Snapshot 6–12 May 2015

**Iraq**: Conflict has escalated in a number of locations. In Anbar, fighting has displaced more than 47,000 in Karmah district, and more than 133,000 around Ramadi. Clashes between Islamic State and government forces have intensified around Baiji oil refinery, in Salah al Din.

**Nepal**: A second earthquake of magnitude 7.3 struck on 12 May. As of 1800 local time, 37 people have been reported killed and 1,129 injured. The earthquake was followed by aftershocks with magnitudes up to 6.3. Major landslides have been reported, further hampering relief efforts.

**Niger**: 3,300 suspected cases of meningitis recorded as an epidemic is declared in eight districts. Vaccines are reported to be out of stock. 39,700 people have reportedly been displaced from islands on Lake Chad, due to planned military operations against Boko Haram.

**South Sudan**: Since the beginning of May, up to 100,000 people have been displaced by fighting south of Bentiu, Unity state. Bentiu’s Protection of Civilians (PoC) site, housing 52,900 IDPs, is so close to the fighting that the displaced are seeking safety elsewhere. Fighting in Upper Nile saw 1,500 IDPs arrive at the Malakal PoC site over 22–23 April.
LATEST DEVELOPMENTS

28 April: The UN Security Council extended MINUSCA’s mandate until April 2016 (UN).

23 April: Moyenne Sido city, Ouham prefecture, was hit by a severe storm affecting 3,500 individuals (IOM, 27/04/2015).

KEY CONCERNS

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

- 2.7 million of 4.6 million people needed immediate assistance, half of them children (OCHA, 31/03/2015).

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

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

- 177,530 IDPs in displacement sites and 43,500 IDPs in Bangui (OCHA, 29/04/2015, 18/03/2015).

- 461,400 CAR refugees in neighbouring countries, 219,720 of whom have arrived since December 2013 (UNHCR 06/03/2015; 17/04/2015).

OVERVIEW

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

Political Context

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

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

A transitional government was formed in August 2014. There will be no national elections before late 2015, and the long duration of the transitional government risks worsening the crisis (Missionary International Service News Agency, 01/09/2014). The ex-Seleka rejected the transitional Government, and proclaimed a de facto, independent, secular state in northeastern CAR in July (IRIN 23/09/2014; Government, 24/07/2014). On 8 April, the ex-Seleka and anti-Balaka agreed to a ceasefire; the transitional Government had rejected a previous ceasefire and did the same to this one (USAID, 10/04/2015). The transitional government postponed the Bangui peace forum involving the two warring factions to 4–11 May. President of Congo, Denis Sassou Nguesso, will moderate the forum (Reuters, 22/04/2015). The forum will include 585 participants who will discuss national security and the economy, the absence of a national army, and inter-communal tensions (BBC, 03/05/2015).

Security Context

More than 5,000 people have been killed since December 2013 (BBC, 07/01/2015). Since January 2014, 1,460 security incidents have been recorded, including 112 in March 2015 (OCHA, 31/03/2015). 76 security incidents were reported in February 2015 (USAID, 10/04/2015).

Stakeholders

Ex-Seleka: Seleka is an alliance of factions created in 2012 and dissolved by President
Conflict Developments

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

Recent Incidents

Nana Grebizi: 300–400 people attacked a MINUSCA camp in Kaga-Bandoro in early April, because UN peacekeepers failed to stop raids by Fulani pastoralists (UNHCR, 10/04/2015; Reuters, 10/04/2015). Continued clashes between ex-Seleka and anti-Balaka along the Kaga Bandoro–Mbres route has resulted in a temporary MINUSCA base in Mbres. Mbres is currently under ex-Seleka control (UNHCR, 17/04/2015).

Ouaka: The area Lihoto in Kouango subprefecture has suffered 17 clashes between ex-Seleka and anti-balaka since June 2014 (ACTED, 19/03/2015). The arrest of alleged Muslim criminals led to the attack of a MINUSCA vehicle on the route from Bambari to Bangui. During the road stop, cars were battered and approximately 17 homes were burned (local media, 11/04/2015).

Humanitarian Context and Needs

As of late March 2015, 2.7 million of 4.6 million people need immediate assistance, half of them children (OCHA, 21/01/2015; 18/02/2015; 31/03/2015). There are 854,070 people of concern, including IDPs and CAR refugees in neighbouring countries (UNHCR, 05/12/2014). Delivery of aid is expected to decline because funding remains low (OCHA, 02/04/2015).

Access

Violent attacks, threats against aid workers, and roadblocks hinder the supply of humanitarian assistance outside Bangui (OCHA, 21/01/2015). Organisations delivering food assistance are challenged by road security (USAID, 13/03/2015). Attacks limiting access to humanitarian assistance increased from 76 in February to 112 in March. They include thefts of humanitarian assets and facilities as well as threats to staff (USAID, 27/04/2015).

Trapped Communities

At end February, more than 36,000 people, mostly but not exclusively Muslim, were trapped in seven enclaves across CAR (WHO, 28/02/2015). As of 10 December, priority areas included Bangui’s PK5 neighbourhood, Yaloke in Ombella 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).

Trapped Fulani in Yaloke (42 of whom have died since their arrival from other conflict areas in April 2014) travelled into the town for the first time in March following negotiations with local leaders (UNHCR, 23/12/2014; Reuters, 25/03/2015). They have resumed limited daily activities in town (USAID, 10/04/2015). On 21 March, looting in Yaloke IDP site heightened tensions (OCHA, 02/04/2015). Since 4 March, 20 IDPs in the family reunification process were relocated from Yaloke to Cameroon (UNHCR, 03/04/2015). 133 left Yaloke from 31 March to 4 April for Cameroon; at 17 April approximately 330 Fulani IDPs were left in Yaloke enclave (UNHCR, 17/04/2015).
Security Constraints

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

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

Security Incidents Affecting Aid Workers

UN, NGO, and private vehicles are becoming regular targets on main roads (IOM, 02/02/2015). On 25 March, a medical worker was killed at a health centre in Gbokolobo village, Ouaka prefecture (OCHA, 02/04/2015). Since January 2014, there have been 166 security incidents against humanitarian organisations, including 14 kidnappings in March 2015 (OCHA, 31/03/2015). There were 22 serious security incidents against UN staff between December 2014 and March 2015 (USAID, 10/04/2015). 18 humanitarian workers were killed and six wounded in 142 incidents in 2014 (OCHA, 04/12/2014; USAID, 19/12/2014).

**Ouaham:** Solidarités International, DRC and Intersos have temporarily suspended activities due to looting and robbery in Kabo (07/04/2015). On 9 April, two cars from the Central African Red Cross were stolen (local media, 11/04/2015).

Disasters

**Ouaham:** On 23 April, a severe storm hit Moyenne Sido, affecting 3,500 individuals. Their households were damaged by different means, including falling trees (IOM, 27/04/2015).

Displacement

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

**IDPs**

As of end April, there are 436,120 IDPs in CAR. Some 177,530 are living in 108 sites countrywide (including Bimbo and Bangui), 225,360 people with host families, and 35,650 people in the forest (OCHA, 07/01/2015; 04/02/2015; UNHCR, 03/04/2015; 21/04/2015).

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

**Bangui:** Relative improvements in the security conditions of some neighbourhoods outside Bangui have reduced IDP numbers in Bangui to 43,500 in 34 sites (OCHA, 14/04/2015; 17/04/2015; 29/04/2015). Some suggest this drop may be due to the poor condition of IDP sites (OCHA, 04/03/2015; IOM, 02/03/2015; UNHCR, 03/04/2015).

Despite its planned closure being overdue, few have left M’Poko and the transitional government has announced that by end May the site will close (OCHA, 14/04/2015). 18,300 IDPs, mostly from Bangui’s 3rd district, remain in the site, as they have been afraid to return home (Reuters, 25/03/2015; USAID, 10/04/2015; OCHA, 14/04/2015; 29/04/2015). A survey of all households previously found that 42% of households plan to resettle in new areas and 55% want to return to their place of origin (OCHA, 18/02/2015; USAID, 27/03/2015). AVICOM is an alternative site, but does not have adequate services and only 350 people surveyed agreed to move there (USAID, 13/03/2015; OCHA, 02/04/2015). Priority needs include shelter and NFI’s, WASH, and health (IOM, 05/01/2015).

**Mambere-Kadei:** In Amada Gaza, a host and transit site, 800 IDPs arrived between December 2014 and February 2015 due to attacks between Gbambia and the Cameroonian border. They need NFI’s, better access to water and schooling (Solidarités International, 05/03/2015).

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

**Ombella-M’Poko:** 21 Fulani herders who had been captured in 2014 were freed by UN peacekeepers in Yaloke. At least 100 are still being held captive (Reuters, 19/04/2015; OCHA, 29/04/2015).

**Ouham:** There are 3,600 IDPs in Kabo and Moyenne Sido IDP sites and 5,200 staying with host-families (IOM, 13/04/2015). There is a need for WASH services and access to education in Kabo and Moyenne Sido (Solidarités International, 31/01/2015). Due to attacks in neighbouring villages, 1,060 IDPs in Kaboro village, Nana-Bakassa sub-prefecture, are in need of NFIs, food, and access to education (Action Contre la Faim, 11/03/2015). 1,100 people fled to Markounda following the killing of two men in Manda village on 8 April (UNHCR, 17/04/2015).

**Ouaka:** There are 57,000 IDPs in the prefecture at 12 March (OCHA, 18/03/2015). In Bambari, there are 9,870 IDPs in Sangaris IDP site; 2,614 IDPs in MINUSCA site; 8,790 at Notre Dame de la Victoire; 9,400 in the Muslim neighbourhood Hadji and Bornu; and 7,900 at Aerodrome (UNICEF, 31/03/2015). In the first weeks of March, 3,000–4,000 IDPs arrived in Grimari, due to ex-Seleka and anti-balaka confrontations. They are in need of food, NFIs, and health assistance (OCHA, 04/03/2015; international organisation, 13/03/2015). Another 6,000 IDPs from the Grimari route and others from Lihoto Kouango subprefecture are living in Azengue-Mindou commune, in Kouango subprefecture (UNHCR, 03/04/2015). This is an area that has suffered 17 clashes between ex-Seleka and anti-balaka since June 2014, resulting in displacement and NFI and WASH needs (ACTED, 19/03/2015). In a survey of the IDPs in Liho, only 11% of those surveyed have access to potable water, the only borehole in the village has not worked in seven years, and the school has been closed for the past three years due to insecurity (ACTED, 19/03/2015).

**Refugees in CAR**

8,100 refugees and asylum seekers are living in CAR (UNHCR, 26/03/2015; 17/04/2015). A rise in security incidents during the first half of February 2015 prompted 150 DRC
nationals to request assistance to return to DRC (IOM, 16/02/2015).

CAR Refugees in Neighbouring Countries

As of April, there are 461,400 CAR refugees in neighbouring countries, 219,730 of whom have arrived since December 2013 (UNHCR 06/03/2015; 17/04/2015). 247,250 are registered in Cameroon, 94,020 in Chad, 94,130 in DRC, and 26,000 in Congo (UNHCR, 17/04/2015).

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

Evacuees

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

Returnees

There are approximately 94,500 returnees in CAR (OCHA, 31/03/2015). At the beginning of March, about 1,000 total people were returning to their districts of origin from displacement sites in Bangui, but many believe this is due to the deteriorating situation of IDP sites and not an improved security situation (OCHA, 18/03/2015).

Mbamou: 2,980 returnees in Debissaka village, Rafai subprefecture, who had fled Ugandan militant attacks, remain in fear, as attacks took place on 27 February and 14 March. Needs include NFIs, safe water, and access to school (ACTED, 22/04/2015).

Ouham: Approximately 4,200 other IDPs have returned home from Kabo due to fatigue and lack of farming space. An estimated 7,000 people have returned to Kouki village, Nana Bakassa subprefecture (1,400 of the original 1,800 households). They are in need of NFIs, food, and health assistance. Child mortality is high (ACF, 22/04/2015). An assessment of Markounda town between 9-11 April found that more than 3,300 returnees lacked access to healthcare services and safe drinking water (USAID, 27/04/2015).

An assessment of Batangafo-Ouandago showed that 439 households, 2,200 people, are returnees in need of NFIs and assistance in rebuilding their shelter (DRC, 21/03/2015).

Food Security

The lean season has begun and is due to last until August 2015. As of 4 March, 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 (OCHA, 04/02/2015; 04/03/2015; FEWSNET, 20/04/2015). About 19% of people in rural areas are in IPC Phase 3 (Crisis) and 12% in Phase 4 (Emergency); food reserves in rural areas are 40–50% lower than average (OCHA, 04/03/2015).

Most IDPs were categorised as IPC Phase 3 (Crisis) in March 2015. Households in the north and northwest and IDPs throughout the country need assistance to prevent further negative coping mechanisms (FEWSNET, 01/04/2015).

Outlook

Most of the population will face IPC Phase 3 (Crisis) conditions, with a minority of households facing IPC Phase 4 (Emergency) conditions until August 2015 (FEWSNET, 13/03/2015). This is worse than the five-year average and a result of insecurity and below-average crop production, food stocks, and household incomes (FEWSNET, 22/01/2015; 13/03/2015).

Agriculture and Markets

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

Health and Nutrition

As of December 2014, two million people need access to health services (OCHA, 19/11/2014; OCHA 22/12/2014). 27% of the health facilities in the country are damaged, and 40% cannot offer health services (WHO, 28/02/2015). 55% of the health facilities are functioning (WHO, 27/04/2015). Only 25% of those offering services have functioning sources of energy, and 21% have access to water (WHO, 31/12/2014). Many health centres have been out of essential drugs for months due to access constraints (IFRC, 05/12/2014). There is a lack of access to health services in IDP sites (WHO, 31/10/2014).

More than 15,000 IDPs from Ngakobo in Ouaka prefecture and health district do not have access to healthcare services (OCHA, 14/04/2015).

Nutrition

Based on a national survey, the country has a SAM prevalence of 6.5% (UNICEF, 08/01/2015). For 2015, 32,350 children under five are projected to suffer from SAM and 75,500 moderately malnourished (OCHA, 04/12/2014; 18/12/2014).

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

WASH

2.3 million people do not have access to improved safe water or improved sanitation (OCHA, 23/09/2014; 22/12/2014). 1.4 million people are targeted for WASH assistance in 2015 (OCHA, 29/04/2015). Western areas as well as Mbomou are most affected.
In Bambari, Sangaris site has 6.8L of water/person/day; MINUSCA has 10L/person/day; Notre Dame de la Victoire 4.0L/person/day; and Muslim neighbourhoods have 2.2L/person/day.

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

Shelter and NFIs

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

Education

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

Only 10% of school-aged returnees in Debissaka village, Mbomou prefecture, are attending school due to security threats and attacks (ACTED, 22/04/2015).

In Bangui’s PK5 district, teachers have been leaving due to insecurity, resulting in 60,000 school-aged children in need of safe learning spaces (USAID, 13/03/2015).

An assessment of schools in CAR noted that from November-December 35% of the schools visited were still or had been functioning, compared to 64% of those visited between January and March 2015. The situation varies across the country depending on number of clashes with schools in nana-Grebizi, for example, closing due to clashes in April 2015. Also in the north of Ouham, Nana-Grebizi and Ouakaalong, fewer than 40% of the schools are functioning.

Protection

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

432 children were killed or maimed by violence in 2014 (OCHA, 04/12/2014). The number of children recruited into armed groups has risen to 8,000–10,000, from 2,500 at the beginning of the crisis (The Guardian, 18/12/2014; OCHA, 02/04/2015). France is in the process of investigating allegations of child abuse by its peacekeeping forces that occurred between December 2013 and June 2014 (Reuters, 29/04/2015).

Updated: 04/05/2015

DEMOCRATIC REPUBLIC OF CONGO
CONFLICT, FOOD INSECURITY,
Kabila’s term (AFP, 22/01/2015). Parliament voted against the legislation, but doubts remain over the scheduling of the preliminary local, provincial, and senatorial polls (AFP, 25/01/2015).

40 activists, musicians and journalists were arrested at a news conference encouraging youth political participation on 15 March; three activists remain in custody. Four pro-democracy activists, members of LUCHA (Struggle for Change), also remain in detention following arrest in Goma on 7 April; many suggest this is due to upcoming elections (Reuters, 16/04/2015; Reuters, 07/04/2015).

Security Context

At least 40 armed groups are operating in the east of the country (ECHO, 22/10/2014). They range from local militias set up initially as self-defence groups (among them many Mayi-Mayı groups), to secessionist groups, and forces first set up by fighters from Uganda (LRA and ADF/NALU), Rwanda (FDLR) and Burundi (FNLI). The UN has a peacekeeping mission (MONUSCO), a mission providing assistance to security sector reform (EUSEC) was extended until 30 June 2015 (EU, 25/09/2014). The UN and the Government are discussing withdrawal of the UN mission (Radio Okapi, 06/04/2015).

The disarmament of the Front of Patriotic Resistance (FRPI), which began in November 2014 was not effective. An increase in attacks in Irumu territory, Orientale has been recorded (OCHA, 19/04/2015).

Democratic Forces for the Liberation of Rwanda (FDLR) are mainly Hutu Rwandans who were allegedly linked to the genocide. An estimated 1,400 fighters are active, primarily in the Kivu region (Reuters, 22/03/2015).

Mayi-Mayı: At least 20 Mayi-Mayı 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 (APF, 2013).

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

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

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

The armed forces of the DRC (FARDC) comprise 120,000–130,000 fighters (Defence Web, 2013). Seven army and police officers were banned from receiving MONUSCO support in March 2015 because they pose a risk of committing human rights violations (Reuters, 11/03/2015).

The UN Stabilization Mission in DRC (MONUSCO) is made up of almost 18,000 troops, as well as military observers and police units (OCHA, 19/04/2015). The initial mission, MONUC, was established after the signing of the 1999 peace agreement between DRC and five regional states. In March 2014 its mandate was expanded, with the creation of an Intervention Brigade, charged with neutralising armed groups (RFI, 20/10/2014). MONUSCO’s mandate was extended for another year in March 2015, although its force was cut by 2,000 troops (Reuters, 26/03/2015; AFP, 26/03/2015).

Conflict Developments

An FARDC offensive on the FDLR began on 24 February in South Kivu, then moving to North Kivu territory, where most FDLR operate (AFP, 23/02/2015, 24/02/2015; 26/02/2015). Recent reports suggest that most FDLR are fleeing into the forest rather than risking combat (Reuters, 08/04/2015).

North Kivu

MONUSCO is preparing for voluntary disarmament of ADF and FDLR militants in Beni and Lubero territories (Radio Okapi, 24/04/2015). Since January, more than 60 people have been killed and around 80 kidnapped (OCHA, 23/04/2015). In Lubero territory, FDLR presence has been reported in the communities of Rusama, Bukumirwa, Kasiki, Luhanga and Buleusa, where the FDLR accuses youth of collaborating with Mayi-Mayi militants (local media, 07/05/2015).

Beni territory: More than 300 people have been killed in Beni since October 2014 (international media, 09/05/2015). On 4 May, armed men fired at a MONUSCO helicopter in Oicha (UN, 04/05/2015). The UN has deployed reinforcements to Beni after suspected ADF killed two peacekeepers and three civilians, and injured 13 others on 5 May near Eringeti town. Four peacekeepers are missing (Reuters, 06/05/2015; RFI, 06/05/2015; international media, 06/05/2015). In April, 33 people were killed (AFP, 24/04/2015; OCHA, 23/04/2015). 200 Ugandan defence force soldiers were reportedly seen in Beni in April (Radio Okapi, 24/04/2015).

Masisi: Renewed fighting broke out mid-March between the Alliance of Patriots for a Free and Sovereign Congo (APCLS) and FARDC around Butemure (UNICEF, 31/03/2015). Communities in Masisi territory say they have seen FDLR activity despite the FARDC having pushed them out. Ten soldiers were killed on 6 April, including three officers (Reuters, 08/04/2015; local media, 08/04/2015).

Rutshuru: Tribal tensions between Hutus and Nande have halted social and economic activities in Nyamilima. Several families sought refuge in the church (local media, 04/05/2015). Armed men kidnapped more than 60 people on 15–16 April (OCHA, 23/04/2015). Six UN peacekeepers were injured in an ambush on the night of 8 April (10/04/2015).

Orientale

The Front of Patriotic Resistance in Ituri (FRPI), LRA, and Mayi-Mayi Simba are all active in Orientale.
FRPI: FRPI has increased attacks on the civilian population in Irumu territory (Radio Okapi, 09/04/2015). 200,000 people are vulnerable to attack (OCHA, 21/04/2015). Armed groups have attacked IDP camps in Irumu territory seven times since the beginning of March, the last being on the night of 7–8 April (OCHA, 14/04/2015).

Mayi-Mayi: On 12 April, the Mayi Mayi Simba attacked some localities in Mambasa territory dressed as FARDC, killing five, kidnapping others, and raping five women (Radio Okapi, 16/04/2015).

Katanga
Active armed groups in Katanga include the Mayi Mayi Kata Katanga, the Mayi Mayi Gedeon, and the Corak Kata Katanga. Since January, the Luba and Pygmies (Batwa) have frequently clashed in Kalemie, Manono, and Nyunzu territories (OCHA, 08/04/2015). 55 people were killed in Pygmy attacks in February and March (Radio Okapi, 20/02/2015; AFP, 25/02/2015; Radio Okapi, 11/03/2015).

In Nyunzu, Luba burned several shelters in an IDP camp in May. Women and children are now hosted in a warehouse and require assistance (ECHO, 05/05/2015; OCHA, 06/05/2015). On 1 May, pygmy militants burned 28 Luba homes in Kazala locality, Manono territory. Following the attack, clashes between pygmies and Luba killed eight and injured 30 (local media, 07/05/2015).

On 14 April, Mujinya IDP site was pillaged by alleged FARDC, causing renewed displacement (OCHA, 29/04/2015).

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

Humanitarian Context and Needs
6.3 million people need humanitarian assistance (WFP, 06/01/2015).

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

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

Katanga: An important trade route connecting the villages of Kabwela and Kakuyu in Katanga has reopened after being cleared of landmines (Mines Advisory Group, 17/03/2015). ACTED suspended its activity in Pweto after 14 April due to threats (OCHA, 29/04/2015).

Security Incidents Affecting Aid Workers

From January to end March, 37 incidents against humanitarian actors were recorded (OCHA, 30/04/2015). There were 35 incidents against humanitarians in North Kivu alone over 14–30 April (OCHA, 30/04/2015). Humanitarian agencies are reporting an increase in kidnapping, robbery and extortion cases in Rutshuru and Walikale territories, North Kivu (USAID, 15/04/2015).

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

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

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

South Kivu: Heavy rains have left approximately 9,700 people without shelter. 16 have died and 12 are missing. Humanitarian access is very limited due to poor road conditions and damage to Kamvimvira and Kawizi bridges, Uvira territory (OCHA, 10/04/2015). In Uvira, rains in March destroyed 1,230 homes, 14 schools, and 850 latrines. In Fizi, 20 died, and 2,300 homes, four schools, and 300 hectares of crops were destroyed (OCHA, 23/04/2015).

IDPs
At end April, there were 2.7 million IDPs in DRC, including 121,000 displaced between January and March 2015 (OCHA, 30/04/2015). 37,800 were displaced between October and December 2014, 609,600 over all 2014 (UNHCR, 28/02/2015; OCHA, 19/04/2015; OCHA, 21/01/2015). 80% of IDPs are hosted by families and communities who are already facing chronic food insecurity and limited access to services and livelihood opportunities (FAO, 20/11/2014).

North Kivu
North Kivu hosts 1,003,250 IDPs, including 60,450 newly displaced in March (OCHA, 17/01/2015; 28/02/2015; 08/04/2015; 14/04/2015; 23/04/2015). 78% live with host families and 22% in IDP sites, most of which are near Goma. Authorities are moving to close the sites down for security reasons (OCHA, 28/02/2015; AFP, 03/12/2014). The IDP breakdown per region is: 19,300 in Goma city; 172,500 in Beni; 158,500 in Lubero; 238,800 in Masisi; 103,500 in Rutshuru; and 249,800 in Walikale (OCHA, 28/02/2015).

Beni: There are more than 5,500 new IDPs in Beni territory since early March (OCHA, 11/03/2015). An estimated 45,000 people remain displaced since operations against ADF/NALU began (UNICEF, 31/03/2015).
Lubero: There are about 34,000 IDPs in Lubero territory (OCHA, 23/04/2015).

Masisi: Some 3,800 people fled their homes on 6 March because of the FARDC offensive against FDLR in Kitchanga and Bibwe (OCHA, 11/03/2015). 1,200 people have fled clashes between FARDC and APCLS (OCHA, 24/03/2015).

Waliwale: 5,300 IDPs were reported in west Walikale and are living with host families (OCHA, 17/03/2015). Approximately 550 IDPs have been identified in Kibua centre (OCHA, 08/04/2015). Some 1,660 IDPs have been reported in Kalonge, Kibue and Limangi on the Mpofu–Kibua route (OCHA, 23/04/2015).

South Kivu
At 31 March, 661,400 IDPs were in South Kivu (OCHA, 30/04/2015). The FARDC offensive against the FDLR has displaced more than 20,200, primarily for the short term. Another 44,000 people have limited mobility. Poor access and limited humanitarian presence make it difficult to measure the impact of the offensive on the population, especially in Mwenga territory (OCHA, 19/03/2015). Approximately 6,500 people have been displaced following clashes between the FARDC and the Mayi Mayi Yakutumba in southern Fizi territory (OCHA, 10/04/2015).

Oriental
As of end March, there were 550,490 IDPs in Oriental province as well as 342,000 returnees (OCHA, 19/02/2015; 30/04/2015). Around 300,000 people are displaced in Ituri district, including 60,000 IDPs from North Kivu (OCHA, 23/12/2014). 80,000 people are still displaced due to FRPI activities (UNICEF, 31/03/2015).

1,200 families (approximately 6,480 IDPs) living in Komanda, Ituri territory, say necessary humanitarian assistance has not been provided (Radio Okapi, 23/04/2015). Some 1,620 people have left two villages in Ango territory due to LRA security threats (Radio, Okapi, 25/03/2015). 1,400 people were displaced from 6–12 April due to FRPI attacks (OCHA, 14/04/2015). More than 10,000 IDPs in CEBCA, Adventiste, Bolombia, and Ngombenyama IDP sites in Omanda locality refuse to be relocated (OCHA, 08/04/2015).

