Chargui, Hodh el Ghrabi, Brakna and Tagant regions (FAO, 27/01/2015).

**Food Security in the Sahel Region**

19.8 million people in the Sahel (Burkina Faso, north Cameroon, Chad, the Gambia, Mali, Mauritania, Niger, north Nigeria, and Senegal) are suffering from food insecurity as of December 2014 (OCHA, 17/12/2014). Food insecurity in 2014 has risen dramatically compared to 2013, when 11.3 million people had inadequate food (OCHA, 03/02/2014).

**Health and Nutrition**

**Nutrition**

In December, UNICEF reported that 124,000 children were acutely malnourished in November 2014, including 30,740 children with severe acute malnutrition; an increase of almost 30% compared to the 2013 caseload.

Preliminary results of an August survey indicate that the national GAM rate had decreased from 13.1% to 9.8%, with SAM at 1%. 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).

**Updated: 28/01/2015**

**NIGER FOOD INSECURITY, DISPLACEMENT**

**LATEST DEVELOPMENTS**

January: 150,000 people are estimated to have arrived in Diffa region from Nigeria since the beginning of the crisis in May 2013 (OCHA, 22/01/2015).

**KEY CONCERNS**

- 5.3 million people are estimated to be food insecure (OCHA, 09/2014).
- 879,269 acutely malnourished children, 356,320 of whom are severely malnourished. 13.3% GAM among children 6–59 months (OCHA, 31/07/2014).
- 156,250 people have fled to Niger: 51,250 from Mali (UNHCR, 31/08/2014) and 119,000 from Nigeria (OCHA, 1/12/2014).
- 1,749 cases and 64 deaths have been recorded since January in a cholera epidemic.
Security Context

Insecurity has been rising in Niger and across the region due to crises in Libya, Mali, and Nigeria. Terrorist threats from Al Qaeda in the Islamic Maghreb, Boko Haram, and the Movement for Oneness and Jihad in West Africa (MUJAO) are all of concern. France announced mid-July that some 3,000 French troops based in Chad will operate counterterrorism operations in Mali, Burkina Faso, Niger, and Chad (Reuters, 18/07/2014).

On 19 November, MUJAO attacked the town of Bani-Bangoe near the Malian border and exchanged fire with Niger’s security forces, killing one soldier and injuring two others. They also sabotaged the telephone network (AFP, 20/11/2014).

On 18 January 2015, violent riots in the capital Niamey, over the depiction of Prophet Mohammed on the cover of French satirical magazine Charlie Hebdo, killed five people and injured 128 others. Buildings were set on fire, including 45 churches, hotels, an orphanage, and businesses of non-Muslim or French origin. In Zinder, five were killed and 45 injured after the Franco-Nigerien cultural centre and several churches were set on fire (AFP, 18/01/2015; 19/01/2015).

Humanitarian Context and Needs

Disasters: Floods

As of October, over 68,000 people have been affected and 36 killed by flooding due to heavy seasonal rainfall that started in August. 18,000 are affected in Tillabery, 12,000 in Maradi, 9,000 in Zinder, and 9,400 in Tahoua. More than 8,100 houses and almost 2,817 hectares of crops have been destroyed (OCHA, 13/10/2014).

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). New arrivals have settled in 104 sites. 87,520 people, including 45,330 children, have been registered in 71 sites, as of 5 December (OCHA, 22/01/2015).

At the beginning of the insecurity, approximately 70% were Niger returnees and 30% Nigerian refugees; more recently, the majority of arrivals are Nigerian refugees (UNHCR, 09/2014; OCHA, 12/12/2014).

The rate of arrival increased in the second half of 2014. 27,000 people arrived between August and September (UNHCR and IRC). Following Boko Haram attacks in Damsack, Nigeria, on 24 November, more than 15,000 new refugees arrived (OCHA, 3/12/2014). They have settled in villages and Diffa town. Most are young men who fled forced recruitment to Boko Haram; unaccompanied children were also reported (OCHA, 28/11/2014).

The newly displaced are in a critical situation, and have shelter and NFI, food, water, and health and nutrition needs (OCHA, 24/09/2014). Sayam Forge camp was opened on 30 December, and has started voluntary relocation of refugees settled in Gagamari area. The initial camp capacity is 5,000 persons, though the camp can be further extended (OCHA, 14/01/2015). A second camp is scheduled to open in a few days (UNHCR, 07/01/2015; 09/01/2015). Security has been reinforced in Diffa town, following rumours of possible attacks by Boko Haram (AFP, 28/11/2014).

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). Internal displacement within Diffa region is increasing, driven by the search for means of subsistence and pasture: Diffa is vulnerable to both flooding and drought, and has long faced serious gaps in the provision of food staples, healthcare and potable water. The refugees and returnees add 10% to the region’s population (UNHCR, 09/2014; IFRC, 08/08/2014; OCHA, 26/07/2014).

The Government has reportedly been slow in giving newly arrived Nigerians refugee status, despite a December decree granting refugee status to people fleeing the states under a state of emergency in Nigeria. As of September, only 18% of newly arrived people had identity documents (UNHCR, 09/2014).

Mali Crisis

53,339 Malian refugees are in Niger (OCHA, 14/01/2015). As of March, 80% of refugees were women and children. Most live in three camps in Tillabery region: Abala, Mangalze, and Tabareybarey. Two refugee hosting areas have been established in Intikane and Tazalit, Tahoua, for refugees from nomadic communities.

In May, Mali, Niger, and UNHCR signed a tripartite agreement on the voluntary repatriation of Malian refugees, although the situation in northern Mali is not yet favourable for the promotion of massive returns. As of 31 August, over 12,000 Malians have returned to their homes (UNHCR, 31/08/2014).

There are also 5,700 returnees from Mali (OCHA, 31/07/2014).

CAR Crisis: Returnees

Since December 2013, 1,160 Nigerian nationals have been repatriated from CAR by IOM in coordination with the Government of Niger.

Food Security

5.3 million people are estimated to be food insecure, compared to 2.9 million in 2013 (OCHA, 31/07/2014 and 30/09/2014).

In Diffa region, almost 161,200 people (one fifth of the surveyed host population) reported suffering from food insecurity (OCHA, 10/08/2014).

IDPs and host communities in the Diffa region will continue to face Stressed food security.
insecurity (IPC Phase 2) in January–March 2015 as a result of cereal deficit, deterioration of livelihoods and pressure of existing resources. Households in the departments of Ouallam (Tillabery), Tchintabaraden and Abalak (Tahoua) and Gouré (Zinder) may face cereal deficits and will also be Stressed over this period (FEWSNET, 01/01/2015).

Sahel Food Crisis: Regional Overview

19.8 million people in the Sahel (Burkina Faso, north Cameroon, Chad, the Gambia, Mali, Mauritania, Niger, north Nigeria, and Senegal) are suffering from food insecurity as of December 2014 (OCHA, 17/12/2014). Food insecurity in 2014 has risen dramatically compared to 2013, when 11.3 million people had inadequate food (OCHA, 03/02/2014).

Agriculture and Markets

Boko Haram-related market disruptions have restrained trade flows towards Diffa and increased marketing costs (FEWSNET, 31/07/2014).

Agricultural/Pastoral Outlook

Poor rainfall in Diffa will affect the 2014–2015 agricultural and pastoral campaign, and is expected to cause a serious food deficit in most communities, according to a joint assessment mission conducted in early September (IFRC, 03/10/2014). Poor pastoral resource availability in parts of the northern Sahel will begin to stress pastoral households from June to September 2015. Refugees from northeastern Nigeria in the Diffa region will need continued food assistance (FEWSNET, 11/2014).

Health and Nutrition

Cholera

On 13 December, The Ministry of Health declared a cholera outbreak in two municipalities of Chétimari and Diffa, in Diffa region. As of 31 December, 291 cases and 18 deaths have been reported (OCHA, 12/2014). After the first few days of the outbreak, the incidence rate dropped sharply (OCHA, 14/01/2014).

Nutrition

Around 1.6 million children are acutely malnourished in Niger; 356,320 of them are severely malnourished, and 12,710 are in Diffa (OCHA, 22/12/2014). GAM among children 6–59 months 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

48% of the population does not have access to safe drinking water (OCHA, 17/07/2014).

Education

In Diffa region, 35 schools have been closed due to insecurity, and others are occupied by new arrivals from Nigeria (OCHA, 12/12/2014).

Updated: 29/01/2014

SENEGAL FOOD INSECURITY

LATEST DEVELOPMENTS

No significant developments this week, 30/01/2015. Last update, 11/12/2014.

KEY CONCERNS

- Over 2.6 million people are food insecure, including 477,000 in Crisis (IPC Phase 3) (FAO, 11/12/2014).
- 326,000 children suffering from acute malnutrition, 69,000 from severe acute malnutrition, and 257,000 from moderate acute malnutrition (OCHA, 30/11/2014).

Political Context

Separatists continue to oppose authorities in the coastal Casamance area. Salif Sadio, leader of the separatist movement, declared a unilateral ceasefire on 30 April, as proof of engagement in an ongoing peace process.

Humanitarian Context and Needs

At October, 2.6 million people were in need of humanitarian assistance. It is expected that 4.13 million will require assistance in 2015 due to climatic conditions, a rise in food prices, and reduced cross-border exchanges (OCHA, 30/11/2014). Displacement

As of 30 September, there were 14,000 refugees in Senegal, as well as 2,000 IDPs and returnees (OCHA, 30/09/2014).

Food Security

Over 477,000 people are in Crisis (IPC Phase 3) food security conditions and above as a result of the lingering effects of previous crises and the impact of the erratic rains in 2014. An additional 2.16 million people are in Stressed conditions (IPC Phase 2) (FAO, 11/12/2014).

A 37% and 51% reduction in 2014 cereal and groundnut production is reducing food availability and households’ purchasing power. Poor households, especially in Thiès, Louga, Matam, and northern Tambacounda, will likely be Stressed by March due to the expected exhaustion of food stocks – which normally does not occur until June (FEWSNET, 29/01/2015). Approximately 850,000 people across central and northern Senegal will be in Crisis (IPC Phase 3) by May, in the absence of assistance (FEWSNET,
Agriculture and Markets

Poorly distributed and significantly below-average rainfall led to poor cropping conditions for much of central and northern Senegal. 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).

As a result of the closure of borders and markets due to Ebola containment measures, trade volumes have fallen 50% below last year’s levels, leading to a 40% and 50% increase in the prices of palm oil and coffee, respectively, in less than four weeks (WFP, 15/09/2014). Senegal reopened its border with Ebola-hit Guinea on 26 January (Reuters, 26/01/2015).

Sahel Food Crisis: Regional Overview

9.8 million people in the Sahel (Burkina Faso, north Cameroon, Chad, the Gambia, Mali, Mauritania, Niger, north Nigeria, and Senegal) are suffering from food insecurity as of December 2014 (OCHA, 17/12/2014).

Health and Nutrition

Ebola

Porous borders between Senegal and Guinea and trade flows via regular weekly markets constitute a serious risk to the spread of Ebola to the country (Red Cross, 29/09/2014).

Nutrition

326,000 children were acutely malnourished in 2014, including 69,000 suffering from SAM, compared to 63,323 SAM and 255,675 MAM cases reported in 2013 (OCHA, 30/11/2014).

WASH

38.7% of rural families and 61.7% of urban households have access to sanitation (OCHA, 30/11/2014).

Reviewed: 30/01/2015

BURUNDI FOOD INSECURITY, DISPLACEMENT

LATEST DEVELOPMENTS

No significant new developments reported this week, 26/01/2015. Last update: 22/01/2015.

KEY CONCERNS

- 78,958 people are in IPC Phase 3 and 4 while another 610,000 are food insecure (OCHA, 30/11/2014).

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 on restrictions on civil and political rights, following a series of violent acts by the ruling party’s increasingly militant youth wing, Imbonerakure. On 12 December, the UN political mission in Burundi closed after 20 years (AFP, 12/12/2014).

2015 General Elections: Proposed Constitutional Amendments

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. On 9 June 2014, the Government, the National Independent Electoral Commission (CENI), 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 rebel links, raising concerns of violence ahead of the elections (AFP, IRIN, 16/01/2015).

Security Context

The Burundian army has claimed it killed 100 armed fighters in the first week of January in Rwesero, north of Bujumbura, after they crossed from East Kivu in DRC. 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 and 06/01/2014).

Humanitarian Context and Needs

Disasters: Flooding

On 24 December, heavy rains in Tuyigi province, eastern Burundi, destroyed more than 750 houses (Government, 26/12/2014).

Displacement

IDPs

As of September, Burundi has 78,940 IDPs (UNHCR, 31/11/2014). They are mostly ethnic Tutsis, located in and around 120 sites across northern and central Burundi. No new displacement has been recorded since 2008 (Internal Displacement Monitoring Centre).
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 Rwanda), Ruyigi, Muyinga, and Cankuzo (east, alongside Tanzania) and Bubanza (west, alongside DRC).

7,000 DRC refugees living in Musasa camp, in northern Burundi, are demanding better conditions, protesting at poor food availability, reduced health services, and substandard education services (local media, 10/11/2014).

Returnees

43,000 Burundians living in Tanzania have been forcibly repatriated. 65% are women and children. Many returnees have chosen to return to their province of origin without being registered, due to a lack of reception facilities at entry points (IOM, 01/2014).

The high number of IDPs and refugees returning to their places of origin 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

As of 1 September, 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, 9,233 Burundian refugees were residing in the DRC (UNHCR, 30/09/2014).

As of 31 July, 6,568 Burundian refugees were residing in Kenya (UNHCR, 31/07/2014), most of the located in Kakuma Camp.

Food Security

As of August, 78,958 people were in IPC Phase 3 and 4 (OCHA, 05/08/2014), while another 610,000 are food insecure (OCHA, 30/11/2014).

WASH

Nearly 4.3 million people in Burundi (43% of the population) do not have access to improved sanitation facilities (Belgian Technical Cooperation, 10/10/2014).

Protection

Several reports have emerged of the Government targeting and incarcerating journalists, activists and members of political parties (Human Rights Watch, 22/01/2015).

Updated: 26/01/2014

NAMIBIA FOOD INSECURITY

LATEST DEVELOPMENTS

No significant developments this week, 30/01/2015. Last update, 17/12/2014.

KEY CONCERNS

- More than 110,000 people are in need of food assistance and over half a million people are at risk of food insecurity from June to December 2014 (Food and Nutrition Security working group, 22/07/2014).

Humanitarian Context and Needs

Food Security

As of July, 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, some 200,000 people less than the previous season. The food insecure population is found primarily in Kunene, and parts of Omahke, Otjozondjupa, Omusati, and Erongo regions (SADC, 08/2014).

Agriculture and Markets

Heavy rains received in some parts of Omusati Region mid-December and potential flooding in Kabbe in Zambezi region have raised fears among farmers that they might lead to a negative yield in the next harvest (Local media, 17/12/2014).

National cereal production was 136,680 metric tons over the 2013-2014 season, a significant increase from the 2012-2013 season’s harvest but still below the five-year average (OCHA, 26/09/2014). Crop harvests as of 22 September were 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%. Agricultural assistance is needed for the areas most affected by the 2013 drought (OCHA, 22/09/2014).

Reviewed: 30/01/2015

UGANDA DISPLACEMENT

LATEST DEVELOPMENTS

23 January: Preparation of new land for refugees in Maaji, Moyo district, is ongoing. The relocation of 8,500 to Maaji has been postponed due to a lack of basic services (UNHCR).

20 January: Harsh climatic conditions and poor yields have deteriorated the food security situation in Arua camp (UNHCR).

20 January: Health centres in Arua require additional staff, space, and supplies to respond to refugee needs. The current ratio of hygiene promoter per population is 1:775
KEY CONCERNS
- **139,276** South Sudanese refugees have fled to Uganda since December 2013. (UNHCR, 24/11/2014).
- **19.9%** GAM among South Sudanese refugees. GAM is above 10% in Karamoja (OCHA, 05/08/2014; WFP, 06/2014).

Security Context
In September 2014, the Ugandan police foiled an alleged Al Shabaab attack in Kampala, seizing large amounts of explosives and suicide vests (BBC News, 14/09/2014).

Lord’s Resistance Army Chief Dominic Ongwen, wanted by the International Criminal Court for crimes against humanity and war crimes, surrendered to US Special Forces in CAR in early January. He has, urged ex-comrades to stop fighting (AFP, 12/01/2015). He was transferred to ICC custody on 17 January (ICC, 20/01/2015).

Humanitarian Context and Needs

Access
Access was seriously disrupted between Adjumani refugee camp and Elegu border point, following flash floods that submerged sections of the road (UNHCR, 03/12/2014).

Displacement

IDPs
As of December, Uganda has 30,130 IDPs (OCHA, 30/11/2014).

Refugees in Uganda
As of 1 January, there were **1,399** Ugandan refugees in Kenya (UNHCR, 01/01/2015). At 30 June, there were **1,211** Ugandan refugees in DRC (UNHCR, 30/06/2014).

Food Security
In Karamoja, about 700,000 people remain at Stressed (IPC Phase 2) level of food insecurity (FEWSNET, 31/12/2014). Localised areas in Karamoja remain in Crisis (IPC Phase 3) acute food insecurity, including Kaabong and Moroto (FEWSNET, 29/11/2014). Households in eastern Karamoja are projected to be in Crisis (IPC Phase 3) from April 2015 (FEWSNET, 27/10/2014). For the second year in a row, a well below-average harvest will lead to an early lean season in the area (FEWSNET, 27/10/2014).

Harsh climatic conditions and poor yields have deteriorated the food security situation in Arua camp. There may be need for food assistance in February (UNHCR, 20/01/2015). Around 146,000 refugees will have their food rations halved in February due to funding issues, WFP has announced (UNHCR, 16/01/2015). Health centres in Arua require additional staff, space, and supplies to respond to refugee needs. The current ratio of hygiene promoter per population is 1:775 (UNHCR, 20/01/2015).

Health and Nutrition

Nutrition
Blanket feeding programmes are required to address increased GAM among South Sudanese refugees in West Nile, in northwest Uganda (WFP, 01/10/2014). GAM among South Sudanese refugees in Uganda had reached 19.9% as of August (OCHA, 05/08/2014).

Malnutrition remains the main challenge in Arua, and it is most pronounced among the host population (UNHCR, 12/12/2014).

WASH
In Kiryandongo refugee camp, self-relocation by refugees is causing delay in completing construction of latrines (UNHCR, 05/12/2014).
There are concerns over lack of water supply in Alere, Boroli and Olua I and II refugee settlements in Adjumani district, where the average supply is 9.7 litres of water per person per day, far below the minimum standard of 15 (ACT, 13/10/2014).

In Amudat district, safe water access, latrine access, and sanitation issues are a serious concern (WFP, UNICEF, 06/2014).

Protection

Four Muslim clerics were kidnapped in Kampala on 8 January (BBC, 08/01/2015).

47 SGBV incidents were reported in Kyriandongo in 2014 (UNHCR, 12/12/2014).

Human Rights Watch issued a report in November asserting that the government response to deadly ethnic violence and reprisals in the Rwenzori region in western Uganda in July has been inadequate. Bakonzo community members attacked police and army posts in several districts, which sparked reprisals by other ethnic groups and security forces, followed by what HRW calls “brutal counter-security against Bakonzo civilians” (HRW, 05/11/2014).

Updated: 27/01/2015

ERITREA FOOD INSECURITY

LATEST DEVELOPMENTS

No new significant developments this week, 27/01/2015. Latest update: 22/01/2015.

No accurate or verified data relating to the food security situation or food price levels in Eritrea is available, therefore Eritrea is not included in the Global Overview prioritisation.

KEY CONCERNS

- 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).

- Over 60% of the Eritrean population was reported as being undernourished between 2011 and 2013 (WFP).

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

Access

There is a lack of updated and reliable data on the humanitarian situation due to limited humanitarian access. As reported in ECHO’s Humanitarian Implementation Plan (HIP) of October 2013, providing direct humanitarian assistance remains a challenge due to limited access, and absence of assessments and humanitarian space.

In November–December 2013, several projects in partnership with the UN and the Government commenced; the Government had previously ordered the end of all operations by non-state development partners by the end of 2012 (IFRC, 30/05/2014). On 24 April 2014, according to media sources, the UAE Red Cross had access to a million children across six provinces to distribute clothing.

Displacement

Refugees

As of 1 January, 3,136 refugees reside in Eritrea, including 3,049 Somali refugees (UNHCR, 01/01/2015).

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).

Ethiopia: As of 25 January, there are 125,000 Eritrean refugees in Ethiopia, mainly settled in four camps in the northern Tigray and Afar region (OCHA, 26/01/2015). Arrival rates spiked towards the end of 2014. 5,000 Eritreans entered in October, and by 24 November another 2,173 had arrived (OCHA, 24/11/2014). 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 news, 15/11/2014). The high proportion of unaccompanied minors who cross from Eritrea to Ethiopia is a priority problem (UNHCR).

Sudan: Eastern Sudan received an average of 500 Eritrean refugees per month in 2013, down from 2,000 a month in 2012. Sudan reportedly hosts at least 114,500 Eritrean refugees.

Djibouti: Djibouti receives an estimated 110 Eritreans each month (UNHCR). On 30 June,
74 Eritrean refugees and asylum seekers were sent back from Sudan, after being convicted of illegally entering Sudan (UNHCR, 04/07/2014).

**Yemen:** Hundreds of Eritrean refugees are currently in 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, who state 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 January, there are 1,566 Eritrean refugees in Kenya, most are located in Nairobi (UNHCR, 22/01/2015).

**Food Security**

As indicated in ECHO’s October HIP, as a result of access restrictions imposed by the authorities, very little data on food security in Eritrea is available.

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 remain high, putting severe pressure on household coping mechanisms. The Government officially denies any food shortages within its borders and refuses food aid.

**Health and Nutrition**

According to FAO in 2013, over 60% of the Eritrean population was reported to be undernourished during 2011–2013.

**Malaria**

According to a government report, malaria infections have visibly declined thanks to higher community awareness and regard for environmental hygiene (Government of Eritrea, 24/09/2014). No figures are available to confirm this information.

**Protection**

On 13 May 2014, the Report of the Special Rapporteur on the situation of human rights in Eritrea was released. It focuses on the indefinite national service and arbitrary arrest and detention, including incommunicado detention and inhumane prison conditions. Rampant human rights violations cause hundreds of thousands to leave the country (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).

Human rights abuses, including torture, arbitrary detention, and severe restrictions on freedom of expression, association, and religion are common in Eritrea (UN Special Rapporteur, Human Rights Watch). Conscription to national service can last indefinitely, and is reportedly poorly paid. 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, the UN Human Rights Council set up a Commission of Inquiry to investigate human rights abuses in Eritrea, but it still had not been granted direct access to the country by January (Human Rights Watch, 24/09/2014; UNHRC, 16/01/2015).

Reviewed: 27/01/2015

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**AFGHANISTAN** **CONFLICT, FLOODS, FOOD INSECURITY, LANDSLIDES, DISPLACEMENT**

**LATEST DEVELOPMENTS**

**29 January:** At least nine people were killed and 34 wounded in a suicide attack in Laghman province (AFP).

**KEY CONCERNS**

- 9,617 civilians killed or injured January–November 2014 (UNAMA, 19/12/2014). At 15 November, 19,469 security incidents, a 10% increase compared to the same period in 2013 (UN, 09/12/2014).


- Nearly 286,750 Pakistani refugees in Khost and Paktika in need of health, WASH, food, shelter, and livelihood support (UNHCR, 14/01/2015).

- 517,000 children under five suffer from SAM, and eight provinces show GAM rates
above 15%, breaching the emergency threshold (UNICEF, 29/01/2015, OCHA, 28/10/2014).

**OVERVIEW**

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 the outcome of the 2014 presidential election will have implications for the country’s internal cohesion. The security environment is highly volatile and expected to deteriorate as international troops gradually withdraw from the country.

### Political Context

On 29 September, Ashraf Ghani and Abdullah Abdullah were sworn in as Afghanistan’s new President and Prime Minister, respectively (Reuters, 29/09/2014). The pair were rival presidential candidates in disputed elections (AFP, 26/09/2014).

**Peace Talks with the Taliban**

Although various official and informal sources have evoked renewed preliminary contacts between Kabul and the Taliban, no substantial talks have yet been launched. Peace talks with the Afghan Taliban have been stalled since mid-2013.

### Security Context

Harassment and intimidation by anti-government forces, inter-tribal disputes, cross-border shelling in Kunar province, and clashes between state and anti-government forces in Farah, Nangarhar, Ghazni, Badghis, Maidan Wardak, Parwan, Kunduz, Logar, Helmand, and Kapisa provinces were major causes of insecurity and displacement in 2014 (UNHCR, 30/09/2014). Conflict between state and anti-government elements was ongoing in Kunar, Maidan Wardak, Helmand and Kapisa provinces end December (UNHCR, 31/12/2014).

9,617 civilians were killed or injured by conflict between January and November 2014; 3,188 were killed, the highest annual toll since 2009. Children civilian casualties increased 33% compared to 2013, with casualties among women up 12% (UNAMA, 19/12/2014).

### International Military Presence

NATO formally ended its combat mission in Afghanistan on 31 December, 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. The move will test the readiness of 350,000 Afghan forces to deal with intensified Taliban attacks (Reuters, 01/01/2015).

### Taliban

The Taliban claimed victory against NATO as it ended its combat mission, 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 intensified attacks.

### Conflict Developments and Incidents

**Kabul:** A suicide attack targeting an EU police vehicle killed at least one passer-by on 5 January (AFP, 05/01/2015). The capital had been hit by at least 12 suicide attacks over 1 November – 13 December 2014, mainly targeting foreigners (AFP, 13/12/2014).

**Helmand:** Shelling in Sangin on 1 January killed 25 civilians and injured a further 45 (UN, 01/01/2015). A Taliban attack on 17 December killed six people, including three police, and injured seven (AFP, 17/12/2014).

**Kunar:** Clashes involving the Taliban, Afghan militants and ANSF in Dangam district over three weeks in December killed five civilians and injured eleven (OCHA, 31/12/2014).

**Nangarhar:** Six people were killed by an IED explosion in Nangarhar on 17 January (UNAMA, 18/01/2015). Gunmen killed a police officer and two civilians, and wounded seven others in Nangarhar on 31 December (Radio Liberty, 31/12/2014).

**Other incidents:** At least nine people were killed and 34 wounded in a suicide attack on 29 January in Laghman province (AFP, 29/01/2015). An explosion in Jaghuri district in Ghazni killed eight and injured two on 20 January (AFP, 20/01/2015).

A suicide attack in Yahya Khail district of Paktika province on 23 November killed 57 civilians and injured 60, the country’s deadliest single attack since 2011 (AFP, 24/11/2014).

### 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

Lack of access to verify displacement and respond to immediate needs of IDPs continues to be a significant challenge (UNHCR, 31/12/2014).

Movement restrictions are increasingly being applied to aid workers. Access continues to present challenges to humanitarian actors in Helmand and in the eastern region, particularly in Kunar and Nangarhar (OCHA, 31/10/2014). Road closures between Lashkar Gah and Sangin in Helmand hamper efforts to transport wounded from the districts to the provincial hospitals (OCHA, 31/12/2014).