Katanga
Katanga hosts 460,600 IDPs, including 24,400 displaced in the first quarter of 2015 (OCHA, 19/02/2015; 15/04/2015; 21/04/2015). 73% are living with host families and 27% in IDP sites (OCHA, 21/04/2015). 109,566 in Manono; 94,689 in Pweto; 76,063 in Kalemie; 66,314 in Malemba-Nkulu; 48,084 in Mitwaba; 22,998 in Kambove; 14,510 in Nyunzu; 11,341 in Kasenga; 7,198 in Mba; 5,250 in Kabalo; 2,780 in Lubudi; and 1,895 in Likasi (OCHA, 09/04/2015). From January–March 2015, 84,500 people returned home (OCHA, 15/04/2015).

About 16,500 new IDPs were registered in March in Malemba Nkulu and Pweto territories (Radio Okapi, 27/03/2015). Escalated violence between the Batwa and the Luba has displaced an estimated 42,100 people towards Lwizi (Nyunzu) and Nyemba (Kalemie) (UNICEF, 31/03/2015). Approximately 15,000 IDPs, primarily women and children, are living in poor conditions in Nyunzu territory, displaced by intercommunal violence in Manono and Kabalo territories (Radio Okapi, 20/04/2015). 10,000 were displaced from Kabumbulo toward Kibumba, Malemba and Mwanza Seya in mid-March, fleeing Mayi-Mayi attacks (OCHA, 29/04/2015).

Maniema has 181,520 IDPs as of 30 March (OCHA, 19/02/2015; 02/04/2015; 21/04/2015). More than 4,000 people arrived in Pagi and Kabambare territories from South Kivu January–March 2015 due to Raia Mutomboki attacks in Shabunda territory and clashes between FARDC and the Mayi Mayi Yakutumba in Fizi (OCHA, 08/04/2015). 2,700 people were displaced from Fizi territory in South Kivu to Kabambare following clashes on 23 March between the FARDC and Mayi Mayi Yakutumba. On 25 and 26 March, clashes between Mayi Mayi Yakutumba caused further displacement in Munzanza, a mining site (OCHA, 02/04/2015).

Refugees in DRC
DRC hosts more than 221,730 refugees (UNHCR, 28/02/2015; USAID, 15/04/2015; OCHA, 19/04/2015). DRC provincial authorities insist that assistance should only be delivered within camps, making it difficult to support refugees in host communities.

From CAR: As of 21 April, there were 94,130 CAR refugees in DRC, 46,150 of whom had arrived since December 2013 (UNHCR, 26/03/2015; 21/04/2015). 30,000 arrived in Equateur province over December 2014 and January 2015 (Radio Okapi, 28/01/2015). Another 2,400 people arrived in Mobay, Equateur, in mid-February (UNHCR, 24/02/2015; OCHA, 18/02/2015). A new refugee camp for 19,000 is being built in Bili, Bosobolo territory (Radio Okapi, 10/02/2015). The transfer of refugees to Bili started on 13 March and is expected to last 14 weeks (Radio Okapi, 14/03/2015). As of 5 April, there were 2,050 CAR refugees in Bili camp (UNHCR, 03/04/2015).

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

From Burundi: New arrivals of Burundian refugees and returnees have reached 7,189, with an arrival rate of 325 per day. Prior to the recent influx, there were 8,000 Burundian refugees in DRC (OCHA, 23/04/2015). Arrangements are being made to settle 6,000 refugees in Uvira territory and 4,000 in Fizi. Most are female and hosted by local communities (UNHCR, 06/05/2015). New Burundian refugees have not been granted refugee status thus far (ECHO, 21/04/2015).

From Angola: There are 560 Angolan refugees registered in DRC, and 28,000 are undergoing voluntary repatriation (UNHCR, 28/02/2015). From 20 June 2014 until 23 April 2015, 15,520 Angolan refugees had been repatriated (2,970 in 2015 alone) (Government, 30/04/2015).

Returnees
North Kivu: In March, there were 445,610 returnees to North Kivu (OCHA, 06/02/2015; 14/04/2015; 30/04/2015). Some 13,000 people returned to Rutshuru territory between March and April due to a renewed peace (OCHA, 30/04/2015).
Katanga: During the first quarter of 2015, 84,500 new IDP returnees were counted in Katanga (OCHA, 16/01/2015; 21/04/2015). At 31 December, Pweto territory had 65,700 returnees (OCHA, 18/03/2015). More than 5,300 returnees who arrived in Kasenga Ngayie locality, Moba territory, in February 2015 need multisectoral assistance (OCHA, 08/04/2015). Another 5,800 returnees in Kamena, south of Moba territory, who had fled Mayi-Mayi Kata Katanga violence, arrived in September 2014 and are in need of health, nutrition, food and protection assistance (OCHA, 22/04/2015). As of 31 March, there are a total of 322,293 returnees in Katanga (OCHA, 30/04/2015).

Maniema: As of 30 March, there were 181,520 returnees, including 1,200 since January 2015 (OCHA, 30/04/2015).

Orientale: As of 31 March, there were 333,610 returnees (OCHA, 30/04/2015). 3,000 returnees are awaiting registration in Ango territory (OCHA, 24/02/2015).

South Kivu: At 31 March, there were 209,600 returnees from the past 18 months (OCHA, 23/04/2015). 325 DRC refugees previously in Burundi returned to Uvira territory (OCHA, 23/04/2015).

DRC Refugees in Neighbouring Countries

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

Food Security

6.5 million people are facing IPC Phase 3 (Crisis) or 4 (Emergency) food insecurity as a result of armed group activity, inter-communal violence, and displacement (OCHA, 30/04/2015; Integrated Food Security Phase Classification, 28/01/2015; USAID, 15/04/2015). The food security situation in DRC is worsening due to low agricultural productivity, limited access to land, and frequent flooding, with an increase of about 523,000 people in the Emergency phase (Integrated Food Security Phase Classification, 28/01/2015).

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

Oriental: Insecurity in Geti area, Irumu territory, is affecting food security, which was IPC Phase 4 (Emergency) in December 2014; 260,000 IDPs, returnees and local communities are affected (OCHA, 19/04/2015).

North Kivu: Farmers are having difficulties accessing their fields because of movement restrictions imposed by the FARDC and the FDLR, who tend to ask for payment for passage (OCHA, 19/04/2015). An assessment of Mugunga 3 Camp showed that food insecurity increased from 48.7% in January to 60.4% in February. Households are adopting negative coping strategies (WFP, 28/04/2015).

Agriculture and Markets

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

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

Maniema: More than 3,000 hectares of rice crops have been damaged due to Whitefly infestation in Kibombo territory (OCHA, 21/04/2015).

Health and Nutrition

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

More than 17,500 IDPs and host-families in north Beni, North Kivu need health assistance (OCHA, 14/04/2015).

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

576 cases of an unidentified disease similar to malaria has been recorded in Kayna health centre, South Kivu (Radio Okapi, 20/04/2015). 11 children died from malaria in the span of two weeks in Malemba Nkulu, Katanga territory. One of the causes is thought to be the lack of medicine (Radio Okapi, 25/04/2015).

Measles

5,450 cases of measles have been reported since January 2015 (UNICEF, 31/03/2015).

In Katanga, 4,426 cases of measles were reported from January to 26 April 2015, including 78 deaths. In the four weeks to 6 May, 30 children under five have died of measles, and an average of 395 cases has been reported (OCHA, 06/05/2015). 20 children died from measles in the span of two weeks in Malemba Nkulu, Katanga territory. One of the causes is thought to be the lack of medicine (Radio Okapi, 25/04/2015).

Cholera

5,030 cases of cholera were recorded, including 56 deaths, from January to end March 2015 (UNICEF, 02/05/2015). In Katanga, 2,000 cases and 37 deaths were recorded between January and 2 April (UN 02/04/2015; OCHA, 18/03/2015). In South Kivu, 1,820 cases have been reported (UNICEF, 31/03/2015). In North Kivu, 880 cases were recorded from January to March 2015 (UNICEF; 31/03/2015; OCHA, 24/03/2015). As of 6 April, 75 cases of cholera and five deaths have been reported in Orientale (OCHA, 08/04/2015; 21/04/2015).
In 2014, there were 22,200 cases of cholera and 372 deaths, compared to 26,440 cases in 2013 (WHO, 31/12/2014; UNICEF, 24/12/2014).

Nutrition

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

WASH

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5,000 IDPs in Bwalanda, Kashiliira and Kikukku sites in Rutshuru territory, North Kivu need urgent WASH assistance. There is a lack of humanitarian actors doing WASH in this area (OCHA, 14/04/2015).

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

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

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

Shelter

More than 235 people in Yamwanda village, Equateur, lost their homes to fire during a month of intercommunal violence (Radio Okapi, 02/04/2015).

Heavy rains on 3 April destroyed more than 85 houses in Durba, Orientale (Radio Okapi, 04/04/2015). An estimated 9,670 people have been left without shelter in Uvira territory due to heavy rains and winds (OCHA, 10/04/2015).

Education

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

Only 40% of school-aged children are attending school in Equateur (Radio Okapi 07/02/2015).

In Katanga, 3,600 students in Malemba Nkulu have not had access to school since 15 January due to insecurity (OCHA, 12/02/2015). Another 6,000 school-aged children are out of school in Kalemie, Nanono, and Nyunzu territories due to clashes between Batwa and Luba, fires, and heavy rains in their localities (OCHA, 08/04/2015). Five schools have been closed since October 2014 in Manono territory, Katanga, affecting 950 students (Radio Okapi, 31/03/2015). More than 85% of the 2,000 school-aged children in Kasanga Nyemba, Kalemie territory, are not attending school (OCHA, 22/04/2015).

In Rutshuru territory, confrontations between the FARDC and the FDLR are compromising school activity (OCHA, 24/03/2015).

Protection

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

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

Kidnapping

Between 8 and 17 March, 26 kidnappings were reported in North Kivu, including four INGO staff (OCHA, 17/03/2015). Around 30 people were kidnapped by the FDLR in Rutshuru territory, North Kivu on 15 April (Radio Okapi, 16/04/2015).

Child Protection

4,500 child soldiers left armed groups to be reintegrated into society in 2014 (Radio Okapi, 03/03/2015). In Orientale province, 450 children are still active in armed groups (OCHA, 24/02/2015). From January to March 2015, 924 children were released from armed groups throughout the country, including 809 in eastern DRC (UNICEF, 31/03/2015).

SGBV

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

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

In Orientale, FRPI are using sexual violence. In Bunia, Irumu and Mambasa territories, 42 cases of sexual violence were reported in February 2015 (OCHA, 19/03/2015). 90% of the 2,900 cases of SGBV reported in Orientale in 2014 occurred in Ituri territory, the others in Uvira territory (OCHA, 08/04/2015; 19/04/2015). On 12 April, in Mambasa territory, the Mayi Mayi Simba attacked localities and raped five women (Radio Okapi, 16/04/2015).

There were more than 600 cases of SGBV reported From January to end March in Katanga. 50% came from Nyunzu territory (OCHA, 22/04/2015). Approximately 100 minors were raped in January 2015 in Kalemie, Moba, and Pweto in Katanga province (Radio Okapi, 19/02/2015). In the past year and a half, rapes of young children and babies have been reported (AFP, 19/03/2015).

1,680 SGBV cases were reported in 2014 in Katanga and 840 in Kasai-Occidental (OCHA, 05/02/2015; Radio Okapi, 11/02/2015). 2,012 were reported in Orientale province, and...
Updated: 11/05/2015

**NIGERIA CONFLICT, FOOD INSECURITY, EPIDEMIC, DISPLACEMENT**

For more information, visit the ACAPS country analysis page.

### LATEST DEVELOPMENTS

**6–8 May:** Around 14,000 Nigerians have arrived at a transit camp in Geidam, having been ordered to leave Niger islands on Lake Chad before planned military operations against Boko Haram (OCHA).

**8 May:** A suspected Boko Haram attack on a school in Potiskum in Yobe state wounded 12 students (AFP).

### KEY CONCERNS

- Around 5,825 deaths from Boko Haram-related violence in 2015 as of early May. 7,711 deaths from Boko Haram-related violence was reported in 2014, half of those reported since May 2011 (ACLED, 07/05/2015; 11/01/2015).

- 1.5 million IDPs (IOM, 29/04/2015).

- 4.6 million people in need of humanitarian aid (OCHA, 08/05/2015).

- 3 million in the northeast expected to be in need of food support until at least October (FEWSNET, 03/2015).

- 1.5 million in need of nutrition assistance, including 461,000 children under five suffering from SAM (OCHA, 10/02/2015).

- 2.2 million people are in need of WASH assistance; 1.9 million in need of shelter and NFI's; 2.2 million in need of protection; and 3.5 million people in need of healthcare (OCHA, 03/2015).

- 1,786 cholera cases reported since January 2015, with 73 deaths (UNICEF 22/03/2015).

### OVERVIEW

Violence has internally displaced more than 1.5 million people, restricted movement, disrupted food supply, seriously hindered access to basic services, and limited agricultural activities. People affected by violence in Adamawa, Borno, and Yobe, and neighbouring Bauchi, Taraba, and Gombe states are in urgent need of protection, shelter, food, and access to health services and education.

### Political Context

Incumbent President Goodluck Jonathan, whose party has led the country since 1999, lost to Muhammadu Buhari from the opposition All Progressives Congress (APC) during the March elections. Buhari is a former president and military ruler from northern Nigeria (AFP, 02/04/2015; 11/12/2014). Although irregularities have been alleged and protests reported, the elections did not spark large-scale violence or displacement (Guardian, 31/03/2015).

National organs were accused of aiding APC supporters in Abia, Imo, Plateau, and Zamfara states during the April state governorship and parliamentary elections (AFP, 04/04/2015). The APC won 21 of Nigeria’s 36 states. 66 violent incidents at polling stations were reported, mostly in Rivers and other southern states (BBC, 13/04/2015).

### Security Context

In 2015, 5,825 fatalities were reported from nearly 240 violent events involving Boko Haram (ACLED, 07/05/2015). Since the end of 2014, the conflict with Boko Haram (BH) has taken on a more regional dimension, with BH attacks in Cameroon, Chad, and Niger, and a strengthened multinational force. With the engagement of regional forces, the Nigerian Government regained territory in early 2015. Boko Haram’s insurgency had gained momentum in 2014, when 7,711 deaths due to Boko Haram-related violence were reported by media sources, over half of those reported since May 2011 (ACLED, 11/01/2014).

### Inter-communal Violence

Inter-communal clashes fuelled by ethnic and religious tensions, as well as competition between farmers and pastoralists, flare regularly in the Middle Belt area (Benue, Kaduna, Plateau, Nassarawa, and Taraba states) (IDMC, 12/2014).

On 19 April, at least 23 villagers died in inter-communal clashes between the Ologba and Egba communities in Benue state, reportedly due to a conflict over fishing rights (AFP, 19/04/2015). In March, 118 people were killed attacks by suspected Fulani herdsmen, which also caused injuries and displacement (AFP, 17/03/2015; ECHO, 17/03/2015). In 2014, around 1,700 people died in inter-communal violence (ACLED, 2014; ICG, 01/10/2014).

### Stakeholders

**Boko Haram (BH)**

Boko Haram (“Western education is forbidden”) 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. Their precise troop number is unknown but estimated at around 15,000 (Amnesty, 13/04/2015). In March, BH pledged allegiance to Islamic State (AFP, 07/03/2015).

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

Regional Forces

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

The Multinational Joint Task Force (MJTF) has reached 10,000 military and civilian personnel, including larger contingents from Chad, Cameroon, Niger in addition to Nigeria and Benin (UNHCR, 26/03/2015). About 2,500 Chadian troops withdrew from Nigeria mid-March, with indications they would be redeployed for fresh offensives elsewhere (AFP, 29/03/2015). The scope and remit of the regional force is unclear; failure to maintain control over liberated towns, such as Gamboru in Borno state in March, have also suggested co-ordination problems between allies (AFP, 20/03/2015).

Conflict Developments

The renewed military offensives early 2015 and territorial gains made by regional forces have prompted BH to revert to guerrilla tactics of village raids, abductions, bombings and suicide attacks, with civilians, including IDPs, increasingly targeted (AFP, 23/03/2015). BH have carried out mass killings and destruction before leaving villages they raided, such as in Bama in mid-March (AFP, 17/03/2015). Reprisal attacks against Arabic speakers in the northeast have also been reported over accusations of aiding Chad's army (Reuters, 12/03/2015). In the first three months of 2015, BH killed at least 1,500 civilians (Amnesty, 13/04/2015). On 22 April, the military announced operations in Sambisa forest, thought to be BH's last stronghold (Reuters, 22/04/2015).

BH has carried out several unsuccessful attacks on Maiduguri since it was repelled by Nigerian security forces and civil militia in February (AFP, 07/03/2015; 14/03/2015). Military counteroffensives, however have recaptured 36 towns from BH in Borno (US Institute of Peace, 09/01/2015; AFP, 17/03/2015).

Recent Incidents

**Borno state**: Hundreds of people have been found dead in Damasak after new BH attacks (AFP, 27/04/2015). On 24 April, BH recaptured Marte, which had been liberated by the military only weeks before (AFP, 25/04/2015). Over 4–10 April, at least 30 people were killed after suspected BH raided Buratai, Kwajaffa and Kayamla villages (AFP, 10/04/2015; 06/04/2015; 04/04/2015).

BH reportedly kidnapped over 400 women and children from Damasak before retreating from the town in early March. Other reports cite about 500 children under 11 were taken (BBC, 24/03/2015).

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

**Rivers state**: Unidentified gunmen invaded Obrikom and Obor communities, killing six people and injuring two (AFP, 04/04/2015).

**Yobe state**: On 8 May, a suspected BH attack on a school in Potiskum wounded 12 students (AFP, 08/05/2015). On 24 April, BH killed 21 people returning to Bultaram village in Gujba district (AFP, 27/04/2015). On 20 April, a suspected BH suicide attack suicide injured three outside a Shi'ite mosque in Potiskum (AFP, 20/04/2015).

Humanitarian Context and Needs

Some 9.7 million people are staying in 34 areas worst affected by the insurgency, including IDPs. The entire population of northeast Nigeria – 24.5 million people – is indirectly affected by the insurgency, while 4.6 million are in need of humanitarian aid (OCHA, 08/05/2015; 30/04/2015). The situation is compounded by limited international presence in the area.

**Access**

Humanitarian assessments are severely challenged as security concerns are preventing access to some areas near Sambisa forest (OCHA, 30/04/2015).

In Borno state, most routes to affected areas are inaccessible. The road from Damaturu, Yobe state, is the only route for bringing food and other basic commodities to Maiduguri and northern Borno state (ECHO, 13/01/2015). Maimaiduguri airport is closed to commercial flights.

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

Media access has also often been prohibited, with BH having destroyed communication and media infrastructure (Reporters without Borders, 05/02/2015).

While the food security sector is 33% funded, health (0%), shelter and NFIs (0%), infrastructure (0%), and media infrastructure (Reporters without Borders, 05/02/2015).

Recent BH attacks have prompted BH to revert to guerrilla tactics of village raids, abductions, bombings and suicide attacks, with civilians, including IDPs, increasingly targeted (AFP, 23/03/2015). BH have carried out mass killings and destruction before leaving villages they raided, such as in Bama in mid-March (AFP, 17/03/2015). Reprisal attacks against Arabic speakers in the northeast have also been reported over accusations of aiding Chad's army (Reuters, 12/03/2015). In the first three months of 2015, BH killed at least 1,500 civilians (Amnesty, 13/04/2015). On 22 April, the military announced operations in Sambisa forest, thought to be BH's last stronghold (Reuters, 22/04/2015).

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**Recent Incidents**

**Borno state**: Hundreds of people have been found dead in Damasak after new BH attacks (AFP, 27/04/2015). On 24 April, BH recaptured Marte, which had been liberated by the military only weeks before (AFP, 25/04/2015). Over 4–10 April, at least 30 people were killed after suspected BH raided Buratai, Kwajaffa and Kayamla villages (AFP, 10/04/2015; 06/04/2015; 04/04/2015).

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**Access**

Humanitarian assessments are severely challenged as security concerns are preventing access to some areas near Sambisa forest (OCHA, 30/04/2015).

In Borno state, most routes to affected areas are inaccessible. The road from Damaturu, Yobe state, is the only route for bringing food and other basic commodities to Maimaiduguri and northern Borno state (ECHO, 13/01/2015). Maimaiduguri airport is closed to commercial flights.

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

Media access has also often been prohibited, with BH having destroyed communication and media infrastructure (Reporters without Borders, 05/02/2015).

While the food security sector is 33% funded, health (0%), shelter and NFIs (0%), infrastructure (0%), and media infrastructure (Reporters without Borders, 05/02/2015).

Recent BH attacks have prompted BH to revert to guerrilla tactics of village raids, abductions, bombings and suicide attacks, with civilians, including IDPs, increasingly targeted (AFP, 23/03/2015). BH have carried out mass killings and destruction before leaving villages they raided, such as in Bama in mid-March (AFP, 17/03/2015). Reprisal attacks against Arabic speakers in the northeast have also been reported over accusations of aiding Chad's army (Reuters, 12/03/2015). In the first three months of 2015, BH killed at least 1,500 civilians (Amnesty, 13/04/2015). On 22 April, the military announced operations in Sambisa forest, thought to be BH's last stronghold (Reuters, 22/04/2015).

BH has carried out several unsuccessful attacks on Maimaiduguri since it was repelled by Nigerian security forces and civil militia in February (AFP, 07/03/2015; 14/03/2015). Military counteroffensives, however have recaptured 36 towns from BH in Borno (US Institute of Peace, 09/01/2015; AFP, 17/03/2015).
of whom are under five; 90% live with host families, while the others live in 42 sites (IOM, 29/04/2015). Some 2,000 IDPs fled Gwoza and Bama towns in April for Maiduguri (OCHA, 30/04/2015).

63% of IDPs in Borno state are in Maiduguri. In April, some 2,000 IDPs fled to Maiduguri from Gwoza and Bama, where all social services have been destroyed (OCHA, 30/04/2015; IOM, 29/04/2015).

12% of IDPs in Borno state are residing in 16 sites (114,360 individuals): ten are in Maiduguri. 10% of IDPs in Adamawa state (21,950) are living in 15 displacement sites, mainly in Yola south and Girei, while 10% of those displaced in Taraba state (6,300) are living in 10 sites (IOM, 29/04/2015).

Displacement sites are expected to be closed down in the coming months, and IDPs relocated (IDMC, 16/04/2015).

Returnees

Over 6–8 May, around 14,000 Nigerians arrived at a transit camp in Geidam, as they were ordered to leave islands on the Niger side of Lake Chad before planned military operations against BH (OCHA, 08/05/2015).

IDPs in northeastern Nigeria are increasingly returning home despite persistent insecurity and critical lack of access to basic services (OCHA, 28/04/2015). 800 IDPs were relocated from Pom pomari site in Damaturu to Adamawa, Borno, Gombe, and Yobe states. Returnees in Adamawa state are in urgent need of shelter, food, health, and education, as villages have been severely damaged by the insurgency. Concerns remain over mines/IED/UXO presence in locations where IDPs are planning to return (OCHA, 30/04/2015).

Refugees

As of 17 January, there were 2,120 refugees and asylum seekers of different nationalities in Nigeria (UNHCR, 08/04/2015).

Nigerian Refugees in Neighbouring Countries

At least 158,000 refugees have fled to neighbouring countries, mainly to Niger, Cameroon, and Chad (OCHA, 08/05/2015).

Food Security

Dry spells have been affecting southern Nigeria for the past few weeks and are expected to continue (FEWSNET, 24/04/2015). 4.6 million people are estimated food insecure (OCHA, 08/05/2015).

More than three million people are expected to be in need of food assistance in the northeast in the coming months (FEWSNET, 11/05/2015; 31/03/2015; 03/2015). The number of areas in Crisis (IPC Phase 3) food insecurity is expected to increase in Borno, Yobe, and Adamawa states until the main harvest in October, as more households begin to face food consumption gaps. Areas worst affected by conflict are expected to be in Emergency (IPC Phase 4) food insecurity in July. Minimal (IPC Phase 1) acute food insecurity is expected for most households outside the northeast through at least September (FEWSNET, 11/05/2015; 31/03/2015).

Agriculture and Livelihoods

Food prices are atypically high in Maiduguri, as food stocks within the host community are depleting rapidly. At least 350,000 farming households in Michika, Madagali, Hong, and Gombi in Adamawa state are in urgent need of agricultural support (OCHA, 30/04/2015).

Boko Haram enforces rigid movement restrictions and some limitations on trade, negatively impacting people’s ability to obtain food and gain a livelihood (Amnesty, 13/04/2015).

Health and Nutrition

3.5 million people need health assistance. There is a need to pre-position more emergency supplies in IDP camps and host communities, especially in Borno, Adamawa, and Yobe states, as the IDP population increases with continued attacks (OCHA, 04/03/2015; 04/03/2015). Mortality rates are increasing and vaccination programmes severely hit, with polio vaccination campaigns limited to Maiduguri.

IDPs emerging from captivity, including from Gwoza and Bama, require urgent psychological support (OCHA, 30/04/2015). Most IDPs in host communities have limited access to health services due to various constraints such as lack of information on services and transportation costs (OCHA, 02/10/2014). 3,000 health facilities in the northeast are closed or have been partially destroyed (OCHA, 08/10/2014). As of March 2014, only 37% of health facilities in Adamawa, Borno, and Yobe states were still functioning.

Cholera

Since January 2015, 1,786 cholera cases have been reported, with 73 deaths (UNICEF, 02/05/2015). There has been a resurgence of cases in Kano and Kaduna states, and there is a risk the outbreak could spread further (UNICEF, 10/02/2015). 35,996 cholera cases, including 753 deaths were reported in 2014.

Meningitis

As of 22 February, 479 cases of meningitis, with 38 fatalities (7.9% case fatality rate) were reported in four areas in Kebbi and Sokoto states. Aleiro in Kebbi and Gudu in Sokoto are in epidemic phase due to very high attack rates, and Jega and Gwandu in Kebbi are in alert phase (WHO, 22/02/2015).

Nutrition

1.5 million malnourished children and pregnant and lactating women are in need of nutrition assistance, including 461,000 children suffering from SAM (OCHA, 08/05/2015; 04/03/2015). Around 100,000 children in camps are thought to be suffering from SAM (OCHA, 30/04/2015).
In the northeast, 12% of children suffer from GAM (UNICEF, 13/01/2015). 8.7% of children in Maiduguri and Jere, in Borno state, suffer from SAM, and 27.8% from MAM. The nutritional situation of the displaced and host communities is rapidly deteriorating (ECHO, 14/03/2015).

Polio

The number of children missing out on polio vaccination because of insecurity increased from 778,000 in November 2014 to more than 1.1 million in January 2015 (UNICEF, 13/04/2015). In 2014, 30 type 2 polio cases were reported, and six cases of poliovirus type 1 (GPEI, 15/04/2015).

WASH

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

WASH conditions in IDP host communities are critical, with reports of inadequate latrines and lack of access to safe water (IDMC, 16/04/2015). In the northeast, only 46% of the population have access to improved sources of drinking water and 21% to latrines (UNICEF, 13/01/2015).

Shelter and NFIs

1.9 million people are in need of shelter and NFIs; people in conflict-affected areas whose homes were damaged are particularly affected (OCHA, 04/03/2015).

In 14 IDP sites, up to a quarter of IDPs are living outdoors. Shelter repair is a priority need in 36 IDP sites, while blankets are reported as the most needed NFI (IOM, 29/04/2015). Only 10% of IDPs in the camp were reported to have a roof, WASH facilities were lacking, and many relied on relatives for food (MSF, 31/03/2015).

Education

10.5 million children are out of school in Nigeria, including 60% in the northeastern part of the country (UNICEF, 04/2015).

More than 300 schools have been severely damaged or destroyed by insurgents in the northeast (OCHA, 30/04/2015). As of April, schools in 19 of the 27 local governments areas in Borno state remain closed, after having been shut down in March 2014 (UNICEF, 06/04/2015).

BH has repeatedly targeted schools and other educational institutions. More than 300 schools have been severely damaged or destroyed, and at least 196 teachers and 314 school children were killed between January 2012 and December 2014 (UNICEF, 13/04/2015).

Protection

2.2 million people are in need of protection assistance; women are at particular risk of sexual violence and trafficking in displacement sites, while separated and unaccompanied minors are also among the most vulnerable (OCHA, 04/03/2015; IDMC, 16/04/2015; UNICEF, 13/04/2015).

Islamic scholars and clerics are often among the first targets during BH raids on towns and villages, as they are considered as unbelievers (Amnesty, 13/04/2015). Indiscriminate killings by the group have also been reported once villages are recaptured: between 600 and 1,000 residents were killed in Gwoza mid-2014 (Amnesty, 13/04/2015).

Abduction, Torture, and Forced Recruitment

Kidnappings of groups of women and girls by BH continue. More than 2,000 women and girls have reportedly been abducted by the group since January; more than 200 schoolgirls captured in Chibok in 2014 are still captive (AFP, 30/04/2015; BBC, 14/04/2015). Around 1,000 women and children rescued from BH over 28 April–4 May have been taken to Yola camp for rehabilitation (local media, 05/05/2015; AFP, 03/05/2015).

Women and girls have been trafficked, raped, abducted and forcibly married in areas controlled by BH (OCHA, 30/04/2015). Young men are also being forcibly recruited and executed (Amnesty, 13/04/2015).

Nigeria’s police and military is thought to practice routine torture (BBC, 18/09/2014). Updated: 11/05/2015

**SIERRA LEONE FOOD INSECURITY, EPIDEMIC**

**LATEST DEVELOPMENTS**

**6 May:** A total of nine confirmed cases were reported in the week to 3 May, compared with 11 the previous week. Five were reported from the northwestern district of Kambia, which borders the Guinean prefecture of Forecariah. Four of these were reported from the central Chiefdom of Magbema (WHO, 06/05/2015).

**8 May:** Resistance to the Ebola response is still being reported in chiefdoms of Kambia and the Urban Western Area, including people not seeking treatment (UN, 08/05/2015).

**KEY CONCERNS**

- As of 11 May, Sierra Leone reported 12,519 cumulative Ebola cases, including 3,904 deaths (WHO, 11/05/2015).

- The cumulative number of reported Ebola cases across the region has reached 26,722, including 11,064 deaths (WHO, 11/05/2015). The numbers of registered cases and deaths are largely inaccurate.

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

The national public health system is overstretched and struggling to deliver non-EVD care (UNICEF, 05/12/2014; ACAPS, 26/02/2015).

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

**Political Context**

Unrest and Resistance to Ebola Response

There are concerns that the State of Emergency measures are being used by the ruling party against its opposition. Police have been accused of using excessive force, protests have been banned, journalists have been arrested for criticising the response, and political figures have been arrested (local media, 26/04/2015; Amnesty International, 04/05/2015).

Reports continue of people fleeing from response teams, hiding bodies, conducting secret burials, and occasional physical assaults on burial teams (Voice of America, 25/03/2015). Resistance to the Ebola response is still being reported in chiefdoms of Kambia and the Urban Western Area, including people not seeking treatment (UN, 08/05/2015). The town of Barmoi and the surrounding chiefdom has seen an influx of soldiers and the closure of markets, reportedly in response to resistance to containment measures by the local community (Doctors of the World, 03/05/2015).

Humanitarian Context and Needs

Access

All response activities are restricted by poor terrain and a lack of transport (Doctors of the World, 04/05/2015). Poor coordination between agencies and road access issues, particularly in rural areas, can render it impossible to reach communities within 24 hours of being placed under quarantine (UNMEER, 16/03/2015). In addition, poor mobile phone coverage is impeding disease surveillance in Koinadugu, Kailahun, and Pujehun (UNMEER, 29/03/2015).

Food Security

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

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

About 76% of Ebola-related food-insecure individuals live in rural areas (FAO, 17/12/2014; WFP, 05/01/2015). Kambia and Port Loko have seen the highest uptake of negative coping strategies, although food prices have remained stable or decreased (WFP, 30/04/2015).

Agriculture and Markets

Following the opening of the border with Liberia, there are signs that markets and trade are recovering across Sierra Leone. Prices of local/imported rice and palm oil are still above average, but mostly stable (WFP, 25/03/2015). In a FEWSNET survey, 53% of respondents reported that the most important market in their area operated at reduced levels in early March, and 10% reported market closures. 35% of traders reported reduced market supply compared to other years. Most cited travel restrictions as the main reason (FEWSNET, 03/04/2015). 32% reported that rice cultivation activities were below-average in April (FEWSNET, 30/04/2015).

Livelihoods

In February 2015, 95% of informants described the livelihoods situation as worse than in February 2014. Unemployment, loss of income opportunities and death of caregivers were the main reasons (ACAPS, 02/04/2015).

Health and Nutrition

An estimated 3.5 million people are at risk due to unmet health needs. Since the beginning of the outbreak, attendance at the majority of health facilities has declined by up to 73% (Doctors of the World, 03/05/2015). In Moyamba alone, paediatric admissions decreased by 75% between August and December 2014 when compared to the same period the previous year in Moyamba (Doctors of the World, 03/05/2015). The highly affected areas of Western Area, Port Loko and Bombali have seen a 28% decrease in health service attendance as of April 2015, compared to October–January 2013 (UNICEF, 07/04/2015). Most districts showed an initial drop in primary healthcare visits at the onset of the Ebola outbreak in June, and a further decline as the epidemic reached its peak in November–December. Kenema, Port Loko, and Kailahun districts recorded the greatest decrease in use. Services related to malaria and diarrhoea are most affected (ACAPS, 25/03/2015). Preliminary results of a second health facility survey by UNICEF and MoHS show that the majority of health facilities are open, and utilisation trends have increased in all except the heavily affected districts, but usage of health facilities remains lower than before the Ebola outbreak (UNMEER, 13/04/2015).

Only 50% of the population is seeking healthcare, compared to 80% before the crisis.
Reported consequences of the crisis include increased mortality, self-medication, increased morbidity, and under-resourced health facilities. There is a correlation between EVD exposure and the severity of the health situation (ACAPS, 04/2015).

In Moyamba, analysis of burial data indicates that as many deaths were recorded in four months than in previous one-year periods. 40% of deaths are children under five. In the same district, only 12% of primary health units have facilities to diagnose and treat TB. HIV cases are believed to be almost completely undiagnosed in the area. A substantial increase in both HIV and TB is very likely, in Moyamba at least (Doctors of the World, 03/05/2015).

Ebola

As of 9 May, 12,426 cumulative Ebola cases have been reported in Sierra Leone, including 3,902 deaths (WHO, 09/05/2015).

A clinical service to detect eye problems and other after-effects has been set up for Ebola survivors Port Loko (Case Management meeting, 14/04/2015).

A total of nine confirmed cases were reported in the week to 3 May, compared with 11 the previous week. Five were reported from the northwestern district of Kambia, which borders the Guinean prefecture of Forecariah. Four of these were reported from the central Chiefdom of Magbema. Only 2 of the 9 new confirmed cases came from known contacts (WHO, 06/05/2015).

Eight districts have been declared Ebola-free, having gone 42 days without reporting any new cases, most recently Moyamba (UNMEER, 29/04/2015).

Healthcare provision: 293 health workers have been infected and 221 have died of Ebola; approximately one in ten of the country’s health workers (MSF, 26/01/2015; WHO, 18/02/2015). This has left the already weak health infrastructure in Sierra Leone very fragile and unresponsive.

Containment measures: Porous borders between Sierra Leone and Guinea are posing a challenge to surveillance (UNMEER, 15/04/2015). Officials from both countries have agreed to share information on population movement and established screening protocols at border points between areas of active EVD transmission (UNMEER, 07/04/2015; 15/04/2015).

Many checkpoints were removed in response to decreasing transmission rates, though some have since been mounted again (Government, 02/03/2015).

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

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

Regional Outbreak

The cumulative number of reported Ebola cases across the region has reached 26,772, including 11,064 deaths (WHO, 11/05/2015).

Maternal Health

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

Delivery of services has improved: the percentage of women giving birth in a clinic increased to 64% in April, compared to 28% in November. The percentage of women who received at least one prenatal visit increased from 56% to 71% in the same period (World Bank, 16/04/2015). Fear, misinformation, and mistrust of health workers and facilities are among the main reasons preventing women from accessing maternal and reproductive health services (UN WOMEN, 27/03/2015; UNFPA, 30/03/2015).

Health staff have been reluctant to attend to pregnant women, as common symptoms such as fever and bleeding are also symptoms of Ebola (UNMEER, 01/02/2015). Health facilities have ceased providing family planning services (IRIN, 04/02/2015).

Measles

864 suspected measles cases were reported in six districts by early March: Bo, Bombali, Kolnadugu, Port Loko, Tonkolili, and Western Area. There is an urgent need for precautionary measures to prevent further spread of the disease. The majority of cases (more than 500) were among children aged 1-4 years (PI, 06/05/2015).

Vaccination rates for measles dropped from 99% in January 2014 to 76% in July, as containment measures were suspended (UNICEF, 03/11/2014). A mass vaccination campaign for under-fives is planned for mid-May (UNMEER, 18/03/2015).

Malaria

Since the Ebola outbreak the impact of malaria has almost certainly increased due to
reduced and/or delayed access to treatment. In December 2014, the number of suspected malaria cases had decreased by half compared to December 2013, and only 20% of those cases were receiving treatment (ACAPS, 25/03/2015). Paediatric malaria admissions decreased by 80% in Moyamba alone, which is likely to have led to greater under-five mortality (Doctors of the World, 03/05/2015).

Mental Health

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

Nutrition

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

WASH

According to a UNICEF survey, about 14% of primary health units have no access to water. In Tonkolili, Pujehun and Kambia districts the lack of water is most widespread, with 35%, 27% and 26% of primary health units lacking water access, respectively (UNICEF, 04/2015). Furthermore, 54% of all schools do not have access to water year-round (UNICEF, 11/03/2015).

Concerns have been raised about waste from Ebola facilities being dumped in waste collection sites. This poses a risk for health, especially to waste pickers (PI, 20/03/2015). About a third of the population live without latrines (UNMEER, 20/11/2014).

Education

Respondents in all districts have said the educational situation has worsened since the outbreak because of school closures (ACAPS, 02/04/2015). Schools reopened on 14 April, nine months after they were closed (UNMEER, 15/04/2015). Turnout was low in the first days, as an estimated 10% of the registered pupils reported to school. 1.8 million children had been out of school since the start of the Ebola crisis (Voice of America, 26/03/2015; UNICEF, 18/03/2015). Schools for children aged 12–14 reopened on 24 March (PI, 29/03/2015).

Protection

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

Sexual and Gender-based Violence

According to the Government, gender-based violence and sexual assault dramatically increased over 2014 (international media, 09/01/2015; IRIN 04/02/2015). Stigmatisation and discrimination have resulted in abuse and mistreatment of especially women. Many female survivors reported being afraid of experiencing gender-based violence as a result of EVD (Ministry of Social Welfare, Oxfam, UN Women, 27/02/2015).

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

Child Protection

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

As children have not been attending school, UNICEF warns of an increase in vulnerability, and a potential increase in child labour and teen pregnancy (UNICEF, 16/10/2014). Due to limited household resources, children are predisposed and sometimes forced to engage in income-generating activities. Long-term consequences include possible school drop-outs. There are reports of girls have turned to sex work for income. Orphans are considered particularly vulnerable (The Guardian, 28/04/2015). Visibly pregnant girls will not be allowed to return to school when they reopen, in an announcement by the Ministry of Education (Ebola Deeply, 14/03/2015; Voice of America, 13/04/2015).

According to UNICEF, as of 29 April, 8,619 children have lost one or both parents to Ebola and 742 are unaccompanied or separated from their caregiver (UNICEF, 29/04/2015). Other sources reported as many as 12,023 registered orphans, with Port Loko the most affected district (Street Child, 02/2015).

Updated: 11/05/2015

SOMALIA CONFLICT, FOOD INSECURITY

LATEST DEVELOPMENTS
Security Context

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

Mogadishu: Al Shabaab attacks in the capital, mainly targeting political figures, have persisted since the beginning of the year, killing 76 in the first three months (local media, 19/01/0215; 16/02/2015; AFP, 22/01/2015; 16/02/2015; 28/03/2015; 18/04/2015; 21/04/2015; PI, 22/01/2015; BBC, 09/02/2015; 28/03/2015; 14/04/2015; Reuters 11/03/2015). On 6 May, a government official was shot dead and an AU troop convoy was bombed outside the capital. The number of casualties has not been verified (Reuters, 06/05/2015).

Al Shabaab

Al Shabaab, a militant Islamist group and off-shoot of the Islamic Courts Union, took over most of southern Somalia in 2006, seeking to establish an Islamic state. Numbering 7,000 –9,000 militants, Al Shabaab typically targets Somali government officials, AMISOM forces, and perceived government allies. Attacks in urban centres and along transport axes are common. Al Shabaab was forced out of Mogadishu in 2011 and Kismayo in 2012, and lost Barawe, Lower Shabelle, in October 2014.

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

The Kenyan military launched two operations on Al Shabaab camps in Somalia in response to attacks in Kenya in November and December 2014 (BBC, The Guardian, 24/11/2014; BBC, 02/12/2014). Al Shabaab carried out several attacks in in Mandera and Wajir, Kenya, in May, which left nine dead and ten injured (Reuters, 18/03/2015; AFP, 13/03/2015; AP, 15/03/2015). It was seen as retaliation for the death of the alleged leader of the Westgate mall attack in Kenya in a US drone strike in March (international media 13/03/2015).

SNAF-AMISOM Offensive

In November 2013, the African Union Mission in Somalia (AMISOM) force was increased to 22,000 from 17,600. Its mandate has been extended until 30 November 2015 (UNSC, 25/09/2014). The Somali National Armed Forces (SNAF) and AMISOM launched a military offensive against Al Shabaab-held areas in March 2014 (OCHA, 05/2014). The second...
phase of the offensive began in late August. Bakool, Gedo, Lower Shabelle, Hiraan, Bay, Banadir, and Lower Juba regions are all affected. Over 2,200 conflict incidents with humanitarian impact were reported in the first nine months of 2014, including military operations, active hostilities, and other forms of violence against civilians (OCHA, 17/10/2014). The number of attacks and fatalities had decreased between 2010 and 2013.

Inter-communal Violence

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

Humanitarian Context and Needs

Access

Between March and 20 April, 343 violent incidents impacting humanitarian operations and protection of civilians were recorded across the country (OCHA, 24/04/2015). Insecurity on the main roads makes needs assessment, delivery of humanitarian supplies, and response difficult (OCHA, 21/11/2014). Al Shabaab has cut off road access to towns controlled by AMISOM, including Rabhure and Wajid in Bakool (FEWSNET, 16/04/2015). Even in areas where there has been no active conflict, illegal checkpoints, banditry, and demands for bribes are common (OCHA, 17/10/2014). Belet Weyne–Mogadishu and Mogadishu–Baidoa–Dolow are the most affected roads. Bulo Burde in Hiraan is only accessible by helicopter and the Puntland–Somaliland border is closed (OCHA, 24/04/2015; Logistics Cluster, 29/04/2015).

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

Security Incidents Involving Aid Workers

On 20 April, at least six UN workers were killed in Garowe, Puntland, when Al Shabaab attacked their bus (AFP; BBC, 20/04/2015). On 13 April, several Somali aid workers were reported missing in Gedeo region, in the areas between Garilley and Fafahdun (local media, 13/04/2015). Somali officials have not confirmed the reports.

Over 40 security incidents involving aid workers have taken place so far in 2015: eight people have been killed, 14 injured, seven abducted and 20 arrested or detained (OCHA, 24/04/2015). In May 2014, a 400-strong UN military unit was deployed in Mogadishu with a mandate to protect aid workers (UN).

Disasters

Floods

Following heavy rains in south Somalia, the Juba and Shabelle rivers have overflowed, damaging crops and property in Middle Shabelle (FAO, 28/04/2015; FEWSNET, 04/05/2015). The Shabelle river basin remains at high risk of flooding, particularly in and around Jowhar town and in Balcaad and Kurtunwaarey in Lower Shabelle. Risks are slightly lower along the Juba (international organisation, 07/05/2015; FAO, 17/04/2015). Flash floods have been reported in Belet Weyne and Mogadishu (FAO, 17/04/2015).

Displacement

IDPs

An estimated 1.1 million Somalis were IDPs by February 2015, 893,000 in the south-central region, 129,000 in Puntland, and 84,000 in Somaliland. 369,000 IDPs live in makeshift camps in Mogadishu (UNHCR, 06/05/2015). Figures show little to no change in the past year: 80,000 were displaced due to the SNAF-AMISOM offensive in 2014 (OCHA, 04/12/2014).

Returnees

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). Luuq, Baidoa, and Kismayo have been designated to receive returnees. 3,000 refugees have registered to return, compared to the original target of 10,000. (UNHCR, 08/12/2014). As of 21 April, 2,060 returnees had arrived; 1,497 in Kismayo, 513 in Baidoa, and 39 in Luuq (UNHCR, 22/03/2015; local media. 21/04/2015). Somali refugees in Kenya cite insecurity and lack of earning opportunities as their main uncertainties regarding a return to Somalia (UNHCR, East African, 02/08/2014; UNHCR, 11/08/2014).

After the attack on Garissa University, Kenyan officials said that they had asked UNHCR to repatriate the estimated 350,000 Somali refugees living in Dadaab camp complex by July. However, they have since softened their position (AFP, 12/04/2015; IRIN, 13/04/2015; Guardian, 30/04/2015).

Refugees and Returnees from Yemen

As of 30 April, Somaliland has registered 1,125 arrivals from Yemen; Puntland has received 2,285, bringing the total to 3,410. So far, 57% are migrants; the remainder are refugees (IOM, 30/04/2015).

An estimated 236,000 Somali refugees are in Yemen; humanitarian actors in Somaliland are preparing for a major influx of returnees (ECHO, 01/04/2015). They are also making contingency plans to receive up to 100,000 refugees over the next six months (OCHA, 15/04/2015).

Somali Refugees in Neighbouring Countries

972,020 Somalis are refugees in neighbouring countries: at least 423,153 in Kenya, 246,603 in Ethiopia, and 244,204 in Yemen, with the remainder in Uganda, Djibouti, Eritrea, and Tanzania. 3,107 new Somali refugees were registered in 2015 (UNHCR, 04/05/2015).
Food Security

An estimated 731,000 people are in Crisis and Emergency (IPC Phase 3 and 4) food insecurity and nearly 2.3 million additional people are classified as Stressed (IPC Phase 2) until June 2015 (OCHA, 10/03/2015).

About 76% of those who face acute food insecurity are IDPs: the situation is Emergency in Dolow and Crisis in the 12 other IDP settlements (FSNAU, 05/03/2015). Among non-IDPs, 12% of food insecure live in rural areas, and 12% are the urban poor; poor households are in Crisis and a significant number of the poorest are in Emergency (FSNAU, 05/03/2015; FEWSNET, 16/04/2015). With a fourth consecutive below-average harvest in agropastoral areas, both agropastoral and urban households are expected to remain in Crisis unless trade resumes and humanitarian access increases (FEWSNET, 16/04/2015).

Agriculture and Markets

At the end of March, the main planting season began as the gu rains started. Rainfall estimate was above average in late April in most parts of the country, but below average in some parts of Awdal and Woqooyi Galbeed Regions in the north. Water sources were replenished and pasture rejuvenation supported in the northwest. In the northeast, pasture is less available in East Gois pastoral livelihood zone and coastal areas of Calula, Iskushban, and Qandala Districts of Bari Region. Well-distributed normal to above normal rainfall in the south is increasing livestock and crop prospects (FEWSNET, 04/05/2015).

Blocked roads and intensified fighting during the past six months in Hiraan and Bakool has further limited trade, decreased the demand for labour, and increased food prices dramatically (FEWSNET, 16/04/2015). Urban communities in Xudur and Wajaajid in Bakool, and Bulo Burde in Hiraan face acute insecurity because of trade disruptions (FSNAU, 05/03/2015).

Livelihoods

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

Health and Nutrition

Around 3 million people are in need of emergency health services (OCHA, 12/03/2015). As of November, 1.5 million people in 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

1.3 million people are in need of nutritional support (OCHA, 12/03/2015). Current GAM levels are 12% and SAM 1.9%, a decrease from previous levels (which were 14.9% and 2.6%, respectively) (FAO, 05/03/2015). The situation is very critical (over 15% GAM and increasing) among Riverine livelihoods in Gedo and Shabelle regions, in urban districts of Belet Weyne and Bulo Burde in Hiraan region, as well as in urban Burao in Togdheer region (FSNAU, 29/04/2015).

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

Education

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

WASH

2.75 million people need safe water (OCHA, 27/03/2015). On 24 March, ECHO reported that water shortages in Bay, Bakool, Hiraan, and Middle Shabelle had led to displacement. Ten children died of dehydration in Yagley village in Middle Shabelle.

Protection

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

Forced Evictions

Reports indicate that over 25,700 IDPs were forcibly evicted from public and private land and buildings in January and February 2015 (UNHCR, 28/02/2015). Over 3–5 March, 19,250 IDPs were forcibly evicted from Mogadishu. The majority fled to settlements in the outskirts of the city. An assessment found more than half are in need of access to shelter, 80% are in need of access safe water and latrines, 70% lacked access to food, and 60% are in need of health services in the new locations (Food Security Cluster, 23/03/2015). Human Rights Watch reported that authorities beat some of those evicted, destroyed their shelter and left them without food, water or assistance (HRW, 20/04/2015).

Over 32,500 people were forcibly evicted in 2014. The majority moved to the outskirts of the city, particularly Sarakastra and Tabelaha. Others sought refuge in nearby IDP settlements. Forced evictions have also been reported in Kismayo, Bosaso, and Luuq.
In September 2014, 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

197 grave violations against children were recorded in January 2015 (UNICEF, 31/01/2015). Grave violations include recruitment or use of children, killing, maiming, rape or other sexual violence (UNICEF). In Tayeeglow, Lower Shabelle, an estimated 115 children have been abducted by Al Shabaab, 80 of whom are still held (OCHA, 21/11/2014). 4,314 cases of child exploitation and abuse were reported January–November 2014 (OCHA, 30/11/2014).

Updated: 11/05/2015

SOUTH SUDAN CONFLICT, FLOODS, FOOD INSECURITY, DISPLACEMENT

LATEST DEVELOPMENTS

9 May: MSF, ICRC and other organisations have evacuated their staff and suspended operations around Leer due to safety risks. The suspension of aid operations has cut off 3,000,000 people in need from relief efforts (OCHA, 11/05/2015; MSF, 09/05/2015; ICRC, 09/05/2015).

8 May: Since the beginning of May, fighting south of Bentiu has displaced up to 100,000 more people (UNHCR, 08/05/2015).

30 April: An increase in violence and the disappearance of three WFP staff members has led to the suspension of all WFP operations in Akoka and Fashoda counties (OCHA, 30/04/2015).

KEY CONCERNS

- Frequent fighting between government and opposition forces continues in Unity, Jonglei, and Upper Nile states.

- 6.4 million people in need of humanitarian assistance in 2015; 4.1 million people to be assisted by the end of 2015 (OCHA, 08/01/2015).

- 3 million people are in Crisis or Emergency food insecurity in April 2015, including nearly half of the population of Jonglei, Unity, and Upper Nile (FEWSNET, 04/2015).

- 1.5 million IDPs since December 2013 (OCHA, 02/2015). Almost 117,000 are in UNMISS bases (UNMISS, 13/04/2014). 68% of IDPs are estimated to live in flood-prone areas (OCHA, 08/2014).

- 260,000 refugees in South Sudan (mainly from Sudan, DRC, Ethiopia, and CAR).

- 525,000 South Sudanese refugees since December 2013 (UNHCR 04/2015).