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

The Mine Action Programme in Afghanistan was directly affected by 37 incidents that resulted in 34 deaths among its personnel and 27 injuries in 2014, including 12 mine clearance workers killed in a Taliban attack in Helmand in December (UN, 15/01/2015). There were 293 incidents against aid workers in 2014 (OCHA, 31/12/2014, 30/11/2014).

Disasters

Around 117,280 people were affected by natural hazards in 2014, mainly floods and heavy rainfall in northern and central Afghanistan (IOM, 14/01/2015).

Displacement

IDPs

At end December, there were 805,400 profiled IDPs in Afghanistan, mainly in southern, western, and eastern areas; 156,200 of these were displaced by conflict in 2014 (UNHCR, 31/12/2014). In December, 6,120 IDPs were displaced from Kapisa to Kabul, 3,556 were displaced in Ghazni, 2,209 in Badghis, including from Ghor province, 2,024 in Kunar and 1,930 in Farah, an increase on November numbers; priority needs are for food, NFI, winterisation assistance, and cash grants (UNHCR, 31/12/2014).

About 73,000 IDPs were living in urban areas in Kabul, Hiraat, Mazar-e-Sharif and in settlements outside Hiraat early November (OCHA, 06/11/2014). Priority needs are for food and NFI, shelter, cash, and livelihood opportunities (UNHCR, 30/09/2014). IDPs are particularly impacted by the severe winter temperatures (UN, 07/01/2015). In November, people began leaving IDP camps where shelters are adequate for winter (FEWSNET, 01/11/2014). Most IDPs in conflict-affected areas are with host families, in rented accommodation or in emergency shelters.

Refugees in Afghanistan

Displacement from Pakistan to Afghanistan’s Khost and Paktika provinces has continued since mid-June. At 14 January, these provinces were hosting nearly 286,750 refugees (40,012 families) from Pakistan (UNHCR, 14/01/2015). 281,180 were in need of assistance at 31 December (FEWSNET, 31/12/2014). More than 1,200 new families reportedly arrived in Matun and Alisher districts in Khost early January (UNHCR, 14/01/2015).

Gulan camp in Khost hosts around 6,400 families, but more than 80% of refugees live in host communities, which are often remote and difficult to access, and stretched beyond capacity (UNHCR, 14/01/2015; 03/12/2014). Gurboz district in Khost and Bermei in Paktika have the highest number of refugees, with 11,410 and 10,215 families, respectively.

Health, WASH, food, shelter, and mine clearance are priorities; additional needs include winterisation, education, and livelihood support (UNHCR, 02/10/2014). Host communities’ resilience is expected to decrease over winter months as resources are exhausted and available shelter is limited (UNHCR, 23/10/2014). An additional 600,000 Baloch refugees who have fled insurgency activities in Pakistan since 1986 are living in precarious conditions in Afghanistan, notably in Nimroz (AAN, 31/12/2014).

Kabul: As of 11 December, 40,629 refugees were in 52 informal settlements in the capital (OCHA, 17/12/2014). The most populated are Charahi Qamber (7,436 individuals), Chamani Babrak (3,429) and Puli Campany (3,652) (OCHA, 17/12/2014).

Returnees

Around 7,700 Afghans have been reported to have returned to Khost, Paktika, Kabul, and Nangarhar provinces from Pakistan’s North Waziristan since fighting broke out in June 2014 (IOM, 21/01/2015).

At 30 September, 16,266 Afghan refugees had voluntarily repatriated in 2014, a 57% decrease on 2013, partly due to the extension of Proof of Registration cards in Pakistan until 31 December 2015 and security concerns in Afghanistan. 32% returned to northern and northeastern regions, 27.6% to central regions and 13.5% to eastern regions (UNHCR, 30/11/2014). Returnees are in need of income-generating activities, vocational training, and technical education (IMC, 31/08/2014).

Afghan Refugees in Neighbouring Countries

As of 30 September, 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 (USAID/Government, 01/02/2015). Most areas in Afghanistan are expected to face Minimal (IPC Phase 1) food security levels through at least March, as the majority of households have been able to stock adequate food for the winter and lean season.

Displaced households or otherwise affected by conflict and natural disasters will continue to require assistance (FEWSNET, 31/12/2014). In Badakhshan, 32% of the population was in Emergency (154,680) (IPC Phase 4) and 24% in Crisis (114,977) (IPC Phase 3) at end November (FEWSNET, 30/11/2014). IDPs inaccessible to humanitarian agencies, particularly in insecure districts in Helmand, are in Crisis, having lost much of their access to income and not receiving assistance (FEWSNET, 01/11/2014). Pakistani refugees in Khost and Paktika provinces, as well as hosting families, are expected to be Stressed (IPC Phase 2) until March, but only thanks to continued humanitarian assistance (FEWSNET, 31/12/2014). Households in Badghis province will be Stressed through March 2015 at least, due to a below-average 2014 harvest. Those who have been unable to stock adequate food for the winter and lean season may enter Crisis from January to March as the winter reduces market access (FEWSNET, 31/12/2014).
Due to a funding shortfall, WFP has been able to pre-position only 35% of food assistance for an estimated 830,000 people ahead of winter (OCHA, 31/12/2014). 54 districts in central Afghanistan will be impossible to access in winter, affecting around 750,000 conflict-displaced WFP beneficiaries (OCHA, 15/10/2014).

**Agriculture and Markets**

Wheat grain and flour prices in Afghanistan have increased 17% on average due to decreased flow of imported food commodities during the prolonged presidential election dispute (FEWSNET, 01/11/2014). Conflict in Helmand in 2014 hampered farmers’ ability to harvest their crops (FEWSNET, 01/11/2014).

**Livelihoods**

Political uncertainty 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 incomes (FEWSNET, 01/12/2014). Opium poppy cultivation in Afghanistan has risen by 7%, from 209,000 hectares in 2013 to 224,000 hectares in 2014 (UN, 12/11/2014).

**Health and Nutrition**

The number of people in need of access to health services has increased from 3.3 to 5.4 million (OCHA).

Pneumonia and acute respiratory infections are major concerns during the winter season. Access to health facilities may also be hampered by winter weather (WHO, 03/11/2014).

Conflict is causing widespread disruption to health services (WHO 24/07/2014). 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).

**Nutrition**

According to the National Nutrition Survey, 517,596 children suffer from SAM (UNICEF, 21/01/2015). Provinces in need of attention are Uruzgan, Nangarhar, Nuristan, Khost, Paktia, Wardak, Kunar, and Laghman, where GAM rates are breaching the emergency threshold of 15% (National Nutrition Survey, OCHA 31/07/2014).

Less than 20% of children with SAM and MAM received the treatment they needed in 2014 (OCHA, 25/11/2014). An estimated 45% of all child deaths in refugee and IDP camps are linked to malnutrition (UNICEF, 21/01/2015).

**Polio**

28 polio cases were confirmed in 2014, mostly in conflict-affected areas, compared to 14 in 2013 (Global Polio Eradication Initiative, 14/01/2015). Extensive cross-border movement is a major challenge. Afghan and Pakistani authorities agreed in July to cooperate in an anti-polio campaign in their border areas (DAWN, UNICEF 12/07/2014).

**WASH**

1.9 million Afghans are in need of better access to safe WASH facilities (UNICEF, 21/01/2015). Sanitation, water quality, and hygiene remain public health concerns in Khost and Paktika (WHO, 03/11/2014). Additional latrines are needed in Gulan camp (UNHCR, 08/01/2015).

**Shelter and NFIs**

Two million people are living higher than 2,000m in Afghanistan and exposed to extreme winter conditions, including 244,200 new refugees in Khost and Paktika, 32,000 displaced in Kabul informal settlements and 2,300 recently displaced by conflict. 423,300 children under five, 253,920 people over 55, 7,000 in need of shelter and 544,000 economically vulnerable living in hard-to-reach areas are also vulnerable (OCHA, 31/10/2014). 29,600 people will be facing winter without adequate shelter (OCHA, 25/11/2014). As of October, 3,805 houses remained completely destroyed in the north by floods earlier in the year (OCHA, 15/10/2014).

**Education**

Educational facilities in Khost are overstretched, with 344 schools employing 6,000 teachers and catering for around 360,000 children. There are 50,000 school-aged refugee children in Khost (Institute for War and Peace Reporting, 05/11/2014).

**Protection**

**Gender and Gender-based Violence**

There are reports of possible increased domestic violence as a result of camp conditions (UNHCR, 08/01/2015).

**Child Protection**

The Afghan national and local police and three armed groups (Taliban, Haqqani Network, and Hezb-e-Islami) have been listed for recruitment and use of children. The Taliban has been listed for attacks on schools and hospitals (Watchlist on Children and Armed Conflict 02/06/2014).

**Violence against Journalists**

There were 129 incidents of violence against Afghan journalists in 2014, resulting in eight deaths, a 69% increase in incidents on 2013. The increase in cases follows international troops’ withdrawal and a tense political situation after contested presidential elections (International Media Support, 15/01/2015).
IRAQ
CONFLICT, INTERNAL UNREST, DISPLACEMENT

LATEST DEVELOPMENTS

30–31 January: Three attacks in central Baghdad and Al Nikhaib in Anbar killed 14, including a tribal leader, and injured 36 (ISW, AFP).

29–31 January: IS launched an attack on Kirkuk city. Peshmerga forces, supported by coalition airstrikes, repelled the offensive. Sporadic fighting was continuing in some areas in the southwest of the governorate on 31 January (OCHA).

28 January: ISF and supporting forces reportedly recaptured Juba village in Anbar, north of al Baghdadi subdistrict (ISW).

27 January: The humanitarian situation for IDPs in Najaf, Kerbala, Babel, Qadissiya, and Wassit is critical. Significant food, WASH, and livelihood needs are reported (WFP, REACH).

27 January: Unidentified gunmen reportedly killed 70 people in the village of Barwana in Muqdadiyah, Diyala (ISW).

26 January: All major airlines have suspended flights to Baghdad international airport until at least 5 February, after a bullet hit a civilian aircraft at the airport (Reuters).

KEY CONCERNS

- Almost 1,400 deaths were recorded by UNAMI in January, including at least 790 civilians. Approximately 12,000 people were killed in 2014, corresponding to the worst levels of violence since 2006–2007 (UNAMI, 01/02/2015, 01/01/2015).

- An estimated 5.2 million people required humanitarian assistance in September 2014; it can be assumed that this number has increased.

- 2.2 million people are beyond the reach of aid agencies (UN, 11/2014). Access is highly constrained in Anbar, Salah al Din, and Ninewa (UNHCR, 10/2014).

- Over 2.17 million IDPs have been identified in 2,282 sites (IOM, 15/01/2015).

- There are 235,563 Syrian registered refugees in Iraq; over 40% are children (UNHCR, 15/01/2014).

- Protection is a key concern, particularly in areas directly affected by conflict and under IS control. Access to adequate winter shelter, kerosene for cooking and heating and NFIs is also required.

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 with four massive waves of internal displacement in 2014: Anbar in January, Mosul in June, Sinjar in August and Hit in October. 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 Haydar al Abadi, and formed at the start of September, represents the first step towards a longer-term solution to the present crisis.

Kurdistan Region of Iraq (KR-I)

Masoud Barzani’s Kurdistan Democratic Party (KDP) and the Patriotic Union of Kurdistan 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. Relations with Baghdad have long been tense, but in mid-November, Baghdad and Erbil reached a budget agreement, following a long-standing dispute (UN 02/12/2014).

Security Context

Around 1,400 people were killed in acts of terrorism and violence in January, including 790 civilians (UNAMI, 01/02/2015). Although hard to verify, particularly in IS-controlled areas, around 12,000 people were killed and more than 23,000 injured in Iraq in 2014, in the worst violence since 2006–2007 (UNAMI, 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. Its chief, Abu Bakr al Baghdadi, was declared caliph and leader for Muslims worldwide. IS has taken over large areas of northern and eastern Syria, as well as parts of northern and central Iraq. In September, IS had around 20,000–31,500 fighters in Iraq and Syria (BBC, 15/09/2014). Since then, the group has suffered significant losses, while attracting an unknown number of additional fighters. Its current capacity is unknown. The group has been selling crude oil and gasoline to finance its operations.
The Kurdish Peshmerga, supported by Kurdish fighters from Syria and Turkey, are emerged in a counter offense to reclaim areas lost to IS. Peshmerga and Iraqi Security Forces (ISF) offensives are backed by coalition aerial bombardments and the Kurdish fighters receive support in the form of training and equipment from multiple countries, including the United States (AFP).

Government Forces

The ISF are involved in offensives in Baghdad, Nineawa, Diyala, Anbar, and Salah al Din governorates. 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 against IS (Reuters, 22/01/2015).

International Involvement

In August, the United States started airstrikes on IS locations. On 15 September, 30 additional countries pledged to help Iraq fight IS militants. Several countries are providing training and arms to Iraqi and Kurdish Peshmerga forces; Iran has dispatched members of its elite Revolutionary Guards Corps and reportedly carried out airstrikes against IS in November, at the request of the Government of Iraq (The Economist, 03/01/2015; The Guardian, 05/01/2015, 04/12/2014, 13/12/2014). In January, international troops engaged in ground battles against IS for the first time (AFP, 19/12/2014, 26/01/2015, Al Jazeera, 20/01/2015, The Guardian 22/01/2015).

Conflict Developments

Since the beginning of December 2014, IS has carried out simultaneous attacks on multiple fronts, especially 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). Recently, however, ISF and Kurdish forces have regained territory in Dahuk, Ninewa, and Anbar. Peshmerga forces also continue fighting IS in Kirkuk, while ISF is engaged in active battles in the central governorates and around Baghdad. On 26 January, ISF recaptured all populated areas of Diyala governorate from IS (AFP, 26/01/2015).

Recent Incidents

Anbar: Clashes between IS and Iraqi forces have been ongoing in the southern part of the province since early January (ISW, 21/01/2015). A suicide attack killed six, including the leader of the powerful Aniza tribe, and wounded a further 14 in Al-Nikhaib on 31 January (AFP, 31/01/2015). On 28 January, ISF and supporting forces reportedly recaptured Juba, north of Al Baghdadi subdistrict in Anbar (ISW, 28/01/2015).

Baghdad has been the scene of near-daily bombings and shootings since the beginning of November. Two explosions in central Baghdad on 30 January killed eight and injured 22 (ISW, 30/01/2015).

Diyala: A battle to retake villages in Mansuriyah, Muqdadiyah, began on 23 January (AFP, 26/01/2015). On 27 January, unidentified gunmen reportedly killed 70 people in the village of Barwanah in Muqdadiyah (ISW, 28/01/2015).

Kirkuk: The overall security situation around and near Kirkuk city remains volatile. Late on 29 January, Peshmerga forces repelled an IS attack in three areas on its outskirts, supported by coalition airstrikes. Sporadic fighting was continuing in some areas in the southwest of the governorate on 31 January. IS fighters have seized a small crude oil station near Kirkuk city (Reuters, 31/01/2015, OCHA, 31/01/2015).

Ninewa: In order to control tribal resistance and safeguard Mosul, one of their most important areas of control, IS continues to carry out security operations south of the city. Peshmerga forces have reportedly taken control of a key road used by IS to supply Mosul and are thought to be preparing for a summer offensive to take Mosul (The Guardian, 22/01/2015, Reuters, 23/01/2015)

Salah al Din: ISF took control of Mutasim, south of Samarra. IS has attempted to reclaim strategic terrain around Baiji (ISW, 08/12/2014). Conflict was ongoing in January.

Other incidents: On 5 January, a suicide-bomber killed a Saudi general and two other soldiers on the border with Saudi Arabia, in the first such attack since Saudi Arabia joined the international coalition against IS (NYT, 05/01/2015).

Humanitarian Context and Needs

In September, 5.2 million people were estimated to be in need of some form of humanitarian assistance, including 1.8 million IDPs, 1.5 million in host communities and 1.7 million people in areas under control of armed groups.

Access

Around 2.2 million people are beyond the reach of aid agencies and require emergency assistance, 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 UXO also hinders access, as do long delays in obtaining clearance from Iraqi authorities (OCHA, 05/12/2014).

On 26 January, all major airlines suspended flights to Baghdad international airport after a bullet hit a civilian plane. This further hampers relief operations in and outside the city (Reuters, 27/01/2015).

Border crossings: 2,000 Syrians from Kobane were admitted to KR-I through the informal Ibrahim Khalil crossing in the week of 17 January, but most crossings, such as the Kurdish-controlled Peshkabour-Semalka crossing, remain generally closed. The IS-controlled Al Qa’im and Al Waleed crossings are technically open, but insecurity prevents most civilian movement. Insecurity at Rabia crossing prevents cross-border movement (Reuters, 23/11/2014, UNHCR, 15/01/2015).
Movement restrictions: Movement and access restrictions for IDPs have been reported, particularly in the centre and centre-north. Security forces at checkpoints have reportedly prevented some IDP families from accessing Khanaqin in Diyala. Access to and in KR-I remains challenging for certain IDPs, particularly those of Arab ethnicity, with authorities claiming security concerns. In Sulaymaniya, authorities are reportedly confiscating identification documents from certain groups of IDPs (OCHA, 23/01/2015, 09/01/2015).

Anbar remains largely inaccessible. Access to Al Obaidy refugee camp, hosting some 950 Syrian refugees, remains difficult. Thousands of people are trapped in siege-like conditions in Ramadi (UNHCR, 15/01/2015). Only one-fifth of Fallujah's population was left in the city in January. Severe restrictions on the mobility of people and goods are reported, with roads and bridges blocked due to insecurity and contaminated by UXO (REACH, 27/01/2015). The population of Al Baghdadi, which has been under IS siege since October, is reported to be suffering serious shortages of food and medicines (WFP, 11/01/2015).

Nineawa: Access to Mosul is impossible for humanitarian actors, while conditions have dramatically deteriorated since IS took control. Government support, in the form of public salaries and the Public Distribution System, under which Iraqi citizens are entitled to a monthly food ration, is largely unavailable (The Guardian, 27/10/2014).

Kirkuk: The ability of humanitarian partners to assess and respond to needs remains limited (OCHA, 05/12/2014).

Displacement

IDPs

At 15 January, around 2.17 million IDPs were identified across 2,282 sites: 212,550 (10%) are in 25 IDP camps, most in KR-I, 660,000 in critical shelter arrangements (31%), mostly in Dahuk and Anbar, and 1.3 million in private settings (59%) (CCCM, 02/02/2015, IOM, 29/01/2015). The overall number and wide geographical spread of the displaced population pose a major challenge to the assessment of needs and delivery of assistance (IOM, 02/12/2014).

Most IDPs reside in Dahuk (478,890); Anbar (386,900); Erbil (193,940); Kirkuk (238,780); Nineawa (162,130); Baghdad (134,350); Sulaymaniya (125,660); Diyala (98,200); and Najaf (81,530) governorates (IOM, 29/01/2015, 31/12/2014). The humanitarian situation for IDPs in Najaf, Kerbala, Babel, Qadissiya, and Wasit is critical. The majority live in public buildings or collective shelters, and have no financial resources. Little assistance has been delivered to date compared to northern areas, and significant food, WASH, and livelihood needs are reported (WFP, 27/01/2015; REACH, 27/01/2015).

Almost 70% of IDPs have left their governorate of origin. However, over 30% are forced to stay within the governorate, due to movement restrictions imposed by neighbouring governorates (IOM, 15/01/2014, Protection Cluster, 15/01/2015).

In Amiriya, Baghdad, 1,300 IDP families, including two-thirds living in abandoned or unfinished buildings or informal shelters are yet to receive assistance (OCHA, 30/01/2015).

In mid-January, fighting in Dhuluiya in Salah al Din displaced over 8,000 people (1,200 families). Priority needs are for food, shelter, medical care, NFIs, and education (UN, 14/01/2015).

In Erbil, over 800 families were displaced from Makhmur district to Debagah subdistrict in January, and are living in very challenging conditions in public spaces. Priority needs are for food, WASH, and medical facilities (OCHA, 16/01/2015).

IDP Returnees

70,000 of 118,000 IDPs from Zummar in Ninewa who were residing in Dahuk have reportedly returned to their areas of origin (OCHA, 09/01/2015). There are concerns over individuals returning to areas contaminated by ERW (OCHA, 28/11/2014).

Refugees in Iraq

At 15 January, 235,563 Syrian refugees were registered in Iraq. KR-I hosts an estimated 96%; another 4,521 are in Anbar governorate, 1,341 in Nineawa, and around 2,000 are elsewhere in Iraq (UNHCR, 15/01/2015).

In KR-I, around 97,700 refugees are in Dahuk, 102,140 in Erbil, and 27,732 in Sulaymaniya. 50,700 reside in Domiz refugee camp, 9,820 in Kawergosk, 9,400 in Darashakran, 4,450 in Gawilan, 5,780 in Qushtapa, and 5,640 in Arbat (UNHCR, 15/01/2015).

Syrian refugees from Kobane: At 15 January, over 27,700 Syrian refugees had arrived in KR-I since 25 September, mostly from Kobane. Arrivals from Kobane in 2015 have been transferred to Gawilan refugee camp in Dahuk. The majority of families have preferred to reside instead in host communities (UNHCR, 31/12/2014).

Returnees to Syria: Around 32,950 Syrian refugees returned to Syria in 2014 (UNHCR, 31/12/2014).

Non-Syrian Refugees

During the first quarter of 2014, the number of registered, protracted, non-Syrian refugees and asylum seekers was 39,480. There is no updated information on the number of non-Syrian refugees and asylum seekers.

Host Communities

An estimated 1.7 million people in host communities are affected (OCHA, 07/11/2014). Local authorities are overstretched and under-resourced.

Iraqi Refugees in Neighbouring Countries

At 1 November, there were about 38,500 Iraqi refugees in Jordan (UNHCR 01/11/2014). Lebanon hosts nearly 7,500 registered Iraqi refugees and a further 1,200 are awaiting registration (USAID 19/09/2014). Around 200,000 Iraqi refugees reside in Turkey, and over

Food Security

2.2 million people need urgent food assistance in Anbar, Kirkuk, Diyala, Ninewa, and Salah al Din governorates. In Anbar, over 30,000 families need assistance as food prices are high (WFP, 01/01/2015, OCHA, 09/01/2015). In Samara, Salah al-Din, recently arrived IDPs from the southern part of the governorate are in urgent need of food. Displaced populations also need food support in Qadissiya (OCHA, 30/01/2015).

Refugees: Most Syrian refugees require food assistance. There is no clear system for food assistance for non-camp refugees in Dahuk, and resources for refugees in urban settings are increasingly stretched (UNHCR 30/11/2014). Assistance is provided to those in camps (WFP, 07/12/2014). However, a reduction in WFP funds will temporarily reduce the food voucher value in Domiz, Darashakran, Akre, and Kawergosk camps from USD 28.20 to USD 19 per person per month from February; WFP will also begin targeted assistance. A further reduction is expected from April if funding shortfalls persist. Food parcels will be reduced in all camps across KR-I when current stocks are depleted (WFP 22/01/2015).

Agriculture

Over 80,000 families from host communities in Erbil and Dahuk and in conflict-affected and government-controlled areas are in need of agricultural inputs (OCHA, 19/12/2014). Many farmers and rural households have fled their fields, and the suspension of government services in these governorates means farmers have not yet received payment for wheat, creating cash flow problems. In Ninewa and Dahuk, farmers are selling livestock at lower prices (FAO, 11/2014).

In Ninewa governorate 500,000 out of 800,000 hectares of land is likely to be sown this winter and planting in Salah al-Din is forecast to be down by 30% (FAO, 11/12/2014). The disruption of markets and the restricted movement of food commodities remain a concern (FAO 11/12/2014; Government/Reuters, 11/2014). IS reportedly took more than a quarter of the overall national output in 2014 to Syria.

Livelihoods

The deterioration of the economic situation and the breakdown of state infrastructure in IS-controlled areas is increasing unemployment. IDPs fleeing the violence face difficulties accessing livelihood opportunities.

Refugees: During an assessment in April, almost half of camp-residing Syrian refugees reported no source of income or cash for their household. Refugees living in remote areas outside camps report even lower numbers (REACH, 14/09/2014). Access to income-generating opportunities has probably decreased since then due to the large influx of IDPs.

Health and Nutrition

5.2 million people need health support, and 2.2 million in inaccessible areas are extremely vulnerable to public health risks (WHO, 20/12/2014; 10/2014). Up to 50% of IDPs will need medical attention this winter.

Acute diarrhoea and acute respiratory infections are a leading cause of morbidity among refugees and IDPs. By mid-January, an increase in cases was reported in those areas covered by a disease surveillance system (WHO, 18/01/2015).

Availability of Healthcare

A number of health facilities have been damaged by bombing and shelling. Critical shortages of essential medicines, vaccines and supplies have become an increasing concern in urban health facilities, as supply routes from Baghdad are disrupted, and the embargo on cargo flights has stopped the medical supply chain (WHO, 09/2014). Staff shortages are an additional complication (WHO, 24/11/2014). Insecurity hampers access to healthcare in some locations. Other health needs include improved control of communicable diseases, better access to specialist services, and improved basic laboratory services in IDP camps.

The newly established Kebirto and Sharia IDP camps in Duhok have no functioning primary health centres (OCHA, 09/01/2015; WHO, 18/01/2015). Severe shortages of essential medicines and limited access to primary services in Salah al Din cause patients to seek services in Mosul, Ninewa, and Hawija, Kirkuk (WHO, 24/11/2014).

Mosul: Only two units of the main hospital remain functional, staffing levels are down to 30 –50%, and severe medicine shortages have been reported. Interruptions in the water supply have resulted in a rise of waterborne diseases (AFP, 12/2014). IS has reportedly executed ten doctors for refusing to treat wounded IS fighters, while evacuating main hospitals to treat injured IS members only (ISW, 01/12/2014).

Refugees

20% of the non-camp refugee population has difficulties accessing health services, due to cost and perceived availability (Government/WHO/UNHCR, 30/11/2014). Mental health and psychosocial care services in urban areas are limited in all governorates (UNHCR, 15/01/2015). In KR-I, health service delivery for refugees is challenged in areas with high concentrations of IDPs (WHO, 11/2014). The influx of under-vaccinated Syrian refugees into KR-I increases the health risks and compromises care for other patients (WHO, 11/2014).

Hepatitis A

A viral hepatitis outbreak was recorded on 23 October in Baharka IDP camp. 48 cases of hepatitis A have been reported from nine different sites since the outbreak was confirmed (WHO, 20/12/2014).

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).
1,127 measles cases were registered in 2014, in Ninewa, Salah al Din, Kirkuk and Diyala. Cases numbers in Kirkuk increased from five in 2013 to 258, and from 1 to 178 in Diyala; numbers in Ninewa halved (WHO, 11/2014).

**WASH**

Access to safe water is a critical problem in conflict-affected and armed groups’ controlled areas. Power cuts, fuel shortages, disruption to supply routes, and the seizure of municipal water facilities have left communities without safe water.