OVERVIEW

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

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

Political Context

Sudan–South Sudan

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

National Context

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

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

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

Economic Crisis

Following a 60% drop in oil production and widespread inflation, the central bank of South Sudan is allegedly printing money to meet a budget shortfall. The UN has warned of hyperinflation in the coming months (AP, 22/03/2015). The South Sudanese currency depreciated by approximately 26 percent from December 2014 to March 2015. Although the official Bank of South Sudan exchange rate remains pegged at 3.1 South Sudanese Pounds (SSP) to 1 U.S. Dollar (USD), the informal exchange rate reached 8.5 SSP for 1 USD in mid-April (FEWSNET, 18/04/2015).

New Insurgent Groups

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

South Sudan Resistance Movement/Army

Brigadier General Lul Ruai Koang, former military spokesperson for the SPLM-in-Opposition, left SPLM-IO and announced the formation of the South Sudan Resistance Movement/Army, consisting of members from the Lou-Nuer ethnic group. He declared a unilateral ceasefire with the government forces. According to local media, all three commissioners of counties in Greater Akobo, a Lou-Nuer territory, have dismissed his claims of a new movement (local media, 15/02/2015).

REMNASA

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

Security Context

Most violence is occurring in the oil-rich northeastern states of Unity, Upper Nile, and Jonglei. Clashes have intensified since January, with a significant escalation since March.

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

International Military Presence

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

Border Tensions with Sudan

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

Clashes between the Government and SPLM-in-Opposition

Jonglei

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

Unity

Renewed heavy fighting between government and opposition forces has been reported in Bentiu and Rubkona since the end of the rainy season in late October (AFP, 10/11/2014; Reuters, 04/01/2014; OCHA, 12/02/2015). In mid-March, fighting was reported north of the Bentiu PoC site (OCHA, 19/03/2015). On 15 April, the government officials temporarily transferred the capital of Unity state from Bentiu to Mankien, Mayom county, due to insecurity (UNMISS, 15/04/2015).

Upper Nile

On 22 April, heavy fighting between government and opposition forces started in Malakal, SPLA deployed additional troops outside Malakal to contain the clashes. Separate skirmishes were reported on 23 April in Gelachel, a town between Malakal and Nasir (local media, 22/04/2015; 23/04/2015).

In March, heavy fighting, including heavy shelling, between government and opposition forces was reported in Duk Duk, Renk county, and Manyo county. SPLA ground troops took control of Wadakona town, Manyo county, on 9 March. Many civilians were trapped (OCHA, 06/03/2015; local media, 09/03/2015). Shelling between
government and opposition forces in Renk county in mid-February destroyed 18 buildings and forced hundreds to flee, according to UNMISS (USAID, 27/02/2015).

On 3 March, mortar shelling was heard across the Sobat River in Nasir. Nasir town had reportedly been largely deserted following recent attacks (OCHA, 06/03/2015). In March, heavy fighting was reported in GuoGuk, on the border with Longochuk county, with reports of local populations fleeing the area.

Inter-communal Violence

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

Lakes

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

Unity

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

Upper Nile

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

Juba

Over ten people were seriously injured after recent clashes within the PoC site after inter-communal violence broke out between two clans (11/05/2015).

Humanitarian Context and Needs

Access

6.4 million people are in need of humanitarian assistance in 2015 (OCHA, 08/01/2015). The delivery of aid is restricted by heavy fighting, logistical constraints, and administrative impediments. In March 2015, 64 access-related incidents were reported, including cases of violence against humanitarian personnel and assets, suspension of activities, and detention of humanitarian staff. A third of these cases were reported in Unity state (OCHA, 14/04/2015). MSF, ICRC and other organisations have evacuated their staff and suspended operations around Leer due to safety risks. The suspension of aid operations has cut off 3,000,000 people in need from relief efforts (OCHA, 11/05/2015; MSF, 09/05/2015; ICRC, 09/05/2015).

This surge in violence, including the disappearance of three WFP staff members has led to the suspension of all WFP operations in Akoka and Fashoda counties (OCHA, 30/05/2015).

Logistical Constraints

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

As of 24 April, WFP reported that road access was impossible between Leer (Unity) and Mayendit (Unity); Akobo, Pibor, Pochala, and Boma (Jonglei); and Lafon and Loming (Eastern Equatoria).

Security Constraints

Incidents against humanitarian personnel and assets reported in January and February 2015 included assault, burglary, harassment, arrest, and detention. Most of the cases were reported in Juba (Central Equatoria), Bentiu (Unity), and in Upper Nile state (OCHA, 18/03/2015). On 17 February, a British aid worker was shot in Juba (international media, 18/02/2014). In February, eight access incidents related to insecurity were reported in Lakes state (OCHA, 18/03/2015). A WFP staff member and one UNMISS contractor are still being held after their abduction in Malakal in October 2014 (UNMISS, 17/10/2014; WFP, 17/10/2014). Two WFP staff members and a WFP-contracted driver have been missing from Upper Nile state since 1 April (WFP, 10/04/2015).

Displacement

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

IDPs

As of 30 April 2015, OCHA estimated that 1.5 million people were displaced in South Sudan: 673,000 in Jonglei, 366,000 in Unity, 244,000 in Upper Nile, and 133,000 in Lakes (OCHA, 12/02/2015). Since the beginning of May, fighting south of Bentiu has
displaced up to 100,000 more people (UNHCR, 08/05/2015).

An estimated 802,120 IDPs are under 18 (UNICEF, 26/03/2015). Displacement patterns remain fluid, driven by violence, floods, and the search for emergency assistance (IOM, 03/09/2014).

The South Sudanese Government has rejected a UN plan to relocate 100,000 IDPs to a place of their choice, which included areas under SPLM-IO control (local media, 10/05/2015).

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

117,000 IDPs are sheltering in six Protection of Civilians (PoC) sites on UNMISS bases including 52,900 in Bentiu, 34,000 in Juba UN House, 26,000 in Malakal, and 2,600 in Bor (UNMISS 20/04/2015). The Bentiu PoC site is being expanded to shelter up to 60,000 IDPs (UNMISS, 24/02/2015).

By 30 April, 8,955 new IDPs had arrived in the Malakal PoC site (UNMISS, 23/04/2015). The rate of new arrivals in Bentiu PoC has decreased because it is so close to fighting, with only three households arriving in the week ending 6 May who had fled inter-communal fighting in Rubkona and Mayom counties, in Unity state (UNHCR, 06/05/2015).

Refugees in South Sudan

261,925 refugees are in South Sudan: 235,000 are from Sudan, 15,500 from DRC, 4,900 from Ethiopia, and 2,040 from CAR. Over 134,000 refugees are based in Upper Nile and around 96,500 in Unity (UNHCR, 19/04/2015; 30/04/2015). Most of the Sudanese refugees in Upper Nile state reside in four refugee camps in Maban county (OCHA, 03/04/2014).

Between 29 April and 5 May, 383 new refugees were registered in Yida camp (UNHCR, 06/05/2015).

Between 29 April and 5 May, 383 new refugees were registered in Yida. Between December and April, 10,323 new refugees arrived in Yida (UNCHR, 06/05/2015). Arrival rates have increased sharply in 2015. Of the new arrivals in Yida between 20 and 26 February, 65% were women and children (OCHA, 21/02/2015). Refugees cited aerial bombardments, ground attacks and lack of livelihood and education opportunities as reasons for leaving (UNHCR, 30/01/2015).

The South Sudanese Government wants to close Yida camp by June 2015 and relocate refugees to other camps. The South Sudan Government and UNHCR have agreed to expand Ajuong Thok refugee camp to accommodate up to 40,000 people. 520 were transferred from Yida in early May (UNHCR, 06/05/2015). Pamyr, a new site 8km from Yida, has been identified as a potential refugee camp (UNHCR, 19/02/2015).

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

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

South Sudan Refugees in Other Countries

525,000 South Sudanese have sought refuge in neighbouring countries since the onset of the conflict (UNHCR, 24/04/2015).

Sudan: 131,000 South Sudanese nationals have arrived in Sudan since 15 December 2013 (UNHCR, 15/04/2015). In December, more than 2,000 were registered per week but since mid-January the numbers have increased less drastically (UNHCR, 29/01/2015). A new spike of more than 5,000 new refugees was reported between 8 and 13 March. These new arrivals were most likely fleeing the fighting in Manyo county, Upper Nile state (OCHA, 15/03/2015). Between 9 and 24 April, 5,000 more refugees arrived from Upper Nile state (UNHCR, 24/04/2015). As of late March, the Sudanese Government has refused to recognise South Sudanese nationals as refugees and instead considers them to be Sudanese citizens (UNCHR, 03/04/2014). UNHCR declared this constitutes an obstacle to accessing humanitarian assistance.

Ethiopia: 201,000 South Sudanese refugees (UNHCR, 24/04/2015).

Uganda: 147,000 refugees (UNHCR, 23/04/2015).

Kenya: 45,000 refugees (UNHCR, 24/04/2015).

Food Security

Three million people were in food security Crisis (IPC Phase 3) or Emergency (IPC Phase 4) levels in April 2015 (FEWSNET, 18/04/2015).

Food security is expected to have to Emergency (IPC Phase 4) in several counties in Unity, Jonglei and Upper Nile state during April (FEWSNET, 23/02/2015). An early onset of the lean season is expected, and an estimated 3.5 million people will be in Crisis and Emergency food insecurity in May and June (FEWSNET, 04/03/2015).

The food security situation has worsened in Warrap and Lakes states, as they experienced above-normal flooding in 2014, which affected crop harvests, livestock migration, and disease patterns. In Lakes state, increased inter-clan fighting and cattle raiding has affected the stability of livelihoods (IPC, 02/2015). According to WFP’s Vulnerability Analysis Mapping, 15% of households in Warrap state are severely food insecure, the highest percentage in South Sudan (WFP, 12/2014).
Livestock are moving into agricultural areas, rather than conflict-affected pastoral zones. This has destroyed crops, heightens the risk of livestock disease transmission, increases competition for natural resources, and is likely to have an impact on local power structures (FAO, 12/2014). Conflict has also affected trade flows and market infrastructure, and weakened financial systems (WFP, 02/2015). The country depends on food imports, and a de facto devaluation of the national currency between 2011 and 2013, the reduction in oil exports, and the increase in imports, all have a negative impact on households’ purchasing power.

Health and Nutrition

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

Cholera

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

Measles

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

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

Nutrition

As of 4 February, at least 229,000 children are estimated severely malnourished (UNICEF, 04/02/2015). Malnutrition screening of 22,917 children in January and February in the three conflict-affected areas found GAM levels above the emergency threshold of 15% in Upper Nile (17.2%), Unity (18.9%) and Jonglei (26%) (UNICEF, 26/03/2015). In the traditionally high burdened states in non-conflict affected areas, the GAM rates were highest in Warrap (17.2%) and Northern Bahr el Ghazal (14.6%) (WFP, 12/2014). The highest GAM rates were recorded in Leer county (34.1%) and Panyijar (32.8%), Unity state; Akobo East, Jonglei State (31.8%) and Uror (27%), Jonglei; and Aweil South, Northern Bahr el Ghazal (26.1%) (UNICEF, 20/11/2014).

In the town of Leer, 1116 children were reported to be malnourished, and are no longer receiving treatment as MSF has suspended its operations in the town due to intense fighting (MSF, 09/05/2015). In Bentiu PoC site, a screening of 12,018 children revealed a proxy GAM rate of 12.5%, an improvement since the previous screening in December (proxy GAM rate of 18.8%) (OCHA, 06/03/2015).

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). Twice as many needed treatment for SAM in 2014 than in 2013 (UNICEF 15/07/2014).

Visceral Leishmaniasis

1,316 cases of visceral leishmaniasis, including 39 deaths (case fatality rate 3.18%), have been reported in Lankien, Ulang, Walgak, and Chuil (Jonglei) since the beginning of 2015. Of these, 837 were new cases, 188 were relapses, and 18 did not complete treatment (WHO, 15/02/2015; 29/03/2015).

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

WASH

Water coverage in the IDP sites of Ajoung Thok, Melut, Bentiu PoC, and Malakal PoC was only 10.9L/person/day, 12.2, 6.3 and 10, respectively. This is below the minimum standard of 20 recommended by UNHCR (UNHCR, 10/04/2015; IOM, 06/05/2015).

Health partners have reported an over 5% increase in diarrhoeal diseases due to the disruption of sanitation and hygiene campaigns in PoC sites (OCHA, 14/11/2014). There have been 1,085 cases of acute watery diarrhoea in Maban county’s four refugee camps (UNHCR, 08/05/2015). Malakal PoC, Bentiu PoC, and Melut have 556, 126 and 140 people per person (IOM, 06/05/2015).

Education

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

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

Protection

An estimated 10% of new refugees arriving in Yida suffer from measles (UNHCR, 30/01/2015). Malakal PoC, Bentiu PoC, and Melut have 556, 126 and 140 people per person (IOM, 06/05/2015).
A UN Security Council report stated that all parties to the conflict since December 2013 were responsible for grave violations against children in 2014, including killing and maiming, recruitment and use, abduction, and rape and other forms of sexual violence (UN, 30/12/2014).

12,000 children were reportedly recruited by armed groups in 2014 (AFP cited UNICEF, 14/12/2014). On 21 February, an unidentified armed group abducted at least 89 boys, some as young as 13, from their homes in the town of Wau Shilluk, near Malakal (Upper Nile). According to UNICEF, the number may be in the hundreds and the children have been recruited as child soldiers. The Shilluk militia, allied with SPLA, is believed to be responsible (UNICEF, 28/02/2015). Since January, UNICEF has released 1,757 children who had been recruited as child soldiers by the Cobra faction (UNICEF, 24/04/2015).

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

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

Updated: 12/05/2015

SUDAN CONFLICT, FOOD INSECURITY, EPIDEMIC, DISPLACEMENT

LATEST DEVELOPMENTS

4 May: 20 water pumps have stopped working in El Salam camp, South Darfur, in the past five months, affecting 80,000 people (Radio Dabanga).

27 April: President Omar al Bashir was elected, with more than 94% of the vote (AFP).

KEY CONCERNS

- Protracted insurgencies by armed groups are occurring across Darfur, and South Kordofan and Blue Nile states. The conflict in South Sudan has also raised tensions.

- 6.6 million people (20% of the population) need humanitarian assistance (OCHA 17/11/2014): 4.4 million in Darfur and 980,000 in South Kordofan and Blue Nile states (OCHA, 11/2014).

- 1.2 million children under five acutely malnourished, an estimated 550,000 are severely acutely malnourished (OCHA, 23/04/2015).

- Renewed fighting between armed opposition groups, militias, and the Sudanese army in Darfur since March.

- 3.1 million IDPs. Two million in Darfur prior to the latest clashes (OCHA, 03/2015), and 431,000 displaced in 2014 (OCHA, 12/2014) and 43,000 newly displaced in 2015 (OCHA, 02/2015).

- Humanitarian access remains a significant problem due to insecurity, mines and explosive remnants of war (ERW), logistical constraints, and restrictions placed by the authorities.

OVERVIEW

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

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

Political Context

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

Parliamentary and presidential elections were held 13-15 April. Voter turnout was reportedly extremely low (AP, 13/04/2015; international media, 19/04/2015). President Omar al Bashir was re-elected with more than 94% of the vote (AFP, 27/04/2015). The Sudan Revolutionary Front and the National Umma Party had previously announced they would not participate in the elections.

Sudan–South Sudan

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

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

**Sudan Revolutionary Front**

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

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

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

**Blue Nile and South Kordofan States**

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

**Security Context**

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

**UN Peacekeeping Mission**

On 30 November, President Omar al Bashir called for a “clear programme” for the exit of the UNAMID mission in Darfur. Relations deteriorated following the Sudanese Government’s refusal to allow a UNAMID investigation of mass rape in Tabit, North Darfur (AFP, 30/11/2014). A working group of officials from the United Nations, African Union and the Sudanese government reached an agreement on the terms of reference for the exit strategy in February and held a four-day meeting 16–19 April. Further discussions will resume mid-May (local media, 8/03/2015; 20/04/2015).

**Darfur**

Security in Darfur has reportedly deteriorated significantly since late December 2013, with numerous airstrikes by the Sudanese Air Force (SAF). Attacks by pro-government militia on IDPs and villagers, their shelters, and commercial convoys, are frequent.

On 1 April, Sudanese army warplanes dropped ten bombs in an airstrike on Rowata, Central Darfur, killing 14 civilians and injuring 18 (local media, 7/04/2015). In early January, 15 villages were burned and another 30 abandoned during fighting between government forces and armed groups in Tawila and Um Baru localities, North Darfur (OCHA, 08/01/2015; local media, 06/01/2015). In early January, government and opposition forces were reported to be fighting for control over Fanga area, Jebel Marra region (AFP, 02/01/2015).

**Inter-communal violence**

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

**Kordofan and Blue Nile**

Information on Blue Nile and South Kordofan states is difficult to obtain as government authorities severely restrict access to the fighting zone. The Sudanese Government announced that it would expand its counter-insurgency operations in Blue Nile state in May 2014. There have since been reports of an SAF offensive and intensified bombings in the region, the most recent being of aerial bombing in Blue Nile State in February. According to a Human Rights Watch report, the government of Sudan dropped cluster bombs on civilian areas of South Kordofan’s Nuba Mountains between February and March 2015. The Sudanese Government has denied possession of any stockpiles of cluster bombs, which are prohibited by the 2008 Convention on Cluster Munitions (Human Rights Watch, 16/04/2015).

According to the South Kordofan and Blue Nile Coordination Unit (SKBNCU), aerial bombardment and shelling increased significantly since the last week of March (SKBNCU, 03/2015). Fighting between SPLA-N and the government troops intensified in March, with SPLM-N claiming they captured the garrison town of Habila on 28 March. According to SPLM-N, 54 government troops were killed in the attack but government troops denied both claims (OCHA, 22/10/2014; local media, 25/11/2014; 23/02/2015; AFP, 28/03/2015).

On 4 April, SPLM-N claimed that they had captured a truck in South Kordofan, which was
carrying ballot boxes for nationwide elections to be held on 13 April (AFP, 5/04/2015). On 25 April, the SPLM-N claimed that they attacked the Sudan Air Force (SAF) from Kululu hills, south of Kadugli town (local media, 27/04/2015).

Abyei

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

Humanitarian Context and Needs

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

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

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

Access

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

Following fighting in Habila town, South Kordofan, all towns in Habila, Dilling and Al Qoz localities were inaccessible, with the exception of Dilling town (OCHA, 29/03/2015).

Administrative and Logistical Constraints

August 2013 regulations ban foreign humanitarian groups and UN agencies from working for human rights, and the Government has banned humanitarian access to areas controlled by opposition groups.

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

There has been no humanitarian access from Sudan to opposition-held areas in South Kordofan since October 2013.

Security Incidents Involving Aid Workers

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

Displaced

IDPs

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

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

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

Up to 121,000 people have been newly displaced in North and Central Darfur, including Jebel Marra, since early January. 41,304 of which have been verified in North Darfur. OCHA, 05/02/2015; 15/02/2015; 01/03/2015; 31/03/2015).

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

North Darfur: 148,000 total IDPs as of March 2015. 107,000 IDPs; 124,000 returnees in 2014 (OCHA 31/12/2014). 729 villages were destroyed December 2013–April 2014 (DRA cited by local media 16/07/2014). OCHA has verified another 41,304 newly displaced: 4,458 in Rwanda camp; 10,888 in Shagra A, B, C, Behir, and Um Hajaleed towns; 4,587 in Argo camp; 4,457 in Rwanda camp; 7,450 in Um Baru UNAMID site; 1,031 in Majdob town; and 624 in Tawila town; 1,645 in Kino and Midasis villages; 4,000 in Guldo town; 6,189 in Argo camp; 418 in Dali camp; 7,450 in Um Baru UNAMID site; 1,031 in Majdob town; and 624 in Nifasha camp (OCHA, 22/02/2015).

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

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


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

Blue Nile and South Kordofan: In South Kordofan and Blue Nile states, 378,000 people are estimated displaced in SPLM-N territory (OCHA, 03/02/2015). With no presence in the SPLM-N territory, the UN is unable to verify these figures (OCHA, 19/05/2015). Between November 2014 and mid-January 2015, 820 new displaced people from SPLM-N areas sought shelter in government-controlled areas of South Kordofan (OCHA, 22/01/2015). Between 9 and 18 March, an estimated 23,600 people fled fighting between SPLM-N and government troops and arrived in Al Abassiya, Abu Jubaiba and Rah Abu Jubaiba and Rashad towns as well as surrounding villages in South Kordofan State, according to the Government of Sudan’s Humanitarian Aid Commission (HAC). Almost 60 per cent of these new internally displaced people (IDPs) are women and children under the age of five. An estimated 19,000 of the total 23,600 newly displaced were in El Abassiya and Abu Jubaiba localities (OCHA, 23/01/2015). Fighting in Habila, South Kordofan, at the end of March caused displacement towards villages in Habila, Dilling and Al Ozq localities, according to HAC. According to the HAC, nearly all people who fled their homes in Habila returned in early April (OCHA, 08/04/2015). SKBNCU estimates that 20,000 have been displaced by increased aerial bombardment and shelling since late March (SKBNCU, 03/2015).

According to the HAC in South Kordofan, a large but unknown number of displaced people are expected to arrive in Kadugl, Al Abassiya, Rashad, Talodi, and Gadier localities from areas controlled by SPLM-N (08/01/2015).

In mid-March, NGOs in Blue Nile reported that 900 people had been displaced from Derag village in Bau locality, fleeing fighting between government forces and SPLM-N in the area. 480 displaced people arrived in Azaza and Algary village in El Roseires locality, 120 in Ed Damazine town and 300 in Bulang village in Kurmuk locality (OCHA, 15/03/2015).

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

Abyei: According to an inter-agency mission, nearly 800 IDPs were confirmed to have fled Marialahak village to Rumramier village, following attacks by armed Misseriya (OCHA, 12/04/2015).

Refugees in Sudan

As of end April 2015, more than 134,240 South Sudanese nationals had arrived in Sudan since 15 December 2013 (UNHCR, 29/04/2015). Between 8 and 19 March, more than 5,000 refugees arrived from Upper Nile state, South Sudan, fleeing fighting between government and opposition forces (UNHCR, 19/03/2015).

An estimated 74,000 refugees live in White Nile, 33,000 in Khartoum, 15,000 in South Kordofan, 3,800 in West Kordofan, and 3,600 in Blue Nile (UNHCR, 10/04/2015). 66% (85,240) are children (UNICEF, 02/2015). 91% of households are female-headed (UNHCR, 29/01/2015).

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

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

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

Sudanese Refugees in Other Countries

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

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

Food Security

Despite improved food security, Crisis (IPC Phase 3) and Stressed (IPC Phase 2) food insecurity persists among 3.7 million IDPs and host communities in conflict-affected areas (FEWSNET, 01/05/2015). Hundreds of families in Graida, South Darfur, are facing food shortages after clashes between Falata and Massalit tribes destroyed more than 168 homes (local media, 22/02/2015).

Food insecurity is a result of conflict in South Kordofan, Blue Nile, and West Kordofan as well as limited purchasing power in east Sudan. 4.2 million people are likely to be in food insecurity during peak lean season from July to September (FEWSNET, 01/05/2015).

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

Health and Nutrition

The UN estimated in mid-December 2013 that 165,000 children in SPLM-N-controlled parts of South Kordofan and Blue Nile do not have access to basic health services.
There are indications that the health situation in Darfur is deteriorating; many have no access to healthcare.

**Measles**

More than 1,730 confirmed measles cases and 22 deaths have been reported in 12 states in 2015. The worst affected states are West Darfur (441 confirmed cases, five deaths), Kassala has had 365 confirmed cases and five deaths, while in Red Sea state, there have been 263 cases and four deaths (UNICEF, 22/04/2015).

**Nutrition**

1.2 million children under five were estimated to be acutely malnourished as of April 2015, a drop from 2 million at the end of September 2014 (OCHA, 23/04/2015). An estimated 550,000 were severely malnourished in 2014 (OCHA, 23/04/2015).

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

**WASH**

According to an inter-agency mission, significant water supply problems were reported in North Darfur’s Tawila locality, particularly in Argo camp. 14 of 40 water sources in Tawila locality were contaminated with bacteria (OCHA, 01/03/2015). Drinking water crises have also been reported in Kereinik locality, West Darfur and El Jeer district, Nyala, South Darfur (local media, 22/02/2015). According to the HAC, there is a severe water shortage in South Kordofan’s Abu Kershola locality, after eight hand pumps broke down (OCHA, 01/03/2015).

There are currently only two functioning handpumps in Guldo town, Central Darfur where 16,300 new IDPs have arrived (OCHA, 12/04/2015).

20 water pumps have stopped working in El Salam camp, South Darfur in the past five months, affecting 80,000 people (Radio Dabanga, 04/05/2015).

**Education**

3 million children between the ages of 5 to 13 are out of school in Sudan. Of these, 1.9 million are primary school aged children (UNICEF, 14/04/2015).

**Protection**

**Mines and ERW**

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

**Sexual and Gender-based Violence**

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

**Legal Status**

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

**Updated: 04/05/2014**

**CAMEROON FOOD INSECURITY, EPIDEMIC, DISPLACEMENT**

**LATEST DEVELOPMENTS**

No significant developments this week, 06/05/2015. Last update 24/04/2015.

**KEY CONCERNS**

- 2.1 million people are in need of humanitarian assistance (OCHA, 17/12/2014).
- 311,000 refugees have arrived from CAR and Nigeria (OCHA, 31/03/2015).
- An estimated 1.08 million people are food insecure in 2015 (OCHA, 10/03/2015).

**Overview**

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

**Security Context**

**Boko Haram Attacks**

The armed Islamist group Boko Haram (BH), based in Nigeria, has intensified attacks in Cameroon since end December (ECHO, 06/01/2015). Throughout December, BH militants crossed into the Far North region from Lake Chad, attacking towns and villages, military vehicles, kidnapping individuals, and attempting to control army bases (AFP, 06/04/2015; Reuters, 18/12/2014; VoA, 13/12/2014; BBC, 29/12/2014; AFP, 29/01/2015). Cross-border
raids continued into January in Kolofata. While attacks are still concentrated in the Far North region, they have spread southward. An increase in attacks to obtain supplies like food and livestock was recorded in the north in March–April (AFP, 06/04/2015). The United States is supplying equipment and logistics training to the Cameroonian military to aid its efforts to counter BH campaign (VoA, 12/12/2014, Reuters, 17/02/2015). Both Cameroon and Chad pledged to support Cameroon in fighting BH, launching air and ground offensives (Daily Mail, 14/01/2015; New York Times, 05/02/2015).

Recent Incidents

Armed militants from CAR killed three people and kidnapped seven in Mbeng village on 24 April. Two more people were kidnapped on 25 April (Reuters, 25/04/2015). On 16 April, Boko Haram attacked the villages of Bia and Blaberi in Kolofata district, Far North region, killing 19 people and later that night attacked Amchide, an army position (Reuters, 17/04/2015; AFP, 17/04/2015).

On 3 April, a nurse from a health centre in the Far North was kidnapped by ten armed men (OCHA, 10/04/2015).

Humanitarian Context and Needs

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

Access

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

Logistical Constraints

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

Bad road conditions delay the provision of assistance.

Security Constraints

The deterioration of the security situation has made access to the Far North extremely difficult. Although the Cameroonian army retook the border towns, the area remains insecure with the presence of armed groups (OCHA, 10/04/2015). UN agencies have only been undertaking priority activities such as assisting refugees and some host communities, according to WFP (IRIN, 15/08/2014). Organisations like UNHCR do not have access to certain localities where refugees are present, due to heightened insecurity (UNHCR, 25/01/2015).

Disasters – Heavy rains

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

Displacement

At April 2015, there were 417,000 displaced people in Cameroon, including 311,000 refugees from CAR and Nigeria and an estimated 106,000 IDPs in northern regions due to the spillover of the Nigerian conflict (OCHA, 10/04/2015; UNICEF, 23/04/2015; UNHCR, 29/03/2015). At 10 February, there were 60,000 IDPs (OCHA, 10/02/2015). As attacks increase, people are moving toward central Cameroon (OCHA, 06/01/2015).

IDPs

In the Far North, there are 39,850 IDPs in Logone-et-Chari department, 20,200 IDPs in Mayo Sava department, and 26,989 IDPs in Mayo-Tsanaga department (UNHCR, 10/04/2015).

Refugees from the Central African Republic

As of 4 April, 247,250 CAR refugees are in Cameroon: 140,820 have arrived since December 2013 (OCHA, 24/03/2015; UNHCR, 21/04/2015; 03/04/2015). But the border is open and extensive, and there are refugees who cross without being registered. In January 2015, it was reported that the influx of CAR refugees has dropped from 10,000 per week to 8,000. The reduced flow of refugees indicates an improved situation in CAR, but many refugees are reluctant to go home because they are concerned about food security and livelihoods (VoA, 16/03/2015). 1,340 refugees were registered in Garoua Boulai and Borgop site from 30 March-12 April (UNHCR, 17/04/2015).

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

Refugees from Nigeria

74,000 Nigerians are estimated to have fled to northern Cameroon since May 2013 (UNHCR, 20/04/2015; OCHA, 09/04/2015). Cameroonian authorities say there are 25,000 refugees living along the Nigerian borders (OCHA, 31/03/2015). The number of pre-registered refugees doubled from 20,000 to 40,000 in just 21 days in February (UNHCR, 25/01/2015; VoA, 23/02/2015).

34,360 refugees have been registered in Minawao camp, in the Far North region (UNHCR, 03/05/2015). The camp’s maximum capacity is 15,000, and the population was only 6,000 in August 2014. The needs among refugees are largely WASH, shelter, health and education (UNHCR, 15/04/2015). Local residents from Marwa village in northern Cameroon reported that around 60,000 victims of BH attacks from Borno and Adamawa, Nigeria, are taking refuge in the area (local media, 06/04/2015).

25,000 refugees who arrived between late February and early March refuse to be relocated to Minawao camp and have signed documents stating their intention to return to their localities (OCHA, 10/04/2015).

People living outside the camp do not receive humanitarian assistance and lack of identification is a concern. Moreover, relocation from Kousseri transit site is slowed because individuals want to go back to their villages (UNHCR, 25/03/2015).
At least 17,500 third-country nationals are currently living in Garoua Boulai and Kentzou transit sites, or in host communities (UNHCR, 07/2014 and IOM, 25/07/2014; 19/02/2015).

Food Security

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

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

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

Health and Nutrition

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

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

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

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

Nutrition

There were 40% more cases of severe malnutrition in January 2015 compared to the start of 2014 (OCHA, 30/01/2015). There are 39,000 cases of severe acute malnutrition (SAM) among children under five the Far North region (UNICEF, 23/04/2015). There were 132,000 cases of moderate acute malnutrition (OCHA, 30/01/2015; UNICEF, 08/2014). The prevalence for severe acute malnutrition (SAM) in the Far North is 2.0%, while the global acute malnutrition (GAM) prevalence is 9% (UNHCR, 29/03/2015).

WASH

Regions affected by the CAR refugee crisis have particularly poor access to drinking water (East: 54% and Adamawa: 70%) and basic sanitation (East: 22% and Adamawa: 64%) (UNICEF, 05/08/2014). The quantity of water provided per day to refugees in Minawao and Gawar refugee camps has increased from 10 to 12L per person per day (OCHA, 10/04/2015). The water supply in Gado and Mibile camps, at 15 litres and 17 litres, respectively, is below standard (UNHCR, 26/03/2015). In East and Adamawa regions, only two out of seven refugee sites have the standard daily 20L of water per person (UNHCR, 17/04/2015).

Education

120 schools had to close in the Far North region for the 2014-2015 academic year (UNHCR, 29/03/2015). Students are moving toward the country’s interior and the government is assisting in moving populations to more secure areas after BH destroyed or occupied schools (VoA, 25/11/2014). 33,163 children from the Far North Region were either left out of school or were forced to seek education in other communities for the 2014-2015 academic year (UNICEF, 28/02/2015; UNHCR, 29/03/2015). In 2014, more than 200 trained teachers did not take up their posts in the Far North region (IRIN, 01/12/2014).

The majority of people residing in Minawao camp have no formal education or profession (UNHCR, 21/03/2015).

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

Protection

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

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

Reviewed: 06/05/2015

CHAD FOOD INSECURITY, DISPLACEMENT

LATEST DEVELOPMENTS

No significant developments this week, 06/05/2015. Last update 07/04/2015.

KEY CONCERNS

- 5.5 million affected by humanitarian crisis, including 2.2 million children (UNICEF, 10/11/2014).
- At least 515,000 refugees in Chad, including 94,000 from CAR (OCHA, 10/02/2015; UNHCR, 03/04/2015).
Regional Military Involvement

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

International Presence in Chad

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

Boko Haram Attacks

Boko Haram launched its first attack in Chad in February, killing at least ten and burning Ngouboua, by Lake Chad, where some 7,000 Nigerians had taken refuge (Aljazeera, 14/02/2015). From 28 February to 1 March, Boko Haram attacked Kaiga village, Lake Chad region, targeting Chadian soldiers (ECHO, 03/03/2015). On 15 March, BH attacked Djargegoroum village, in the Lake Chad region, killing one person and burning two houses (Reuters, 12/03/2015). On 2 April, an attack on Maidogo, an island on Lake Chad, killed seven (AFP, 06/04/2015). On 3 and 7 April, Boko Haram attacked Ngouboua and the Lake Region, respectively (UNHCR, 07/04/2015).

Security measures have been heightened in Tchoukoutalia following BH attacks on 7, 9, and 13 April (UNHCR, 14/04/2015). Along the border with Nigeria, Chadian security forces are screening road users and their property. Navigation on the Chari River and its tributary the Logone, which flow along the border of Chad and Cameroon, has been halted (AFP, 30/04/2015).

Humanitarian Context and Needs

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

Access

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

Displacement

Nearly 90,000 IDPs are living in protracted displacement in the east, facing difficulties accessing shelter, land, and income-generating activities (OCHA, 19/11/2013). The arrival of CAR refugees since December 2013 is further increasing competition for scarce resources (IDMC, 24/10/2014). Some 1,300 IDPs are in the south of Ndjamena (UNHCR, 21/03/2015). There are an estimated 14,500 IDPs in the Lake Region (UNICEF, 08/04/2015).

Refugees

As of 14 April, Chad hosted 515,000 refugees from Sudan, CAR, Nigeria, and DRC (OCHA, 14/04/2015). Of those, 367,200 are Sudanese (OCHA, 31/01/2015), 94,000 are from CAR (UNHCR, 03/04/2015), 18,100 are Nigerian (UNHCR, 28/02/2015; IOM, 23/02/2015), and 36,500 from DRC.

Most refugees are in Wadi Fira (157,500), Ouaddai (114,350), Sila (84,650), and Logone Oriental (47,500), while 22,750 are in Dosseye camp and 26,420 in Belom camp, Moyen Chari; 4,900 in Dar es Salam camp, and around 18,100 in Lake region (UNHCR, 14/04/2015; 25/03/2015; 21/03/2015; 28/01/2015; 02/11/2014; OCHA, 20/03/2015; 08/02/2015; WFP, 06/03/2015; UNICEF, 08/04/2015).

CAR Refugees

There are 94,020 refugees from CAR in Chad, including 17,080 who have arrived since December 2013 (UNHCR, 21/04/2015; 01/05/2015). Of these, 83,030 live in sites in Amboko, Belom, Dosseye, Doholo, Gondje and Moyo (UNHCR, 01/05/2015). 6,690 live in host communities. (UNHCR, 03/04/2015). In Dembo refugee site, there are 2,298 with needs for shelter and WASH (UNHCR, 03/04/2015).

Nigerian Refugees

The Chadian Prime Minister has appealed for international aid for Nigerian refugees (Reuters, 08/01/2015). At 7 April, 18,100 Nigerian refugees had entered Chad since 3 January (OCHA, 18/03/2015; UNHCR, 07/04/2015). Some 6,900 remain stranded on small islands on Lake Chad, where they are living with host communities (OCHA, 21/02/2015). Relocating the refugees on Lake Chad islands to the Dar Es Salam site remains a priority (UNICEF, 08/04/2015). Resources are limited for both refugees and host communities,
especially food, shelter, and essential household items (OCHA, 12/01/2015). At end March, at least 68,000 people in host communities in five prefectures are affected by the influx of refugees (OCHA, 19/01/2015; UNICEF, 08/04/2015). At camps in Baga Sola there were 3,810 refugees, 6,970 in Ngouboua, and 150 in N’Djamena (UNHCR).

Returnees

There are approximately 257,000 returnees in Chad, including 130,000 from CAR (OCHA, 10/02/2015; UNHCR, 21/03/2015). There are 8,500 Chadian returnees from Nigeria in Lake region, including 2,010 who have been registered (IOM, 21/04/2015; OCHA, 21/02/2015).

There were 1,712 returnees and 3,398 IDPs in Bagasola and 1,494 IDPs in Bol based on recent profiling (UNHCR, 14/04/2015).

On 2-3 May, an international organisation helped 179 stranded migrants in Cameroon relocate home. They are currently in Djako transit site (IOM, 05/05/2015).

Returnees from CAR

There are 130,000 returnees from CAR (UNHCR, 21/03/2015). As of 26 March 1,724 are in Djako site; 11,446 in Danamadja Site; 6,449 in Kobiteye; 8,418 in Logone Orientale villages; 8,513 in Mandoul villages; 16,879 in Sido; and 16,074 in Maingama (OCHA, 28/03/2015). Some 30,000 returnees have returned to their homes in Chad (IOM, 05/05/2015).

There are some 64,220 Chadian returnees living in seven sites in N’Djamena and the south of the country (IOM, 27/04/2015).

90% of CAR evacuees are in camps (OCHA, 15/10/2014). The Government has increased the maximum stay in transit centres from ten days to one year to allow the restoration of family links and better prepare relocation (OCHA, 30/09/2014).

The situation in southern transit sites is critical. The intention is to relocate people from Sido and Doyaba to Maingama, a temporary camp in Moyen Chari; however, Maingama does not have sufficient shelter and WASH capacity to host the entire population of Doyaba and Sido sites (IOM, 16/02/2015).

There are 11,770 people in Danamadja, 6,480 in Kobiteye, 16,360 in Maingama and 116,870 in Sido (UNHCR, 03/04/2015). Work is underway to increase the hosting capacity at Maingama to 30,000 (OCHA, 30/09/2014).

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.

Food Security

2.4 million people in Chad are food insecure (OCHA, 10/02/2015). 681,000 are considered severely food insecure during the lean season, compared to 428,000 severely food insecure at end December 2014 (OCHA, 28/01/2015; WFP, 31/12/2015).

Those in moderate and crisis food insecurity are mainly in central Chad (WFP, 31/12/2015). Between April and June, the lean season will be early in Bahr el Gazel, Kanem, and the Lake Region. Livestock prices are below normal, milk availability will fall and the food security situation, currently in Phase 2 (Stressed) will progress to IPC Phase 3 (Crisis). There is no aid programme planned for this period (FEWSNET, 04/2015). People in the Lake Chad region may face higher food insecurity if they do not receive humanitarian assistance (FEWSNET, 03/2015; 20/04/2015).

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

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

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

Regional Outlook: Sahel

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

Health and Nutrition

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

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

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

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

The HIV/AIDS prevalence in the Lake Region is 10.10% compared to the national prevalence of 2.7% (UNHCR, 14/04/2015).

Nutrition

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

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

Education

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

The number of students in Dar Es Salam camp has decreased from 848 to 269, due to insufficient food rations, heat, and distance (UNHCR, 14/04/2015). Attendance in Baga Sola schools decreased by 70% due to food insecurity, distance, and lack of canteens in school (UNHCR, 17/04/2015).

Protection

Child Protection

Family re-unification is a major protection challenge (OCHA, 25/10/2014).

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

Legal Status

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

Updated: 06/05/2015

DJIBOUTI DROUGHT, FOOD INSECURITY

LATEST DEVELOPMENTS

17 April: 5,867 people have arrived from Yemen over the last two weeks (OCHA).

KEY CONCERNS

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

Security Context

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

Humanitarian Context and Needs

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

Access

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

Displacement

Migrants

IOM estimates that over 100,000 migrants, the majority from Ethiopia and Somalia, transit the country every year. Children account for 32% of the migrant population (UNICEF, 15/01/2015).

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

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

Refugees in Djibouti

According to UNHCR, over the last two weeks 5,867 people have arrived from Yemen by boat. The majority of the new arrivals are staying with friends or family (OCHA, 17/04/2015). Of the newly arrived, 431 have been registered as refugees (UNHCR, 17/04/2015). The refugees are housed at two transit centres in Al-Rahma before transfer to Markazi, where construction of a new camp is underway (UNICEF, 17/04/2015).

UNHCR is planning to receive up to 30,000 refugees in the next six months (UNHCR, 14/04/2014). Humanitarian organisations fear that the influx of people from Yemen may worsen an already difficult humanitarian situation in Obock (ECHO, 20/04/2015).

24,362 refugees, the majority of Somali origin, are registered in Djibouti (OCHA, 01/01/2015). 70% are women and children who depend entirely on humanitarian assistance and protection services (UNICEF, 15/01/2015). There are also 4,220 asylum seekers, 3,275 of whom are from Ethiopia. The refugees are living in two camps: Holl Holl and Ali Addeh, where there is a reported lack of shelter, sanitation facilities and essential non-food items (ECHO, 15/04/2015).

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

Due to below-average rainfall throughout 2014, rural populations in the Southeast Pastoral Border, Northwest Pastoral, and Central Pastoral zones are expected to be in Stressed (IPC Phase 2) acute food insecurity through June 2015 (FEWSNET, 31/01/2015). A combination of high food prices, water scarcity, and reduced pasture is further deteriorating food insecurity (ECHO, 17/04/2015).

Health and Nutrition

In 2014, OCHA reported that 300,000 people are in need of health services. Rates of communicable diseases are high, including diarrhoeal disease.

Nutrition

According to OCHA, 277,000 people are in need of nutritional aid, compared to 195,400 in 2013.

In Obock region, nearly half of the population is considered moderately food insecure and one in ten severely food insecure, according to a 2014 food security survey. The global acute malnutrition is estimated at 29.9 per cent and severe acute malnutrition at 12.1 per cent (UNICEF, 17/04/2015).

WASH

In Obock region, only 40% of the population have access to safe water and only 25% have access to adequate sanitation facilities (UNICEF, 17/04/2015).

Education

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

Protection

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

Updated: 22/04/2015

ETHIOPIA FLOODS, FOOD INSECURITY

LATEST DEVELOPMENTS

20 April: An increasing number of moderate acute malnutrition cases were reported in Arero, Bule Hora, Melka Soda and Miyo woredas in Oromia, and more complicated SAM cases reported in Abaya and Gelana woredas in Oromia (OCHA).

13 April: 13,000 people in Minjar Shenkora and East Belessa woredas, Amhara region are in immediate need of water trucking support (OCHA).

13 April: Around 600 people have been affected by floods in the highlands of Amhara region after the Kebena River overflowed (OCHA).

KEY CONCERNS

- 2.9 million will require food assistance in 2015. The most affected regions are Oromia, Somali, Amhara, Tigray, and Afar (OCHA, 09/03/2015).
- 1.2 million people are in need of improved access to safe water and water sources (UNICEF, 31/10/2014).
- Ethiopia hosts some 682,750 refugees; mainly Somalis, South Sudanese, Eritreans, and Sudanese (UNHCR, 15/04/2015).
- A majority of refugee camps have reached full capacity. Main concerns include overcrowding, malnutrition, flooding and critical shortfalls in humanitarian aid.
- 264,500 SAM cases were reported in March; 446,800 pregnant and breastfeeding women need nutrition interventions (OCHA, 15/03/2015).

Political Context

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

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

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

Security Context

Participation in Regional Military Operations

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

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

**Humanitarian Context and Needs**

**Access**

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

**Disasters**

**Floods**

Around 600 people have been affected by floods in the highlands of Amhara region after the Kebena River overflowed. 300 of them are in temporary shelters while the rest are displaced. A flood assessment reported that the population is at high risk of water-related disease outbreaks (OCHA, 13/04/2015).

**Displacement**

**IDPs**

As of 11 February, Ethiopia had 495,680 IDPs (IOM through OCHA, 11/02/2015), who mostly live in Sumale (USAID, 2014). About 60% of IDPs represent protracted displacement cases (OCHA, 2014).

**Refugees in Ethiopia**

As of 31 March, Ethiopia hosts some 682,750 refugees; mainly Somalis, South Sudanese, Eritreans, and Sudanese (UNHCR, 15/04/2015). South Sudanese account for the biggest refugee population (UNHCR, 20/10/2014). Environmental degradation in camps, the fragile ecosystem, and scarce resources have led to tensions between host communities and refugees in some locations (UNHCR, 20/01/2015).

**South Sudanese Refugees**

As of 28 February, 202,665 South Sudanese refugees have entered Ethiopia since December 2013. **71% are women and children, of which two-thirds are children (67%) (UNHCR, 31/03/2015).** They are arriving in a critical nutritional condition (UNHCR, 28/02/2014). The majority come from Upper Nile state and are predominantly from Gajaak, Gajok, and Luo-Nuer tribes (UNHCR, 03/07/2014). 57,800 South Sudanese refugees were in Ethiopia before December 2013 (UNHCR, 12/02/2015).

Matar reception centre has been closed, and Leitchuor and Nip Nip camps were so damaged by flooding in 2014 they are not suitable for the settlement of refugees. Relocation to Pugnido camp is ongoing: so far 9,000 refugees have been relocated (WFP, 20/02/2015). Pugnido is now hosting 54,800 refugees (UNHCR, 28/02/2015). Refugees from Leitchuor and Nip Nip are also being relocated to Jewi, a new camp near Gambella, which will have a capacity of 50,000 (OCHA, 16/03/2015). **However, more land is needed to accommodate new arrivals from South Sudan (OCHA, 20/04/2015).** Relocation has slowed as refugees are unwilling to leave their communities (WFP, 01/04/2015). Other refugees have self-relocated in different parts of Nyinyang and along the Nip Nip—Jakawo corridor and Gambella—Matar highway (UNICEF, 15/08/2014; UNHCR, 10/11/2014). As of January, two other sites, Kobe, with a capacity of 50,000, and Cholan, with a capacity of 20,000, have been identified and approved for development as refugee camps (UNHCR, 09/01/2015, 15/01/2015). 32,668 refugees are living within host communities (UNHCR, 24/03/2015).

**Eritrea:** As of April Ethiopia hosts 133,000 Eritrean refugees, including 33,000 new arrivals in 2014 (OCHA, 28/02/2015; ECHO, 17/04/2015). There was a spike in daily arrivals in the last quarter of 2014: about 8,588 refugees arrived in October, and November (OCHA, 24/11/2014). New arrivals are transferred to Hitsat camp, which hosts about 27,560 people (OCHA, 24/11/2014). The recent spike has led to a shortage of health services, shelter, and core relief items. UNHCR has highlighted that the large number of unaccompanied minors is cause for grave protection concern (OCHA, 26/01/2015).

**Somalia:** As of April, there are 246,000 Somali refugees in Ethiopia. 4,621 arrived in 2014 (ECHO, 17/04/2015). Most of them are located in Dollo Ado camps (UNHCR, 28/02/2015).

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

**Ethiopian Refugees in Neighbouring Countries**

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

As of 1 March there are 30,630 Ethiopian refugees and asylum seekers in Kenya (UNHCR, 14/04/2015).

**Returnees**

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

**Food Security**

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

Health and Nutrition

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

Measles

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

Nutrition

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

An increasing number of moderate acute malnutrition cases were reported in Arero, Bule Hora, Melka Soda and Miyo woredas in Oromia, and more complicated SAM cases reported in Abaya and Gelana woredas in Oromia (OCHA, 20/04/2015).

WASH

1.2 million people are in need of improved access to safe water and water sources (UNICEF, 31/10/2014). Water shortages continue in Legahida and Salahad woredas of Nogob zone (OCHA, 13/04/2015).

13,000 people in Minjar Shenkora and East Belessa woredas in the Amhara region people are in immediate need of water trucking support (OCHA, 13/04/2015).

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

Protection

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

Vulnerable Groups and Minorities

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

Updated: 20/04/2015

GAMBIA FOOD INSECURITY

LATEST DEVELOPMENTS

No significant developments this week, 30/04/2015. Last update 07/01/2015.

KEY CONCERNS

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

Political and Security Context

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

Humanitarian Context and Needs

Displacement

Refugees in the Gambia

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

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

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

Sahel Food Crisis: Regional Overview

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

Health

Nutrition

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

Reviewed: 30/04/2015

GUINEA FOOD INSECURITY, EPIDEMIC

LATEST DEVELOPMENTS

4 May: More than 20 people were injured in clashes between police and protesters demanding the revision of the election calendar (Daily Mail).

29 April: A measles vaccination campaign in Gueckedou faced some resistance, mostly due to persisting fear of Ebola (IRIN).

27 April: A three-day sensitisation and Ebola case finding campaign in Coyah prefecture led to several incidents of resistance, two of which involved violent threats (UNMEER, 29/04/2015).

29 April: In the week to 26 April, 22 new Ebola cases were confirmed in Guinea: 17 in Forecariah, two in Fria, and one each in Boffa, Dubreka and Kindia (WHO).

KEY CONCERNS

- The cumulative number of reported Ebola cases across the region has reached 26,339, including 10,895 deaths. As of 2 May, 3,591 cumulative Ebola cases, including 2,385 deaths, have been reported in Guinea (WHO, 04/05/2015). The numbers of registered cases and deaths are largely inaccurate.

- Between February and March 2015, 1.35 million (15%) of Guinea’s population were in Phase 2 food insecurity, and 275,000 in Phase 3 (5%). These figures are expected to reach 1.5 million in Phase 2 and 395,000 in Phase 3 (5%) in the lean season between June and August 2015 (Cadre Harmonisé, 01/03/2015).

- Resistance to the Ebola response continues to be reported.

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

Political Context

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

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

Security Context

Unrest

Political protests began in mid-April, after announcements that local elections would be delayed until March 2016. On April 13, at least 9 people were shot with live ammunition during clashes between demonstrators and security forces in the capital Conakry (international media, 13/04/2015). On 20 April, at least five people were wounded by gunfire in Conakry during violent protests. Reports indicate security forces killed one of the protesters. The opposition called for more demonstrations nationwide (international media, 20/04/2015; Al Jazeera, 23/04/2015). On 4 May, clashes between police and protesters injured 26 in Conakry, according to the opposition, though the Government claims two people were wounded in a traffic accidents caused by the protests. 29 were arrested. The main market of Conakry was closed, as well as most businesses close to the airport. Other towns with opposition strongholds remained quiet, but a rally was staged in Nzerekore city (Daily Mail, 04/05/2015).

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

Though resistance to the Ebola response continues to be a challenge, there are indications of improved access in certain communities (USAID, 16/04/2015). Community resistance was reported in Boffa, Boké, and Kindia in the week to 19 April, and at least one incident of resistance was reported per day in Conakry over the past six weeks (WHO, 22/04/2015). Between 30 March and 12 April, IFRC only reported one incident in Conakry (IFRC, 20/04/2015). In Coyah prefecture, the health team was attacked following a death and burial in the community and the security forces had to intervene (UNMEER, 17/04/2015). During the two-day stay-at-home in Coyah prefecture from 24–27 April, several incidents were reported. Two involving threats by armed locals (UNMEER, 29/04/2015).

A measles vaccination campaign in Gueckedou has faced some resistance, which was typically passive and due to persisting fear of Ebola (IRIN, 29/04/2015).

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

The Red Cross said members of its staff in Guinea are attacked on average ten times per month (IFRC, 12/02/2015). The Prime Minister has announced measures against resistance, including prosecution of those who hide patients from medical teams or those who hold medical teams hostage (International media, 12/01/2015).

Humanitarian Context and Needs

Access

The larger size and population of Guinea compared to Liberia and Sierra Leone make the response more difficult (Washington Post, 13/03/2015). Poor road infrastructure means many communities outside the capital are extremely difficult to reach (OCHA, 16/09/2014). Rains have started already in some areas; they will be heavy by May, making some areas inaccessible by car (Plan, 07/04/2015). Community resistance, especially in Forecariah, also challenges relief activities, as the community does not want to receive support associated with the response to the Ebola epidemic (WFP, 13/02/2015).

Food Security

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

Almost 90% of the Ebola-driven food insecure live in rural areas (FEWSNET, 31/12/2014).