**IDPs: Urgent WASH support is required in Arbat camp in Sulaymaniya to prevent the spread of diseases from overcrowding, and in Baharka camp in Erbil, where facilities are reportedly hard to reach and people defecate in the open (OCHA, 30/01/2015). Support is also required to host 300 families settled on the Baghdad-Babylon road (OCHA, 30/01/2015). Critical water needs have been reported among IDPs in Salah al Din and Kerkaba (OCHA, 09/01/2015). In KR-I, 31% of over 85,000 IDPs across 880 sites reported that they do not have access to electricity or water (CCCM 11/2014).**

**Refugees: Newly arrived refugees from Kobane are in need of better access to WASH services (UNHCR, 15/01/2015). Almost 19,000 refugees in camps lack access to safe drinking water, latrines, and bathing facilities, while over 100,000 lack adequate waste disposal (UNHCR/UNICEF, 31/10/2014). In Darashakran camp, Erbil, drainage continues to be an issue; in Basirma camp, water quality also remains an issue (UNHCR, 15/01/2015). Pipes need repair in Gawilan camp, Ninewa, and in Al Qa’im district in Anbar (UNHCR, 30/11/2014).**

**Newly established camps lack coordination and support for some WASH-related activities (USAID, 19/12/2014).**

**Other affected communities: In central and southern governorates, lack of access to NFIs, due to insecurity preventing delivery, is affecting access to personal hygiene in Anbar and Salah al Din (OCHA, 11/2014). Inadequate water supply has been reported in western parts of Mosul, caused mainly by shortage of chlorine and broken pipelines (WHO, 20/12/2014).**

**Shelter and NFIs**

Overall, around 800,000 IDPs are in need of shelter assistance and specific winter support (UNHCR, 30/11/2014). **Some 36,000 people in Tooz, Salah al Din, and 2,500 families in Zakho in Dahuk, need shelter and NFI support (OCHA, 30/01/2015).**

**Most camp facilities and services do not meet the minimum Sphere standards, with many facing capacity overflow (REACH 31/10/2014). Shelter improvement is required for 6,000 tents in Domiz camp in Dahuk, hosting 30,000 people (Government/UNHCR, 30/11/2014). Ten camps are under construction for an additional capacity of 384,420 IDPs (CCCM, 02/02/2015).**

The large influx of Syrian refugees has exhausted the capacities of Basirma and Kawergosk camps. The cancellation of the construction of Qushtapa 2 camp aggravates refugee shelter limitations (UNHCR, 15/12/2014). **Arbat IDP camp in Sulaymaniya is overcapacity, with 2,700 families instead of the planned 1,000, including 700 families without tent; additional land for the camp is expected around March (OCHA, 30/01/2015).** Some IDPs in Debagah in Erbil have reportedly been pushed out of mosques, where they had been sheltering. In Khanaqin in Diyala, IDPs in Aiden camp will be relocated to Al Wand camp (OCHA, 23/01/2015).

**Winterisation**

Winter weather is compounding existing vulnerabilities in northern Iraq. A significant number of IDPs reside in sub-standard shelter and do not have access to sufficient winterised NFIs. Throughout Iraq, 200,000 children living in poor households still require blankets and hygiene supplies (UNICEF, 11/01/2015).

Kerosene for cooking and heating remains a major concern. An estimated 129,500 vulnerable IDP families remain in need access to fuel (OCHA, 23/01/2015)

**Education**

Over 720,000 displaced children are estimated to be of school age in Iraq, including 8% residing in camps (OCHA, 30/01/2015). Over 39,000 children are estimated to have been affected by the occupation of schools. Over 500 schools, including 376 in Anbar, are still occupied by IDPs, and an estimated 130 by the military. Educational materials are needed (UNICEF 31/10/2014; OCHA, 16/01/2015).

Around 252,000 school-aged displaced Iraqi children are in KR-I; 87,000 in camps, and 165,000 in non-camp settings. In Dahuk, displacement has increased the student population by 50% (OCHA 10/2014). In Sulaymaniya, there is no high school in Arbat camp (UNHCR, 15/12/2014).

**Refugees: The proportion of school-aged children in camps who are enrolled in schools ranges from 32% (Gawilan camp) to 75% (Qustapa camp) (UNHCR, 12/2014). The main challenges include: very limited capacity in schools with an Arabic curriculum; shortages of Syrian refugee teachers, and delays in the extension of their work permits; increasing schooling demand; the need for bridging classes for new arrivals; and insecurity, as in Al Obaidy camp in Anbar (UNHCR, 31/12/2014, 15/01/2015).**

**Protection**

Targeted attacks, abductions, forced conscription, human trafficking, and sexual assault, particularly from ethnic and religious minority groups, have been reported since early 2014 (UNAMI, 10/2014). Armed actors have also attacked civilian infrastructure, such as health facilities and schools (USAID, 10/2014).

Shariah courts have been established in IS-controlled territories, carrying out extreme punishments against men, women, and children (UN, 20/01/2015).

There are safety and welfare concerns for civilians recently liberated from IS-controlled areas, due to their perceived support for IS and affiliates.
Tensions between IDPs and their hosts have been reported, limiting IDP movement in some areas of the country (OCHA, 31/01/2015).

IDPs

Evictions are more and more frequently reported. 20 IDP families were reportedly evicted from their shelters in Kirkuk city beginning of January, while 170 received eviction warnings. Over 1,500 displaced families are also at risk of eviction in Erbil (OCHA, 30/01/2015).

An increase in detention of IDPs is reported, due to growing mistrust from local authorities and communities (OCHA, 19/12/2014).

Tensions have been reported in Kabarto IDP camp in Dahuk on 25 January, which led to tightened security measures in and around the camp (OCHA, 30/01/2015).

An estimated 10% of IDPs have no form of documentation, which is a prerequisite for obtaining residency permits.

Refugees: Lack of documentation is also of concern for Syrian refugees; residency in urban areas is reportedly being denied to Syrian asylum-seekers lacking original ID documents (Protection Cluster 15/01/2015, UNHCR, 30/11/2014).

Child Protection

Concerning issues include harmful practices targeting girls, such as female genital mutilation and early and forced marriage, child labour, and discrimination of children from ethnic minorities (OHCHR, 22/01/2015). IDP children are at increased risk of exploitation. There are no special services available for children with disabilities or special needs (ACTED, 08/2014).

IS is reportedly providing military training to schoolchildren in Syria and Iraq, using children as young as 13 as fighters (Radio Liberty, 10/2014). Reports suggest that IS forcefully recruited young men around Kirkuk and in Mosul for city security and frontline deployment in January (OCHA, 16/01/2015).

Overcrowding of Syrian refugee camps is causing protection concerns for unaccompanied minors, who are leaving camps prematurely (UNHCR, 31/10/2014). An October survey in Gawilan identified that 4% of refugee households had separated minors with them (REACH, 11/10/2014).

ERW and Mines

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). UXO has been found mixed with scrap metal close to Deraboun camp, Dahuk. IDP children collect scrap metal to generate income (OCHA, 28/11/2014).

Updated: 02/02/2015

OCCUPIED PALESTINIAN TERRITORIES COMPLEX, FOOD INSECURITY, INSECURITY

LATEST DEVELOPMENTS

31 January: 425,000 children are in need of specialised psychosocial support (UNICEF).

28 January: Protests took place outside the UN headquarters in Gaza following the announcement that repair and rental subsidies are to be halted due to a lack of funds (OCHA, 30/01/2015; AFP, 28/01/2015).

January: 90% of the 252 UNRWA schools in Gaza run on a double shift basis, and some on triple shifts (UNRWA, 29/01/2015).

KEY CONCERNS

- 1.81 million people need humanitarian assistance, over 50% are children (OCHA, 09/2014).
- 1.45 million people, or 33% of the people in the OPT, including 57% of people in Gaza, are estimated to be food insecure (WFP, 19/12/2014).
- 1.5 million people in the Gaza Strip have no or extremely restricted access to water (OCHA, 03/08/2014).
- 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.

OVERVIEW

The 50-day war with Israel in July–August 2014 caused high civilian casualties in Gaza and large-scale destruction. Movement and access restrictions are aggravating the situation. The number of attacks on Palestinians by Israeli settlers in the occupied West Bank is increasing; attacks by Israeli security forces have also increased.

Political Context

On 16 January, the International Criminal Court (ICC) launched a preliminary examination of the events of the 50-day war (ICC, 16/01/2015). This followed Palestine officially joining the ICC on 7 January. The United States and Israel opposed the move, citing that oPt is
not a sovereign state. From April, Palestinian officials will be able to launch war crimes complaints against Israel. Israel has frozen approximately USD 127 million in tax revenue due the Palestinian Authority, while the US has threatened to withhold USD 440 million in aid (AFP, 07/01/2015).

Israel has announced a series of measures affecting occupied territory since August 2014, beginning with the appropriation of some 400 hectares in the occupied West Bank, which an anti-settlement group termed the biggest in 30 years (Reuters, 31/08/2014). This was followed by approval for almost 4,000 new housing units in the West Bank and East Jerusalem (AFP, 05/09/2014; AFP, 01/10/2014; AFP, 27/10/2014).

The Palestinian reconciliation Government, made up of members of both Hamas and Fatah, convened its first cabinet session in October (UNICEF, 09/10/2014). The Government was sworn in before President Abbas in June, ending seven years of division (AFP, UN, 02/06/2014). It has a six-month mandate, but no formal announcement regarding the passing of the six months has been made (UNRWA, 14/12/2014).

Security Context

Gaza

There were 29 incidents involving Israeli forces opening fire into the Access Restricted Area (ARA) between 20 and 26 January; four Palestinians were injured (OCHA, 30/01/2015). The boundaries of the ARA have not yet been defined by Israeli authorities, increasing the risks to civilians (OCHA, 24/11/2014). On 20 December, Israel launched its first airstrike since the truce of 26 August, in response to rocket fire. No injuries were reported (OCHA, 22/12/2014).

On 23 January, Egyptian naval forces opened fire at a Palestinian boat accused of infiltrating Egyptian territorial waters, injuring one Palestinian (OCHA, 30/01/2015). A 17-year-old Palestinian was killed along the border by Egyptian military gunfire on 3 January. On 8 January, Egypt began doubling the width of the buffer zone along the Gaza border to 1km. The objective is to deter militants from crossing to Egypt (AFP, 08/01/2015).

Social Tensions

On 28 January, police intervened during a protest outside the UN headquarters in Gaza, following a statement that current funds have been exhausted, and many subsidies will be halted. Only USD 135 million out of USD 720 million requested for repairs and rental subsidies has been received (OCHA, 30/01/2015; AFP, 28/01/2015).

Operation Protective Edge

Israel launched Operation Protective Edge on 8 July, striking Gaza with intensive aerial bombing, aimed at ending cross-border rocket fire. Hamas and Israel agreed 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; OCHA, 04/09/2014). 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

Between 20 and 31 January, Israeli forces injured 33 Palestinians and killed one. The majority of injuries (17) occurred during clashes associated with the construction of the West Bank Barrier, or during search and arrest operations (OCHA, 19/01/2014: 30/01/2015; AFP, 31/01/2015). In 2014, 56 people were killed and 5,886 injured by Israeli forces.

Settler-related Violence

Three Israeli settler attacks were recorded between 20 and 26 January, each resulting in wounded Palestinians. Additionally, on 24 January an Israeli settler vehicle ran over a five-year-old boy in a hit-and-run incident (OCHA, 30/01/2015). On 3 January, 50 armed settlers tried to detain five Palestinians next to the settlement of Itamar near Nablus, causing further clashes (OCHA, 12/01/2015).

Over 20 to 26 January, four Palestinian attacks on Israeli settlers were reported, resulting in three injured Israelis. (OCHA, 30/01/2015). On 25 December, Palestinians attacked settlers with a Molotov cocktail near Azzun village (Qalqiliya), injuring one settler girl (OCHA, 29/12/2014).

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. The demolition of 590 structures displaced 1,177 people; 565 structures were demolished in 2013 (OCHA, 12/01/2015).

Humanitarian Context and Needs

Access

Donors have pledged over USD 5.4 billion, half of which will go towards rebuilding Gaza (Reuters, 12/10/2014; 14/10/2014). The Palestinian Authority estimates it will cost USD 7.8 billion to reconstruct bombed areas (ACT Alliance, 10/10/2014).

Border Restrictions

Border crossings continue to be highly restricted and closures in response to security incidents are frequent. The Rafah Crossing between Gaza and Egypt was closed for 207 days in 2014 (31/01/2015). 37,000 people are waiting to exist Gaza, 17,000 of whom are registered with the Border and Crossing Authority (OCHA, 29/12/2014). On 8 January, Erez crossing closed following a disagreement between Hamas and the Palestinian Authority and is only operating for medical patients, Israeli citizens, and other exceptional circumstances (Gisha, 12/01/2015).

Since October, approximately 3.9% of all materials needed for reconstruction have been delivered (Gisha, 19/01/2015).
Electricity, fuel and cooking gas supplies are running low in Gaza (UNICEF, 22/01/2015). On 21 January, the Gaza Power Plant shut down one of three operating turbines due to lack of fuel (OCHA, 30/01/2015).

Security Incidents Involving Aid Workers

Nine UNRWA staff members were killed in July and August (UNRWA, 03/08/2014).

Disasters

On 7 January, Storm Huda brought heavy snow to the West Bank and flooding in Gaza (Al Jazeera, 11/01/2015). The harsh winter conditions are linked to at least five deaths and nine injuries due to inadequate shelter (OCHA, 12/01/2015; UNICEF, 22/01/2015, UNRWA, 27/01/2015). Over 25 November–3 December, severe flooding blocked roads and forced around 50 families to evacuate their homes in Gaza City (OCHA, 03/12/2014). The Palestinian Authority declared a state of emergency across oPt (AFP, 08/01/2015).

Displacement

As of 9 January, 110,000 people remain displaced since the July–August conflict (Act Alliance, 09/01/2015). 17,913 IDPs are residing in collective shelters as of 28 December (UNICEF, 05/01/2015). With the approach of winter, IDPs’ living conditions continue to deteriorate, with many in need of additional humanitarian assistance (OCHA, 13/10/2014).

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). This is similar to food security levels prior to the July–August hostilities (UNRWA, FAO, WFP, Government, 12/08/2014).

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.

Agriculture

In 2014, 88 truckloads of selected agricultural produce were reported have been allowed to leave Gaza, the vast majority for international markets. In the first half of 2007, before the blockade, 5,007 truckloads of a wider range of goods were delivered to international markets and the West Bank (UNRWA, 20/11/2014).

Some 85% of Israel’s separation barrier runs inside the West Bank, rather than along the internationally recognised Green Line, cutting off Palestinians from 30% of their land (AFP, 29/10/2014).

Livelihoods

The majority of the Gaza population lost its productive assets in the July–August conflict. The livelihoods of 28,600 households, including farmers, breeders, herders and fishers have been severely affected or destroyed (Food Security Cluster, 28/08/2014). Losses to the farming sector are estimated at USD 450 million (Ministry of Agriculture cited by OCHA, 18/08/2014). Up to 720 fishers lost their livelihoods (Food Security Cluster, 28/08/2014). According to the Palestinian Federation of Industries, 419 businesses and workshops were damaged, including 128 completely destroyed (OCHA, 04/09/2014).

As of September, quarter of the Palestinian workforce was unemployed: 16% in the West Bank and 45% in Gaza (World Bank, 10/09/2014).

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 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 stocks of 118 (of 481) essential medicines were at zero (OCHA, 31/05/2014).

Child Health

425,000 children are in need of direct and specialised psychosocial support, including 373,000 children in the Gaza Strip (OCHA, 03/08/2014; UNICEF, 31/01/2015).

WASH

400,000 people in the Gaza Strip, including those still displaced, have no or reduced access to water supply and sanitation services (EWASH, 14/01/2015). Although extensive repairs have restored 70–80% of the water and sanitation network to pre-conflict conditions, significant constraints still impair the delivery of services (OCHA, 29/10/2014).

Some 30–50% of water storage capacity at the household level is damaged, putting particular strain on host families (ECHO, 02/10/2014). In addition, households without electricity and/or supplementary pumps cannot fill rooftop storage tanks when water is available (OCHA, 04/09/2014).

Gaza’s only water reserve is the coastal aquifer, which it shares with Israel and Egypt, and which is 55 million cubic metres; Gaza needs 190 million cubic metres every year, according to senior officials. The aquifer could be unusable by 2016 and the damage it has suffered may be irreversible by 2020 (AFP, 05/09/2014).

95% of groundwater in the Gaza Strip is unfit for human consumption, forcing residents to be reliant on aid for their water source (UNICEF, 22/01/2015). Only 50% of wastewater in Gaza is treated, and treatment is currently of low quality (World Bank, 10/09/2014).

Although solid waste is being collected in most areas, it is being left in temporary sites rather than dumped in designated landfills.

Shelter

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Although solid waste is being collected in most areas, it is being left in temporary sites rather than dumped in designated landfills.
With the onset of winter, 700,000 people are in need of shelter assistance, including emergency winterisation (OCHA 30/11/2014).

Approximately 124,000 housing units have been damaged, including 17,000 which were severely damaged or destroyed (AFP, 08/01/2015, Gisha, 19/01/2015). This is in addition to the pre-crisis housing deficit of 80,000 units (NRC, 11/10/2014). Winter conditions have further slowed reconstruction efforts (Al Jazeera, 11/01/2015).

In the West Bank and East Jerusalem, demolition of houses, step-work orders for houses and structures, as well as confiscation of building materials, pose critical challenges (OCHA, 03/12/2014).

Education

22 schools were completely destroyed and 118 schools damaged by the conflict. UNRWA has reported at least 75 damaged school buildings. Many higher education facilities, including the Islamic University in Gaza, were also damaged (OCHA, 04/09/2014). The education sector already had a shortage of almost 200 schools before the conflict (Gisha, 19/01/2015). 90% of the 252 UNRWA schools in Gaza run on a double shift basis, and some on triple shifts (UNRWA, 29/01/2015).

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 (OCHA, 12/01/2015).

Forcible Transfer

Israeli authorities continue to make eviction and demolition orders from an area designated as a ‘closed military zone’. 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. Two-thirds of communities reported facing settler violence during the past three years (OCHA, 23/09/2014).

Child Protection

3,436 children were injured in 2014; 54,000 were homeless. Up to 1,500 orphaned children will need sustained support (OCHA, 04/09/2014; UNICEF, 02/01/2015).

On 10 December, ten Palestinian children suffered excessive gas inhalation after Israeli troops fired teargas near the Ibrahimiyya School in Hebron during school hours (NRC, 25/12/2014). On 26 January, a 10-year-old boy was arrested in East Jerusalem. A 14-year-old girl from Ramallah has been in detention since 31 December, accused of stone-throwing (UNICEF, 31/01/2015). 182 children were imprisoned and prosecuted in the Israeli military court system in November, a 9.4% decrease on August figures (Defence for Children International, 06/11/2014).

Detention

At the end of August, 473 Palestinians were under administrative detention in Israel without trial, compared to 250 in June–July. It is the highest number since April 2009 (Israeli Information Center for Human Rights in the Occupied Territories, 07/10/2014).

Media Workers

At least four journalists and three media workers were killed while covering the conflict in July and August (Committee to Protect Journalists, 23/12/2014).

Mines and ERW

It is estimated that more than 1,900 ERW have yet to be secured (UNRWA, 23/09/2014). Over 2–8 December, four children and a pregnant woman were injured by unexploded ordnance (OCHA, 08/12/2014).

In 2014, ERW has killed 31 civilians and injured ten in Gaza. This figure includes 12 children, the highest number affected by ERW in the last six years (UNICEF, 23/10/2014; 27/10/2014).

Updated: 02/02/2015

SYRIA DISPLACEMENT, CIVIL WAR

LATEST DEVELOPMENTS

26 January: Russia-mediated peace talks began, including some members of the Syrian opposition, but not the National Coalition (AFP, 26/01/2015).

26 January: Kurdish forces now control 90% of the Kobane city area (SOHR, 26/01/2015).

13–15 January: Jabhat Al Nusra (JAN) fighters reportedly withdrew from the Beit Sahem neighborhood of southern Damascus following two weeks of anti-JAN demonstrations by local residents. Days later, government forces allowed an aid convoy to enter the neighbourhood and the adjacent Babbila neighbourhood (ISW, 20/01/2015).

KEY CONCERNS

- Over 200,000 deaths documented March 2011–December 2014, including over 63,000 civilians, almost 11,000 of whom were children (SOHR 12/2014). 2014 recorded the highest number of deaths, with 76,000 fatalities.

- 12.2 million people in need of humanitarian assistance inside Syria, including 5.6 million children (OCHA/UNICEF 12/2014). Winter aid is a priority (UNHCR 11/2014).

- 7.6 million IDPs (OCHA 28/12/2014).
- 4.8 million people live in hard-to-reach areas (OCHA 12/2014).

- 3,323,031 Syrians are registered or waiting to register as refugees outside Syria as of 10 December. Lebanon: 1,158,995; Turkey: 1,165,279; Jordan: 622,672; Iraq: 233,625; Egypt: 138,212 (UNHCR 05/01/2014). Children make up 51.6% of the refugee population.

- 711 of 1,921 primary health centres and more than one-third (37 of 92) public hospitals are out of service. 26 of 41 basic emergency obstetric care centres are reported non-functional (Syrian Ministry of Health/UNFPA 30/11/2014).

OVERVIEW

There were major changes in the Syrian conflict dynamics over 2014, both in terms of areas of control and fault lines.

The humanitarian situation continues to worsen. The conflict has killed over 200,000 people and caused large-scale displacement. More people are in camps than last year, and more non-displaced are in need of humanitarian assistance. The country has also experienced severe drought. Protection concerns are widespread. WASH and access to food are high priorities as well as access to health services. Humanitarian needs in areas under prolonged and ongoing sieges are particularly high as access to food, basic services, and livelihoods is obstructed.

Political Context

Russia-mediated peace talks began on 26 January, including some members of the Syrian opposition, but not the National Coalition (AFP, 26/01/2015). Previous attempts have failed. Local truces have mainly been short-term solutions for access, instead of becoming tools for a broader political solution and step towards peace talks. In November, UN Envoy Mistura led talks on the establishment of ‘freeze zones’ in Aleppo (UN/BBC 11/2014; SNAP 07/12/2014).

In June 2014, President Bashar al-Assad was elected for another seven years.

Security Context

Widespread conflict and high levels of violence continue, including indiscriminate aerial bombings by government forces and indiscriminate shelling by armed opposition (UNSC 21/11/2014). There are some 1,000 armed opposition groups fighting in Syria (BBC, 13/06/2013).

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. Aerial bombardment injured 40,000 in 2014 (SOHR, 05/01/2015). More than 200,000 people have died since fighting began in March 2011 (SOHR 02/12/2014).

Conflict Developments

Aleppo: IS has been clashing with Kurdish forces in the area of Kobane since September. Latest reports indicate that Kurdish forces now control 90% of the Kobane city area, although the IS offensive continues (SOHR, 05/01/2015; BBC, 16/01/2015; SOHR, 26/01/2015). According to the Syrian Observatory for Human Rights, more than 1,600 people have died in Kobane since the beginning of the fighting in September 2014, more than 1,000 of them IS fighters (SOHR, 16/01/2015).

In Aleppo city, opposition forces have launched an incremental counteroffensive that has reversed government forces’ most recent gains (OCHA, 02/01/2015). Five major military 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). Opposition groups including JAN have also sustained their offensive on Nubul and Zahra villages, held by the Government (OCHA, 05/12/2014). Government forces had regained control of several areas north of Aleppo in 2014.

Al Hasakeh: Kurdish YPG fighters seized several government positions in northern Al Hasakeh city in mid-January. Government forces shelled YPG-held neighbourhoods, with the YPG alleging that regime forces also used cluster munitions (ISW, 20/01/2015).

Deir-ez-Zor: IS made minor advances in government-controlled areas of Deir-ez-Zor city over 5–16 January; its advance on Deir-ez-Zor airport has slowed after a campaign of several months (OCHA, 16/01/2015, SOHR, 12/2014; OCHA, 05/12/2014; OCHA, 19/12/2014).

Idleb: Since the middle of 2014, JAN has seized towns and extended its influence along the border with Turkey. In mid-December, JAN seized two key military posts, thereby gaining control of most of the governorate (AFP, 16/12/2014). 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 and JAN consider the south, especially Dar’a, as a main stronghold, away from the threat of IS (SNAP 07/11/2014). Central governorates have witnessed an increase in airstrikes and the use of barrel bombs, especially Rural Damascus. The Government controls most of Rural Damascus, Homs, Hama, Tartous, Lattakia and As-Sweida governorates. Over 13–15 January, JAN fighters reportedly withdrew from the southern Beit Sahem neighbourhood of Damascus city following two weeks of anti-JAN demonstrations by local residents (ISW, 20/01/2015).

Humanitarian Context and Needs

Some 12.2 million people are in urgent need of humanitarian assistance inside Syria, including 5.6 million children. Winter aid is a priority (OCHA/UNICEF/UNHCR 11/2014). 11 people in opposition-held areas, including seven children, have died from the extreme winter conditions (AFP, 11/01/2015).

Over two million people need humanitarian assistance in Aleppo governorate; food and water assistance are the highest priorities. 1.2 million are in need in Idleb, 830,000 in Ar-Raqqa, 523,000 in Deir-ez-Zor, 504,000 in Al Hasakeh, 483,000 in Hama, 381,000 in Dar’a, 347,000 in Lattakia, 108,000 in Rural Damascus, and 56,000 in Quneitra. In general, needs are more severe in rural areas, specifically in the food, health, water, and NFI sectors (MSNA 30/10/2014).

The UN’s response efforts are chronically underfunded: only 47% of the Syria component of OCHA’s appeal is covered. Only 59% of the 2014 regional component has been funded (Financial Tracking Service, 06/01/2015).

Syria also 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.

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, undercutting 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.

After JAN fighters reportedly withdrew from the southern Beit Sahem neighbourhood of Damascus city following two weeks of anti-JAN demonstrations by local residents, government forces allowed an aid convoy to enter Beit Sahem and neighbouring Babbila neighbourhood in mid-January (ISW, 20/01/2015).

On 14 January, a ten-day ceasefire was announced between regime and opposition forces in the besieged al-Wa’er neighbourhood of Homs city, allowing access for aid delivery to al-Wa’er. However, SOHR reported shelling of the area by pro-regime elements despite the agreement (ISW, 20/01/2015).

Security Incidents Involving Aid Workers

69 humanitarian workers have been killed in the conflict since March 2011. Twenty-seven United Nations staff (including 24 UNRWA staff) have been detained or are missing (UNSC 21/11/2014).

Trapped and Hard-to-Reach Communities

212,000 people remain besieged at the end of 2014: in Nubul and Al Zahra in rural Aleppo; Eastern Ghouta, Darya, and Moadanmiah in Rural Damascus; the Old City in Homs; and Yarmouk camp in Damascus. This is a decrease from 241,000 in mid-October 2014 (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).

Aleppo: Aid delivery to Aleppo is rarely possible (UN, 10/2014). Approximately 300,000 civilians would be affected if the Government successfully surrounds the east of Aleppo city, as all routes would require actors to cross front lines (OCHA, 07/11/2014).

Ar-Raqqa: Volatile security conditions and the presence of armed groups along access routes have prevented deliveries since July (WFP, 11/11/2014).

Damascus: Since mid-September, there has been a significant decline in the quantity of relief items delivered to 18,000 civilians in Yarmouk Camp (UNRWA 07/12/2014; 30/12/2014). On 30 December, state news reported that around 217 people had been given...
safe passage out of the area by the Syrian army (AFP, 30/12/2014). Food, healthcare, NFIs, and shelter need are unmet, as persistent armed violence has prevented any successful UNRWA aid distribution between 6 December 2014 and 25 January 2015 (UNRWA, 25/01/2015).