Agriculture and Markets

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

Livelihoods

Typical livelihood activities, including vegetable and cassava harvests and agricultural and mining, have resumed and are providing rural households with income. Income from other sources, such as petty trade, handicrafts and casual labour remain limited due to reduced market activity (FEWSNET, 01/05/2015).

In 2015 the economy is expected to contract by 0.2%, compared to pre-Ebola expected growth of 4.3% (World Bank, 15/04/2015). Poverty is predicted to rise from 2.25% in 2014 to 7.9% in 2015 (UNDG, 11/03/2015).

Health and Nutrition

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

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

Ebola

As of 24 April, 3,591 cumulative Ebola cases, including 2,385 deaths, have been reported in Guinea (WHO, 04/05/2015). The utility of case numbers has been questioned; statistics are reported to be highly unreliable due to a lack of a comprehensive contact tracing, timely case investigation, and rapid Ebola testing (UNICEF, 06/09/2014).

22 confirmed cases were reported in the week to 26 April. 17 cases were reported from Forecariah, two from Fria and one in each of Boffa, Dubreka and Kindia prefectures. No new confirmed case was reported in Conakry. 18 of the 25 affected prefectures have not reported any Ebola cases in more than six weeks (WHO, 04/05/2015).
Phase III clinical trials of an Ebola vaccine began in Guinea on 8 March. Front-line workers are targeted for the first round of vaccinations (UNMEER, 09/03/2015).

Containment measures: Contact tracing remains a challenge. There are several reports of losing contacts in Conakry, Coyah, Boké, and Forecariah (UNMEER, 20/04/2015). The electoral protests in the week of 13 April decreased contact tracing by 50% in Conakry for safety reasons. Burial teams were unable to attend some funerals (Ebola Deeply, 20/04/2015). There are still concerns about the number of cases arising from unknown contacts and the Ebola-related deaths that continue to be confirmed in the community post mortem (IFRC, 20/04/2015).

The risk of cross-border transmission has increased as market days in Koinadugu, Sierra Leone, and family ties in Kono, Sierra Leone, have led to an increase cross-border traffic (USAID, 07/04/2015). Officials from Guinea and Sierra Leone have agreed to share information on cross-border movement and intend to establish screening protocols (UNMEER, 07/04/2015).

Three-day stay-at-home periods are being implemented in Forecariah, Coyah, Conakry, Kindia, Boffa and Dubreka, targeting 500,000 households for a campaign of sensitisation and suspected EVD case-finding (UNMEER, 07/04/2015; USAID, 21/04/2015). This follows the President announcing a 45-day ‘health emergency’ in those counties. Additional measures are taken to combat Ebola, including the closure of health facilities where Ebola cases have been reported recently, and all burials being carried out by the Red Cross or security forces (Al Jazeera, 28/03/2015; BBC, 29/03/2015; international media, 29/03/2015; UNMEER, 20/04/2015).

The Forecariah Ebola Response Coordination has agreed on an information sharing system with neighbouring Kambia district in Sierra Leone, to harmonise EVD response and sensitisation on both sides of the border (UNMEER, 02/04/2015).

The border between Guinea and Liberia at Ganta border post was opened on the Guinean side on the week of 13 April. IPC protocols were being practiced. Yekepa border post is open, as is the checkpoint in Kondadou Lofa prefecture, where IPC measures are being implemented for travellers between Guinea and Liberia (UNMEER, 15/04/2015). On 25 February, Liberia reopened its border with Guinea (UNMEER, 20/04/2015). On 26 January, Senegal reopened its land border with Guinea (international media, 27/01/2015).

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

Regional Outbreak

26,339 cumulative Ebola cases have been reported across the region, including 10,895 deaths (WHO, 04/05/2015). About 75% of current Ebola cases in West Africa are from the region between Kambia in Sierra Leone and Forecariah (WHO, 29/04/2015). About 130,000 people have HIV, and 28,000 received antiretroviral therapy (ART) in 2014. From April to December, 2014, the proportion of defaulters among patients receiving ART increased from 0% to 42% because of the pressure on the health system due to the Ebola outbreak. The number of patients active in care also decreased between June and December 2014 (The Lancet, 11/04/2015).

Malaria

The recent gains from the past ten years in reducing malaria mortality by 50% have been seriously hampered by the Ebola outbreak. About five million people are affected by malaria each year; the disease kills at least 10 people every week (international media, 14/11/2014).

Maternal Health

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

Measles

The number of suspected measles cases continues to increase. Since January, 1,265 suspected measles cases have been reported in the country (WHO, 15/04/2015). A vaccination campaign was conducted in three villages hardest hit by measles in Lola prefecture (Nzerekore region) (UNICEF, 18/03/2015). Difficulty reaching children in remote areas hampered a measles vaccination campaign in Gaoual and Koundara prefectures (UNICEF, 16/03/2015).

A nationwide measles vaccination campaign started on 18 April, targeting 1.3 million children between six months and nine years (international media, 24/04/2015). In Nzerekore prefecture the campaign only achieved a 39% participation rate by the third day, far below the target of 95% by the end of the campaign (UNMEER, 24/04/2015).

Meningitis

156 suspected meningitis cases and 16 deaths have been reported in Kankan, Siguiri, Kouroussa, Kerouane and Mandiana (WHO, 15/04/2015).

Nutrition

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

Education
Most schools reopened on 19 January. Around 1.3 million children have returned to school, bringing attendance to 88% of pre-Ebola levels for primary schools and 81% for secondary schools. All assessed schools have hygiene equipment to help prevent further spread of Ebola (UNICEF, 25/03/2015; UNICEF, 15/04/2015).

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

Protection

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

As of 22 April, 5,596 children have been identified as having lost one or both parents to Ebola (UNICEF, 22/04/2015). All 773 children who lost both parents have been placed with extended family (UNICEF, 06/02/2015).

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

Updated: 05/05/2015

KENYA FOOD INSECURITY, INSECURITY

LATEST DEVELOPMENTS

21 April: Following numerous statements from humanitarian organisations against the forced repatriation of Somali refugees to Somalia, Kenyan officials announced a suspension of plans due to high costs (MSF, DRC, UNHCR, local media).

20 April: Delayed and inadequate long rains have sparked fears of inadequate harvests next season, causing the price of food to steadily rise since January. The government has released maize stocks to counteract the rising price of flour (local media).

17 April: Following rains in 15 April, many areas of Kakuma refugee camp were flooded. While most of the roads and some blocks were flooded, there were no signs of displacement or collapsed houses (OCHA).

14 April: The Kenyan government offered a ten-day amnesty to youths who had joined Al Shabaab and now wish to disassociate themselves (Ethiopian government).

11 April: Nearly 1,500 people have been affected by floods in Kisumu County. Breached banks in Muhoroni have destroyed crops and houses. A recent assessment indicated that most children and the elderly were likely to contract diseases because of the lack of food (Kenya Red Cross, local media).

KEY CONCERNS

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

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

- More than 586,224 refugees, including at least 420,000 Somalis and 90,000 South Sudanese (UNHCR 01/04/2015).

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

Political Context

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

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

Security Context

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

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

Al Shabaab-related Violence

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

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

The April attacks follow several months of escalating Al Shabaab activity and military response in Kenya. Al Shabaab gunmen killed 28 non-Muslims taken from a Nairobibound bus in Mandera in November retaliating for Kenyan police raids of suspected radical mosques in Mombasa earlier in the month (OCHA, 28/11/2014). Health workers, teachers, and civil servants subsequently fled the area. Attempts to hire new health workers have failed, as perceptions of insecurity remain high (Kenya Daily Nation, 27/11/2014; local media, 26/03/2015). Al Shabaab launched further attacks in Wajir and Mandera in early December, killing 37 in total and injuring 12 (AFP, 01/12/2014; AFP 02/12/2014).

On 13 March, four soldiers were killed and seven were injured in Mandera when a convoy carrying county governor Ali Roba was attacked (AFP, 13/03/2015). On 15 March, Al Shabaab gunmen killed one and injured three in Mandera (AP, 15/03/2015). On 18 March, Al Shabaab locked people inside a shop in Wajir and set it on fire, killing four people (Reuters, 18/03/2015) (Reuters, 18/03/2015).

On 14 April, the Kenyan government offered a ten-day amnesty to youths who had joined Al Shabaab and now wish to disassociate themselves. The Government stated they would consider granting amnesty and appropriate reintegration support (Government of Ethiopia, 15/04/2015).

Inter-communal Violence

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 2014, inter-communal violence in Kenya had caused 310 deaths, 214 injuries and displaced 220,200 (OCHA, 31/11/2014). The areas most affected by inter-communal violence are the northern Rift Valley and northeastern regions.

On 9 March, a group of 30 armed men raided the village of Suyian in North Samburu, stealing cattle, and killing two people and injuring two (local media, 10/03/2015). A clash over land between Mwimbi and Tharaka people on 10 March left one dead in Meru, eastern Kenya (local media, 10/03/2015).

Conflicts in Baringo and Turkana

Raids in Baringo in December 2014 displaced tens of thousands. The Government has since stepped up efforts to evict Pokot herders from North and South Baringo in order to ensure security in the area (local media, 19/03/2015). On 5 February, the leaders of the Turkana and Pokot tribes met for peace talks (Finn Church Aid, 05/02/2015). However, all the police reservists in Kailoseget village, Turkana, have been killed, either while guarding herders at grazing fields or helping recover stolen animals. Most herds have been stolen, severely impacting livelihoods (local media, 23/03/2015).

Humanitarian Context and Needs

Disasters

Drought

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

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

Floods

Nearly 1,500 people have been affected by floods in Kisumu County in early April. Breached banks in Muhoroni have destroyed crops and houses. A recent assessment indicated that most children and the elderly were more likely to contract diseases because of the lack of food (Kenya Red Cross, 11/04/2015). Cholera and water-borne diseases have affected Kisumu almost every year due to water scarcity and floods (local media, 11/04/2015).

Following rains on 15 April, many areas of Kakuma refugee camp were flooded. While most of the roads and some blocks were flooded, there were no signs of displacement or collapsed houses (OCHA, 17/04/2015).

IDPs

On 11 February, Kenya had 309,200 IDPs (OCHA, 11/02/2014).

As of 30 November 2014, inter-communal violence had caused the displacement of 125,107 people in Mandera, 84,980 in Wajir, 4,920 in Lamu and 1,730 in Turkana in 2014. Conflicts in Baringo in December caused the displacement of at least 17,600 people. Mid-January reports indicate that the displaced are facing acute food shortages and are still in need of shelter support (local media, 25/01/2015). The Government has provided aid to facilitate the return of 5,000 of the displaced (local media, 19/03/2015).

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

Refugees

As of 1 April, Kenya is hosting more than 586,224 refugees and asylum seekers. 223,970 are in Dadaab, 127,476 in Afinjugu, 181,821 in Kakuma and 52,957 in Nairobi (UNHCR, 1/04/2015).

From Somalia: As of 1 April, 422,591 Somali refugees are in Kenya. 13,162 arrived in 2014, indicating a considerable drop in arrivals (UNHCR, 01/04/2015). Most are in the northeastern Dadaab refugee camp complex (UNHCR, 15/03/2015). Additionally, there are 2,620 asylum seekers (UNHCR, 24/03/2015). Security in Dadaab and along the border with Somalia is volatile, with frequent incidents being reported and implications for the safety of humanitarian workers (ECHO, 17/04/2015).

The Tripartite Agreement between the Kenyan and Somali Governments and UNHCR, signed in November 2013, establishes the legal framework for those Somali refugees wishing to return home (IOM, UNHCR, 09/12/2014). As of 21 April, 2,060 returnees had arrived in Somalia (UNHCR, 21/04/2015). On 12 April, Kenyan officials had asked UNHCR to close Dadaab camp and repatriate all Somali refugees within two months (Al Jazeera, 12/04/2015). Following numerous statements from humanitarian organisations, Kenyan officials announced on 21 April that the plans would be put on hold, as it was too expensive. The Kenyan government is now requesting resources from partners and donors for the repatriation of refugees (MSF, UNHCR, DRC, 17/04/2015; local media, 21/04/2015).

From South Sudan: As of 9 April, more than 45,639 South Sudanese refugees had crossed into Kenya through Nadapal border since mid-December 2013 (OCHA, 09/04/2015). 64% of these are children (UNICEF, 05/02/2015). The total population of South Sudanese refugees in Kenya had reached 90,714 in February 2015 (UNHCR, 01/02/2015).

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

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

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

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

Access

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

Food Security

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

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

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

Agriculture and Markets

Delayed and inadequate long rains have sparked fears of inadequate harvests next season, causing the price of food to steadily rise since January. On 20 April, the government released maize stocks held by authorities in attempts to stop the increasing price of flour across the country (local media, 20/04/2015).

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

Livelihood

On 7 April, the Central Bank of Kenya closed 13 remittance firms, in an effort to curb the financing of terrorism. This has affected Somali refugees in Kenya, as families are unable to receive funds from abroad. 30 remittances outlets work in Dadaab, all of which have signed in November 2013, establishes the legal framework for those Somali refugees wishing to return home (IOM, UNHCR, 09/12/2014). As of 24 March, 17,303 DRC refugees and asylum seekers in Kenya (UNHCR, 24/03/2015).

Health and Nutrition

Lack of medical staff was reported in Kakuma camp, creating a gap in consistent service delivery. Insufficient supply of condoms, vaccines, and associated materials were also reported (UNHCR, 28/01/2015). The ratio of hygiene promoters to refugees in Kakuma camp is 1:2,500, well below the UNHCR standard of 1:500 (UNHCR, 09/01/2015). Eleven of 26 health facilities in Mandera have closed because staff have left the county (UNICEF, 05/02/2015).
Cholera

A cholera outbreak has been reported in Homa Bay, Migori, and Nairobi counties (local media, 13/02/2015). The outbreak has spread to Kisii county. As of 24 February there were 805 confirmed cases and 12 deaths, most in Migori (IFRC, 24/02/2015).

Nutrition

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

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

Education

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

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

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

Protection

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

Child Protection

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

Updated: 22/04/2015

Liberia

Latest Developments

30 April: The Government of Liberia has threatened to close all schools and restaurants that lack adequate WASH facilities (All Africa).

April: Income generation is the main concern for two-thirds of respondents in a multisectoral assessment. (ACAPS).

23 April: No new Ebola cases have been confirmed in Liberia since 27 March (WHO, 04/05/2015).

Key Concerns

- The last confirmed Ebola patient died on 27 March (WHO, 15/04/2015).

- 26,399 cumulative Ebola cases across the region, including 10,895 deaths (WHO, 04/05/2015).

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

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

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

Political Context

The official Liberian anti-corruption watchdog has reported that around USD 800,000 intended to combat Ebola cannot be accounted for. Over USD 600,000 of this passed through the Ministry of Defence (Reuters, 09/04/2015; All Africa, 09/04/2015).

International Presence

The Security Council has 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).

Economic Impact

2015 GDP growth is projected at 3%, compared to 1% in 2014. This is still below the pre-Ebola growth estimates of 6.8% (World Bank, 15/04/2015). Revenue for 2015 is projected
to decline by about 16% (UN, 26/03/2015). A fiscal deficit is projected at 12.8% in 2015, due to decreased revenue and increased Ebola-related expenses (World Bank, 15/04/2015).

**Humanitarian Context and Needs**

**Access**

In some areas of Liberia the first rains have started. Heavy rains will begin in May: it will be difficult to reach hospital and clinics, electricity will not be available for long periods, and water and sanitation infrastructure will be disrupted (Plan, 07/04/2015).

**Refugees in Liberia**

Liberia is hosting 39,843 refugees, asylum seekers and others of concern, including 37,907 refugees from Côte d’Ivoire. Voluntary repatriation of Ivorian refugees was suspended by the Government of Côte d’Ivoire at the beginning of the Ebola epidemic. In March UNHCR, and the Liberian and Ivorian Government have agreed to resume repatriation (UNMEER, 15/03/2015; UNHCR, 28/02/2015; international media, 23/04/2015).

**Food Security**

As of March, 1.23 million people are facing Stressed (IPC Phase 2) food insecurity, and 190,000 Crisis (Phase 3). Rates of negative coping strategies remain highest in Lofa, Bomi, Gbarpolu, and Grand Cape Mount counties (WFP, 31/03/2015).

A survey conducted in March by the World Bank showed 75% of households had concerns about having enough to eat in the previous week. The end of the harvest has improved the situation in rural areas, but food insecurity has increased in urban areas (World Bank, 15/04/2015). However, WFP reports that urban households tend to use fewer coping strategies than rural ones (WFP, 31/03/2015). **Increased unemployment rates are likely contributing to reduced household food access through market purchase** (FEWSNET, 01/05/2015).

Cadre Harmonisé projects 720,000 people, equal to 15% of the population, will reach Crisis (IPC Level 3) food insecurity in the June–August lean season, as poor and very poor households in Nimba, Lofa, Bong, Margibi, and Montserrado counties will have insufficient purchasing power (Cadre Harmonisé 03/2015; WFP, 31/03/2015).

**Agriculture and Markets**

Markets and trade seem to be recovering since the reopening of Liberia’s borders with Guinea and Sierra Leone. **Daily and weekly markets are open and functional, although operating at reduced levels compared to April 2014. This is due to continued Ebola-related fears, low purchasing power, and reduced demand for export** (FEWSNET, 01/05/2015). Surveys indicated that local and imported rice prices remained stable in March, but are still well above average. Palm oil prices were stable, but were nearly 20% higher in the counties in the extreme southeast (Maryland, Grand Kru, and River Gee), compared to Montserrado county (WFP, 31/03/2015; World Bank, 15/04/2015). Over 35% of traders reported that they were not able to sell their cash crops as usual at this time of year (FEWSNET, 03/04/2015).

65% of agricultural households report a smaller harvest than last year, though the link with the EVD outbreak is not clear (World Bank, 15/04/2015). In April, 21% of traders reported that rice cultivation was taking place at below-average levels (FEWSNET, 01/05/2015). Decreased agricultural production is of particular concern in Bomi, Bong, and Lofa counties, where the impact will become clear during the October 2015 harvest (ACAPS, 04/2015). Agricultural sector growth will decline by over 2% due to the Ebola outbreak, according to a recent recovery report (UN, 26/03/2015).

60% of Liberians rely on imported staple crops, and a rice import gap of 90,000 metric tons is exacerbating food insecurity, based on commercial forecasts (FAO, 05/01/2015; 22/01/2015).

**Livelihoods**

Two-thirds of respondents in a nationwide multisectoral assessment considered the income generation situation worse in April 2015 than before the Ebola outbreak. Access to income generation is the main concern, and priority over health and education. A lack of jobs was cited as the main obstacle (ACAPS, 04/2015). More than 37% of people surveyed in March reported fewer wage opportunities compared to the same period in the previous year, although almost 20% of Liberians who had stopped working since the Ebola crisis had returned to work in February (FEWSNET, 03/04/2015). In March, 45% of respondents who were employed between February and August 2014 reported that they were currently out of work (FEWSNET, 01/05/2015). Women are particularly vulnerable since they work disproportionately in non-farm self-employment. 95% of women who were engaged in small business have lost their markets and are accumulating debt, which they will struggle to repay (UN, 26/03/2015). Microcredit, one of women’s main sources of funding, has decreased to negligible amounts (Cadre Harmonisé, 03/2015).

Manual labour wage rates are up by 3% nationally as demand for agricultural labour returns, but wage rates fell in Bong (-6%), Lofa (-2%), Margibi (-3%) and Nimba (-2%) (WFP, 31/04/2015). According to a World Bank phone survey, 40% of respondents said they haven’t been working since the start of the crisis, which should indicate a steady return in wage work and rural self-employment, offset by a typical seasonal lull in agricultural work. Women have experienced the worst job losses (World Bank, 15/04/2015).

In a World Bank survey, 85% of participants reported having sold assets, sold or slaughtered livestock, borrowed money, sent children to live with relatives, spent savings, or delayed investments since the start of the Ebola crisis (World Bank, 24/02/2015). Bush meat vendors are out of business due to bans on sales. Closure of many industries has led to increased unemployment (Cadre Harmonisé, 03/2015).

**Health and Nutrition**

In a World Bank survey, 85% of participants reported having sold assets, sold or slaughtered livestock, borrowed money, sent children to live with relatives, spent savings, or delayed investments since the start of the Ebola crisis (World Bank, 24/02/2015). Bush meat vendors are out of business due to bans on sales. Closure of many industries has led to increased unemployment (Cadre Harmonisé, 03/2015).
Nearly all health facilities in the country are open, but most are operating at reduced levels compared to before the outbreak. A recent assessment of non-Ebola health facilities in Montserrado county showed 40% had a functional triage system (WHO, 11/03/2015). Many patients are still fearful of infection and so avoid health facilities (MSF, 02/04/2015). Between August and December 2014, the number of outpatient visits decreased by 61% compared with the same period in 2013 (UN 26/03/2015). Routine disease surveillance remains sporadic and data is limited. Outbreaks of infectious disease have been reported (UNMEER, 15/03/2015).

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

### Ebola

**As of 23 April, 10,322 cumulative Ebola cases have been reported in Liberia, including 4,608 deaths (WHO, 04/05/2015).** The utility of case numbers has been questioned; statistics are reported to be highly unreliable (CDC, 09/2014; international media, 20/11/2014). A high number of suspected Ebola cases are not being confirmed, which misrepresents total case numbers and consequently the fatality rate of the Ebola outbreak. No new cases have been confirmed since 27 March (WHO, 29/04/2015). The low number of suspected cases being reported and tested indicates weak surveillance (IMS, 27/02/2015). Some new suspected cases are not being reported for testing because reporting will lead to quarantine (PI, 07/03/2015).

**Healthcare provision:** 372 health workers have been infected, 180 of whom have died (over 3%, and nearly 2%, of health workers, respectively) (MoH, 07/04/2015; UNICEF, 25/03/2015). Health workers have a 30-fold greater risk of contracting EVD than the general population. Many are too scared to return to work, adding to chronic understaffing issues; some have refused to treat patients. The majority of the country’s 32 pharmacists left their posts during the crisis (MoH, 07/04/2015).

**Containment measures:** The Government of Liberia has threatened to shut down all schools and restaurants that lack WASH facilities (All Africa, 30/04/2015). A WASH in schools program was launched to improve access to water and sanitation in education facilities.

On 22 February the 1200–0600 curfew was officially lifted (AFP, 20/02/2015). The Government reopened its borders with Sierra Leone and Guinea, which had been closed since 29 July (UNMEER, 23/02/2015). Thousands of people are now crossing daily through official and unofficial crossing-points, although the Sierra Leonean side of the border remains officially closed. More border points with Guinea are opening officially on both sides, although there are concerns about critical gaps in infection control supplies, particularly on the Guinean side (UNMEER, 15/03/2015; UNMEER; 15/04/2015). Infection prevention and control challenges persist in border areas, according to a CDC assessment in March, including a lack of safe drinking water at health centres; inadequate WASH facilities; insufficient fuel for incineration; and inconsistent access to and storage and use of personal protective equipment (USAID, 25/03/2015). Residents of Lofa county have voiced concerns about the limited monitoring of infection prevention protocols (IMS, 07/03/2015; PI, 16/03/2015; VOA, 18/03/2015).

Authorities are urging Ebola survivors to refrain from unprotected sex beyond the recommended 90 days, until more information on the likelihood of sexual transmission is collected. This is due to the last confirmed case being suspected of having been sexually transmitted (VOA, 29/03/2015, NYT, 28/03/2015).

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

### Regional Ebola Outbreak

26,339 cumulative Ebola cases have been reported across the region, including 10,895 deaths (WHO, 04/05/2015).

### 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

In the three most affected countries, deliveries in health facilities and the number of assisted births have decreased. Antenatal consultations decreased by between 40% and 43%; while institutional deliveries decreased by 37% to 38% by the end of 2014 compared to 2013 (UN, 26/03/2015, MoH, 07/04/2015). In addition, Ebola-infected pregnant women were often not permitted in Ebola treatment centres because of the high risk of contamination during delivery (UNFPA, 13/02/2015).

### Measles

As of 30 April, there have been 385 confirmed measles cases across nine counties. Two-thirds of the cases were among children aged 9–59 months. The counties that reported most cases are Grand Bassa (160), Margibi (85), and Montserrado (65) (MoH, 30/04/2015).

A mass vaccination campaign is planned from 8–14 May, targeting around 700,000 children for both measles and polio (UNICEF, 11/03/2015; All Africa, 24/04/2015).

There are reports of people suspected to have measles abandoning their homes to avoid specimen collection and testing (UNMEER, 27/03/2015). Different reports suggest measles vaccination coverage has decreased by between 45% and 58% by December 2014, compared to 2013. The minimum acceptable level is at least 80% to protect a population against the virus (UN, 26/03/2015; Save the Children, 02/04/2015).

### Mental Health

A need for access to mental health and psychosocial support remains, especially for survivors, orphans, and the bereaved (UNMEER, 22/02/2015).
There is only one psychiatrist and there are no psychologists in Liberia. 143 mental health clinicians are meant to be attached to wellness units, but these are yet to be established. There are no long-term treatment facilities for mental health in Liberia. There is one facility with approximately 80 beds for short-term patients (PI, 21/03/2015).

Nutrition

The six counties prioritised by responders for nutrition interventions are the counties that reported the highest Ebola case numbers during the height of the crisis: Montserrado, Margibi, Bong, Nimba, Grand Cape Mount, Lofa (UNICEF, 15/04/2015). 52,000 children are estimated to be at risk of severe acute malnutrition (SAM). There is a need for nutritional support for infants and young children in Ebola affected households (UNMEER, 15/03/2015). However, there is no nutritional status information post-Ebola, since the “no-touch” policy has prevented screening. Relative to trends observed from 1992–2012, malnutrition prevalence is forecast to increase by 2.8–5.3% between 2014 and 2016 (UN Development Group, 11/03/2015). Global acute malnutrition was 6% before the EVD crisis (PI, 24/03/2015).

WASH

According to a recent assessment of health facilities, 50% do not have a protected year-round source of water, and 20% do not have any protected source on site. 45% do not have any bulk water storage on site. Only 61% of facilities report hand washing facilities at the toilet. 23% have a drainage system and only 45% have a functioning soak pit for liquid waste (WASH Cluster, 10/04/2015).