**Dar’a:** Intensified conflict has prevented deliveries to rural areas (WFP, 11/11/2014).

**Deir-ez-Zor:** Volatile security conditions and the presence of armed groups along access routes have prevented deliveries since May (WFP, 11/11/2014). IS restricts access to government-controlled areas, affecting approximately 150,000 civilians (UNSC, 21/11/2014).

**Hama:** Since the end of October, the deterioration of the security situation and numerous checkpoints in rural areas has slowed deliveries (WFP, 11/11/2014).

**Homs:** Under partial siege for the past 12 months, 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). On 14 January, a ten-day ceasefire was announced between regime and opposition forces in the besieged al-Wa’er neighbourhood of Homs city.

**Idleb:** 1.3 million people have been affected by cuts in electricity supply, following a JAN offensive on Idleb city (UNSC 21/11/2014). JAN’s seizure of two strategic military bases opens up large stretches of the highway for humanitarian access, and has reportedly led to the return of many refugees and IDPs (OCHA, 19/12/2014).

**Quneitra:** Intensified conflict prevented deliveries to rural areas (WFP 11/11/2014).

**Border Restrictions**

Border closures or tight restrictions by neighbouring countries are dissuading people in life-threatening situations from seeking refuge abroad. Additionally, humanitarians have voiced concern over rules inconsistently applied at border crossings. Palestinian refugees are particularly affected by closed borders and forced returns from neighbouring countries (UN 24/11/2014).

**Turkey:** At the two fully open crossing-points between Turkey and Syria, as of 1 January 2015, Syrian refugees crossing back and forth will only be able to spend three out of every six months in Turkey or face fines. Those without a valid passport or travel document will be turned back. The new regulations may hamper the movement of local aid staff and leave them stranded in Syria (IRIN, 14/01/2015).

As of 10 January, the UN Security Council decided that UN agencies and humanitarian partners could continue until 10 January 2016 with notification to the Syrian authorities, to use the border crossings at Bab al-Salam, Bab al-Hawa, Al Yarubiyah and Al-Ramtha in addition to those already in use as originally authorized by resolution 2165 (2014) (OCHA, 16/01/2015).

**Jordan:** Five registered refugees have been fired at by Jordanian border patrols; one was wounded, the other four were deported (HRW 24/11/2014).

**Critical Infrastructure**

Due to fighting around Kobane, the city has been cut off from the national power network for 11 months. For 9 months, the water supply from the station in the southern Shaioukh district has also been cut off (Guardian/Bihar 10/2014).

**Displacement**

**IDPs**

There are 7.6 million IDPs within Syria; 50% are children (OCHA 25/11/2014). Between January and September, the number living in IDP camps grew by 56%, from 108,000 to approximately 165,000. IDPs generally account for 10–35% of the population, although in Idleb that figure is 40% (WFP 11/11/2014; MSNA 30/10/2014).

Displacement in September–November was mostly due to intensified conflict and most reported in Aleppo, Dar’a, Hama, and Lattakia, followed by Ar-Raqqa, Deir-ez-Zor, and Al-Hasakeh. Lattakia (80%), Ar-Raqqa (60%) saw the biggest increases in population (WFP 11/11/2014; MSNA 30/10/2014).

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).

**Refugees**

**Palestinian refugees in Syria:** Over 50% – or 280,000 – of approximately 540,000 Palestine refugees registered with UNRWA in Syria have been displaced within Syria (UNRWA 28/10/2014).

There are an estimated 29,000 Iraqi refugees in Syria (UNHCR 25/11/2014).

**Syrian Refugees in Neighbouring Countries**

3,800,109 Syrians are registered or waiting to register as refugees outside Syria as of 18 January (UNHCR, 18/01/2014).

100,000 new Syrian refugees were registered in neighbouring countries in the first nine months of 2014 – down from 150,000 per month in 2013 (UNHCR 09/2014). In October, only 18,453 new refugees were registered by UNHCR (NRC/IRC, 12/11/2014).

**Turkey:** 1,622,839 refugees, almost 892,000 of whom are outside camps (UNHCR, 31/12/2014). The Government suspended pre-registration in October to focus on the full registration process: as of 11 December, at least 52,000 Syrian refugees have been biometrically registered (UNHCR, 05/01/2014). The rate of full biometric registration is reportedly 40 people a day (UNHCR, 20/11/2014).

**Lebanon:** 1,160,468 refugees (UNHCR 08/01/2015). Lebanon’s borders have been closed to Syrian refugees since 24 October. Since January, Syrians wanting to enter Lebanon
must apply for a visa. It is unclear what this will mean for Syrians in Lebanon not registered as refugees (BBC, 05/01/2015).

**Jordan:** 622,405 refugees (UNHCR 18/01/2015), with an average of 100–150 people returning to Syria per day (IFRC, 18/12/2014). No entries through informal border crossings have been registered since 1 November (23/11/2014). Between 3,000 and 4,000 people are camped on the Syrian side of the border. UNHCR is trying to broker their access with authorities.

**Egypt:** 136,717 refugees (UNHCR 12/01/2015). 150 have been deported to Syria, Lebanon, and Turkey. More have received deportation orders (Amnesty International 14/11/2014).

**Iraq:** 233,625 refugees (UNHCR 31/12/2014).

**Palestinians:** 45,000 have been recorded with UNRWA in Lebanon, 14,642 in Jordan and 860 in Gaza. Around 4,000 are reportedly in Egypt (UNRWA 28/10/2014).

**Food Security**

Almost 4.5 million are in need of food assistance. In many areas of Syria, food security is deteriorating because of continuing civil war and fragmentation, international sanctions, disrupted food production, and hikes in domestic fuel and food prices (WFP, 19/12/2014). Food aid was resumed in mid-December, having been suspended on 1 December following a funding crisis (WFP, 09/12/2014, WFP/UNHCR 01/12/2014). The food aid basket for 4.2 million Syrians had already been cut by 40% in October (AFP, 10/2014). Food dispatches continue to be hindered by worsening security, particularly in the northeast and south (WFP 25/11/2014).

IDPs outside formal camps are most susceptible to food shortages. The most acute needs are reported from Aleppo, Dar’a, Quneitra, and Rural Damascus, including 600,000 besieged civilians in Eastern Ghouta (MSNA, 10/2014). Bread shortages are threatening food security in many areas, particularly in the north. Government subsidies have brought down inflation in some parts of the country. However, in parts of opposition-held Dar’a, Deir-ez-Zor, and Rural Damascus, prices have risen over 75% in just over three months (WFP, 10/2014). It is expected that 60% of Syrians will not be able to secure their own food requirements in 2015 (WHO, 10/2014).

**Agriculture and Markets**

The cereal belt of Syria includes Ar-Raqqa, Aleppo, Al-Hasakeh, Deir-Ez-Zor, Hama, and Idlib, and produces more than 80% of the country’s wheat. Drought and conflict have both impacted production. According to FAO estimates, Syria’s overall cereal production in 2014 was approximately 18% below total production in 2013 and 38% below the five-year average (2009–13) (FAO, 14/10/2014).

**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). The GDP has set the economy back more than three decades. Gross domestic product has contracted by more than 40%, and exports have fallen by 90%. Oil production has dropped by 96% (World Bank/IFC/World Bank, 02/12/2014).

**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). 43% of areas with frequent fighting, and 37% with sporadic fighting, have reported acute health needs (MSNA, 30/10/2014). The winter is likely to have a large impact on vulnerable people – particularly the chronically ill and children, and those residing in the mountainous regions in northern Syria (WHO, 31/10/2014).

Tuberculosis, typhoid, and scabies have become endemic in northern Syria (AFP, 28/11/2014). In opposition-held Aleppo, cholera, typhoid, scabies and tuberculosis are spreading, according to local doctors (Reuters, 08/01/2015). WHO has not been able to deliver medical aid to the opposition-held parts of Aleppo, despite a government promise to allow access end of December (Reuters, 08/01/2015). In Deir-ez-Zor governorate, contamination of the Euphrates River, violence, damaged water infrastructure, overcrowded shelters, and frequent power cuts have contributed to a rise in typhoid and hepatitis A. 76% of typhoid cases between January and mid-July 2014 were reported from Deir-ez-Zor (PHR, 10/2014).

**Capacity**

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 to the increase in the number of injured – averaging 25,000 each month – combined with a lack of (female) medical staff, severe supply shortages, and frequent power cuts (PHR, 10/2014).

711 of 1,921 primary health centres and more than one-third (37 of 92) public hospitals are out of service (Syrian Ministry of Health/UNFPA, 11/2014). Five governorates (Aleppo, Rural Damascus, Homs, Dar’a, and Deir-er-Zor) have the highest number of non-functional public hospitals. Local drug production has fallen by 70% (WHO, 10/2014).

**Attacks on Health Workers and Facilities**

Between March 2011 and August 2014, 560 medical personnel had reportedly been killed, mostly in targeted killings (PHR, 10/2014). In the same period, PHR documented 195 attacks on 155 medical facilities. Of these, 176 were committed by government forces, 13 by non-state armed groups, and six by unknown forces (PHR, 25/09/2014).

**Diarrhoeal Disease**

Diarrhoea is one of the main causes of death for children under 12 months old (IFRC, 24/07/2014). The number of acute diarrhoea cases continues to increase, with 60,012 reported by mid-September, up from 22,169 reported in July (WHO, 22/08/2014; WHO, 30/10/2014).

**Maternal Health**

In late 2014, 1,049 maternal deaths were reported in Syria. There is a lack of competent obstetricians and anaesthetists, and higher rates of maternal deaths during humanitarian crisis (MSNA, 28/11/2014).
3 million women and girls of reproductive age are in need of care in Syria, including around 432,000 pregnant women. Every day, some 1,480 women give birth in dire conditions. 26 of 41 basic emergency obstetric care centres are reported as non-functional (Syrian Ministry of Health/UNFPA, 30/11/2014).

**Measles**

4,200 cases of measles were reported in Syria in 2014 (Reuters, 19/12/2014).

**Mental Health**

More than 350,000 individuals in Syria are estimated to suffer from severe forms of mental illness; over 2 million people suffer from mild to moderate problems such as anxiety and depression disorders, and a large percentage have 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).

**Polio**

21 January will mark one year since the last case of polio was reported in Syria, indicating that transmission of the virus has been interrupted (Global Polio Eradication Initiative, 16/01/2015). 36 polio cases have been reported in Syria since October 2013.

**Typhoid**

More than 6,500 cases of typhoid were reported in Syria in 2014 (Reuters, 19/12/2014).

**WASH**

4.6 million people are in need of WASH assistance. Six out of ten governorates report major problems in the WASH sector. Syrian families consume 40% less water than they did pre-crisis.

One-third of water treatment plants no longer function, and sewage treatment has halved. In Aleppo, as of September, three of four water pumping stations have been shut down, affecting over two million people (PHR, 10/2014; WHO/UNICEF, 22/07/2014). More than 400,000 are reported in acute need of water in Al Bab subdistrict of Aleppo governorate alone (MSNA, 30/10/2014).

The cut-off of a main water source feeding Damascus has aggravated the already scarce resource triggered by drought (UNICEF, 12/2014).

In November, after three months, UNRWA was permitted to transport limited amounts of clean water into Yarmouk camp (UNRWA, 10/11/2014).

**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 since June, the majority civilians (UN Human Rights Council, 14/11/2014; SOHR/AFP, 17/11/2014). There are unconfirmed allegations of IS abuses against the Al Shaitat tribe for refusing to

**Winter conditions have caused increased hardship since early January in IDP camps and settlements in Idleb, Lattakia, and Homs. Urgent needs are heating fuel, tents, and in some cases fuel stoves. Ar-Raqqa, Homs, Hamah, and Lattakia governorates remain with lower coverage and are in need of shelter and NFI assistance.**

The CCCM indicates that 174, 624 IDPs were affected by a storm on 7 January in Aleppo, Idlib, Raqqa and Deir-ez-Zor governorates (ECHO, 08/01/2015; OCHA, 16/01/2015). The most severely affected areas are in Lattakia governorate. Several IDP camps in northern Idlib, along the border with Turkey, have been flooded. A large number of families have been forced to move after their tents and belongings were damaged.

2.7 million people are in need of NFI assistance. The dispatch of non-food items (NFIs) has fallen significantly since April, (MSNA, 30/10/2014).

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).

**Education**

4,000 Syrian schools have been destroyed, damaged, or used to house IDPs, leaving the educational system on the verge of collapse. Nationwide, 52% of school-age children are not going to school (Syrian Centre for Policy Research, 05/2014; AFP, 12/09/2014).

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). 76 UNRWA schools – more than two-thirds – have become unusable. Another 15 are used as collective shelters, housing 6,043 people (UNRWA, 17/11/2014). 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).

**Protection**

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**Nutrition**

4.6 million people are in need of nutrition assistance. 7.2% GAM rate has been reported (UNICEF, 21/10/2014).

**Shelter and NFIs**

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).
recognise IS jurisdiction, with hundreds of civilian members of the tribe reportedly abducted and detained in Deir-ez-Zor (UNSC 21/11/2014). Over November–December, IS killed 120 of its own members, most of them foreign fighters trying to return home (SOHR, 28/12/2014).

Indiscriminate Attacks

Over October–January, government forces carried out more air strikes and barrel bombings on opposition-held areas in the central and southern governorates, killing and wounding civilians.

Improvised mortar bombs, used by Syrian fighters, killed 311 civilians between July and December 2014, two-thirds in Aleppo (SOHR/Reuters, 12/12/2014).

Recruitment

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, 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).

Kurdish residents of Amuda, Al Hasakeh governorate, held a demonstration protesting the compulsory conscription of minors for service in YPG forces following the conscription of a 16-year-old schoolgirl in the town (ISW, 12/01/2015).

Chemical Weapons

The Organisation for the Prohibition of Chemical Weapons (OPCW) maintains a presence in Syria (UNSC, 10/2014). 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.

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, 19/11/2014). Landmines in a restricted zone, laid decades ago by the Turkish military, killed at least three civilians trying to flee Syria and injured at least nine others (HRW, 02/12/2014).

Detention

200,000 people are estimated to be in government detention, including 20,000 detainees who are completely unaccounted for (SOHR/HRW, 02/12/2014). OHCHR continues to receive reports of the use of torture and other forms of ill-treatment in government detention facilities (UNSC, 21/11/2014). In 2014, 2,100 people died in Syrian prisons from torture, starvation, and lack of medical treatment; 27 were under the age of 18 (SOHR, 10/01/2015; AFP, 11/2014). 11,000 detainees were allegedly freed after President Assad declared a general amnesty in June (AFP, 11/2014).

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 recent months (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: 26/01/2015

YEMEN CONFLICT, FOOD INSECURITY, DISPLACEMENT

LATEST DEVELOPMENTS

25–26 January: Houthis detained several activists and reporters during anti-Houthi protests, then attacked protesters demonstrating against their occupation of the capital, leaving ten people wounded (AFP, 25/01/2015, 26/01/2015).

22 January: Two tribesmen were killed and six wounded in an ambush by Houthi militias in Naqil al-Watada, an area between Marib and Sanaa. Abdul Malik al Houthi had previously threatened to take control of Marib. In a televised speech after his men seized the presidential palace in Sanaa, Houthi demanded that authorities immediately improve the security situation in Marib, where Sunni tribes have been mobilised to resist Houthi advances. Marib supplies electricity and fuel to most of Yemen (AFP, 22/01/2015).

21–25 January: In the south, Aden closed its airport, seaport and entrances to the city, in a bid to back President Hadi’s rule. The security and military committee for four of south Yemen’s provinces, Aden, Abyan, Lahej and Daleh, said in a statement on 22 January it would not take orders from Sanaa following Hadi’s resignation (AFP, 21/01/2015; 22/01/2015; The Daily Star, 22/01/2015). Three days later, leaders of some southern provinces announced their secession.

21–23 January: President Hadi and the Houthi forces agreed to end violent confrontation. The Houthis agreed to withdraw from government buildings seized during the week, in return for concessions over the draft constitution (AFP, 21/01/2015). The Houthis reportedly failed to honour the conditions (AFP, 22/01/2015). President Hadi and Prime Minister Bahah resigned, although Yemen’s Parliament rejected Hadi’s resignation. Thousands of Houthi supporters staged a rally north of Sanaa showing their backing of recent actions by Houthi militias (AFP, 23/01/2015). Violence caused the deaths of 35 people, and wounded 94.
19–20 January: Houthis seized the presidential palace and attacked President Hadi’s residence, violating a ceasefire agreed after fighting the day before (AFP, 20/01/2015). Several hundred families were displaced, and one hospital was reported to be damaged (OCHA/IRIN, 20/01/2015). Houthis apparently took control of state media outlets (AFP, 19/01/2015).

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)
- There are 335,000 internally displaced people (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 governors 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 food and nutrition assistance, access to healthcare, shelter – primarily for conflict-affected people – protection, and provision of water and sanitation.

Yemen’s political transition towards democratic elections in 2015 has stalled. In addition to economic challenges, it continues to face three concurrent security challenges: Houthi insurgents advancing from the north; southern secessionists; and Al Qaeda in the Arabian Peninsula (AQAP) throughout the country.

Political Context
Instability and violence continue across the country, and any attempt at political transition has stalled. Shia Houthi insurgents from the far north have de facto control over Sa’ada and neighbouring Amran, and parts of Al Jawf, and Hajjah governorates, and have rejected the proposed division of the country into six federated regions, claiming it is unequal in terms of wealth distribution. By September, the Houthi had taken control of much of Sana’a. At end November, Shi’ite and Sunni groups met for the first time for talks aimed at de-escalating the crisis (AFP, 29/11/2014).

Prime Minister Khalid Bahah’s Government received parliamentary approval in December, after agreeing not to implement UN sanctions on Yemeni citizens (Yemen Times, 18/12/2014). A Houthi presidential aide stated the Houthi group endorsed the new Government despite its opposition to some ministers (Reuters, 13/11/2014). Yemen's ex-president Ali Abdullah Saleh had withdrawn his General People's Congress (GPC) party from the new Government (AFP, 09/11/2014; 13/11/2014).

On 17 January, Houthis ab ducted President Hadi’s chief of staff, who heads the national dialogue on Yemen’s political transition (AFP, 17/01/2015). On 19 January, fighting broke out between Houthis and security forces, after Houthis deployed reinforcements near the presidential palace. Houthis apparently also took control of state media outlets (AFP, 19/01/2015). On 20 January, Houthis seized the presidential palace and attacked President Hadi’s residence (AFP, 20/01/2015). The militia agreed to withdraw from government buildings seized during the week, in return for concessions over the draft constitution. On 22 January, the Houthis were failing to honour the deal, and a day later, President Hadi and Prime Minister Bahah both resigned. Yemen’s parliament rejected Hadi’s resignation (AFP, 22/01/2015). Thousands of Houthis staged a rally north of Sanaa showing their backing of recent actions by Houthi militias (AFP, 23/01/2015). On 25 and 26 January, there were anti-Houthi protests: Houthis attacked protesters and detained several activists and reporters (AFP, 25/01/2015; AFP, 26/01/2015). Four political parties negotiating with the Houthis announced there would be no further contact (AFP, 26/01/2015).

A large portion of southern leaders are still aiming for a fully independent, unified south.

Southern Movement (Al Hirak)

Various leaders of southern provinces announced their secession following events in Sanaa. As none speak for the entire region, there are fears of fighting among southerners. In Shabwa’s capital Ateq, local media reports said a secessionist group and local security had taken over security. In Aden, local groups raised the flag of the south in the general security building. In Mukallah, the capital city of the Hadramaut province, militia fanned out across the city (Reuters, 25/01/2015). In Marib, local officials denounced the 19 January events as a coup and said they would no longer take orders from Sanaa.

Rallies in the south calling for secession had gained momentum since October due to the developments in Sanaa and other northern governorates (Yemen Times, 19/10/2014; AFP, 01/01/2015). The Southern Movement’s two existing councils had merged in October to represent all southerners, calling for the south’s full independence, a federal and parliamentary political system, the restoration of the legitimacy of Ali Salem Al Beidh, president of South Yemen before 1990, and his appointment as president of the south. The Southern Movement had called on Houthi support (Yemen Times, 28/10/2014).
members of parliament have formed the Southern Parliamentary Bloc, in support of protesters arguing for secession (The Daily Star, 27/10/2014).

Economic Crisis

Yemen's economic difficulties are adding to the political crisis. Oil revenues declined almost 30% between January 2013 and January 2014 (Yemen Central Bank, 02/2014). In July, the Government increased the price of petrol by 60% and diesel by 95%. On 1 December, it was reported that Saudi Arabia is considering stopping financial support to Yemen, a move that could tip the country further towards economic collapse (IRIN, 01/12/2014).

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

In 2014, at least 7,000 people were killed, including 1,200 civilians, according to a Yemeni think tank (Al Jazeera, 04/01/2014). 274 people have been killed and 470 injured in Sanaa since September, according to the Yemeni Government. Other reports indicate 652 people killed and 930 injured (Yemen Times, 22/12/2014).

The inability of internally divided state forces to check the Houthis' ascent or dampen sectarianism has galvanised separatist groups (Reuters, 09/11/2014). AQAP, Al Qaeda's powerful Yemeni branch, backed by Sunni tribesmen, have instead fought to halt the Houthis' advance (AFP, 20/10/2014).

Houthi Insurgency

The Houthis, also referred to as Ansarullah, are based in Sa'ada governorate. Their advance in 2014 has seen fighting in Al Jawf, Amran, Al Bayda, Dhamar, Ibb, Marib, and Hajjah governorates, as well as Sanaa and Al Hudaydah. On 31 December, Houthis seized Raymah governorate (Yemen Times, 01/01/2015). The Houthis virtually control Ibb governorate, with the exception of Udain, which AQAP and its allies recaptured in October (29/10/2014). Houthis seized the Red Sea port city of Hudaydah in October.

Houthi took control of much of Sanaa in September. Protests against their presence took place on 28 September, and Houthis began dismantling protest camps on 16 October, although they were reportedly still in control of the city, operating checkpoints and keeping guard outside key ministries, commercial districts, and diplomatic missions (Reuters, 19/10/2014). Violence persists despite a peace agreement and an annex covering security and military conditions in Amran, Al Jawf, Marib, and Sanaa governorates, as well as 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: tribes in Ibb and Al Bayda, for example, who are opposed to the Houthi advance, have allied themselves with 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).

Security Incidents and Conflict Developments

Sanaa: Fighting between Houthis and security forces erupted in the capital on 19 January, and by 21 January, it had caused the deaths of 35 people, wounded 94, displaced hundreds of families and damaged a hospital (OCHA/IRIN, 20/01/2015). On 7 January, a car bomb hit dozens of potential police recruits lining up at a police academy. 37 people were killed and 66 wounded (AFP, 07/01/2015). A number of bomb and IED attacks were reported in December (Yemen Times, 08/12/2014). By December, armed Houthi 'popular committees' had mushroomed at improvised checkpoints across the city. Critics charge that they are a partisan force. Houthis have also been accused of violently suppressing dissent (IRIN, 03/11/2014). The largest of a number of attacks in October targeted a gathering for Houthi supporters, killing 47 and wounding dozens more. Al Qaeda claimed responsibility (AFP, 09/10/2014).

On 26 January, a drone strike in a desert area of Sanaa governorate killed three suspected Al Qaeda militants, according to tribal sources (AFO, 26/01/2015).

Aden: On 21 January, it was reported that Aden had shut its airport, seaport and entrances to the city, in a bid to back President Hadi's rule (AFP, 21/01/2015; 22/01/2015).

Al Bayda: On 11 January, at least five men were killed and an unknown number injured in a raid launched by armed tribesmen on Houthi headquarters in Rada. The raid was launched to free five tribesmen who had been apprehended and detained by the Houthis on 10 January, according to tribal sources (Yemen Times, 12/01/2015). On 6 January, unidentified assailants killed a Yemeni tribal chief allied with Shi'ite Muslim Houthi militias and at least four other people in an ambush in Al Zaher district (Reuters/Yemen Times 06/01/2015).

Clashes between Houthis, AQAP and affiliated tribes began in October and intensified into more sustained conflict in November, with violence mainly centred in Wald Rabi, Al Quraishyah and Rada districts. Clashes have involved the use of rocket-propelled grenades and attacks on schools and hospitals used by the warring parties (AFP, 17/10/2014; 20/10/2014; 08/11/2014). Rada is a mixed Sunni-Shi'ite area that has frequently been the scene of clashes. As of early December, AQAP has reportedly withdrawn mainly towards Marib governorate (OCHA, 01/12/2014). On 16 December, a suicide bomb attack in Rada, targeting a Shi'ite militia leader, killed 25 people including 15
children (AFP, 16/12/2014). Over November–December, Al Bayda governorate witnessed 28 security incidents, a 370% increase over the previous year (31/12/2014).

**Dhamar:** On 4 January, four people were killed and 25 wounded in a bomb attack targeting a Houthi gathering in Dhamar city (AFP, Reuters, 04/01/2015).

**Ibb:** On 31 December, 49 people were killed and 70 wounded in a suicide attack on a religious celebration by Houthi supporters in Ibb city (AFP, 01/01/2015).

**Hadramaut:** On 9 December, a suicide attack on the headquarters of the First Military Command in Seyoun killed at least five people, according to officials (Al Jazeera, 09/12/2014).

**Marib:** On 22 January, two tribesmen were killed and six wounded in an ambush by Houthi militias in Naqil al Watada, an area between Marib and Sanaa. Several Houthis were also killed, according to sources. Abdul Malik al Houthi had previously threatened to take control of Marib, which supplies electricity and fuel to most of Yemen. In a televised speech after his men seized the presidential palace, Houthi demanded that authorities immediately improve the security situation in Marib, where Sunni tribes have been mobilised to resist Houthi advances (AFP, 22/01/2015).

A large influx of armed tribesmen have entered the governorate since 10 January. Reinforcements from Al Jawf, Al Baida, and Sa’ada governorates are joining local tribes to defend the governorate against possible Houthi assaults. According to tribal sources, upwards of 30,000 armed tribesmen are stationed in Sahil area (Yemen Times, 12/01/2015). On 1 January, clashes broke out in the city of Marib between tribesmen and government troops, whom the tribesmen suspected to be Houthi supporters. Six soldiers and two tribesmen were killed (Al Jazeera, 02/01/2015). On 14 December, AQAP claimed an attack which killed a leading General People’s Congress figure, accusing him of supporting Houthis (Yemen Times, 16/12/2014).

**Taizz:** Anti-Houthi demonstrators gathered in Yemen’s third city Taizz on 26 January, according to sources (AFP, 26/01/2015).

**Humanitarian Context and Needs**

**Access**

Extreme access constraints prevail in Hadramaut, Shabwah and Marib governorates (OCHA, 22/12/2014).

The ongoing fuel crisis and insecurity are slowing humanitarian operations and access. Road closures further hamper aid deliveries.

**Displacement**

Several waves of conflict, lack of access, and the fluidity of displacement all make it extremely difficult to estimate new displacements and needs.

In 2014, 80,000 people fled their homes due to conflict (OCHA, 09/10/2014).

In 2015, an estimated 915,000 refugees and migrants will require multi-sector humanitarian assistance – an increase of 16% on 2014’s estimate (OCHA, 22/12/2014).

**IDPs**

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, 3/09/2014; Global CCCM Cluster, 27/03/2014).