17% of Liberians have access to improved sanitation. The number drops to 4% in rural areas. 32% don’t have access to improved drinking water source (WASH Cluster, 13/04/2015).

An estimated 2,800 schools need improved access to water (PI, 26/03/2015). According to the Ministry of Education, 55% of schools do not have access to functional water supply and 43% lack access to functional latrines. Only 18% of schools have hand-washing facilities. In schools with functional sanitation facilities, there is an average of 118 boys or 113 girls per latrine (MoE, 26/02/2015). According to an Education Cluster assessment, 31% of schools do not have functional latrines, while schools that do average one latrine for every 123 students. Only 60% of the schools had safe drinking water within 500m, 40% of schools had soap and water for hand washing, and 39% had functional hand-washing facilities (Education Cluster, 17/03/2015).

Education

According to self-reported data, enrolment since schools re-opened in February is at 92% of the 2014 level according to the schools assessed recently by UNICEF (UNICEF, 08/04/2015). However, private sources have suggested the figure is closer to 66% and the World Bank found only 75% of people with primary school-aged children reported that at least one child had returned to school, with over 80% of parents citing a lack of money as the main barrier to education (World Bank, 16/04/2015; PI, 20/04/2015). Many schools are reportedly not in compliance with hygiene protocols (UNICEF, 18/03/2015). Fear of Ebola transmission continues to be of concern countrywide, preventing people from sending their children to school (ACAPS, 04/2015).

Protection

Families of victims and survivors are experiencing physical and verbal abuse and lack access to health facilities, food, and water sources (UNMEER, 30/11/2014; UNMEER, 11/01/2015). Some survivors say marketers are refusing to accept their money for transaction (All Africa, 04/05/2015). Healthcare workers who were in ETUs face similar discriminatory attitudes (Mercy Corps, 02/04/2015).

Best estimates suggest there are currently around 2,000 survivors in Liberia (VOA, 30/03/2015). Many return home to find their possessions have been destroyed to prevent the spread of the virus. Landlords have terminated leases and some people have lost their jobs (VOA, 30/03/2015; All Africa, 04/05/2015). Women and girls, who have poorer access to jobs and education, are especially vulnerable (UNFPA, 03/02/2015).

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

Child Protection

It is reported that 401 of the 450 rape cases reported in Liberia since the beginning of the EVD outbreak were committed against children 0-17 years (UNICEF, 15/04/2015).

4,345 children have been identified as directly affected by Ebola – defined as quarantined, unaccompanied, orphaned and separated children, and children in treatment or discharged. 3,187 have lost one or both parents to Ebola (UNICEF, 22/04/2015).

Social workers have raised fears of child trafficking and exploitation, after some children, who have been placed into foster care and are receiving material support or onetime cash grants, have been claimed by strangers who failed to come forward previously (UNICEF, 13/04/2015).

Updated: 05/05/2015

LIBYA DISPLACEMENT, CIVIL WAR, POLITICAL UNREST

LATEST DEVELOPMENTS

No significant developments this week, 30/04/2015. Last update 24/04/2015.

KEY CONCERNS

- 393,420 IDPs in 35 cities and towns (UNHCR, 14/11/2014). More than 150,000 people
OVERVIEW

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

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

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

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

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

Economic Crisis

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

Peace Talks

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

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

Over 6–8 March, the rival parliaments held their first direct meeting, led by the UN (AFP, 06/03/2015; 11/03/2015). On March 24, the UN mission in Libya (UNSMIL) unveiled a six-point plan to end the crisis, including the formation of a transitional unity government until a new constitution is adopted and elections held (AFP, 18/04/2015). Adjourned on 26 March, talks resumed in April, aiming for warring factions to agree on a unity government (Libya Analysis, 01/04/2015). On 19 April, another round of peace talks closed in Morocco, with UN envoy Leon stating that progress had been made and that parties would return to negotiations at end April (AFP, 19/04/2015). According to UN envoy Leon the current fighting in the country is mainly affecting the political dialogue and intended to hamper the talks. The UN-proposed draft agreement is currently being reviewed by Libyan parties (UN, 29/04/2015).

Security Context

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

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

Main Stakeholders

Libya Dawn

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

There are fissures between actors deriving their political legitimacy from the GNC, and Islamists in the GNC. Some are wary of the threat of IS to regional and local interests; others are willing to cooperate with IS to defeat Haftar and the Libyan National Army (ACLED, 03/2015).
Former General Khalifa Haftar launched Operation Dignity in May 2014, aiming to break the strongholds of Islamist forces. Operation Dignity and its supporters are now called the Libyan National Army (LNA), and Haftar is army chief (ICG, 05/01/2014; Middle East Eye, 24/02/2015). Support comes from the Al Qa’a and Al Sawai’q brigades, allied with the city of Zintan, and fighters from the Warshefana region west of Tripoli, as well as units of Libya's regular armed forces. The House of Representatives has repeatedly appealed to the international community for more weapons (AFP, 05/01/2014).

Islamic State and Allies

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

IS activity in Libya has increased markedly. The group has targeted minorities, executing some 60 Christians on two occasions. Over April, IS was accredited with attacks on three embassies.

Regional Involvement

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

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

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

Conflict Developments

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

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

Tripoli and Western Libya

Tripoli is largely under the control of Libya Dawn. On 20 March, the LNA announced an assault to recapture Tripoli, and carried out airstrikes the day before (Reuters, 23/03/2015). Targets were reportedly Mitiga airport, a camp used by Libya Dawn, and the airport in Zuwara (Reuters, 21/03/2015). On 15 April, as peace talks were starting in Morocco, forces loyal to the HoR carried out airstrikes on Mitiga airport and other targets in western Libya (Reuters, 15/04/2015). On 17 April, 21 people died and 24 were wounded in fighting in Tajoura, 30 km east of Tripoli, as pro-HoR forces launched an attack attempting to retake Tripoli from Libya Dawn (AFP, 18/04/2015).

On 21 April, a bomb attack struck the Spanish embassy in Tripoli without causing any casualties. According to local officials, the attack was perpetrated by IS. On 12 April, gunmen reportedly affiliated with IS attacked the South Korean embassy in Tripoli, killing two people and wounding another. On the same day, a bomb exploded outside the Moroccan embassy, causing no casualties (International Business Times, 12/04/2015; 21/04/2015; AFP, 13/04/2015). On 5 April, a suicide attack claimed by IS killed four people and reportedly wounded 21 in Misrata (AFP, 05/04/2015).

Sirte: As of 23 April, clashes between Libya-Dawn affiliated Misrata militants and IS fighters have entered their fifth day (Libya Herald, 23/04/2015). In early March, it was reported that IS, backed by local militias and militias from Misrata, controls the city of Sirte (NYT, 10/03/2015). The GNC has sent forces from Misrata and from bases near oil ports to recapture Sirte; fighting is ongoing (Reuters, 25/03/2015; 28/03/2015). On 25 March, five people were killed in a suicide bombing in Sirte (UNSMIL, 25/03/2015).

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

Benghazi and Eastern Libya

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

Oilfields and Terminals

In December, Libya Dawn announced a campaign for the control of oilfields and terminals (The Telegraph, 14/12/2014). On 20 January, renewed Libya Dawn-LNA clashes were reported near As Sidr (Reuters, 20/01/2015). On 3 February, Libya Dawn-affiliated Islamist militants temporarily seized Al Mabruk oilfield south of Sirte. The Libyan national oil company has declared 11 oilfields non-operational because of theft, looting, sabotage, and destruction by unidentified armed groups (NYT, 05/03/2015). On 1 April, LNA were withdrawn from As Sidr oil field (Libya Herald, 01/04/2015). The withdrawal of troops from Ras Lanuf and As Sidr could mean that oil terminals will reopen soon (The Guardian, 01/04/2015).
On 16 February, Egypt carried out airstrikes on the city of Derna, IS’s stronghold in Libya, reportedly killing seven civilians (Reuters, 23/02/2015). Days later, armed groups claiming affiliation to IS carried out twin suicide attacks in Al Gubba, near Derna, killing at least 44 people, including six Egyptians, and injuring dozens more (HRW, 24/02/2015, The Daily Star, 24/02/2015). IS stated the strikes were in retaliation for Egyptian airstrikes (BBC, 23/02/2015).

**Inter-communal Violence**

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

**Humanitarian Context and Needs**

**Access**

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

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

**Security Incidents Involving Aid Workers**

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

**Infrastructure**

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

**Displacement**

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

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

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

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

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

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

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

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

An estimated 35,000 of Tawerghan IDPs have been sheltering in temporary camps in Tripoli and Benghazi since 2011. No aid has been provided to the 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 a
growing population of refugees and asylum seekers using the country as an exit point to Europe. At end December, the total number of refugees in Libya was 36,984 (OCHA, 28/12/2014). In addition, IOM estimates that there are at least 150,000 migrant workers in Libya, 5,000 of whom might be vulnerable and in need of evacuation assistance, health services, and psychosocial support (IOM, 08/01/2015).

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

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

By September, more than 150,000 people, including third-country nationals had sought refuge abroad since the beginning of the conflict (OCHA, 03/09/2014). On 12 April, a shipwreck off the coast of Libya killed around 400 migrants and refugees (AFP, 15/04/2015). On 19 April, as many as 900 people may have died off the Libyan coast when their boat capsized. More than 36,000 people have tried to cross the Mediterranean in 2015, most of them using Libya as their starting point, and nearly 1,800 are feared to have died in the attempt (Reuters, 22/04/2015). Over 2014, 170,000 migrants departed from Libya and arrived in Italy. An estimated 3,200 people died crossing the sea (IOM, 31/03/2015).

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

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

**Food Security**

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

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

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

**Livelihoods**

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

**Health and Nutrition**

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

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

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

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

**WASH**

In the Zawiya detention centre for migrants, only five showers are available for the more than 400 inmates (Deutsche Welle, 28/04/2015).

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

**Shelter**

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

**Protection**

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

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

**Abduction and Detention**

According to estimates by the European Commission, nearly one million people are waiting in Libya to make their trip to Europe. Anyone caught by the police without a valid residence permit ends up in a Libyan detention centre (Deutsche Welle, 28/04/2015).

On 19 April, IS released a video showing the beheading of 12 Ethiopian Christians and the execution of 16 more Ethiopian Christians by gunshot (AFP, 19/04/2015).
On 9 March, nine foreign oil workers were reportedly kidnapped by IS, during an attack on Al Ghani oil field in which several guards were killed (BBC, 09/03/2015).

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

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

Third-country refugees and asylum-seekers, including unaccompanied children, face arbitrary arrest and indefinite detention for migration control purposes by both state and non-state actors. Torture and ill-treatment have also been reported (AI, 30/09/2014; Reuters, 22/04/2015).

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

Updated: 30/04/2015

MALAWI FLOODS

LATEST DEVELOPMENTS

17 April: Several areas in northern and central Malawi have received less than 50% of average rainfall in March (FEWSNET).

15 April: Between 8 and 15 April, 96 new cholera cases were reported, the highest weekly number since the outbreak began (OCHA).

KEY CONCERNS

- 162,000 people remain displaced in 202 displacement sites as a result of January floods (IOM/Government, 31/03/2015).

- 616,000 people affected by floods and heavy rainfalls are in Crisis (IPC Phase 3) (WFP, 23/03/2015).

For more information, visit the ACAPS country analysis page.

Humanitarian Context and Needs

Access

Access to cut-off populations on the east bank of the Shire River in Nsanje, especially in the Makhangana area (including Chikahi, Chigwamafumu and Makhangana) remains a challenge (WFP, 10/04/2015). Populations are in need of food, WASH, and NFI support (Government/UN, 07/04/2015; 13/03/2015).

Access to camps in Mulanje district is also reportedly difficult due to damaged roads (Government/UN, 13/03/2015; Logistics Cluster, 17/03/2015). The Logistics Cluster is facing a funding gap of USD 450,000, and WFP helicopters have had to leave Malawi due to a funding shortfall (Government/UN, 13/03/2015; Logistics Cluster, 10/03/2015). As of March, the Preliminary Response Plan, appealing for USD 81 million, was 40% funded.

Disasters: Floods

Heavy rains since early January have led to severe flooding across Malawi and caused great damage to crops, livestock, food stocks, and infrastructure. The southern districts of Nsanje, Chikwawa, Phalombe, and Zomba have been most affected, and 15 districts declared a state of emergency in January (ACT, 15/01/2015; Government/UN, 02/03/2015).

Around 638,000 people have been affected overall, 104 have died and 645 have been injured. Priority needs are for food, shelter and NFIs, WASH, and protection (Government/UN, 11/02/2015; 22/01/2015).

Displacement

Flood-affected IDPs

People displaced by flooding continue to return to their places of origin amid early recovery preparations. As of 8 April, around 162,062 people remain displaced in 202 open sites (UNICEF, 08/04/2015). 68,420 IDPs are in 31 sites in Nsanje, 32,720 in 23 sites in Chikwawa, 29,930 in 49 sites in Zomba, and 27,170 in 67 sites in Phalombe (IOM, 15/04/2015). 87% of IDPs have been displaced within their areas of origin (IOM/Government, 31/03/2015).

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

Refugees

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

Food Security

616,000 people in 17 districts affected by floods and heavy rainfalls are in Crisis (IPC Phase 3) due to a reduction or total loss of livelihoods, and will need assistance until at least July and possibly for the whole consumption season (FEWSNET 20/04/2015; WFP,
10/04/2015). 73 IDP sites report no access to a market; 40 report having difficulties accessing food, including through distributions (IOM/Government, 31/03/2015).

Agricultural Outlook

Around 64,000 hectares of land was submerged in the floods, including 42,000 hectares of cropland, affecting 116,000 farmers (Government/UN, 03/02/2015).

Dry conditions in the highly productive northern and central regions since early March have reportedly caused some wilting and drying of crops (UNICEF, 08/04/2015). Several areas have received less than 50% of their normal rainfall accumulation (FEWSNET, 17/04/2015). Current estimates indicate that over 105,000 metric tons of cropped maize has been lost as a result (FEWSNET, 28/02/2015; SADC, 20/03/2015). Tools and seeds remain priorities (Government/UN, 07/04/2015).

Due to the combined impact of floods and drought, the 2015 harvest is expected to be 30-40% lower than last year. Food security will likely worsen in affected areas during the lean season (WFP, 10/04/2015).

Health and Nutrition

Cholera: As of 15 April, 425 cases of cholera, including six deaths, have been confirmed since the start of the floods, mostly in Nsanje. Between 8 and 15 April, 96 new cases were reported, the highest number of new cases since the outbreak began nine weeks ago. The case fatality rate is now at 1.4 per cent (OCHA, 15/04/2015). The rise in cases is linked to a cholera outbreak in Mozambique (UNICEF, 08/04/2015).

In the IDP camps diarrhoea and malaria are reported as health priorities (IOM/Government, 31/03/2015).

Health facilities have been damaged by floods; lack of personnel and medical supplies to cope with the needs of the displaced is also an issue (Government/UN, 23/01/2015). More than half of IDP sites report that it is more than 3km to the nearest health facility (IOM/Government, 31/03/2015).

Nutrition

There has been a significant increase in the number of malnourished children as a result of the floods and poor harvests. Only 20 IDP sites report availability of supplementary feeding for pregnant and lactating women, while 36 report availability for children (IOM/Government, 31/03/2015; Government/UN, 08/03/2015).

25,313 children aged 6–59 months were suffering from SAM as of July (Government/UN, 08/03/2015; UNICEF, 27/09/2014).

WASH

70,000 people are in need of WASH assistance. Water sources have either been damaged or contaminated in the affected areas, and pit latrines damaged (Government/UN, 03/02/2015; UNICEF, 26/01/2015). There is an increased need for WASH activities as cholera cases are rapidly increasing (Government/UN, 13/03/2015). 41 of 202 IDP sites reportedly have less than 15L of water per person per day.

WASH needs are greatest in Chikwawa and Nsanje, where the current sanitation ratio is one drop hole for 170 people (IOM/Government, 31/03/2015).

Shelter and NFIs

Shelter remains a primary need among flood-affected communities. 76% of IDP sites are spontaneous; around 430 families in Chapinga camp in Nsanje are living without a single tent (Government/UN, 07/04/2015; IOM/Government, 31/03/2015). On the east bank in Nsanje, many are waiting to be allocated land to rebuild their homes, but lack the resources to build them (Government/UN, 07/04/2015).

NFI support is required in most IDP sites, with kitchen supplies and blankets highlighted as priorities (IOM/Government, 31/03/2015).

Education

Education has been affected by displacement, lack of school materials, and damaged classrooms, in particular in Nsanje and Phalombe (UNICEF, 14/04/2015). Preliminary assessments show that school enrolment for boys in Nsanje has dropped by 32% (UNICEF, 01/04/2015). 415 schools and 350,000 students have been affected, including 181 schools used as camps. 37 schools in Phalombe have been damaged (Government/UN, 03/02/2015).

Protection

Reports of rape and cross-border trafficking between Malawi and Mozambique are a concern (Government/UN, 07/04/2015).

There is limited capacity to identify vulnerable children affected by flooding and refer them to basic social services (Government/UN, 13/03/2015).

Updated: 22/04/2015

MALI CONFLICT, FOOD INSECURITY, DISPLACEMENT

LATEST DEVELOPMENTS

1 May: Militants reportedly belonging to the Azawad Movement Coalition (AMC) attacked Bintagoungou town in Timbuktu region, killing one person and taking six others hostage (AFP).

30 April: Three civilians were killed and 28 injured when a minibus hit a mine close to Gao (AFP).

29 April: 19 people died in clashes between Malian soldiers and CMA militants in Lere, Timbuktu, making it the deadliest battle in almost a year (AFP, 30/04/2015).
KEY CONCERNS

- Security, particularly in the north, remains volatile, and access is limited for aid workers. Security in and around the northeastern region of Kidal remains of particular concern, and security incidents in Gao and Mopti have increased since early 2015.

- 181,000 children suffer from severe acute malnutrition (OCHA, 10/02/2015).

- An estimated 241,000 people are severely food insecure (IPC Phase 3 and 4) and 2.4 million people are in IPC Phase 2 (Stressed) (Cadre Harmonisé, 22/03/2015).

- 690,000 million people are in need of health assistance and 840,000 are in need of WASH (OCHA, 31/01/2015).

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.

In June 2014, after several bouts of violence, the Government signed the Algiers Declaration with the Azawad Movement Coalition (AMC) – 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). The coalition has agreed to engage with the Government on a path of dialogue (AFP, 01/09/2014).

The Algiers peace agreement was signed by the Government and some armed groups in March 2015 (OCHA, 17/03/2015; international media, 16/03/2015). Scores of people protested in Kidal against the accord (international media, 01/03/2015; OCHA, 02/03/2015). On 26 April, the AMC announced they will sign the accord on 15 May (local media, 26/04/2015). However, recent clashes between pro-government armed group Gatia and the AMC have put this at risk (international media, 28/04/2015; 30/04/2015).

In Gao, an agreement between MINUSMA and the AMC has been suspended. Tabankort had been named a buffer zone between opposing forces, where pro-government militias would be disarmed. However, on 27 January, four civilians died and several were severely injured as thousands protested against MINUSMA and the weakening of the militia (international media, 26/01/2015; local media, 27/01/2015; UN, 28/01/2015).

Insecurity in the north has held up the revision of voter rolls, delaying local and regional elections that were scheduled for April (international media, 07/03/2015).

Security Context

Attacks by and clashes between rival armed groups, including separatist Tuareg movements, government forces and Islamist militants, continue to hamper security in the country. In addition to the northern provinces of Kidal, Gao, and Timbuktu, security incidents have been reported in the southern regions of Mopti and Segou since January, and in Bamako in March. Landmines and improvised explosive devices (IED) are a particular threat. Attacks on MINUSMA vehicles, camps, and peacekeepers have spiked since mid-August 2014 (AFP, 21/09/2014). It often remains unclear who is responsible for the attacks.

The Movement for Unity and Jihad in West Africa (MUJAO), which split from Al Qaeda in the Islamic Maghreb (AQIM) in 2011, and Ansar Dine, are among the main Islamist groups active in northern Mali, carrying out attacks on pro-government and international forces.

International Presence

The stability of the Sahel region relies on the presence of foreign troops. In addition to Malian forces, there are French forces, MINUSMA, and the EU military training mission (EUTM), mainly in Bamako (53% of forces) and in northern cities such as Kidal, Gao, Timbuktu, and Menaka (28%) (OCHA, 31/05/2014). MINUSMA’s mandate expires on 30 June 2015. 34 peacekeepers have died since the start of the UN mission in July 2013 (UNSC, 06/01/2015; international media, 17/01/2015).

On 1 August 2014, France deployed a 3,000-strong counterterrorism operation across the Sahel region. Based in Chad, Operation Barkhane is active in Burkina Faso, Chad, Mali, Mauritania, and Niger (Local Media, 01/08/2014).

Security Incidents

Since late April, the security situation is deteriorating as clashes between government forces and separatist Tuareg groups have increased. On 1 May, militants storms Bintagoungou town, Timbuktu region. One person was killed, six others taken hostage, and several shops were raided. The attack was blamed on the AMC (International media, 01/05/2015). On 29 April, armed AMC insurgents clashed with Malian soldiers in Lere, Timbuktu, in their first conflict in 2015. Ten militants and nine soldiers died, making it the deadliest battle in almost a year. More than 20 others were injured and six soldiers were taken hostage (international media, 30/04/2015). On the same day, unidentified militants opened fire on government forces in Goundam, Timbuktu, killing at least two soldiers and a child. On 28 April, there were several skirmishes between the Malian army and armed groups. On 27 April, pro-government Tuareg group Gatia seized the town of Menaka, Timbuktu region, which had been under AMC control (international media, 28/04/2015). Over 22–23 April there were clashes between Malian security forces and armed groups in Nampala, Segou region. According to the security forces, there were several deaths on the side of the armed groups (local media, 23/04/2015).

In April, several civilians and soldiers were killed or injured in attacks and by landmines in Gao, Mopti and Segou regions. On 30 April, three civilians were killed and 28 injured when a minibus hit a mine close to Gao (international media, 30/04/2015).
Attacks on MINUSMA have become more frequent in April. At least seven attacks were reported, some claimed by AMC, others by Islamist groups. Some attacks were carried out by unidentified armed groups. Several peacekeepers and UN contracted drivers were killed, as well as at least four civilians. Most attacks were carried out in Gao, but some in Timbuktu and Kidal regions.

Humanitarian Context and Needs

Access

Deterioration of the security situation and hostilities between parties of the conflict in early 2015 continue to hamper humanitarian access in the north of Mali. All transportation companies have suspended activities on the route between Sevare (Mopti region) and Gao because of the absence of escorts by security forces and increased security risks, threatening the rupture of supplies to the region and displacement to the south (local media, 27/04/2015). Since the beginning of 2015, OCHA has recorded 31 access constraints, compared to 22 in the whole of 2014. 50% of constraints were related to violence against humanitarian personnel, assets or facilities, and 50% were linked to the conduct of hostilities or military operations. At least 14 humanitarian organisations have had to temporarily suspend activities or relocate staff between February and April (OCHA, 04/05/2015).

Humanitarian air services are disrupted in Kidal region, as the Kidal airstrip still needs repair (OCHA, 04/05/2015).

Displacement

IDPs

As of December 2014, 61,621 people were internally displaced as a consequence of the 2012 conflict and continued insecurity, a decrease from 86,000 reported in October. 53% are women and 56% are children under 18. About half reside in northern Mali, with 11,990 in Kidal, 10,348 in Timbuktu and 7,245 in Gao. In the south, 14,386 IDPs were identified in Bamako, and 10,456 in Koulkiko. Mopti and Segou regions also host several thousand IDPs (Government, USAID, IOM, 06/04/2015).

IDPs in Bamako live under precarious conditions. Most are affected by poverty and food insecurity and have limited access to basic social services and livelihood opportunities (OCHA, 16/04/2015).

Returnees

As of 31 July 2014, Mali hosts over 14,525 refugees from countries including Mauritania (12,900) and Côte d’Ivoire (1,110) (OCHA, 16/09/2014). Planning figures for January 2015 from UNHCR do not indicate a large change in the number of refugees (UNHCR, 01/12/2014).

In December 2014, 394,655 returnees were registered in Mali; most in Timbuktu, followed by Gao and Mopti. The increase confirms the trend of return observed through the decrease in IDPs. 39% of returnees came from Bamako (Government, USAID, IOM, 06/04/2015).

Some 35,000 Malian refugees have returned: more than 10,000 from Burkina Faso; over 12,000 from Niger; around 7,300 from Mauritania; and 2,200 from Algeria (OCHA, 31/01/2015; UNHCR, 14/08/2014).

Malian Refugees in Neighbouring Countries

As of March, 52,566 Malian refugees are registered in Mbera camp, Mauritania, and 50,222 in Niger as of 30 April (UNHCR, 31/03/2015; 30/04/2015). Burkina Faso hosts 33,125 Malian refugees as of 31 March (UNHCR, 31/03/2015).

Food Security

As of end of March, the food security situation is generally acceptable across the country. An estimated 240,880 people are in Crisis food security (IPC Phase 3), most in Timbuktu, Mopti, and Gao. In Timbuktu and Gao, some 7,000 people are in Phase 4, Emergency (Cadre Harmonisé, 22/03/2015). The situation in Kidal has improved thanks to food security programmes. 2.4 million people are in Phase 2, Stressed food security (Cadre Harmonisé, 22/03/2015).

The total number of people in IPC Phase 3 and above is projected to increase to more than 400,000 from April to August 2015 (Cadre Harmonisé, 22/03/2015). Poor households’ prolonged dependence on markets in Timbuktu and Gao is leading to increased use of coping strategies such as borrowing and decreasing food expenditure. They will face Crisis food insecurity (IPC Phase 3) as of July. For agropastoral households in the north, an early lean season and associated high animal mortality are triggering atypical herd movements, leading to decreased milk production and lower prices of animals (FEWSNET, 26/03/2015; 01/04/2015; OCHA, 28/04/2015).

Market prices in Segou and Sikasso have increased. Mopti and Gao regions observed some declining prices, and in Bamako and Kayes market prices have remained stable (international organisation, 21/04/2015). Insecurity is negatively affecting the functioning of markets and limiting household access to markets. Otherwise, markets are generally well supplied with cereals and prices are more or less stable (WFP, 28/02/2015). The impact of staple food prices was low overall between January and March 2015, but high in Timbuktu region (WFP, 29/04/2015).