In Al Bayda governorate, 20,000 were displaced over November–December due to fighting between armed groups. As of 21 December, around 1,500 people remain displaced (OCHA, 01/12/2014; 31/12/2014).

**Refugees**

Around 800,000 refugees, asylum seekers and migrants require humanitarian assistance. As of end November, 82,680 refugees and migrants had arrived in Yemen in 2014 (OCHA, 31/12/2014).

At least 2,000 Syrians refugees have been registered in Yemen since August. The total number of Syrians in Yemen is estimated to be more than 10,000 (OCHA, 5/11/2014). There has been a marked increase in arrivals of refugees and migrants from Africa, in excess of 10,500 people in August. Border controls have been relaxed between Ethiopia and Somalia since early 2014 (OCHA 29/09/2014). 236,000 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).

**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**

The food security situation shows a slight improvement since 2011. Nonetheless, 5 million people are severely food insecure (WFP, 31/12/2014). 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, Hajjah, Shabwah, Abyan and Lahj are in Phase 4 (Emergency), while Hudaydah, Rayma, Al Dhale’ee, Al Bayda, Ibb, Taiz, Al Mahweet, Sana’a (rural), Marib, Dhamar, Amran and Al Jawf are in Phase 3 (Crisis). 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).

Crisis levels of food insecurity (IPC Phase 3) are expected in the country between January and June (FEWSNET, 12/2014). Emergency levels of food insecurity (IPC Phase 4) are expected in Shabwah, Abyan, Sa’ada, Hajjah and Lahj governorates over January- June 2015 (IPC, OCHA, 22/12/2014).

Agriculture and Markets

Insecurity is hampering agricultural activity as well as agricultural assistance programmes (FAO cited in OCHA, 08/10/2014).

Over December, the supply of essential food commodities continued to be normal in most parts of the country. However, the flow of food commodities was disrupted in some areas such as Haja, Sa’ada, and Hudaydah, due to localised conflicts and restricted border market access with Saudi Arabia, which affected the movements of traders and the flow/supply of commodities, as well as the normal functioning of markets, and had a negative impact on local food availability in some areas.

Food supply is expected to remain stable in the early months of 2015 (WFP, 31/12/2014). Yemen imports up to 90% of its main staple foods, including wheat and sugar. Continued instability, currency depreciation, and low foreign reserve levels have all contributed to costlier food imports and higher local commodity prices (WFP, 31/07/2014).

Livelihoods

The conflict in Sanaa has disrupted livelihoods and hurt the local economy (Yemen Times, 06/11/2014).

The loss of remittances due to the expulsion of Yemeni migrant workers from Saudi Arabia is likely to have a severe impact on the lives of thousands of families (ECHO, 27/08/2014).

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.

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’ee, 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.

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). 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

Conflict in Sanaa has raised critical protection concerns regarding systematic violations of human rights and international humanitarian law (OCHA, 08/10/2014).

Children

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).

The Watchlist on Children and Armed Conflict has reported that Houthis, Ansar al Sharia, AQAP and state forces are all recruiting children (01/10/2014). Child recruitment by armed forces and armed groups was also reported during the Amran conflict (UNICEF, 31/07/2014). Armed children guard checkpoints throughout Sa’ada, Ibb, Hudaydah, and Amran and the Houthis’ use of under-18s in active combat roles has been observed (UNICEF, 31/12/2014; 20/01/2015).

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). In the first half of 2014, 285 cases of gender-based violence were reported in Aden (OCHA, 05/06/2014).

Mines and ERW
Landmines and explosive remnants of war are a major concern in the northern governorates. There were several incidents reported in Sanaa, Sa’ada, Al Dhale’e, Amanat Al Asimah and Ibb in September and October (UNICEF, 31/10/2014).

In 2013, there were 49 casualties from mines or ERW, including 40 children (Landmine & Cluster Munition Monitor, 19/11/2014).

Updated: 27/01/2015

LEBANON CONFLICT, INTERNAL UNREST

LATEST DEVELOPMENTS

28 January: Fighting between Israeli Defence Forces (IDF) and Hezbollah caused the deaths of one UNIFIL peacemaker and two IDF soldiers. (UNIFIL, 28/01/2015; Daily Star, 28/01/2015; NYT, 28/01/2015).

23 January: According to ILO estimates, 300-400,000 school-aged refugee children are not being educated, and 70–80% of them are involved in some form of child labour (VoA, 23/01/2015).

December: 35,000 families have not received winterisation assistance and are unprotected from the cold, health risks, and other hazards (Shelter Cluster, 12/2014).

KEY CONCERNS

- 1,166,488 Syrians are registered as refugees in Lebanon. 11,624 are awaiting registration (UNHCR 08/01/2015). Over 44,000 Palestinian refugees from Syria have been recorded (OCHA 15/01/2015).

- As of December, 35,000 families still need winterisation assistance (Shelter Cluster, 12/2014).

- 300,000-400,000 refugee children of school age are 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

On the grounds that elections would present too much of a security risk, the Lebanese Parliament extended its mandate for another two years and seven months in November 2014, after a similar move in 2013. 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).

Hezbollah has ruled out imminent presidential elections, despite admitting increased domestic stability as a result of dialogue between Hezbollah and the Future Movement bloc (Daily Star, 14/01/2015). Former president Michel Sleiman’s term expired on 25 May. 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.

Hezbollah’s involvement in Syria, and the alleged presence of Jabhat al Nusra (JAN) and IS in Lebanon, raises destabilisation concerns in Lebanon. Along its northern and northeastern border with Syria, Lebanon is engaged in a battle against Islamic State (IS), JAN, and affiliated armed groups. JAN hinted at attacks on Hezbollah strongholds in November, which observers perceive as consistent with JAN’s stated strategy to force Hezbollah to withdraw from Syria and refocus on Lebanon. 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).

On 28 January, Hezbollah launched rockets into Shebaa Farms, a disputed landstrip at the intersection of the Lebanese-Syrian border and the Israeli Golan Heights. The Israeli Defence Forces returned fire and carried out mock air raids. A UN peacekeeper and two IDF soldiers were killed (UNIFIL/Daily Star, 28/01/2015; NYT, 28/01/2015). On 18 January, an Israeli air strike in Quneitra, in Syria’s Golan Heights, reportedly killed ten, including senior Hezbollah figures as well a General of the Iranian Revolutionary Guard (Washington Post, 19/01/2015; BBC, 19/01/2015; Middle East Monitor, 21/01/2015). Syrian warplanes reportedly entered Lebanese airspace on at least three occasions between 1 December 2014 and 10 January 2015, killing at least one person (OCHA, 15/01/2015).

Bekaa Valley: In August, armed fighters briefly took over the town of Arsal, in the Bekaa Valley, with air raids along the border and bomb attacks targeting military and Hezbollah in Arsal and Bekaa Valley. Violence in Arsal, and sporadic incidents across the country, have been followed by an increase in raids and arrests by the Lebanese Armed Forces (LAF). Around 950 people were arrested in November, for residing in Lebanon without a valid
permit, or on terror or drug-related charges, among others (Daily Star, 06/12/2014).

However, an overall decrease in security incidents was recorded between 1 December 2014 and 10 January 2015. The majority of incidents occurred in the Arsal-Baalbeck area. Ten instances of armed clashes between the LAF and armed opposition left at least seven LAF and three opposition fighters dead (OCHA, 15/01/2015).

Tripoli: Since October, there have been several bouts of fighting in Tripoli between Sunni groups sympathetic to armed opposition groups in Syria, and Alawite groups supporting the Syrian Government. Fighting was recurrent before the alleged presence of IS and JAN, and is mostly a manifestation of longstanding socio-economic grievances and sectarian tensions (SNAP 06/11/2014). The fighting caused major damage to the impoverished Sunni neighbourhood of Bab-al-Tabbaneh, home to some 100,000 people, including over 6,600 registered Syrian refugees (SNAP 06/11/2014; UNHCR 07/2014). On 10 January, a double suicide attack killed nine people and wounded 37 others in an Alawite neighbourhood (AFP, 11/01/2015). JAN claimed responsibility for the attack (OCHA, 15/01/2015). Lebanese security forces cracked down on Islamist militants in Roumieh prison, Beirut, relocating inmates into higher security blocs and confiscating possessions, as prisoners were allegedly linked to the bombings (Daily Star, 13/01/2015).

Prisoner Exchanges

Since clashes in early August, IS and JAN are believed to be holding about 25 Lebanese soldiers and members of security forces. Arsal Deputy Mayor Fliti is mediating an exchange. On 5 December, JAN executed a hostage, a Lebanese policeman, and vowed to kill another unless the Government released women and children related to IS leader Baghdadi and another IS commander. The execution led to unrest, including a spike in security incidents targeting Syrian refugees. JAN again threatened again to kill captives after the raid of Roumieh prison (Daily Star, 12/01/2015). According to sources, the negotiations are progressing and both sides have listed their conditions (Al Monitor, 25/01/2015).

Humanitarian Context and Needs

Some 3.3 million people in Lebanon, including 1.2 million children, are directly affected by the Syria crisis (UNHCR 16/12/2014). Lebanon is also hosting 270,000 long-term Palestinian refugees (UNICEF 12/12/2014).

Access

Refugees live across 1,750 different locations in Lebanon, making the delivery of humanitarian assistance challenging (UNHCR 10/2014). Northern Bekaa, Tripoli, and Akkar are areas of higher risk for humanitarian workers (OCHA 30/11/2041), and the UN will only carry out critical missions to parts of those areas (WFP 03/12/2014).

In early January, stormy weather and snow cut off all routes in and out of the Bekaa Valley (Medair 07/01/2015).

A backlog of work permits and delays in issuing visas to international staff is forcing INGOs to possibly reduce their operations in Lebanon (OCHA, 15/01/2015).

Border Restrictions

In October, the Government formally agreed to stop welcoming displaced people, barring exceptional cases, and to ask UNHCR to stop registering the displaced. The policy has resulted in a substantial reduction in refugees registering and raised serious protection concerns (UNHCR, AFP 24/10/2014; UNHCR 07/2014). During the last quarter of 2014, some 14,000 refugees per month were registered by UNHCR, a sharp decline compared to 2013’s monthly average of 59,000.

Since January, Syrians wanting to enter Lebanon must apply for a visa; previously, Syrians were automatically allowed to stay up to six months. It is unclear what this will mean for Syrians in Lebanon not registered as refugees; Lebanon’s Prime Minister has promised to review the policy (BBC, 05/01/2015; Daily Star, 14/01/2015).

An average of 13% of registered refugees have entered through unofficial border crossings and are not able to pay the prohibitive regularisation fees. Those who entered through official crossings often have difficulties meeting the residency renewal fees (UNHCR 10/2014).

The unpredictability of policies and their implementation severely hampers the provision of services and frustrates advocacy efforts aimed at a solid legal framework (SNAP 07/12/2014).

Palestinian refugees from Syria: Since May, PRS entry to Lebanon has been almost entirely limited to those transiting to a third country. An increasing number of PRS remain in Lebanon without legal stay, and face an array of protection concerns (OCHA 01/09/2014).

Critical Infrastructure

The shortage of surface water, partly due to little rainfall last winter, has reduced hydroelectric power generation, leading to a scarcity of electric power (UNHCR 11/2014).

Displacement

Refugees in Lebanon

1,166,488 Syrians are registered as refugees in Lebanon. 11,895 are awaiting registration (UNHCR 08/01/2015). Bekaa is hosting 410,629 refugees; Beirut 333,959; North Lebanon 287,400; and South Lebanon 137,500 (UNHCR 22/01/2015). The number of Syrians in Lebanon who are not registered with UNHCR is unknown.

26% of refugees are women, and 53% children. 32% of registered families are headed by women. Over 38% of households include at least one person with specific needs (UNHCR 09/2014). Most refugees come from Homs, Idlib, and Jebel Saman (Aleppo) (UNHCR 30/11/2014).

More than half of refugees coming to Lebanon moved at least once before crossing the border; one in ten moved more than three times (UNHCR 01/09/2014).
Palestinian refugees from Syria: 44,000 Palestinian refugees from Syria (PRS) reside in Lebanon (OCHA 15/01/2015).

Host Communities

All 446 host communities have reported inadequate or insufficient access to water, waste water management systems, affordable housing, and employment opportunities. Conditions in urban locations are better than in rural communities (OCHA 09/2014).

86% of Syrian refugees are living in Lebanon’s 242 most vulnerable locations. Competition for scarce income-generating opportunities, more expensive goods and services, and less affordable accommodation, are the main drivers of tensions (UNHCR 09/2014; REACH 08/2014)

Food Security

As of August, 13% of households were classified as moderately food insecure, and less than 0.5% were considered severely food insecure. The highest levels of food insecurity are found in North Lebanon (Akkar) and the Bekaa Valley (WFP 18/12/2014). 27% of new Syrian refugees have poor to borderline food consumption scores (UNHCR 08/2014).

Agriculture and Markets

A severe drought has resulted in a substantial decline in agricultural production throughout the country (FAO 11/2014). Average rainfall in 2014 is estimated at 470mm, far below annual averages of 824mm (Inter Press Service 07/2014). Prices inflated as a result, with fruit and vegetables most affected. Aid workers say much of the suffering due to water shortages could be alleviated by repairs to infrastructure (VOA, 23/12/2014).

Aggregate cereal consumption has increased from 0.9 million metric tons a year (2004–2008) to 1.2 million. Lebanon relies heavily on imports: national grain production is tentatively put at just under 200,000 metric tons, similar to last year and the five-year average (FAO 11/2014).

Livelihoods

78% of refugee households are not able to generate an income, citing a lack of work as the main issue. 28% of Syrian refugee households resorted to emergency coping strategies in 2014, up from 22% in 2013. 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).

30% of refugees are unemployed and 88% of the employed are paid 40% less than the minimum wage. Female Syrian workers earn 30% less than male workers (UNHCR 09/2014). 68% of refugee households reported that WFP vouchers were their main source of income (WFP 09/2014). Approximately 80% of households borrowed money or received credit and/or money to buy food (WFP 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

72% of primary health centres assessed by UNICEF lack sufficient essential drugs, 67% lack sufficient medication for chronic diseases, and 49% lack sufficient antibiotics for children (08/2014).

Lebanon has a private healthcare system, and cost is a major obstacle for refugees, despite UNHCR covering 75% of medical charges (MSF 19/11/2014). Short opening hours and lack of trained health personnel further limit access. In Akkar, Tripoli, and Bekaa, people have to travel over 2km to access services (OCHA/REACH 10/2014).

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

Demand for water has increased by 7% due to the refugee influx: 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). An estimated 55.4% of households reported storing water in containers at home, which can increase the risk of infectious disease transmission (UNHCR 10/2014).

Lack of funding in the Tripoli area has led to the suspension of WASH activities in Koura and Batroun districts (UNHCR 31/10/2014).

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
Shelter remains an urgent concern. The number of evictions is growing every month (UNHCR 10/2014). 55% of Syrian refugees live in substandard housing, including 38% in insecure dwellings; and 17% in improvised informal settlements (UNHCR 09/2014). There is a 41% gap in substandard shelter assistance because of lack of funding (UNHCR 31/10/2014).

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). Bekaa has over 700 settlements, and Akkar has over 300, some of which were severely damaged by heavy rainstorms in October. In Akkar, the majority of informal settlements had existed for a year or more, and are generally on private land, on the outskirts of host communities. The populations are highly dependent upon assistance and loans (UNHCR/REACH 11/2014).

Winterisation: An approximate 47% gap is recorded in weatherproofing assistance for substandard shelters (OCHA, 15/01/2015). 35,000 families need winterisation assistance (Shelter Cluster, 12/2014). In UNICEF target areas, needs for winter items have more than doubled since the previous winter – over 60% of Syrian refugees live in the north or the Bekaa Valley, where winter conditions are more severe than in the rest of the country. There have been reports of more than 100 shelters and tents damaged. Flooding and standing water is a problem in many places. In southern coastal areas, high waves have flooded some settlements (UNHCR, 09/01/2015). Akkar and the Bekaa Valley are particularly affected by snow (OCHA, 15/01/2015). Unconfirmed reports by local sources indicate that ten Syrian refugees died due to low temperatures during the snowstorm (Reuters, 20/01/2015).

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

The school-aged population has increased by almost 480,000 as a result of the refugee influx.

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.

Roughly 65% of community representatives in Akkar and Tripoli have reported improving access to education as urgent or critical (OCHA/REACH 10/2014). 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. In addition, 45 Lebanese municipalities have imposed curfews on Syrian refugees since the clashes in Arsal in August. Such curfews violate international human rights law and appear to be illegal under Lebanese law (HRW 10/2014). 570 people were evicted by security forces in October, down from 3,855 in September (UNHCR 31/10/2014).

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.

Upon arrival, refugees require prompt registration and documentation to ensure access to services, relief assistance, and effective protection interventions. The lack of a legal or administrative refugee framework; the dispersed refugee population; lack of civil status documentation; irregular legal statuses; physical safety and security; and limited access to justice remain challenges (UNHCR 31/10/2014).

Sexual and Gender-based Violence

Displacement increases the risk of SGBV, as does overcrowding, lack of income-generating opportunities, and lack of privacy. Unaccompanied girls and adolescents, single heads of households, child mothers and spouses, and women and girls living with disabilities are the most at risk (UNHCR 14/11/2014). 25% of survivors of reported SGBV cases are under 18 years of age.

The mobility of refugee women in Lebanon is reportedly restricted due to fear of sexual harassment and exploitation (UNFPA 13/08/2014).

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.
Only 30% of Syrian children born in Lebanon have birth certificates (UNHCR 10/11/2014).

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 labour is also reported to be increasing. 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). 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).

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).

Updated: 29/01/2015

MYANMAR INTERNAL UNREST, FLOODS, DISPLACEMENT

LATEST DEVELOPMENTS

26 January: A bomb exploded in Hpakant township, Kachin state, injuring two people. No group has yet claimed responsibility (local media).

24 January: 42 children were released from the armed forces (AFP).

KEY CONCERNS

- Repeated bloodshed between Buddhists and Muslims in Rakhine state since 2012, with human rights abuses reported against the Muslim minority (UN).

- 640,000 IDPs, resulting from years of internal conflict, including mainly Rohingya Muslims 137,400 IDPs in Rakhine state (OCHA, 08/2014).

Political Context

Myanmar’s first democratic elections in 25 years are scheduled for October or November 2015 (local media, 21/10/2014). In October 2014, 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. On 31 October, government officials stated that Parliament would consider amending the country’s constitution – which currently bars Suu Kyi, released from house arrest in 2010, from becoming president – ahead of elections next year (AFP, 31/10/2014).

Nonetheless, local activists report that the prosecution of dissidents is continuing. In October, civil society representatives stated that political reform has stalled (HRW, 17/10/2014).

Peace Negotiations

Minority groups make up some 30% of the 51.4 million population, and ethnic and political groups have conducted protracted insurgencies mainly in remote and economically marginalised areas such as Kachin, Kayin (Karen ethnic group), Kayah (Karenni), Rakhine, and Shan states (Government, 28/06/2014).

In 2013, authorities signed several peace deals with various insurgent movements, 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). In mid-August 2014, leaders of ethnic groups announced that the Government had agreed to include their longstanding demand for a federal system in a draft accord (Center for International and Strategic Studies, 22/10/2014). However, in October, a leader of the United Nationalities Federal Council (UNFC), the main ethnic coalition, warned that the military’s refusal to give up its parliamentary veto to any amendment to the constitution, and the failure to provide more powers to ethnic states, would make efforts to forge a nationwide ceasefire meaningless (local media, 24/10/2014). According to a senior member of the NCCT, the NCCT were to meet with government officials in January 2015 (local media, 23/12/2014).

Security Context

Despite peace negotiations, the security situation remains tense in parts of Myanmar. The Government came under criticism in October, 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 the west, massive human rights infringements against the Rohingya Muslim minority in Rakhine state continue to be reported.

In early December, the UNFC announced the establishment of the Federal Union Army (VoA, 02/12/2014).

Rakhine State

Tensions remain high in Rakhine state, with authorities imposing restrictions on the displaced Muslim minority after government attacks on Rohingya Muslims were reported in January. The Government denies the incident. Over 17–18 November, robberies and arbitrary arrests were reportedly carried out by security forces in Maungdaw Township. The victims were Rohingya Muslims (local media, 20/11/2014).

Kachin State

The KIO still has administrative control over several key areas of Kachin, and clashes between its army, the KIA, and the Myanmar army have been intermittent since the termination of a 17-year ceasefire in June 2011 (local media, 06/10/2014). Renewed fighting between Myanmar government troops and the KIA started on 15 January in the area of Hpakant. The KIA took the state transport minister and three police hostage (AFP, 15/01/2015). On 26 January, a bomb exploded in Hpakant township, injuring two people. No group has yet claimed responsibility for the bomb (local media, 27/01/2014). There had been reports of shelling by government forces in November near Laiza and Mai Ja Yang (OCHA, 24/11/2014). 23 militants were also killed in an attack on
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. Some 27,500 IDPs around Laiza and east of Bhamo have not received blankets and warm clothes for winter. This includes over 12,000 children considered by humanitarian organisations to be particularly vulnerable (UNHCR, 30/11/2014). IDP camps near Laiza, Kachin state, are also reported to be facing a shortage of food supplies. None of the food distributions planned by WFP and its partners were able to take place in non-government areas in October and November (local media, 05/12/2014; UNHCR, 30/11/2014). More than 20 IDP camps are under KIO management, with an estimated total population of 50,000 (local media, 05/12/2014).

By mid-December, villages in Kachin state, particularly in the Hpakant area, reported movement restrictions due to fighting between the Myanmar army and the KIA (local media, 16/12/2014).

Rakhine state: Access to services is impeded by tension and restrictions on freedom of movement. As of mid-July, 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 the Rohingya living in the state.

International media reports from the end of July indicate that access to northern Rakhine state along the Myanmar–Bangladesh border is tightly restricted. The Government has designated a specific area of Sittwe – the Southern Quarter – for relief organisations to establish offices and accommodation. NGOs and UN agencies say limited space in the Southern Quarter is a key constraint to operating at full capacity (USAID, 02/07/2014).

Displacement

IDPs

As of 1 August, there are 639,500 IDPs in Myanmar (OCHA, 08/2014). An estimated 236,000 IDPs require humanitarian assistance in Kachin, Rakhine, and Shan states (USAID, 20/10/2014).

As of end October, 3,300 people remain displaced in Meiktila, Mandalay region, following inter-communal violence that broke out in March 2013. With winter approaching, mats, blankets, and other essential items are needed (OCHA, 31/10/2014).

Rakhine: There are approximately one million Rohingya in Rakhine state; most are considered crisis-affected and need humanitarian assistance. 139,000 people, mainly Rohingya Muslims, continue to be displaced as of end October, after the Government moved some 140,000 Muslims into closed camps following inter-communal violence in 2012 (IRIN, 05/11/2014; OCHA, 31/10/2014).

Rohingyas not living in camps are restricted to their communities in northern Rakhine state and unable to move freely (Refugees International, 14/11/2014). An estimated 50,000
displaced people live in host communities and 50,000 in isolated villages (OCHA, 31/07/2014).

**Kachin:** 98,371 people are displaced in Kachin and Shan states, with more than half living in areas where government services are not available (OCHA, 12/2014). An estimated 20,000 IDPs live with host communities. Many have been displaced for up to two years, triggering both emergency and medium-term needs. Shelters and water systems in IDP camps need repair or replacement and families lack the means to generate income (OCHA, 30/09/2014). On 29 December, Sin Kyai IDP camp in Kachin state caught fire, leaving 100 households without shelter or food in winter (local media, 29/12/2014). IDPs who have been resettled in Ngwe Pyaw Standard Village, a purpose-built village near Myitkyina township, are reportedly facing severe shortages, as access to livelihoods is extremely limited (local media, 08/11/2014). **Renewed fighting between government forces and KIA in Hpakant has displaced an estimated 1,500 civilians.** 2,500 people remain blocked around around Kan See village (ECHO, 21/01/2015).

**Mandalay region:** Approximately 3,300 people are displaced in Meiktila (UNICEF, 30/11/2014).

**Returnees**

Land taken by the military, the state, and companies close to the Government impede 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. In mid-November, about 12,000 Rohingya had left Rakhine since 15 October, thought to be heading for Thailand, and a month later had not yet reached their destination, according to relatives and an advocacy group (VOA, 28/10/2014; Reuters, 15/11/2014). As of end November, the number of Rohingya who have fled since early October was thought to have reached 19,000 (AFP, 30/11/2014).

**Bangladesh:** To date, most Rohingya are denied refugee status by the Bangladeshi authorities. An estimated 30,000 Rohingya Muslims live in official camps, where they are assisted by aid agencies, and another 200,000 refugees reside in unofficial camps or Bangladesh villages where they get little or no humanitarian assistance and almost no protection from human rights abuse. On 6 November, 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, movement restrictions have been more strictly enforced; Myanmar refugees are banned from leaving the 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 back to Myanmar about 100,000 of the 120,000 refugees living in border camps (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 human trafficking in Thailand (international human rights organisations, 12/2013).

**Food Security**

Overall, the food security situation has improved. However, recurrent inter-communal tensions since June 2012 have negatively impacted the food security situation, mainly for IDPs (FAO, 24/09/2014). 70,000 people are food insecure in Rakhine state (OCHA, 31/10/2014).

As of September, WFP expected that funding shortfalls would limit the ability of humanitarian actors to address food needs in Myanmar beginning in November (USAID, 30/09/2014).

**Agricultural Outlook**

Drier than average conditions were the norm in 2014, affecting cultivation. The central, mainly agricultural, regions were most seriously affected, although aggregate national crop production is not expected to be significantly affected (WFP, 09/12/2014).

**Livelihoods**

The trend for poppy cultivation in Shan state, which was on the course of being 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 (NY Times, 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**

The biggest challenge in Rakhine is access to healthcare (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. Access to health services in Rakhine state remains significantly below levels before February, when a Médecins Sans Frontières office and Malteser suspended activities, according to the World Health Organization (OCHA, 30/09/2014).

**Nutrition**

In June, 2.1% SAM and 6.8% MAM was found among 32,000 children under five screened in Rakhine. This indicates a deterioration in parts of Rakhine 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 NFI

In Rakhine state, 15,000 people are in urgent need of shelter repair. 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 relying on negative coping strategies, 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).

Legal Status of Rohingya Muslims

In 2014, for the first time, Rohingya were included in the census. The census figures indicated 1.1 million people in Rakhine state, almost a million of them Rohingya Muslims (UNFPA, 30/08/2014).

Over 800,000 people, mostly Rohingya Muslims, are estimated to be without citizenship in the northern part of Rakhine state (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. 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).

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 incidents of sexual violence at the hands of the Myanmar army since Thein Sein’s government took power (local media 26/11/2014).

Assessments in camps for recently displaced people in northern Shan state indicate that domestic violence is prevalent in the 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, 05/10214). Mine clearance has not begun in Kayah state, despite a ceasefire since 2012, and 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. Myths and wrong beliefs about mine risks persist. 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).

On 18 October, a landmine exploded outside a school in Kachin state, injuring three girls (AFP, 24/01/2014). In 2014, 42 children were released from the armed forces on 24 January. In 2014, 376 children were released (AFP, 24/01/2014). One police officer was killed and another injured in two separate incidents, while guarding polio vaccination teams in Karachi (DAWN; AFP).

Updated: 28/01/2014

PAKISTAN CONFLICT, FLOODS, DISPLACEMENT, EARTHQUAKE

LATEST DEVELOPMENTS

26 January: A landmine explosion in Dera Murad district in Balochistan killed five and injured one (AFP).

19–26 January: One police officer was killed and another injured in two separate incidents, while guarding polio vaccination teams in Karachi (DAWN; AFP).
KEY CONCERNS
- Over 1.1 million displaced by military operations Zarb-e-Azb in North Waziristan and Khyber Agency (DAWN, 06/01/2015). There were already 930,000 IDPs in Khyber Pakhtunkhwa and FATA as of mid-December 2013.
- Drought in Tharparkar in Sindh affected nearly 1.74 million people (259,946 families) in 2014 and killed 650, mostly children. 3,800 livestock have died (USAID, 04/12/2014; IPS, 03/01/2015). Dadu, Jamshoro, and Thatta districts were also classified as calamity-hit areas in October (USAID, 27/11/2014).

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 for a probe into allegations of vote rigging by Prime Minister Nawaz Sharif have been taking place in Pakistan since mid-August, led by Imran Khan's Pakistan Tehreek-e-Insaf (PTI) and Tahirul Qadri's Pakistan Awami Tehreek (PAT). There are signs that the military has been exploiting these protests as a means of re-asserting its dominance over civilian authorities (AFP, 10/12/2014). The PTI called off its opposition campaign following the 16 December attacks on a school in Peshawar but warned of further protests mid-January should an independent judicial commission not be formed (The Express Tribune, 30/01/2015).

Security Context
Violence in Pakistan in 2014 involved military operations in tribal areas but also armed group attacks in urban areas and in Balochistan, and tensions along the Pakistan–India border. 1,781 civilians were killed in terrorist violence in Pakistan in 2014, compared to 3,001 in 2013 (SATP, 01/01/2015).
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. Al Qaeda in the Indian Subcontinent will cover Myanmar and Bangladesh, the Indian states of Assam and Gujarat, and the disputed territory of Kashmir (Financial Times, 03/09/2014).

Security in the Federally Administered Tribal Areas (FATA) and Khyber Pakhtunkhwa
Both militant and security sources have stated that a ceasefire with the Taliban, which expired in April, was used by the Taliban to preserve militant bases, and on 10 June, the Taliban vowed to start all-out war. The Government launched operation Zarb-e-Azb in North Waziristan Agency on 15 June, after the declaration of war and a Taliban attack on Karachi airport. A second operation, Khyber 1, began on 18 October in Tirah Valley in Khyber Agency. At 1 December, the army had reportedly killed more than 1,400 militants and 95 soldiers had died. Operations were continuing end January (Al Jazeera, 01/12/2014).

A bomb targeting Shi’ite Muslims in Orakzai Agency killed four and injured eight on 4 January; militants set fire to two primary schools in Kurram Agency on 30 December, causing severe damage (AFP, 04/01/2015; 30/12/2014).

In Khyber Pakhtunkhwa, 141 people were killed, including 132 children, at an army-run school in Peshawar on 16 December in the Pakistan Taliban's deadliest attack to date, in retaliation for the Government operation in FATA (BBC News, 17/12/2014).

Balochistan
The United Baloch Front (UBF) has opposed the alleged annexation of Balochistan since 1948. 2014 saw a sharp rise in acts of violence. Attacks by Islamist armed groups are also a problem in the state.

A landmine explosion in Dera Murad district on 26 January killed five and injured one (AFP, 26/01/2015). Two people were killed and four injured in three separate incidents in Quetta on 8 January (DAWN, 08/01/2015). Nine people, including four officials, were kidnapped by militants in Zhob district over 4–5 January (DAWN, 05/01/2015).

Tensions along the Pakistan–India border
Indian and Pakistani troops exchanged fire along the Line of Control on 5 January, killing four near Sialkot. Tensions escalated on 31 December, when an Indian border guard and two Pakistani paramilitary soldiers were killed during exchanges of fire (AFP, 05/01/2014).
In November, 55 were killed and 120 wounded by a suicide bombing at the main Pakistan–India border crossing near Lahore. The attack was claimed by several factions within the TTP (AFP, 02/11/2014). Mortar shelling killed three and injured one (AFP, 05/11/2014).

Other Incidents
A suicide blast in Rawalpindi in Punjab injured three on 20 January (DAWN, 21/01/2015). A Taliban attack targeting a Shi’ite mosque in Rawalpindi killed seven people and wounded another 15 on 9 January (AFP, 09/01/2015).

Humanitarian Context and Needs
Access
Humanitarian actors reported serious funding constraints on assistance to IDPs, with shortfalls likely in access to health, food, nutrition, education, and child protection (OCHA, 15/12/2014).

Access in Balochistan remains challenging due to hostilities between the Government and
militants, separatist movements, and sectarian violence (ECHO, 20/10/2014).

Security Incidents Involving Aid Workers

One police officer was killed and another injured in two separate incidents on 26 and 19 January, while they were guarding polio vaccination teams in Karachi (DAWN, 27/01/2015; AFP, 19/01/2015).

By November, 79 aid workers, including 36 police escorts and 21 polio workers, had been attacked in 2014 in 71 incidents, 51 of which were linked to polio (OCHA, 30/11/2014). The highest number of incidents occurred in KP, FATA and Sindh (OCHA, 31/08/2014). In 2013, 155 aid workers were killed, 171 seriously wounded, and 134 kidnapped – a 66% increase on 2012 (OCHA, 19/08/2014).

Displacement

IDPs

At 22 January, there were nearly 2.02 million IDPs (301,078 families) in FATA, including 103,356 families in Khyber, 91,606 in North Waziristan, 64,578 in South Waziristan, 21,248 in Orakzai and 19,730 in Kurram (Government, 22/01/2015).

The repatriation of IDPs from North Waziristan and Bara following military operations is scheduled to start on 15 February; the process is expected to be completed by the end of 2015 (DAWN, 21/01/2015). IDPs from Khyber Agency are not planning to return to their homes until security is provided to them, destroyed houses rebuilt and local schools, hospitals, government offices and markets re-opened (DAWN, 27/01/2015).

At end November, 2,543 families in Jalozai camp in Peshawar needed shelter, WASH, health, and protection support; 300 off-camp families in Peshawar, Hangu, and Kohat needed shelter support, information on registration and services, winterised kits, education, and enhanced protection mechanisms (Protection Cluster, 25/11/2014).

Refugees in Pakistan

At end December, 1.5 million Afghan refugees were in Pakistan, mostly in Khyber Pakhtunkhwa (UNHCR, 29/12/2014). Approximately one-third live in refugee villages, and two-thirds in urban and rural host communities; the exact number is difficult to ascertain (UNHCR, 1/11/2014).

Returnees

As of 20 October, nearly 59,200 IDPs (8,837 families) had returned to their place of origin in 2014, including 27,780 to Kurram Agency and 31,425 to KP. In total, 165,603 families had returned to FATA between 2010 and 2014 (UNHCR, 20/10/2014). Many families in Khyber Pakhtunkhwa are not intending to return due to houses destroyed, insecurity, and lack of health services; information regarding the return process is also lacking (Protection Cluster, 12/2014).

Pakistani Refugees in Neighbouring Countries

At 8 January, nearly 283,590 refugees (39,494 families) from Pakistan had arrived in Afghanistan’s Khost and Paktika provinces since mid-June and needed humanitarian assistance (UNHCR, 08/01/2015).

Food Security

1.16 million people need food assistance (OCHA, 25/11/2014). Economic access to food continues to be the main limitation to household food security. 12 districts and agencies are in Emergency (IPC Phase 4) food security and 35 districts in Crisis (IPC Phase 3).

Tharparkar and parts of Umerkot, Sanghar, Khairpur, Sukkur and Ghotki districts in Sindh are in Emergency food insecurity (IPC Phase 4) due to prolonged drought conditions (USAID, 04/11/2014). Populations away from irrigated agricultural land are expected to face difficult conditions in the months ahead (WFP, 09/12/2014).

Populations displaced from FATA continue to be vulnerable to acute food insecurity, particularly with the new influxes from North Waziristan and Khyber Agency (WFP,
31/12/2014). Most conflict-related IDPs rely on negative coping mechanisms and need food support (ECHO, 20/10/2014).

Increasing demand for food and NFIs has resulted in massive inflation: nominal oil prices increased 8%, and sugar prices 9% between July and September, following the trend of previous quarters (WFP, 27/10/2014).

Health and Nutrition

1.21 million people are in need of basic health and quality maternal and child health services. 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).

Diarrhoea

At 22 November, over 2.7 million cases of acute diarrhoea had been reported in 2014, and 48,786 cases of bloody diarrhoea (Government, WHO, 26/11/2014). 150,000 cases of diarrhoea, including 15 deaths, have been reported in Sindh, highlighting a lack of clean water and sanitation facilities (DAWN, 12/01/2015).

Polio

The first polio case of 2015 was reported on 17 January, in Khyber Pakhtunkhwa (DAWN, 18/01/2015).

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).

A vaccination campaign could not be launched in four northern districts of Balochistan on 19 January due to security threats (DAWN, 19/01/2015).

Nutrition

An estimated 2.86 million children and pregnant and breastfeeding women are undernourished in Pakistan (OCHA, 25/11/2014). In Sindh, 1.1 million children under five are acutely malnourished; 400,000 of them are suffering from SAM (ECHO, 20/10/2014).

In the remote Neelum Valley in Azad Kashmir, an estimated 21% of children are acutely malnourished, well above the national average of 15%, which is already at the emergency threshold (WFP, 12/2013). 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 (OCHA, 25/11/2014). An estimated 690,000 people — largely IDPs and returnees in KP and FATA — urgently need assistance in accessing safe drinking water. 186,000 IDPs do not have access to safe drinking water, more than 128,000 remain in need of improved sanitation facilities, and approximately 256,000 people require critical hygiene services (USAID, 04/10/2014).

Shelter and NFIs

Inadequate shelter services, overcrowding, harsh weather conditions, and high rental charges are key challenges for displaced families (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).

960,000 displaced people are in need of shelter, including 85,637 IDP families off-camp and 6,500 in-camp in urgent need of winterised items (OCHA, 25/11/2014).

Education

450,000 children are in need of education. Educational supplies are a major gap in education response, such as school tents, stationery, and other teaching and learning materials. (OCHA, 25/11/2014).

At least 86,000 students from government schools in NWA have been affected by military operations. The number of students enrolled in private schools is unknown. Many educational institutions were occupied by military or security forces (DAWN, 15/07/2014).

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. 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, 20/02/2014).

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: 29/01/2015

INDIA INTERNAL UNREST, FLOODS

LATEST DEVELOPMENTS

26 January: Cases of mosquito-borne Japanese encephalitis have risen five-fold in Assam, in northeast India, in the last five years, to more than 700 cases in 2014. Experts have linked this to warming weather and changing rainfall patterns (Reuters).
On 3 January, Indian and Pakistani troops exchanged fire along the border, killing four people (AFP, 03/01/2015). Local media reported more than 10,000 villagers displaced in Samba and Kathua Districts in Jammu and Kashmir, finding refuge in camps in Hiranagar, Hiranagar, Plat, Kanha, Baniyari and Chadwal (Times of India, 07/01/2014). On 27 November, an army patrol was attacked near the border in the town of Arnia, leaving seven dead, including four civilians (AFP, 27/11/2014). As of 8 October, cross-border fire that began in August had claimed 12 lives in India, most of them civilians, and displaced thousands (AFP, 08/10/2014). Further firing was reported at the end of the month (AFP, 29/10/2014).

**Humanitarian Context and Needs**

**Disasters**

**Cold Wave**

According to the State Disaster Mitigation and Management Centre, 117 people had died in Uttar Pradesh as of 29 December due to a cold wave and snowfall (Times of India, 18, 25, 29/12/2014).

**Cyclone HudHud**

Severe cyclonic storm HudHud made landfall on 12 October on India’s east coast, around the city of Visakhapatnam in Andhra Pradesh. Hudhud affected north coastal Andhra Pradesh, south Odisha, and Chhattisgarh (IFRC, ECDM, 13/10/2014). 920,000 people have been affected. 41,200 houses and buildings were damaged, and about 180,000 hectares of agricultural land was inundated. (OCHA, 20/10/2014). This has been the most costly cyclone to have hit India, with total damage estimated at between USD 9.7 and 11 billion (OCHA, 20/10/2014).

**Floods in Assam and Meghalaya**

Over 20 September–7 October, flash floods and landslides killed up to 95 people. 130,000 houses were destroyed and over 87,000 hectares of crops damaged (OCHA, 07/10/2014, Islamic Relief, 28/10/2014). Experts calculate that about 1.2 million people might have been affected by the flooding (Islamic Relief, 28/10/2014).

**Floods in Jammu and Kashmir**

More than 1.9 million people were directly affected by flooding in September, including 543,380 displaced, 67,930 left homeless and 110,000 evacuated (Caritas India, 25/09/2014). This was the worst natural disaster in 100 years in the area, killing 284 people.

As of 10 November, the most affected areas were Rajouri, Shopia, Anantnag, Poonch, Pulpwana, Kulgam and Srinagar (IO, 10/11/2014). Major parts of Srinagar were completely submerged; the floods swept away the houses of more than 30% of the population living along the river’s path. (IFRC, 08/09/2014; SEEDS 08/09/2014). Winter is threatening the status of the affected population (Sphere India, 12/12/2014).

**Political Context**

Kashmir is a disputed between the Government of India, the Government of Pakistan and Kashmiri insurgent groups, who since the Indo-Pakistan War have fought over control of the area. 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 has now formed a state government.

**Security Context**

On 23 December, the Songbijit faction of the National Democratic Front of Bodoland (NDBF), a separatist group seeking to obtain a sovereign Bodoland in Assam, led an attack that killed 75 people, most of them Adivasis, 18 of them children, in Kokrajhar and Sonitpur districts (Times of India, 23/12/2014; AFP, 25/12/2014). Troops were deployed as residents launched retaliatory attacks on Bodo settlements. More than 2,000 people fled their homes, finding shelter in makeshift camps set up by the state government. The worse-affected districts were Kokrajhar, Chirang, and Sonitpur, while Bongaigaon, Baksa and Udalguri were also affected (Sphere India, 28/12/2014). On 28 December, the Government reported that the situation was returning to normal, as curfews were lifted, and some of the displaced made their way back home (Government, 28/12/2014). As of 4 January, 1,272 people remain displaced in Kumar Gram relief camps, in Alipurduar district, in West Bengal (Sphere India, 04/01/2015).

An IED explosion in the northeastern state of Manipur, which borders Myanmar, killed three people and injured four on 21 December. On 15 December, a similar explosion killed one person and injured five others (AFP, 21/12/2014). No group has claimed responsibility for the attacks.

Kashmir

**Floods in Jammu and Kashmir**

On 3 January, 1,272 people remain displaced in Kumar Gram relief camps, in Alipurduar district, in West Bengal (Sphere India, 04/01/2015). Government reported that the situation was returning to normal, as curfews were lifted, and some of the displaced made their way back home (Government, 28/12/2014). As of 4 January, 1,272 people remain displaced in Kumar Gram relief camps, in Alipurduar district, in West Bengal (Sphere India, 04/01/2015).

An IED explosion in the northeastern state of Manipur, which borders Myanmar, killed three people and injured four on 21 December. On 15 December, a similar explosion killed one person and injured five others (AFP, 21/12/2014). No group has claimed responsibility for the attacks.
A landslide in Phuktal River in the Ladakh Region of Jammu and Kashmir has resulted in the formation of an artificial lake near the village of Shaday Sumdo (ECHO, 22/01/2015). The accumulated water can burst at any time, posing a danger to villages at low-lying areas near the river. A major impact on livelihoods is expected. Regional authorities have advised all villagers in nearby areas to move to safer ground (Sphere India, 22/01/2015).

**Food Security**

With seasonal snowfall expected soon, displaced and affected populations are facing a precarious food security situation. Although the Jammu and Kashmir state governments have promised six months of free food to those affected, but populations in remote areas or with access difficulties had not received food aid as of mid-November (Reuters, 17/11/2014).

Delayed and erratic monsoon rains are expected to reduce 2014 *kharif* (monsoon) cereal production. Additionally, floods and high food prices in some markets are affecting the food security situation for poor households (FAO, 31/10/2014).

**Health**

Cases of mosquito-borne Japanese encephalitis have risen five-fold in Assam, in northeast India, throughout the last five years: from 154 in 2010 to 744 in 2014. Experts have linked this to warming weather and changing rainfall (Reuters, 05/07/2014).

**LATEST DEVELOPMENTS**

No significant developments this week, 29/01/2015. Last update: 07/01/2015.

**KEY CONCERNS**

- 621,400 Syrian refugees since the crisis began in 2012 (UNHCR, 24/01/2015; JRP, 04/12/2014). 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).

**Political Context**

Jordan has remained politically stable despite spiralling crises in neighbouring Iraq and Syria and fears of infiltration by extremist groups, particularly Islamic State (IS). These concerns have increased since Jordan joined the US-led airstrikes against IS in late September. Jordan has a substantial home-grown extremist movement, and thousands of Jordanians are reportedly fighting for opposition groups with links to Al Qaeda, particularly Jabhat al Nusra (JAN), as well as IS, despite the military’s tight control of cross-border movements (NYT, 12/04/2014).

In addition, the country is home to several prominent extremist religious leaders of an older generation, who were linked to Al Qaeda ideology and generally support JAN (Al Jazeera, 07/07/2014). Jordanian protestors have occasionally praised IS or used its slogans during protests about local grievances, including economic issues and police violence, but there is debate over whether the group has substantial support in Jordan (AL Jazeera, 05/07/2014).

The Government has recently cracked down on fighters returning from Syria, and on anyone expressing support for IS, and arrests have increased – though some members of the domestic opposition say the crackdown is being used to stifle local dissent (Al Jazeera, 07/07/2014). Jordan has also increased pressure on the Muslim Brotherhood, arresting one of its prominent leaders in November for harming Jordan’s relations with a friendly state (Jordan Times, 22/11/2014).

In 2011 and 2012, Jordan had an active movement calling for reform—mostly economic relief and an end to political corruption—with street protests primarily led by the Muslim Brotherhood. In 2013, the Government implemented a programme of political reform, which helped calm protest movements. Many analysts have warned the reforms are cosmetic, but public worries about potential unrest are likely to stifle dissent in the short to medium term (CS Monitor, 2013).

Social tensions between refugees and host communities are a concern, primarily due to a sense of competition over housing and jobs, and, to some extent, international assistance (Mercy Corps, 12/2014). There have been few notable incidents, but refugees report widespread discrimination and harassment, and some localised protests have taken place among host communities (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 also significant issues (Government, 12/2014).

**Access**

International NGOs working in Jordan are required to get all projects approved by the...
Ministry of Planning and International Cooperation (MoPIC), and frustration persists among NGOs about the lengthy approval process, and lack of clear guidelines. MoPIC also informally requires all aid agencies assisting Syrians to include vulnerable Jordanians as 30% of their beneficiaries, and some NGOs have faced pressure to increase the proportion of Jordanians 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 Jordanian government institutions, rather than directly to humanitarian actors (JRP, 12/2014).

In 2014, the Government took several measures that will impact refugees’ access to assistance, and which bring up a number of protection concerns.

Displacement

Jordan has hosted numerous waves of refugees throughout its history, including major influxes of Palestinians in 1948 and 1967, and more than 100,000 Iraqis during the height of the Iraq civil war.

Syrian Refugees

Jordan hosts the third largest number of Syrian refugees, after Lebanon and Turkey. As of 24 January, 621,404 Syrian refugees were registered with UNHCR in Jordan; children (0-17) make up 52% of refugees. Around 84% live in urban areas and the remainder in three camps. 155,200 require specific assistance, including 32,836 children: 31,565 have legal and physical protection needs and 28,834 are in a serious medical condition (UNHCR, 24/01/2015). Another 100,000–200,000 refugees may be unregistered (PI, 12/11/2014).

Non-Syrian Refugees

As of 31 December, UNHCR had registered more than 43,000 Iraqis, and the Government estimated there were some 58,000 in the country (PI, 07/01/2015, UNHCR, 01/2015). From September 2014, a new surge in the registration of Iraqi refugees was reported, at times as many as 100–150 each day, matching or exceeding the number of Syrian arrivals. The majority of arrivals originate from Baghdad, although an increasing number are from IS-controlled areas of northern Iraq (UNHCR, 23/09/2014).

Nearly 2,500 refugees and asylum seekers from Sudan, Somalia, and other countries also currently live in Jordan.

Refugees in Host Communities

Most of the 84% of Syrian refugees living outside camps are concentrated around the major urban areas of the northwest, such as Amman and Irbid. Refugees are becoming more vulnerable as their displacement continues. While 91% of refugees are renting homes, over half live in substandard shelters, face rising rents, and many are struggling to pay the bills. With an average expenditure 1.6 times greater than income, refugees resort to a range of coping strategies, including spending savings, living with other families, and taking children out of school. Almost half of assessed households in a 2014 UNHCR report had no heating, a quarter had unreliable electricity and 20% no functioning toilets (UNHCR, 14/01/2014).

In June 2014, REACH assessed 10,500 Syrians residing in 125 informal tented settlements (ITS) across six governorates, nearly half in Mafraq. This is the third such assessment, and the number of ITS has increased considerably; in Mafraq, the number of ITS increased fourfold from Dec 2013 to June 2014, and the number of inhabitants more than doubled (REACH, 02/10/2014)

Camps

Za’atari camp is now one of the largest refugee camps in the world, with about 84,000 residents (UNHCR, 24/01/2015). Recently, 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).

As of 24 January, 11,620 refugees were registered in Azraq camp in Zarqa governorate and 4,745 in the Emirati-Jordanian Camp (EJC) (UNHCR, 24/01/2015). The EJC has received extensive support, primarily from the UAE Red Crescent, however, refugees have complained about limited freedom of movement in the camp (FT, 2014).

Palestinian Refugees from Syria (PRS)

UNRWA currently records 14,736 PRS who have approached the agency for support since the start of the Syrian conflict (UNRWA, 03/12/2014). It is unclear if these cases represent new arrivals, or simply people approaching UNRWA for the first time. 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, UNRWA, 28/10/2014, UNRWA, 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).

Food Security

In October, 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 (UNHCR, 13/01/2015).

In 2015, the value of food vouchers to Jordanian beneficiaries will be reduced from USD 33.60 to USD 28.00/person/month. For January, available funding only allows WFP to
distribute full-value vouchers to the roughly 90,000 refugees in camps, while the more than 400,000 in urban areas are receiving USD 18.20/person/month. Further funding shortfalls are expected over the next two months (PI, 11/01/2015).

In June, 85% of refugees said they would be unable to meet the cost of basic needs without WFP food aid, and 74% said it was their only source of income (CFSME, 07/08/2014). It is reasonable to believe that without food aid, a considerable proportion of refugees will resort to negative coping strategies.

**WASH**

Water resources are scarce in Jordan. The 2013/14 rains were only 77% of the long-term annual average, leading to a reduction in underground water reserves and a marked increase in underground water salinity in some well fields. The situation is expected to result in increased stress on existing water resources (UNICEF/REACH, 31/04/2014).

While Jordan has an effective public water system, reports suggest these facilities are under significant strain in areas with high concentrations of Syrians, resulting in shortages. Municipal sewage and garbage removal services are also under stress (REACH, 12/11/2014, Jordan Times, 04/12/2014, UNDP, 2014). Two out of five Syrian refugees live in poor sanitary conditions, especially people in informal shelters (UNHCR, 14/01/2015).

**Health**

Access to health services is expected to be a significant burden for the most vulnerable Syrian refugees, as free access to health services at Ministry of Health facilities was halted in November 2014. There are also concerns that pregnant Syrian women outside camps do not have access to assistance during childbirth (UNFPA, 31/12/2014).

**Education**

There are roughly 220,000 Syrian school-aged children in Jordan. Preliminary records indicate that more than 109,000 are enrolled in public schools for the 2014/2015 school year, including 19,000 in Jordan's three major camps (Inter-Agency Regional Update, 05/12/2014). Government estimates plan for a total of 125,000 Syrian refugee children in schools in 2015 (JRP, 2015-16).

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.

A study in Za'atari at the end of the 2013/2014 school year found that although attendance had more than doubled since 2013, 48% of school-aged children in the camp were not attending school, 38% were not attending any form of education, and 28% had never attended any form of education in the camp (REACH, 04/11/2014). Boys aged 12–17 were the least likely to attend, with only 33% in school, and 50% not attending any form of education.

**Protection**

Over the course of the conflict, the average number of Syrians able to enter Jordan on a daily basis has dropped from more than 1,700 in early 2013 to fewer than 33 in the last quarter of 2014 (RRP6, 2014-2015 R1). 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. In the last three months of 2014, even those crossings were shut for long periods of time, and refugees have been stranded, leading to protection concerns (IOM, 2014).

There is increasing evidence that the Government is allowing large numbers of refugees into Jordanian territory, screening them, and then returning them to Syria. On multiple occasions in the last quarter of 2014, there were reports that large numbers of refugees had gathered in the no-man’s-land adjacent the last used border crossings, and were inaccessible to UNHCR, though they did receive assistance from the ICRC (NYT, 20/11/2014; UNOSAT, 03/11/2014; UNOSAT/UNITAR, 01/10/2014; PI, 16/12/2014).

In October, 180 out of 950 Syrians allowed to enter Jordan and taken to the Raba’a Sarhan registration center appeared to have been transported to camps (PI, 12/10/2014, 09/10/2014, 18/12/2014, IOM, 01/10-15/10/2014). Mid-December, only 650 out of 1,300 Syrians reported to be in the no man’s-land waiting for entry, were transported to camps (NYT, 12/12/2014; PI, 16/12/2014; IOM, 5/12-19/12/2014). It is assumed that they were returned to Syria; it is also possible that they were allowed entry over a longer period, or that the estimates of the original number were too high. Some reports indicate that large numbers of refugees have been returned from Raba’a Sarhan on other occasions, and that this may be a regular practice in Jordan (PI, 16/11/2014, 15/10/2014).

Jordanian officials continue to 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)

Reports suggesting that Syrians residing in Jordan are also being deported are denied by the Government (HRW, 08/12/2014, 21/11/2014; PI 03/12/2014; Jordan Times, 11/12/2014). Current information makes it impossible to estimate how many Syrians have been deported from Jordan, or whether this number has changed over time. The most vulnerable refugees likely include those without identity documents, or with forged documents; and those who had previously returned to Syria, then re-entered Jordan (PI, 29/09/2014).

**Evictions and Encampment**

Since early 2014, the Government appears to be implementing a more rigorous approach to its encampment policy of Syrian refugees.

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. GoJ has instructed humanitarian agencies not to provide assistance to Syrians who do not have service cards issued by the Ministry of Interior. There is no sign this decision has been enforced, but it creates a vulnerability for agencies (PI, 08/01/2014, 03/12/2014).
Refugees who were brought to camps 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. While for years their presence in urban areas has been tolerated, there have recently been reliable reports that Jordanian authorities have begun enforcing bail regulations. Significant numbers of refugees are being forcibly returned to camps from urban areas (NRC-IRC, 13/11/2014, PI, 03/12/2014, 12/11/2014). The Government has also asked UNHCR not to issue asylum-seeker certificates to Syrians in urban areas who left the camp after 14 July, and who did not obtain bail (PI 16/07/2014 R1, PI 07/2014 R1). These requests are contributing to a climate of fear and may have a significant impact on refugees’ ability to maintain regular status and access services.

In December, more ITS were dismantled, affecting more than 100 families. Some of the inhabitants were returned to camps, with their bail now deemed invalid by the authorities (PI, 10/12/2014, Jordan Times, 09/01/2015). Eviction threats were also given to Syrians discovered living in ITS (PI, 18/12/2014).

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).

Reviewed: 29/01/2015

PHILIPPINES CONFLICT, FLOODS, TYphoon

LATEST DEVELOPMENTS

**25 January:** 43 police officers and five militants were killed as they conducted law enforcement operations in Mamasapano, Maguindanao. More than 3,000 people have moved to an evacuation camp in Mindanao (AFP, CNN, ECHO).

**23 January:** A bomb blast in Guiwan, Zamboanga city, killed one and injured 52 others (Philippines Red Cross, AFP).

**20 January:** An armed clash between Moro and Christian settlers in Tulunan, in Cotabato Province, has caused the displacement of 110 people (OCHA).

KEY CONCERNS

- Over 26,000 people remain displaced ten months after Typhoon Haiyan struck and more than two million lack adequate shelter or housing (FAO, 09/10/2014).
- Thousands of people who fled fighting in Zamboanga in September 2013 are still displaced and being temporarily moved to the Masempla transition site, where minimum standards for WASH and basic services are currently unmet (OCHA, 01/10/2014).
- The Philippines is one of the most hazard-prone countries in the world, experiencing several large-scale natural hazards a year.

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 is relatively stable, and the Philippine authorities are finalising a peace deal with the Moro Islamic Liberation Front (MILF). However, various breakaway armed groups continue the insurgency.

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 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). As of mid-January, there are no reports indicating this has happened.

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 has been reported in November 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, as required under the ceasefire agreement. In the worst fighting since the peace agreement of 2014, 43 police officers and five militants were killed in clashes (AFP, 26/01/2015, ECHO, 28/01/2015; CNN, 27/01/2015). More than 3,000 people were displaced and are at an evacuation camp in Mindanao (ECHO, 28/01/2015).

On 23 January, a bomb blast in Guiwan, Zamboanga city killed one and injured 52 (Philippines Red Cross, 26/01/2015; AFP, 23/01/2015). No group has claimed responsibility, but links to Abu Sayyaf have been made.

On 20 January, an armed clash reportedly between Moro and Christian settlers in Tulunan municipality, in Cotabato province, causing the displacement of 110 people. Insecurity is still a concern in the area (OCHA, 26/01/2015).
Fighters from the separatist group Bangsmoro Islamic Freedom Fighters raided a camp in Sultan Kudarat province on 3 January, killing one soldier and injuring three. The raids aimed at sabotaging peace talks between MILF and the Government (AFP, 03/01/2015).

Abu Sayyaf

Abu Sayyaf has about 300 armed fighters, split into several factions. Incidents were reported in on Jolo Island in July and in Sulu, ARMM, in November (AFP, 16/11/2014). Abu Sayyaf holds about 13 hostages, including three foreigners (AFP, 16/11/2014).

Bangsamoro Islamic Freedom Fighters (BIFF)

BIFF split from the Moro Islamic Liberation Front (MILF) in 2008. Thousands have been displaced by fighting between the Philippine army and BIFF in 2014 (IRIN, 22/07/2014; OCHA). A number of BIFF attacks took place in Maguindanao and Cotabato between September and November 2014, including an attack on a hospital in Maguindanao’s capital Sharif Aguak in October (Missionary International Service News Agency, 23/10/2014).

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

Tropical Storm Mekkala

Tropical Storm Mekkala, locally known as Amanog, crossed over the Eastern Visayas and Bicol regions on 17 January (Government, 19/01/2015). It produced storm surge, strong winds and heavy rainfall. The Government pre-emptively evacuated 114,590, 420 of whom still remained in evacuation centres by 25 January (ASEAN, 25/01/2015). Almost 150 houses were destroyed and two people died (ECHO, 19/01/2015).

Tropical Storm Jangmi

Tropical Storm Jangmi, also known as Seniang, made landfall in Hinatuan on 29 December, affecting about 486,900 people across seven regions, killing 54 and injuring 40. Around 77,400 people took refuge in 187 evacuation centres. 390 houses were destroyed (OCHA, 05/01/2015).

Typhoon Hagupit

Category 5 Typhoon Hagupit, locally known as Ruby, made landfall on 6 December 2014 over the town of Dolores 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

Flood-related displacement

1,000 people are to be pre-emptively evacuated from shanties in low-lying areas of Tunambac Town in Camarines Sur into typhoon and earthquake-resistant shelters (Government, 26/01/2015).

Zamboanga

As of January 2015, an estimated 35,000 people still remain displaced, including around 20,000 who continue living in IDP camps. The rest are either in evacuation centres or transitional sites. Additionally, 15,000 people are thought to be living with host families (IDMC, 16/01/2015). 120,000 people were initially displaced.

Refugees International reported in mid-December that transit sites lack water, health, education, and livelihood opportunities (Refugees International, 14/12/2014).

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).

Ten months after typhoon Haiyan struck, more than two million people lack adequate shelter or housing (FAO, 09/10/2014). Some 456,000 people live in unsafe or inadequate emergency or makeshift shelters, sometimes in flood-prone coastal areas (Government, 31/08/2014), and solutions are needed for 20,000 people still living in 56 displacement sites and requiring shelter, WASH and protection support (UNHCR, 07/11/2014).

With 89% of affected households still reporting varying levels of typhoon-related damage, longer-term assistance such as supporting self-recovery, assisting households in no-build zones, helping with safer reconstruction, and enabling access to health care, schools, public transportation, and livelihood opportunities is required (UNHCR, 30/09/2014).

Food Security

High prices of main staple rice lead to food security concerns. A 4.7% increase on the September 2013 Consumer Price Index was witnessed in September (FAO, 10/10/14).

As of July, flooding had affected 45% of the planted area in Maguindanao, affecting over 5,000 farmers (OCHA, 07/07/2014). Agriculture, fisheries, and agricultural infrastructure were affected by July’s Typhoon Rammasun.

Health and Nutrition

Measles

By October, 117 cases of measles had been confirmed, mostly in Benguet, Baguio and Kalinga provinces, compared to 60 during the same period last year, with a reported death in Baguio city in Benguet province (Government, 20/10/2014).
26% of the population (25 million people) lacks access to improved sanitation facilities, including 8% still practicing open defecation (UNICEF, 01/05/2014).

Education

Ten attacks on schools in Mindanao were reported in 2014, affecting over 3,500 school children (UNICEF, 10/10/2014).

Protection

BIFF continues to actively recruit and train child soldiers.

Updated: 28/01/2015

SRI LANKA  INTERNAL UNREST, DROUGHT, FLOODS, FOOD INSECURITY

LATEST DEVELOPMENTS

9 January: According to WFP, 228,000 people are severely food insecure following the December floods (WFP).

KEY CONCERNS

- An estimated 770,000 people are food insecure due to consecutive droughts and floods (WFP, 01/10/2014).

Political Context

Presidential elections were held on 8 January 2015, two years ahead of schedule (ICG, 09/12/2014). After a decade in power, Mahinda Rajapaksa was defeated by Maithripala Sirisena by a very small margin. Rajapaksa denied rumours that he attempted to use military power to influence the election results, and accepted defeat (AFP, 13/01/2015).

On 12 January, Sirisena announced a 100-day reform plan that would end with parliamentary elections in late April (AFP, 12/01/2015).

Security Context

There was a surge in violence during the campaigning period, including at least 237 major incidents of assault, intimidation or damage to property (Amnesty 06/01/2015). On 5 January, on the last day of campaigning, three opposition supporters were shot at an opposition rally in the southern town of Kahawatte. One was killed and two were wounded (Al Jazeera, 06/01/2015; AFP, 07/01/2015).

Humanitarian Context and Needs

Displacement

IDPs

Government statistics compiled by UNHCR show 820,882 people are estimated to be displaced as of early 2014, living with host families (GIEWS, 04/11/2014). These are attributed to protracted displacement since the violence of 2009; people who cannot return owing to housing, land, or property issues (UNHCR).

Refugees

As of 30 June, there were 308 refugees and 1,562 asylum seekers in Sri Lanka, a 700% increase on 2013 numbers.

On 15 August a Sri Lankan court ordered authorities to stop deporting Pakistani asylum seekers without properly assessing their claims (Reuters, 15/10/2014).

Since early June, national authorities have arrested and detained 328 refugees and asylum-seekers, and deported 183 to Pakistan and Afghanistan (UNHCR, 12/09/2014). Some 157 asylum seekers, including 84 Pakistanis, 71 Afghans, and two Iranians, remain in detention. UNHCR has requested that the Government stop deportations immediately and grant access to asylum seekers in detention to enable protection assistance (UNHCR 12/08/2014).

Disasters

Floods

Severe flooding started on 19 December, caused by heavy rains and high winds, affecting 22 out of 25 districts. Central, North Central, Uva, and Eastern provinces are worst affected (ECHO 30/12/2014). Rains began to abate around the end of December, and the situation is gradually being normalised. People have begun returning home (OCHA, 05/01/2014). The magnitude of the flood disaster is one of the worst recorded in Sri Lanka (WFP, 09/01/2015).

According to the Sri Lankan Disaster Management Centre (DMC), fewer than 100,000 people were affected as of 6 January and 5,700 were in evacuation centres (DMC, 06/01/2015). OCHA reported on 5 January that 1.1 million people were affected; ECHO reported on 22 January that 1.2 million people had been affected (OCHA, 05/01/2014; ECHO, 22/01/2015). Differences in numbers may be due to differing definitions of ‘affected’.

4,970 people affected by floods in October were still in evacuation centres at the time of the latest flooding (Government, 20/12/2014).

Drought

The 11-month drought following the delayed December–February northeast monsoon maha has affected more than 1.2 million people across 13 districts in six provinces, including 900,000 people in the Northern and Eastern provinces, regions that are generally poor,
dependent on agriculture, and lack strong coping mechanisms or infrastructure to withstand the impact of natural disasters (Inter Press Service, 29/09/2014; Government, 21/10/2014; 29/08/2014). Families are suffering from shortages of water for domestic and agricultural use in Anuradhapura, Polonnaruwa, Hambantota, Puttalam, Mannar, Vavuniya, Moneragala, Batticaloa, Mullaitivu, Trincomalee, Jaffna, Kurunegala, and Ampara districts.

The southwest monsoon rains, from May to September, have also been below average (Economic Times, 30/06/2014).

Food Security

228,000 people are severely food insecure due to the December floods, WFP reported (WFP, 09/01/2014).

770,000 drought-affected people are food insecure (WFP, 01/10/2014), mainly in Ampara and Moneragala in the east (WFP, 04/2014 and FAO, 05/2014).

Agriculture and Markets

Overall, crop production has decreased by 42% compared to 2013 (Government, 05/08/2014). Aggregate rice production dropped by 22% compared to 2013, and was 12% below the previous five-year average (FAO, 02/10/2014). The 2014 yala rice output, accounting for 35% of annual production, was 30% lower than last year’s, due to a 29% contraction in area planted and dry weather at the start of the cropping season, particularly in key north-central and eastern producing areas. About one-third of the paddy harvest was also lost by drought conditions in the country (WFP, 01/10/2014).

Updated: 27/01/2015

DEMOCRATIC PEOPLE’S REPUBLIC OF KOREA FLOODS, FOOD INSECURITY, EPIDEMIC

LATEST DEVELOPMENTS

No significant developments this week 28/01/2015. Last update: 30/11/2014

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

On 18 November, 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). In response, DPRK threatened to conduct a nuclear test (BBC, 20/11/2014).

The UN High Commissioner for Human Rights had urged world powers to refer DPRK to the International Criminal Court in February; a UN report documented evidence of widespread and systematic human rights violations and crimes against humanity and recommended targeted UN sanctions. China dismissed a March resolution by the Human Rights Council condemning DPRK for human rights violations as unfounded. DPRK announced in August that would publish a human rights report to counters the claims in the UN report (international media, 08/2014).

On 30 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).

Security Context

DPRK–South Korea

On 12 February, 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, 11/09/2014).

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 risky 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). Poor rainfall has been reported in parts of the country (WFP, 10/2014).

OCHA reports that although the humanitarian situation has improved slightly since 2013, the structural causes of vulnerability persist and external assistance is needed, notably in the northeastern provinces. The food system in DPRK remains highly vulnerable to shocks and serious shortages exist, particularly in the production of protein-rich crops.

Health and Nutrition

Malnutrition

Chronic child malnutrition and poor dietary diversity among children, women, and households remain the main concern. Super cereal, biscuits, pulses and oil are needed to supplement the poor dietary intake among target vulnerable groups (WFP 06/2014).

Reviewed: 28/01/2015

KEY CONCERNS

- 5.2 million people in need of protection. Need for humanitarian aid is still important, especially with winter ongoing (OCHA, 09/01/2015).

- Bureaucratic, security and financial restrictions are impeding response (OCHA, 26/12/2014). Getting in and out of the conflict zone is becoming more and more difficult (MSF, 23/01/2015).

- The health sector has reported that the national pharmaceutical supply is “on the verge of collapse” (OCHA, 24/10/2014). 1.37 million people are in need of healthcare, as they are unable to purchase out-of-pocket health services (OCHA, 08/12/2014).

OVERVIEW

About 921,000 people have been displaced internally and over 600,000 externally, while continued fighting and lack of transportation make it difficult for civilians to escape contested areas. The affected populations, especially in the Donetsk and Luhansk regions, are in most urgent need of shelter, healthcare and protection. There is a critical need of winterised shelter. Medical supplies are lacking and health services are extremely limited. Infrastructure has been damaged or destroyed. The human rights situation is deterioration.

Political Context

On 23 December, the Ukrainian Parliament officially dropped its status of neutrality towards NATO (international media, 24/12/2014).

As of 1 December, allocations from the state budget to areas controlled by the armed groups have been halted, including for social payments (UN, 15/12/2014). On 15 November, Ukraine's President ordered the withdrawal of all state services from the eastern regions held by armed groups, as well as the evacuation of state workers. Banking services could also be withdrawn (international media, 15/11/2014).

Parliamentary elections were held on 26 October. Voters in Crimea and in eastern Luhansk and Donetsk provinces – about five million of Ukraine's 36.5 million electorate – were unable to vote, so 27 of 450 parliamentary seats are empty (AFP, 26/10/2014). On 2 November, opposition groups held elections, and Alexander Zakharchenko was announced head of the self-proclaimed Donetsk People's Republic. Russia was the only state to support the elections (AFP, 03/11/2014; international media, 03/11/2014).

Security Context

As of 21 January, at least 5,086 people had been killed in the conflict, an increase of 200 deaths since the beginning of January. 10,948 people had been wounded. An average of 29 people are being killed per day, making 13–21 January the deadliest
period since the ceasefire declaration of 5 September. The death toll could be significantly higher, according to the UN, since access to conflict-affected areas is restricted (UN, 24/01/2015).

Armed groups control most of eastern Donetsk region and a small area of southern Luhansk region (Government, 13/01/2015). Most of the fighting is in Donetsk and Luhansk city (Government, 13/01/2015). Hostilities in have intensified since January. Tension is again mounting after several days of rocket assaults on the port city of Mariupol left 30 dead and 95 injured (AFP, 25/01/2015). Fighting around Donetsk airport has causing at least 41 casualties since 9 January (AFP, 09/01/2015; international media, 22/01/2015). The airport is reported to have fallen under armed groups’ control (international media, 22/01/2015).

More than 100 Russian vehicles have crossed into Ukraine since October. Some were presumably to deliver humanitarian assistance, some were identified as military trucks (OSCE, 16/11/2014; 12/12/2014).

**Humanitarian Context and Needs**

5.2 million people live in areas directly affected by the conflict and are in need of protection (INGOs, 31/12/2014). An estimate 1.4 million people are highly vulnerable and in need of humanitarian assistance (INGOs, 31/12/2014). Humanitarian needs are significant and growing, and there is a serious lack of response capacity on the ground (OCHA, 14/11/2014; 28/11/2014).

**Access**

Obligatory permit controls have been introduced for anyone crossing the lines separating opposition-controlled areas, in force as of 21 January (AFP, 06/11/2014). However, it is unclear how to obtain a permit, which prevents the local population from accessing humanitarian aid (OSCE, 11/01/2015; 14/01/2015). Getting in and out of the conflict zone is becoming more difficult (MSF, 23/01/2015).

**Security Constraints**

The presence of humanitarian actors is increasing, but bureaucratic, security, and financial restrictions are impeding response at the scale required (OCHA, 19/09/2014; 28/11/2014).

Armed groups have reportedly blocked aid entering territories controlled by the self-proclaimed Donetsk and Luhansk People’s Republics (Amnesty International, 23/12/2014). Checkpoints continue to hamper any increase in the provision of assistance across the frontline (OCHA, 26/12/2014).

**Logistical Constraints**

The Government has decided to halt public transportation in areas controlled by armed groups, hampering humanitarian access (OCHA, 09/01/2015). Months of conflict have severely damaged Donetsk international airport (international media, 01/12/2014). Limited rail transport to the region continues to impede humanitarian access (OCHA, 28/11/2014).

Since 26 December, train and bus connections to Crimea have been suspended (OCHA, 09/01/2015). International shipping has been prohibited from the ports of Evpatoria, Kerch, Sevastopol, Theodosia, and Yalta, on the Crimea peninsula, since 15 July (GARD, 17/07/2014).

**Displacement**

**IDPs**

As of 21 January, about 921,640 IDPs had been registered in Ukraine since March; an increase of almost 50,000 since 14 January (Ministry of Social Policy, 23/01/2015).

As of December, most of the IDPs were in Kharkiv and Donetsk region. 27% of IDPs are children, 21% elderly or disabled, and 65% women (UNHCR, 05/12/2014).

IDPs in private accommodation constitute the majority of the displaced (90–95%) and are often not supported by the humanitarian community (OCHA, 12/12/2014). The absorption capacity within host communities has been weakening and tensions are rising (IOM, 22/10/2014).

**Returnees**

Back and forth movements continue to be reported in territory back under government control (OCHA, 08/12/2014). Some IDPs are reportedly returning to conflict despite insecurity due to exhausted coping mechanisms and rising rent prices (OCHA, 31/10/2014, 14/11/2014).

**Refugees in Neighbouring Countries**

As of 21 January, about 600,000 people have fled to neighbouring countries, around 500,000 of whom have crossed into Russia since the beginning of 2014 (OCHA, 23/01/2015). However, the UN and Russian authorities estimate that 875,000 Ukrainians have actually fled to Russia as of end October. Little humanitarian assistance is provided in Russia, despite signs of a long-term population shift (International media, 03/10/2014). 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 (international organisation, 09/12/2014).

In addition, an estimated 19,000 people are estimated to be displaced within Crimea (IDMC, 31/10/2014).

**Food Security**

1.1 million people are in need of food (OCHA, 08/12/2014). Eastern Ukraine's food reserves are fully depleted and infrastructure is partly destroyed (FAO, 14/11/2014). The most pressing needs are in Zaporizhzhia region, Donetsk region, and in Luhansk region (WFP, 08/12/2014).

The price of the minimum food basket in Donetsk and Luhansk is higher than the national
average by 6.3% and 12.5%, respectively (WFP, 01/12/2014; OCHA, 08/12/2014). Lack of cash and exhausted savings appear to be major issues in some of the areas where food is available but buying capacity does not exist (WFP, 21/01/2015). Preliminary results from the WFP food security assessment indicate that at least 20% of the population living in the five regions of Luhans, Donetsk, Kharkiv, Dnipropetrovsk and Zaporizhzhia have limited access to markets, due to increased food prices, disrupted transport systems, high insecurity, remoteness and lack of hard currency. Negative household coping mechanisms have been observed, with over 80% of interviewed households reported to be relying on less-preferred and less-expensive food and missing one meal a day (OCHA, 08/12/2014).

Livelihoods
1.2 million people are in need of a livelihood (OCHA, 08/12/2014). Around 650,000 pensioners have not received any pensions since August (AFP, 28/11/2014). Many IDPs can no longer afford to pay the rent (UNHCR, 17/10/2014). As of 10 October, nearly 40,000 small and medium businesses in the Donetsk and Luhansk regions have ceased activity (OCHA, 10/10/2014). Unemployment is a key concern for IDPs (OCHA, 26/12/2014).

Industrial production had declined 60% in Donetsk region and 85% in Luhansk by September (OCHA, 08/12/2014).

Health and Nutrition

The safety and security of health workers remains a major concern in conflict areas, preventing access to emergency and primary health services in Shahtersk, Snizhne, Yasinovataya (OCHA, 26/12/2014; 09/01/2015). Targeted attacks on ambulances have been reported (OCHA, 17/10/2014). There are concerns that civilians may have less access to inpatient healthcare than military actors (OCHA, 31/10/2014).

1.37 million people are in need of healthcare, as they are unable to purchase out-of-pocket health services (OCHA, 08/12/2014). The health sector has reported that the national pharmaceutical supply is "on the verge of collapse" and prices of medicines are constantly increasing (OCHA, 09/01/2015). Only 40% of required healthcare provision has been funded in government-controlled areas (USAID, 25/11/2014). As of 31 October, only 25% of required medication had been purchased (OHCHR, 15/11/2014). There are no extra-budgetary resources allocated for IDP health services, overstretching the health system in areas of displacement (OCHA, 08/12/2014).

There are critical supply shortages and access to primary, secondary and emergency health care services remains very limited for populations in Donetsk and Luhansk (WHO, 16/01/2015). Most urgent health needs are in Stanychno-Luhanskyi district of Luhansk region, and Makivka and Novoazovskiy districts of Donetsk region (WHO, 08/12/2014). At least 45 hospitals in Donetsk and Luhansk regions have been destroyed or damaged (OHCHR, 15/11/2014). Between 30% and 70% of health workers are no longer at their posts (WHO, 16/01/2015). Conflict-affected areas are lacking about 20–30% of doctors, 20–50% of nurses, and 50–70% of paramedics (OCHA, 14/11/2014; 09/01/2015). Only half of ambulances in conflict areas are operational for lack of fuel (OCHA, 23/01/2015).

The average vaccination coverage in the country is well under 50% (WHO, 16/01/2015).

HIV/AIDS

Almost 60,000 HIV-infected patients are in urgent need of antiretroviral drugs; the current stock of antiretroviral drugs is sufficient until December, and provision of health products for HIV testing is critical (OHCHR, 15/11/2014; OCHA, 10/10/2014). However, insecurity is obstructing the delivery of supplies (UNICEF, 14/11/2014).

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 who reside in the area (OCHA, 23/01/2015).

Polio

Extreme vaccine shortages, a low rate of vaccination – reported to be 50% – an already weak surveillance system disintegrating, armed conflict, and displacement have all aggravated the risk of polio transmission (Global Polio Eradication Initiative, 02/10/2014; UNICEF, 20/10/2014).

Tuberculosis

Doctors are warning of a worsening tuberculosis epidemic in eastern Ukraine. 48,000 people are registered with the disease; however, one in four people with TB are not officially registered, according to WHO (AFP, 18/08/2014).

In areas under government control, stocks of drug supplies for HIV and TB patients will be finished by March 2015 (OCHA, 23/01/2015). 11,600 multidrug-resistant TB cases also urgently need drugs (OHCHR, 15/11/2014).

Shelter and NFIs

850,000 people are estimated to be in urgent need of shelter and NFIs (OCHA, 08/12/2014). Most urgent needs are in Donetsk, Luhansk and Kharkiv regions (UNHCR, 08/12/2014). Winterisation is an urgent priority, including the provision of warm blankets and winter clothes for IDPs (OCHA, 09/01/2015). Lack of coal and wood is a pressing issue (OCHA, 26/12/2014). NFI needs are more pressing in Luhansk, Donetsk, Dnipropetrovsk, Zaporizhzhia and Kharkiv, especially for new IDPs (OCHA, 23/01/2015). The lack of reliable energy supply over the winter is a serious concern (OCHA, 26/09/2014). 20% of electricity needs are covered in Luhansk (OCHA, 03/10/2014). Supply of electricity in some parts of Donetsk region has been interrupted (UNICEF, 14/11/2014).

According to estimates, more than 33,000 families living in the non-government-controlled areas need emergency shelter solutions or repairs. In the Donbas region, there is need for
NFIs, especially for the 20% of the population previously receiving social service support (Shelter and NFI Cluster, 29/12/2014). More than 12,000 facilities have been damaged or destroyed as a result of the conflict (OCHA, 28/11/2014).

Concerns remain about how to fund the temporary accommodation of IDPs (UNHCR, 23/09/2014; OCHA, 28/11/2014). Due to lack of financial resources and facilities, Government coordination agencies often refuse free accommodation to IDPs (OCHA, 13/09/2014). Collective centres are facing problems due to non-payment of communal and food services, and the prospect of bankruptcy is looming. This is increasing the risk of IDPs being evicted or compelled to return to unsafe areas (OCHA, 23/01/2015). IDPs renting accommodation seem to be excluded from any humanitarian assistance, and in a worse situation compared to those staying in collective centres (OCHA, 14/11/2014).

**WASH**

Water is now available in most areas of government-controlled territory; however, the quality of water is of major concern. People are either buying bottled water or boiling it before they drink (OCHA, 24/10/2014).

750,000 people are estimated to be in need of WASH, most vulnerable people are in Zaporizhzhia, Donetsk and Luhansk regions (OCHA, 08/12/2014; UNICEF, 08/12/2014). 161,260 people in Donetsk and 46,950 in Luhans regions still do not have a reliable water supply due to damage to power lines (UNICEF, 23/01/2015). The delivery of drinking water and hygiene supplies in opposition-controlled areas remains a huge challenge for the humanitarian community (UNICEF, 12/12/2014).

In Donetsk region, damage to critical infrastructure has left approximately 30% of inhabitants without a central water and gas supply (UNICEF, 20/10/2014; OCHA, 08/12/2014). The water system in six major towns was disrupted for 86 days and there is now need for water purification plants (UNICEF, 09/01/2015). Diesel generators are needed to power water pumps and treatment units (OCHA, 28/09/2014).

In Donetsk and Luhansk regions, temporary latrines and disinfection materials are urgently required (UNICEF, 12/12/2014; 09/01/2015).

**Education**

600,000 people in Donetsk and Luhansk need education (OCHA, 08/12/2014). 147 schools have closed in Donetsk region (UNICEF, 19/12/2014). Lack of transportation is preventing children from attending school (OCHA, 09/01/2015). 260,000 children were not able to resume their studies on 1 September (OHCHR, 15/11/2014).

**Protection**

Approximately 100,000 children and adults are estimated to need psychosocial support (INGOs, 31/12/2014).

Human rights abuses committed by armed groups continued to be reported, including abduction, torture/ill-treatment, unlawful detention, execution and forced mobilisation of civilians, as well as the seizure and occupation of public buildings (OHCHR, 15/11/2014).

Up to 600 people continue to be held by armed groups (OCHA, 23/01/2015).

**IDPs**

An increasing number of unlawful refusals of registration and financial assistance, violations of employment rights, and limited access to social benefits is being reported. There are still long waits for IDPs to register with the Department of Social Protection in regions near the conflict zone (OCHA, 12/12/2014). IDPs are often unable to access employment (OCHA, 31/10/2014). UNHCR has reported a pattern of discrimination and stigmatisation against IDPs from the east on political grounds (IOM, 22/10/2014).

**Mines and ERW**

Evidence of widespread use of cluster munitions in some 12 locations has been documented by Human Rights Watch. While it was not possible to determine conclusively responsibility for all attacks, evidence indicates that Ukrainian government forces were responsible for several cluster munition attacks on Donetsk city in early October (Cluster Munition Coalition, 22/10/2014).

Mines and unexploded ordnance have been increasingly reported in areas of Donetsk and Luhansk, with civilian deaths (UNICEF, 22/10/2014).

**Minorities**

An estimated 260,000 Roma live in Ukraine. In August, OCHA reported that the Roma population displaced from Donbas experiences access restrictions to government health and social services: 40% do not have documentation, and many fear registration as IDPs, preventing access to humanitarian assistance. Being registered as Roma may lead to persecution upon return (UNHCR, 17/10/2014).

In Crimea, Crimean Tatars and other pro-Ukraine figures have been forcibly disappeared or gone missing since May (HRW, 07/10/2014).

**Vulnerable Groups**

The situation of people in institutional care is a major concern. Disabled people, orphans, older people and people in psychiatric hospitals are in particular need of immediate protection (UNHCR, 20/10/2014; OCHA, 12/12/2014). There are indications that 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). People with special needs are facing problems accessing services and transportation in areas re-taken by the Government (OCHA, 09/01/2015).

**Women**

Women face prohibition from leaving conflict zones by their partners; rape; forced domestic labour by insurgents; and violence in collective centres (OCHA, 19/09/2014). An increasing number of cases of gender-based violence are being reported in conflict-

affected areas (OCHA, 31/10/2014).

Updated: 26/01/2015

NORTH AMERICA

HAITI FOOD INSECURITY, EPIDEMIC, HURRICANE

LATEST DEVELOPMENTS

27 January: 16,760 IDPs will be affected by the planned closure of 56 camps in Haiti (CCCM Cluster).

22 January: A new electoral council was formed, tasked with organising elections by end 2015 (AFP).

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 (PAHO, 02/12/2014).

- 800,000 people relied on humanitarian assistance in 2014 (UN, 27/10/2014).

- 79,400 IDPs remain in 105 camps as a result of the 2010 earthquake (IOM, 09/01/2015).

- The resilience of the population and its capacity to cope with new crises are generally weak.

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 appoint a unity government on 19 January, and on 22 January the new Prime Minister set up a new electoral council, but tensions with opposition demonstrators are expected to persist, as new ministers have been reshuffled from the previous Government (AFP, 19/01/2015, 22/01/2015).

The Parliament became dysfunctional on 12 January after failing to hold elections within its constitutional framework (UN, 13/01/2015). Elections have been postponed since 2011. 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

In 2014, 800,000 people relied on international humanitarian assistance (UN, 27/10/2014).

Disasters

Nearly 91,000 Haitians have been affected by heavy floods that hit northern and western departments in November 2014. 18 people were killed and more than 22,000 houses damaged. At end December, Nord department still reported significant NFI and WASH needs (OCHA, 31/12/2014).

Displacement

IDPs

At 9 January, 79,400 IDPs remained in 105 camps following the 2010 earthquake (IOM, 09/01/2015). At end December, 80% of displaced households were living in Delmas (49%), Croix-des-Bouquets (15%), Tabarre (9%) and Leogane (8%) (IOM, 27/01/2015). Priority needs include the provision of minimum basic services, protection monitoring and response, and promotion of durable solutions (OCHA, 03/11/2014).

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, 31/07/2014).

Food Security

As of July, 2.6 million Haitians continue to be affected by food insecurity, including 200,000
In October, populations in Artibonite, Nord-Ouest, Sud-Est, and Nippes departments faced Stressed (IPC Phase 2) food security levels (OCHA, 04/10/2014). Parts of Sud, Sud-Est, and Nippes departments are likely to enter Crisis (IPC Phase 3) by March 2015 (FEWSNET, 18/11/2014). Below-average food stocks due to the prolonged drought are expected to result in higher food prices between March and April 2015 (AlterPress, 21/10/2014).

Agricultural Outlook

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).

Heavy rainfall at the beginning of November affected agricultural output, with 62% and 29% losses in breeding production in the north and northeast, respectively (Government, 20/11/2014). In contrast, 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. Potential above-normal temperatures until March could reduce water availability for crops and increase the cost of cropping activities in Artibonite Valley, in Plaine de l’Arcahaie and Plaine du Cul de sac in Ouest, Plaine des Cayes in Sud, and St Raphael and Grison Garde in Nord (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 still not been fully rehabilitated since the earthquake, while a national plan to provide urgent care for cholera patients is still lacking (MSF, 08/01/2015). Lack of mental health support is also reported, with only seven mental health professionals in the country (Alter Press, 10/01/2015).

Cholera

The upward trend in incidence continues at the beginning of 2015, with 50% more cases than in the same period last year.

27,434 suspected cases of cholera and 294 deaths were recorded in 2014, including 11,324 cases and 133 fatalities over 8 November–31 December, a 20% increase compared to the same period in 2013 (ECHO, 16/01/2015). The departments of Artibonite, Centre, Ouest, and Nord are most affected (PAHO, 02/12/2014).

Overall, 725,476 suspected cholera cases and 8,824 deaths have been reported by the Ministry of Health since the start of the epidemic in October 2010 (ECHO, 16/01/2015).

Nutrition

100,000 children under five suffer acute malnutrition, 20,000 of whom are severely malnourished. Ten communes have above 10% GAM (OCHA, 20/08/2014).

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). Access to water sources in Belladere in the 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. 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).

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).

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 2008 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 against minors commonplace (Save the Children, 08/01/2015).

Eviction

Thousands of IDPs in 22 camps are considered at risk of forced eviction, as landowners seek to reclaim their land (ECHO, 15/12/2014). Few are targeted by a return programme (OCHA, 25/11/2014).

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: 29/01/2015

GUATEMALA DROUGHT, FLOODS, FOOD INSECURITY
LATEST DEVELOPMENTS

22 January: 6,652 people have been affected by the cold season since November 2014 (OCHA, 19/01/2015).

KEY CONCERNS

- 1.5 million people have been affected by drought (SESAN MAGA quoted by WHO, 07/11/2014).
- 12,200 cases of acute malnutrition have been recorded among under-fives in Guatemala in 2014, as of 12 October (Government, 12/10/2014).

Humanitarian Context and Needs

Disasters

Cold Wave

6,652 people have been affected by the cold wave since it began in November 2014 (OCHA, 19/01/2015). Since November 2014, approximately 6,688 people have been placed in fifteen shelters around the country (Government, 22/12/2014; 08/01/2015; 16/01/2015).

Drought

1.5 million people have been affected by drought (SESAN MAGA quoted by WFP, 07/11/2014; UNHCR, 12/12/2014). 944,000 people in the Dry Corridor are particularly affected, as they are highly dependent on subsistence farming (ACT Alliance, 15/10/2014). The Government declared a State of Public Calamity due to drought in August 2014 in 16 departments: Jutiapa, Chiquimula, Santa Rosa, Quiché, El Progreso, Huehuetenango, Baja Verapaz, Zacapa, Retalhuleu, Solola, Totonicapán, Chimaltenango, San Marcos, Guatemala, Suchitepéquez and Jalapa. 73% of the country’s territory was affected (UN Country Team, 28/08/2014). On 26 December, the decree was extended for 30 extra days (local media, 26/12/2014).

The Government appealed for international help to deal with the loss of crops in early December (FAO, 11/12/2014). 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 aggravates 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).

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. 9,978 people were evacuated, 4,423 to shelters, two people disappeared, 25 were injured, and 29 died (local media, 03/12/2014). Zapaca department was the most affected: at least 12,000 people from 54 communities were cut off from the departmental capital (Siglo XXI, 19/10/2014).

As of 11 December, 1,568 people in Quiché department were affected by flooding from the Chixoy River, in the municipalities of San Jorge, Tres Lagunas I, Nueva Máquina, Tres Ríos, and Tres Lagunas II and III. Families lost all their harvests (local media, 04/12/2014; 11/12/2014).

As of 28 November, heavy rains and strong winds affected more than 2,200 people in the northern regions of the country. Approximately 1,600 people were affected in Alta Verapaz and Baja Verapaz, where 335 houses were flooded. The remaining 600 affected people were in Petén department, where 300 houses were flooded (local media, 28/11/2014).

Food Security

As of 10 December, 150,000 people (30,000 families) had finished their food stocks and were implementing survival strategies (OCHA, 10/12/2014). 1.5 million people are affected by food insecurity (OCHA, 10/12/2014). Exhaustion of food stocks and reduced income will deteriorate food security to Crisis levels (IPC Phase 3) in January–March 2015 (FEWSNET, 18/11/2014). The projected emergency food assistance needs for February–August will be at IPC Phase 3, higher than the same period in 2014 and the five-year average due to poor harvests and coffee rust (FEWSNET, 22/01/2015).

The coffee leaf rust epidemic, which began in 2012, is affecting the entire Central America region (International Coffee Organization). In Guatemala, some 70% of crops have been affected, corresponding to a loss of 100,000 jobs and a 15% drop in coffee output over the past two years (Save the Children, 29/09/2014).

Agricultural Outlook

70% of small-scale and subsistence farmers have suffered losses due to the drought. 47% of households affected depend on basic crop production (WFP, 07/11/2014). Over 70% crops have been lost in some affected areas of the Highlands (FEWSNET, 18/11/2014). About 75% of maize and beans harvests have been lost (OCHA, 10/12/2014).

Households most affected by drought decided not to plant crops in the second planting season, and in eight of the 16 affected departments, producers are only growing maize. 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). Compulsory vaccination programmes, nutritional vigilance, and specific care for pregnant women and malnourished
As of 2 January, 21,859 suspected cases of chikungunya have been reported and 198 cases confirmed (local media, 17/12/2014; WHO, 29/12/2014).

Nutrition

116 children died from malnutrition in 2014. Between January and November, 14,731 children were reported to be malnourished, which represents a 16% reduction compared to last year (Prensa Latina, 17/12/2014). The highest rate of acute malnutrition was identified in the eastern part of the country with 5.4%. Overall, 4.7% presented total acute malnutrition and 2.5% presented severe acute malnutrition in girls (OCHA, 10/12/2014).

WASH

7,000 people were left without running water in Zapaca following heavy rains and drainage collapse (Prensa Libre, 22/10/2014).

23% of households in drought-affected areas are estimated not to have access to safe drinkable water (SESAN quoted by OCHA, 03/11/2014).

 Reviewed: 26/01/2015

HONDURAS DROUGHT, FOOD INSECURITY

LATEST DEVELOPMENTS

No significant developments this week, 26/01/2015. Last update 07/01/2015.

KEY CONCERNS

- 930,000 people in 165 departments have been affected by drought (Government, 13/01/2015). Choluteca, Valle, El Paraíso, Francisco Morazán, Intibuca and Lempira departments are most affected (EU, 20/08/2014).

Humanitarian Context and Needs

Disasters

930,000 people in 165 departments have been affected by drought (Government, 13/01/2015). 372,000 small-scale and subsistence farmers and labourers were considered to be in need of humanitarian assistance at the end of October (Humanitarian Country Team, 27/10/2014). Choluteca, Valle, El Paraíso, Francisco Morazán, Intibuca and Lempira departments are most affected (EU, 20/08/2014). The Government declared a state of emergency in the Dry Corridor on 5 August (Government, 05/08/2014).

Drought has affected 2.5 million people in Central America (Government, 13/01/2015).

Floods

On 1 December, a red alert – mandatory evacuation – was imposed by national authorities in the department of Atlántida due to expected continuation of heavy rains, and a precautionary yellow alert for the departments of Cortés, Bay Islands and Colon, and northern part of the Yoro department (local media; OCHA, 01/12/2014). In the north, severe storms caused damage and the death of four people (PAHO, 03/12/2014).

Food Security

One million people are affected by food insecurity (OCHA, 10/12/2014). Vulnerable households in parts of southern Honduras will experience Stressed (IPC Phase 2) levels of food insecurity October 2014–March 2015 due to below-average 2014 primera harvests, reduced income from coffee sector employment and sales, and above-average basic food prices (FEWSNET, 18/11/2014).

The projected food security assistance needs for March–August 2015 (until the première harvest begins) are at IPC Phase 3 in southwestern Honduras, higher than the same period in 2014 and the five-year average (FEWSNET, 22/01/2015).

Agriculture and Markets

Secondary season production is not expected to offset crop production losses (WFP, 12/2014). Delayed postera sowing due to moisture deficits in August will result in stepped production.

Maize prices increased by 23% and bean prices by 17% over the third quarter of 2014 (WFP, 27/10/2014).

The coffee leaf rust epidemic, affecting the entire Central American region, is further affecting the livelihoods of small-scale farmers and day labourers. In Honduras, Nicaragua, and El Salvador, 655,000 people are estimated to be food insecure due to the coffee leaf rust infestation (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).

Dengue

As of 2 December, 38,600 cases of dengue have been recorded (local media, 16/12/2014).

Chikungunya

5,338 cases of chikungunya have been reported since October 2014, 96% in the Choluteca
and Valle departments in the south (local media, 14/01/2015).

Nutrition

3.4% of children under five are suffering from acute malnutrition, with a greater impact on girls (5.6%). At least 19,559 children are malnourished as a direct consequence of the drought (OCHA, 10/12/2014).

WASH

The drought has affected access to safe drinking water in the most affected areas (La Prensa, 10/08/2014). 27,300 people are considered to be in need of house disinfection, health education and access to safe water according to a joint assessment between the Ministry of Health and the Water and Sanitation working group (Humanitarian Country Team, 27/10/2014).

Reviewed: 26/01/2015

NICARAGUA DROUGHT, FOOD INSECURITY

LATEST DEVELOPMENTS

No significant developments this week, 26/01/2015. Last update 26/11/2014.

KEY CONCERNS

- About 400,000 people are estimated to be affected by drought, 100,000 of whom are in need of assistance (OCHA, 03/11/2014; ACT Alliance, 31/10/2014).

- Vulnerable communities will face Stressed (IPC Phase 2) Food Insecurity from October to December (FEWSNET, 01/09/2014).

Humanitarian Context and Needs

Disasters

Drought

About 400,000 people were estimated to be affected by drought in November, and 100,000 of them in dire need of assistance (OCHA, 03/11/2014, ACT Alliance, 31/10/2014). It is estimated that 112 of the country’s 156 municipalities have reported damage or loss of crops. Nearly 75% of the primera maize crop was lost (OCHA, 09/08/2014). Latest official assessments have revised estimated losses upward, to 77,000 metric tons of maize and 45,000 metric tons of rice. The most affected areas are the northern departments of Nueva Segovia, Madriz, and Esteli, bordering Honduras.

The drought, which began in late July, has been the worst in more than 30 years. Nicaragua requested aid from humanitarian and development actors in the country (OCHA, 29/08/2014). Drought has affected 2.5 million people in Central America (Government, 13/01/2015).

Food Security

Poor households in northwestern areas will be in Stressed levels of food insecurity (IPC Phase 2) January–March 2015 due to production losses, price rises for basic food products and reduced income opportunities (FEWSNET, 18/11/2014).

Agricultural Outlook

In Esteli, Madriz, Nueva Segovia, Matagalpa, Leon and Chinandega departments, farmers waited until the end of September to sow postrera seeds due to insufficient rainfall, which will result in stepped production.

The coffee leaf rust epidemic, affecting the entire Central American region, is further affecting 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).

Health

Chikungunya

As of 29 December, 1,918 cases of chikungunya have been reported, as well as 1,598 suspected cases, for 2014 (Government, 15/12/2014; WHO, 29/12/2014).

Reviewed: 26/01/2015

SOUTH AMERICA

COLOMBIA CONFLICT, DROUGHT, DISPLACEMENT, INSECURITY

LATEST DEVELOPMENTS

24 January: FARC-EP reported attacks from the military on 12, 18, and 21 January despite the FARC-EP’s unilateral ceasefire (local media, 24/01/2015).

**KEY CONCERNS**

- 4.2 million people are in need of humanitarian assistance (OCHA, 20/01/2015).
- 262,000 people are trapped in their communities due to armed violence (OCHA, 20/01/2015).

**OVERVIEW**

Five decades of armed violence coupled with the country’s frequent natural disasters have had serious humanitarian consequences. Forced displacement, landmine contamination, as well as 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.

**Political Context**

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 aims to ‘end social, political, and economic inequalities’ while the ELN was created based on Marxist-Leninist ideals along with those announced during Vatican II (In Sight Crime). Attempts at peace negotiations in the 1980s and from 1998-2000 failed. The latest peace negotiations began in November 2012 in Havana, Cuba. Agreements have already been reached on agrarian reform, political participation, and illicit drugs. The next round in February will discuss the end of the armed conflict (World Bulletin, 20/01/2014).

**Security Context**

The intensity of the armed conflict has decreased substantially since the start of the peace negotiations in 2012. A 24% decrease in ‘terrorist activity’ was announced by President Juan Manuel Santos in early 2014 as well as a drop in homicides from 16,033 cases in 2012 to 14,782 in 2013 (Colombia Reports 01/2014). Other types of violence prevalent in Colombia include kidnappings and extortion by armed groups and gangs called Bacrim.

**Stakeholders**

**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 in Havana, Cuba, with the aim of putting an end to the conflict and transitioning into peace. On 20 December, FARC-EP announced a unilateral ceasefire (Washington Office on Latin America, 2014).

**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 have been active in Arauca, Nothe de Santander, Nariño and Cauca Departments (Kienyke, 2013).

**Government forces**: The Government of Colombia has uses strategies to combat non-state armed groups. These strategies have been closely linked to eliminating the cultivation of illicit crops in the country which finances the armed groups.

**Bacrim**: Criminal gangs under the names Black Eagles, Erpac, and Rastrojos, among others, are 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 (BBC 29/08/2013) throughout the entire country as well as in Venezuela and Panama, but have a lot activity in Antioquia Department as well as the Pacific and Caribbean Region.

**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).

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 International Service News Agency, 12/01/2015). Disarmament, demobilization and reintegration programmes have been operational since 2003; 56,903 people have been demobilised from armed groups, including 47,770 people who has gone through reintegration programmes with the Colombian Reintegration Agency (Government, 16/12/2014).

**Recent Incidents**

FARC-EP reported being subjects to attacks by the military on 12, 18, and 21 January, resulting in three casualties (local media, 24/01/2015).

**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 (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). In Chocó, an estimated 6,500 people are...
affected. The situation is critical for 2,000. Clashes between the National Liberation Army (ELN) and paramilitary group, Gaitanistas, on 13 June in Alto Baudo, Chocó, caused severe movement restrictions as well as displacement of Afro-Colombian and indigenous populations, mainly in fear of being caught in the fighting (Colombia Reports, 11/07/2014).

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 for fear of coming across (OCHA, 16/01/2015).

Disasters

Approximately 1.5 million people are affected by natural disasters in Colombia every year (OCHA, 20/01/2015). Events include floods, strong winds, high temperatures and droughts. Chocó and Cauca are among the most affected departments.

Droughts

Approximately 566,300 people are affected by drought in the north (OCHA, 22/08/2014). Since the week of 22 December, the drought has heightened the propensity of forest fires, cold waves in the high plains, and a decrease in river levels in the Magdalena River between Port Berrio and Port Wilches (El Espectador, 07/01/2015). Eleven departments are under a state of emergency for forest fires; over 80 emergencies have been recorded in the departments of Antioquia, Quindio, Santander, and Valle (OCHA, 05/01/2015). 30 hectares of crops have been affected by forest fires in Boyaca department (El Espectador, 18/01/2015).

In Chocó department, 200 drought-affected areas lack proper access to water, food security, and are reporting health issues (OCHA, 15/01/2015).

Floods

Floods affected 2,000 people in Timbiqui (Cauca) in early November; houses were damaged and livelihoods lost (OCHA, 11/2014).

IDPs

Colombia hosts 5.1 million IDPs. In 2014, there were 97,450 new IDPs, compared to 228,530 in 2013 (OCHA, 20/01/2015). 39% of the IDP caseload between 2012 and June 2014 was concentrated in the Pacific region. The municipalities of Cali (Valle del Cauca), Popayán (Cauca) and Buenaventura (Valle del Cauca) were the main areas receiving displaced populations. In 2014, new displacement was primarily concentrated in Cauca and Chocó (OCHA, 07/01/2015).

Chocó: 38,320 IDPs (HNO, 2014). Between 27 and 29 November, 414 Wounnan Indians were displaced from Burujon, Buenaventura, and Union Basalito due to fighting between the Marine Infantry and unidentified armed groups (FSC, 2014).

Cauca: 78,550 IDPs (HNO, 2014). Growing insecurity in Alto Baudo since June 2014 has displaced Afro-Colombian and indigenous populations to Cauca Department (OCHA, 2014).

Valle del Cauca: 92,200 IDPs (HNO, 2014). Violence between armed forces and an unidentified armed group has affected up to 3,000 people in indigenous and Afro-Colombian communities on the border of Chocó and Valle del Cauca since September 2014. 800 people have been displaced to Buenaventura (OCHA, 30/11/2014).

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 30% since 2012 (Nuevo Municipio, 26/11/2014).

Food Security

1.2 million people are food insecure (OCHA, 20/01/2015) due to in part to low food production, poverty and internal displacement from the conflict (USAID). Indigenous communities in Nariño are among the most affected by food insecurity. In November 2014, food prices increased compared to previous months (FAO, 31/12/2014). 223,000 persons affected by the conflict are food insecure with 557,000 requiring support to receive food assistance (OCHA, 20/01/2015).

Health and Nutrition

Only 30% of victims have access to healthcare assistance (OCHA, 20/01/2015).

Dengue

In 2014 there were 88 deaths related to dengue, of 108,290 cases (REC, 15/01/2015).

Chikungunya

The city of Medellín, Antioquia Department, declared a health alert due to the chikungunya virus because the department has detected 600 cases. Countrywide, 74,566 cases have been reported as of 7 January, primarily in the Caribbean region (local media, 07/01/2015).

Nutrition

From January to November 2014, 240 children under the age of five died due to malnutrition (RCN, 25/11/2014), including at least 43 in northeastern Colombia (AFP, 09/12/2014). The national GAM was 3.5% in 2010 with rural areas at 4.7% and urban areas at 2.9%. Chronic malnutrition rate was 13.2% in 2010 and projected to be 8% in 2015 (FAO, 05/2011).

WASH

1.1 million people are in need of WASH (OCHA, 20/01/2015). Only 35.5% of the population consumes potable water with only 15% of rural areas consuming water treated (OCHA, 20/01/2015).

Shelter and NFIs
916,000 people need shelter (OCHA, 20/01/2015). Many of those displaced by the armed conflict come from rural areas and have difficulty in re-obtaining rights to their homes. A process is in place in the departments of Atlantico and Magdalena in northern Colombia, though some of the claimants have received threats from paramilitary groups (Amnesty, 23/01/2015).

Education

There are one million school-age children in need of education; 70% in rural regions and 30% in urban areas (OCHA, 20/01/2015; Enseña por Colombia, 2015). There are also more than 3,000 children living in institutions without access to school kits or feeding programs (OCHA, 20/01/2015).

Protection

Afro-Colombians and indigenous peoples are highly vulnerable groups, as they are minorities and generally live in areas that make them more likely to be trapped by conflict (NRC, 09/2014).

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).

Gender and Gender-based Violence

52% of displaced women have suffered some type of sexual violence after displacement according to a study by OHCHR, especially for women in the Pacific region (NRC, 09/2014).

Updated: 26/01/2015

BOLIVIA DROUGHT, FLOODS, FOOD INSECURITY

LATEST DEVELOPMENTS

26 January: 50,000 people are affected by heavy rains and 8,000 hectares of crops have been damaged in La Paz, Cochabamba, Oruro, Santa Cruz, Potosi, and Chuquisaca departments (OCHA, 26/01/2015).

19 January: The rainy season, which will last until March, has left 15 dead so far (ECHO, 19/01/2015; OCHA, 20/01/2015).

KEY CONCERNS

- 500,000 people are affected by heavy rains (local media, 26/01/2015).
- Around 130,000 affected by drought (Government, Media, 10/12/2014).

- Bolivia is prone to natural disasters including earthquakes, floods, and droughts.

Humanitarian Context and Needs

Disasters

A series of natural disasters has affected Bolivia since the beginning of the rainy season in October 2013 and had a severe impact on livelihoods and food security. The 2014 rainy season, lasting from October-March, left 60 dead and 60,000 families affected (Telesur, 19/01/2015).

Drought

Around 130,000 people have been affected by drought, including an estimated 20,000 farmers (Government, 05/01/2015). Four districts have declared a States of Emergency: Oruro, Santa Cruz, La Paz and Chuquisaca (local Media, 10/12/2014).

Estimates indicate that close to 63,000 hectares of crops, including rice, maize, and cassava, have been negatively impacted. In six municipalities in the department of Santa Cruz, more than 54,000 acres of maize have been affected (OCHA, 27/10/2014). 16,000 head of cattle and camels have been lost (REDLAC, 17/11/2014). In the municipality of Azurduy, 50% of the maize and potato crops are damaged (Government, 9/12/2014). It is estimated that approximately 20,000 farmers in 20 municipalities in Cochabamba are affected (Government, 05/01/2015).

Heavy Rainfall and Floods

Since December 2014, 50,000 people have been affected by the rainy season in La Paz, Cochabamba, Oruro, Santa Cruz, Potosi and Chuquisaca departments (OCHA, 26/01/2015). Chuquisaca is worst hit, with 30,100 affected in 13 districts (Government, 23/01/2015). In Santa Cruz, La Paz, and Beni, roads are blocked, and sewer systems and other infrastructure damaged (OCHA, 15/12/2014; ECHO, 07/01/2015; local media, 07/01/2015). In Santa Cruz department, two died as the Grande and Pirai Rivers rose (local media, 06/01/2015). Rains in Cochabamba in mid-December destroyed 4,500 hectares of crops (Government, 17/12/2014; OCHA, 22/12/2014).

In the department of Guanay, 40 houses were flooded, affecting 172 people (local media, 04/01/2015).

Flooding from the Tipuani River in Tipuani department has placed 215 individuals at risk (Redhum 04/01/2015).

In September, 146 of 339 communities were still affected by the flooding of the last rainy season; 11 districts north of La Paz were under a state of emergency (Government). 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).

Landslides
Around 850 people in Luribay, La Paz, have been affected by landslides caused by a severe hailstorm in early November. Some households are living in tents on the town’s sportsfield. The majority of the crops in the town have been lost (PAHO, 04/11/2014; Government, 05/11/2014). North of La Paz, a landslide destroyed the homes of more than 3,600 people (Government, 12/01/2015).

Food Security

Despite losses in the department of Beni, harvest prospects for 2014’s verano season (from 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. 8,000 hectares of crops have been affected by heavy rains (OCHA, 26/01/2015).

Health and Nutrition

In Beni department, 337 cases of dengue were reported in 2014, with 2,889 suspected cases and two deaths (Redhum, 29/12/2014).

Updated: 28/01/2015
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 ongoing 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 ongoing crisis which triggers a change of prioritisation, the Global Overview will be updated on an ad-hoc basis.

Disclaimer

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