Sahel Food Crisis: Regional Overview

Early 2015, the number of people suffering from food insecurity in the Sahel is estimated at 20.4 million and least 2.6 million have crossed the emergency threshold and require urgent food assistance (OCHA, 31/12/2014; 02/04/2015). In 2014, food insecurity rose dramatically to 24.7 million food insecure people, compared to 2013 when 11.3 million people had inadequate food (OCHA, 03/02/2015).

Health and Nutrition
690,000 people are estimated to be in need of health assistance (OCHA, 31/01/2015). High vigilance is observed in southern Mali for meningitis cases due to climatic conditions (ACMAD, 02/04/2015).

In Kidal, the reference health centre is facing difficulties since the supporting international organisation left in December 2014. There is a lack of medication, qualified personnel, and means for emergency evacuation. People in remote villages cannot access health services (local media, 21/04/2015).

**Nutrition**

As of 10 February, 181,000 children suffer from severe acute malnutrition (SAM), and 534,000 suffer from moderate acute malnutrition (MAM) (OCHA, 10/02/2015; 04/05/2015). SAM rates are highest in Mopti (3.7%), Segou (3.4%) and Koulikoro (2.7%). MAM rates are highest in the northern provinces (FEWSNET, WFP, FAO, 28/02/2015; ACF, 31/12/2014).

In Gao region, a SMART survey showed 11.3% GAM and 2.3% SAM. Malnutrition is more severe in urban than in rural areas. Priority districts are Gao and Bourem, with 2.9% and 2.1% SAM, respectively (UNICEF, 31/03/2015; OCHA, 16/04/2015).

In Kidal, malnutrition rates have been stable since 2011, with 5.7% GAM and 1.0% SAM (UNICEF, 31/03/2015).

**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**

Community initiatives led to the reopening of 27 out of 62 schools in Kidal, providing access to education for 1,800 students. In Kereri town, Mopti and Nampalari, Segou, 1,100 students remain affected by the closure of schools since January, following attacks. Teachers are absent due to insecurity. 193,000 children in 57 communes remain out of school because of insecurity (OCHA, 16/04/2015).

Only 76% of schools in the north that were functional before the crisis were functional as of December 2014. Only 23% of children in school before the crisis are currently enrolled. As of March 2015, 334 schools remain closed in the regions of Gao, Kidal, Mopti, Timbuktu and Segou (UNICEF, 05/03/2015). 79% of schools in Kidal are not functioning (OCHA, 31/01/2015).

**Protection**

About 860,000 people are in need of protection, including 313,000 non-displaced in the north (OCHA, 31/01/2015). Explosive remnants of war (ERW) caused 101 casualties from 2012 to June 2014 (OCHA, 30/06/2014).

Three armed groups (Ansar Dine, MNLA and MUJAO) are reportedly recruiting and using children, and are listed for rape and other forms of sexual violence. According to the International Medical Corps, 75% of cases of gender-based violence are not reported by victims. Of those who do report, only 5% refer to legal structures (OCHA, 16/04/2015).

For IDPs living in Bamako, destruction or loss of official documents, such as birth certificates, is a major challenge (OCHA, 16/04/2015).

Updated: 06/05/2015

**MAURITANIA FOOD INSECURITY, DISPLACEMENT**

**LATEST DEVELOPMENTS**

No significant developments this week 29/04/2015. Last update 21/01/2015.

**KEY CONCERNS**

- 800,000 people are estimated to be food insecure, of whom 428,000 are severely food insecure (OCHA, 02/2015).
- 24,100 children suffer from severe acute malnutrition (OCHA, 02/2015)

**Political Context**

The credibility of the Government continues to be questioned by much of the northern population, who claim they are being marginalised concerning the provision of basic services.

**Humanitarian Context and Needs**

**Displacement**

Mauritania hosts almost 52,566 Malian refugees as of April 2015 (OCHA, 04/2015). Almost all live in Mbera camp, a remote desert location on the border that has significant security challenges, and where food insecurity and malnutrition are high. According to UNHCR, 80% 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 (UNHCR, 04/2015).

Security problems and inaccessibility to areas of northern Mali make it difficult to obtain
Food Security

In February 2015, nearly 820,000 people, a fifth of the total population, were food insecure, including 428,000 who are in IPC Phase 3 (Crisis) and 4 (Emergency), according to the Cadre Harmonisé (Harmonised Framework), and in need of food assistance (OCHA, 02/2015). This is an increase from 635,000 individuals who were food insecure in early 2014 (WFP, Government of Mauritania, 28/04/2015). Poor households in affected areas of the Senegal River Valley (near the border between Mauritania and Senegal) and western agro-pastoral zones (southwestern Mauritania) will be particularly vulnerable as a result of declines in seasonal income and food consumption gaps (FEWSNET, 19/03/2015).

Erratic rains have affected pasture regeneration and level of water points in several pastoral areas, particularly in Hodh el Chargui, Hodh el Gharbi, Gorgol, Brakna and Tagant regions (WFP, Government of Mauritania, 28/04/2015). Declining prices for sheep and cattle will affect poor pastoral households between April and May (FEWSNET, 03/2015).

Without additional, well-targeted emergency assistance, more than 600,000 households could face Crisis (Phase 3) acute food insecurity by June. (FEWSNET, 18/11/2014; 03/2015).

Food Security in the Sahel Region

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

Health and Nutrition

Nutrition

91,300 children are acutely malnourished as of February 2015, of which 24,100 children suffer from severe acute malnutrition (OCHA, 02/2015). Results of an August survey indicate that the national GAM rate had decreased from 13.1% to 9.8%, although Guidimakha region is reported to have GAM of 16%, exceeding the emergency threshold. GAM is over 10% in Gorgol, Assaba, Tagant, Hod El Chargui and Hod El Garbi (UNICEF, 10/2014).

A nutrition survey carried out in Mbera camp in November 2014 showed a significant decrease in both global acute malnutrition (from 11.8% to 9.9%) and severe acute malnutrition (1.4% to 0.8%) (UNICEF, 12/2014).

Reviewed: 29/04/2015

Security Context

Insecurity has been rising in Niger and across the region due to crises in Nigeria, Mali and Libya. Terrorist threats from Boko Haram, Al Qaeda in the Islamic Maghreb and the Movement for Oneness and Jihad in West Africa (MUJAO) are all of concern.

On 30 April, Niger authorities ordered populations out of the Lake Chad islands in order to launch military operations against Boko Haram. 39,700 people were displaced, the majority to Nguigmi and Bosso towns in Diffa (OCHA, 07/05/2015).

5 May: Eight districts have reported a meningitis epidemic; three others are in a state of alert. 3,304 suspected cases of meningitis, including 252 deaths, have been recorded so far. The country is under quarantine, while a shortage of vaccines is reported (OCHA, AFP).

30 April: A critical shortage of nutrition products in Diffa is expected to affect displaced and hosting populations as of May (WFP).

25 April: A BH assault on Karamga island left at least 74 people dead (AFP).

KEY CONCERNS

- An estimated 2.5 million people are food insecure, (410,297 severely food insecure) in 2015 (AFP, 17/04/2015).
- 1.3 million acutely malnourished children, 366,858 of whom are severely malnourished (OCHA, 01/2015).
- More than 150,000 Nigerian refugees have fled to Niger since May 2013 (OCHA, 22/01/2015).
- 1,749 cases and 64 deaths have been recorded since January in a cholera epidemic, reportedly linked to the one in neighbouring Nigeria (UNICEF, 11/2014).
Boko Haram Incidents

On 7 May, a Boko Haram attack on a village near Dosso killed five; militants looted homes and shops before crossing back to Nigeria (Reuters, 07/05/2015). An assault by the group on Karamga Island on 25 April left at least 74 people dead (AFP, 01/05/2015). Boko Haram launched its first attack in Niger on 6 February, in Bosso town, in Diffa. Thousands of troops from Niger and Chad launched a major ground and air offensive against BH in southeastern Niger in March (AFP, 14/03/2015). By 30 March, Chad and Niger troops had pushed BH back to Nigeria (international media, 31/03/2015).

Humanitarian Context and Needs

Access

Movement within Diffa, northern parts of Zinder, Tahoua, and Tillabery regions is possible only with military escorts (OCHA, 16/02/2015). The presence of landmines along the border between Niger and Nigeria, especially around Komadougou River, is preventing access to certain areas (UNHCR, 30/04/2015).

Displacement

Boko Haram Crisis

As of 7 May, there are 105,580 Nigerian refugees in Niger (OCHA, 07/05/2015). About 50,000 of Nigerian refugees living in the border areas of Diffa region have been displaced since the start of the year, as cross-border violence intensified in February (WFP, 07/05/2015). As of February, more than 2,800 had settled in Zinder region (OCHA, 02/2015).

25,700 people have been displaced from islands around Lake Chad to Nguigmi and Bosso towns, in Diffa, over 30 April – 7 May, after warnings over possible Boko Haram attacks in the region. 75% are Nigerians and third-country nationals. 47% are women and 37% children. Priority needs are for food, shelter, and WASH (OCHA, 08/05/2015).

New arrivals have settled in 106 sites (UNICEF, 03/03/2015). 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).

Diffa is vulnerable to both flooding and drought, and has long faced serious gaps in the provision of food staples, healthcare and potable water.

Mali Crisis

As of 30 April, 50,530 Malian refugees are in Niger, including 14,500 in Intikane camp, and 12,840 in Abala camp in Tillabery region. 62% of refugees are children (UNHCR, 30/04/2015).

Food Security

2.5 million people are estimated to be food insecure in 2015, compared to 5.3 million in 2014. 410,297 are severely food insecure (AFP, 17/04/2015; OCHA, 30/09/2014).

Around 200,000 people in Diffa region are in Crisis (IPC Phase 3) food security (WFP, 07/05/2015). Security constraints have forced food assistance programmes to be scaled back (FEWSNET, 01/04/2015). Nigerian refugees are also Stressed in Diffa (FEWSNET, 01/05/2015). Pastoral zones of Nguigmi in Diffa region will remain in Crisis (IPC Phase 3) until September due to limited trade opportunities and high food prices.

Agriculture and Markets

Boko Haram-related market disruptions have limited trade flows towards Diffa and increased marketing costs (FEWSNET, 31/07/2014). Moreover, the new wave of internal displacement came when farmers should have been preparing to plant crops. This has raised concerns about the long-term economic impact of the violence (Reuters, 12/02/2015).

Cereal stocks are expected to significantly decrease by September, as well as overall food stocks in May-June in Ouallam, Tanout, Abalak, and Tchintabaraden departments. Poor households in these departments will remain Stressed (IPC Phase 2) until September (FEWSNET, 01/05/2015).

Poor resource availability in parts of the northern Sahel will begin to stress pastoral households from June to September 2015 (FEWSNET, 11/2014).

Livelihoods

In Diffa region, insecurity has led to a decrease in demand for workers and lowered wages. This has particularly affected livelihoods of households growing pepper, who are also unable to sell because of insecurity (FEWSNET, 01/04/2015).

Sahel Food Crisis: Regional Overview

20.4 million people in the Sahel (Burkina Faso, north Cameroon, Chad, the Gambia, Mali, Mauritania, Niger, north Nigeria, and Senegal) are expected to suffer from food insecurity in 2015 (OCHA, 10/01/2014). In 2014, food insecurity rose dramatically to 24.7 million food insecure people, compared to 2013, when 11.3 million people had inadequate food (OCHA, 03/02/2014).

Health and Nutrition

Cholera

As of 5 April, 51 cases of cholera have been registered in Niger in 2015 and four deaths (UNICEF, 02/05/2015). 25 cases were registered in Tillabery region, and 26 in Diffa region (OCHA, 02/2015).

Measles
3,080 measles cases, including two deaths, were recorded from 1 January to 23 April in all eight regions of Niger. 77% of cases were in Zinder region. 12 out of 44 health districts have epidemic outbreaks (OCHA, 23/04/2015).

Meningitis

As of 3 May, 3,304 suspected cases of meningitis, including 252 deaths, were recorded in 2015. A meningitis epidemic has been reported in eight districts of Niger, while three others are in a state of alert. Agadez, Maradi, and Zinder are worst affected (OCHA, 23/04/2015). 70% of those infected are 2–15 years old (international media, 22/04/2015).

Nutrition

In Diffa, a critical shortage of nutrition products is expected to affect displaced and hosting populations as of May (WFP, 30/04/2015). GAM is at 26% among Nigerian refugee children, and pregnant and breastfeeding refugee women, exceeding the 15% crisis threshold (WFP, 07/05/2015).

WASH

Access to safe water remains limited in certain sites hosting IDPs. Hygiene and sanitation conditions are precarious in some areas (OCHA, 20/03/2015).

Education

On 17 April, the government of Niger ordered all schools to be shut in the region around Niamey following the meningitis outbreak. Schools are scheduled to reopen on 27 April 2015 (Reuters, 21/04/2015).

In Diffa region, dozens of schools were closed due to or occupied by refugees in December (OCHA, 12/12/2014). Several schools reopened in March, but attendance levels are low (OCHA, 20/03/2015).

Protection

82% of 13,000 Nigerian refugees surveyed in Diffa did not have identity documents, according to an IOM assessment (IOM, 23/02/2015). Unaccompanied children have been reported arriving from Nigeria (OCHA, 28/11/2014).

Updated: 11/05/2015

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SENEGAL FOOD INSECURITY

LATEST DEVELOPMENTS

No significant developments this week, 06/05/2015. Last update 22/04/2015.

KEY CONCERNS

- Over 3.8 million people are food insecure, including 927,420 in Crisis (IPC Phase 3) due to erratic rains in 2014 (UN, 16/02/2015).
- 332,300 children suffering from acute malnutrition, 68,650 from severe acute malnutrition (OCHA, 30/11/2014).

Political Context

Separatists have long opposed authorities in the coastal Casamance area, but the country overall remains stable. Salif Sadio, leader of the separatist movement, declared a unilateral ceasefire in April 2014, as proof of engagement in an ongoing peace process.

Humanitarian Context and Needs

4.3 million people are in need of assistance in 2015 in Senegal (31% of the population), corresponding to a 266% increase on 2013. The needs are mostly due to climatic conditions, a rise in food prices, and reduced cross-border exchange (UN, 16/02/2015).

Displacement

As of February, there are 17,085 refugees in Matam, Saint Louis, and Tambacounda, mostly from Mauritania. 52% of refugees have declared they are seeking naturalisation in Senegal (UN, 18/02/2015).

Food Security

3.8 million people are food insecure. This comprises 927,420 in Crisis (Phase 3), mainly in central and southern regions (FAO, 31/03/2015). Poor livestock conditions in the North and Centre of the country led to incomes below average for Livestock rearers. In Thiès, Louga, Matam, and northern Tambacounda, households rely on negative coping mechanisms, such as selling productive assets and reducing food intake, to compensate for the early exhaustion of their food stocks – which normally does not occur until June (FEWSNET, 27/02/2015; 29/01/2015; 21/04/2015). Under current conditions, approximately 1.25 million people are expected to face Crisis between May and September 2015 in the affected areas of Mauritania and Senegal (FEWSNET, 05/05/2015).

In October 2015, 100,000 to 490,000 people are expected to be in Stressed conditions (IPC Phase 2), and less than 100,000 are expected to be in Crisis (IPC phase 3) (FEWSNET, 20/04/2015).

Updated: 11/05/2015
Satellite data collected by ACF highlights a deficit in the production of biomass in Northern Senegal. This deficit could have a negative impact on the pastoral environment (ACF, 14/04/2015).

Availability of pastures has been far below average, leading to shortages in livestock food (FEWSNET, 14/04/2015). 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).

Agriculture and Markets

A 38% reduction in 2014 cereal and groundnut production is reducing food availability and purchasing power (FAO, 31/03/2015).

Sahel Food Crisis: Regional Overview

20.4 million people in the Sahel (Burkina Faso, north Cameroon, Chad, the Gambia, Mali, Mauritania, Niger, north Nigeria, and Senegal) are expected to suffer from food insecurity in 2015. In 2014, food insecurity rose dramatically to 24.7 million food insecure people, from 11.3 million in 2013 (OCHA, 10/01/2014, 03/02/2014).

Health and Nutrition

Nutrition

332,300 children are acutely malnourished, including 68,650 suffering from SAM. 319,000 were acutely malnourished in 2013. Matam, Saint Louis (Podor department in particular), and Tambacounda regions are most affected (UN, 16/02/2015).

Climate conditions are favourable to meningitis. High vigilance is advised over eastern Senegal and moderate vigilance over western Senegal (ACMAD, 02/04/2015).

Reviewed: 06/05/2015

**KEY CONCERNS**

- Since the beginning of April, nearly 39,100 Burundians have sought asylum in DRC, Tanzania and Rwanda ahead of the 26 June presidential election. The region may face a refugee crisis (Rwanda Government, OCHA, UNHCR).

- As of September, Burundi has 78,940 IDPs (UNHCR, 31/11/2014).

**Political Context**

Scores of political killings, intimidation of the opposition, and a crackdown on media freedom have been reported since President Nkurunziza’s re-election in 2010. Most recently, observers stated concerns about restrictions on civil and political rights, following a series of violent acts by the ruling party’s increasingly militant youth wing, Imbonerakure. The recent announcement that President Nkurunziza will be allowed to run for a third term has sparked political demonstrations in the capital, Bujumbura.

**2015 Elections**

On 25 April, President Nkurunziza announced he would be seeking a third term (BBC, 25/04/2015). Under the Burundian constitution and the terms of the peace deal, no leader is supposed to hold power for more than ten years. President Nkurunziza’s supporters argue that his first term does not count, as he was selected by lawmakers in 2005, and not voted in (Reuters, 20/03/2015). On 5 May, the country’s constitutional court approved his bid (AFP, 05/05/2015). With the names of official candidates being published on 11 May, there is a potential for escalation of violence. The presidential election is scheduled for 26 June (ICG 30/04/2015; HCT, 24/04/2015).

The Vice President of the Constitutional Court fled to Rwanda before the Court approved the bid. The judge reported huge pressures and death threats (AFP, 05/05/2015). On 26 April, the party speaker of the National Liberation Forces, the opposition group, was kidnapped (ICG 30/04/2015).

In June 2014, the Government, the National Independent Electoral Commission, and all political parties and actors signed the General Principles for the conduct of the 2015 elections (UN, 10/06/2014). The UN Electoral Observation Mission in Burundi (MENUB) is mandated to follow and report on the presidential, parliamentary, and local elections scheduled between May and September 2015, though the Government has stated that MENUB’s mandate is limited, and does not cover validating the results (UN, 03/01/2015; AFP, 12/01/2015). Western countries, including the US and UK, have warned that Nkurunziza’s bid was unconstitutional and urge parties to find a political solution to the conflict (local media, 05/05/2015; Reuters, 04/05/2015).

**Security Context**

President Nkurunziza’s decision has sparked over a week of demonstrations, beginning in Bujumbura on 26 April (BBC, 27/04/2015, Reuters, 06/05/15). As of 5
May, at least 13 individuals have been killed, more than a hundred injured, and at least 600 arrested. Increasing reports of unrest and violence targeting unarmed civilians are particularly worrying (local media, 05/05/2015; local media, 05/05/2015; AFP 02/05/2015; OCHA 04/05/2015). Independent radio stations have been closed and social media networks have been blocked (ICG 30/04/2015).

Few international actors on the ground have prepared contingency plans should violence worsen during and after elections (Burundi Red Cross, 04/03/2015). Eight provinces have been identified as potential ‘hot spots’ (Cibitoke, Bubanza, Bujumbura Mairie, Bujumbura Rural, Bururi, Makamba, Kirundo and Muyinga) (ICG 30/04/2015; HCT, 24/04/2015). Earlier army reports had suggested that a major offensive had been planned to destabilise the country ahead of the elections (AFP, 05/01/2014; 06/01/2014). In January, the Burundian army claimed it killed 100 armed fighters who had crossed from DRC. The fighters were reportedly trying to reach Kibira forest, an area used as a base by opposition groups in the past. A Human Rights Watch report published in February asserted that during this attack, the Burundian National Defense Forces and police committed at least 47 extrajudicial executions, adding that armed members of the Imbonerakure also participated in the killings (Human Rights Watch, 12/02/2015).

Humanitarian Context and Needs

Disasters

Landslides

Torrential rains in late March caused landslides south of Bujumbura, which killed 20 people; ten more are missing. Crops have been severely damaged (local media, 30/03/2015; Caritas, 01/04/2015). Around 1,800 people have been left homeless and are staying with family, and roads, bridges and schools were seriously damaged (Burundi Red Cross, 01/04/2015).

Displacement

IDPs

As of January 2015, Burundi has 77,600 IDPs (IDMC, 31/01/2015). They are mostly ethnic Tutsis, located in and around 120 sites across northern and central Burundi, who were displaced by inter-ethnic and inter-communal violence. (Internal Displacement Monitoring Centre). National and international organisations are anticipating that in the first six months of an election crisis and related violence in Burundi, 250,000 people could be displaced. People have been seen fleeing the capital but no numbers are available yet (HCT, 24/04/2015; START Network, 05/05/2015).

Refugees

As of September, Burundi is host to 49,800 refugees, mostly from DRC (UNHCR, 31/11/2014). Refugees are mainly located in the border regions of Ngozi (north, alongside Rwanda), Ruyigi, Muyinga, and Cankuzo (east, alongside Tanzania) and Bubanza (west, alongside DRC).

Returnees

79,000 Burundian returnees are also going through slow reintegration processes, including 43,000 Burundians who have been forcibly repatriated from Tanzania. Most of them have not been registered due to a lack of reception facilities (IOM, 01/2014; HCT, 24/04/2015). The high number of IDPs and refugees returning is aggravating tensions over land ownership, as returnees claim land where other families, often of a different ethnic background, have since settled.

Burundian Refugees in Neighbouring Countries

Humanitarian actors on the ground are warning of a potential refugee crisis in the region as a result of displacement into Rwanda, Tanzania and DRC ahead of the presidential election. As of 5 May, nearly 39,100 Burundians have sought asylum in Rwanda (24,800); Tanzania (6,790) and DRC (7,320). Daily arrivals have been as high as 1,000 in Rwanda and decreased to 300 in the first days of May. (UNHCR, 26/04/2015; 05/05/2015). 60% are children (UNHCR, 17/04/2015). Unconfirmed reports suggest most of those who are fleeing are Tutsi and Twa (WFP, 28/04/2015). Refugees started arriving in Rwanda and DRC in mid-April, at the rate of around 200–300 per day (local media, 12/04/2015).

As of 1 September 2014, 14,367 Burundian refugees and asylum-seekers were residing in Uganda. Most Burundian refugees are located in Nakivale and Oruchinga (UNHCR, 23/09/2014).

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

As of 1 March 2015, 6,619 Burundian refugees were residing in Kenya (UNHCR, 01/03/2015), most of them in Kakuma camp.

Food Security

As the lean season progresses, household food stocks and purchasing power have declined. Food security for the poor is expected to deteriorate to Stressed (IPC Phase 2) during this period due to the high number of IDPs and refugees returning. (FEWSNET, 31/03/2015).

Livelihoods

Economic activities in Bujumbura are significantly hampered by protests, with most businesses and banks closed, raising concern for the impact on an already fragile economy (OCHA, 04/05/2015).

Markets

Most staple food prices are roughly 25% above the five-year average, particularly in...
**NAMIBIA  FOOD INSECURITY**

**LATEST DEVELOPMENTS**

No significant developments this week, 30/04/2015. Last update: 13/04/2015.

**KEY CONCERNS**

- Prolonged unseasonal dry spells since January have resulted in poor vegetation conditions and unfavourable production prospects for the 2015 harvest (FAO, 11/03/2015).

**Humanitarian Context and Needs**

**Food Security**

Large parts of the country, including the main producing regions of Oshikoto, Oshana and Omusati, have received well below-average rains since January. At least 28,000 people from Ruacana in Omusati region are in need of food aid as a result of poor crops (NOAA, 08/04/2015; local media, 31/03/2015). *Mitigation measures have been put into place by the Government until the results of the June harvest (local media, 27/04/2015).*

At July 2014, 117,660 people were affected by a food security crisis and around 557,900 people in rural areas were at risk of food insecurity and requiring assistance. Kunene, and parts of Omaheke, Otjozondjupa, Omusati, and Erongo regions, were most affected (SADC, 08/2014).

**Agriculture and Markets**

The extended dry spells means prospects are unfavourable for the June 2015 harvest: a 33% reduction on 2014 is forecast, notably for cereals and maize (FAO, 28/04/2015; 11/03/2015; WFP, 03/03/2015). Farmers are in need of livestock support (local media, 24/03/2015). Price increases as a result of lower imports from neighbouring countries also affected by dry conditions have been reported in February (FAO, 28/04/2015).

Crop harvests in September 2014 were already 20–50% lower than in the same period in 2013 due to localised dry spells, and agricultural employment opportunities had been reduced by 40–65% (OCHA, 22/09/2014).

**Reviewed: 30/04/2015**

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**UGANDA  DISPLACEMENT**

**LATEST DEVELOPMENTS**

27 April: Erratic seasonal rains, especially in southern areas, are affecting harvest prospects for June. Prices of food crops rose by 20-40% in March, mainly due to reduced stocks (FAO).

**KEY CONCERNS**

- 146,251 South Sudanese refugees have arrived in Uganda since December 2013 (IOM, 15/04/2015).
- In Karamoja, GAM rates of 13.4% are the highest recorded in the last five years, while SAM remains above 3% (UNICEF, 23/01/2015).
- Rapid expansion of refugee camps has strained health services (UNFPA, 16/02/2015).

**Security**

Tensions around unexplained killings of Muslim leaders in Busoga sub-region are rising (Government, 09/03/2015).

**Humanitarian Context and Needs**

**IDPs**

As of 11 February, there were 422,440 refugees and asylum seekers in Uganda, **including 274,582 children. The refugees and asylum seekers are mainly from DRC (44%), South Sudan (38%), Somalia (7%), Rwanda (4%), and Burundi (3%)** (UNICEF, 15/04/2015;
Refugees are hosted in settlements in Adjumani, Kiryandongo, Kampala and Arua districts (UNHCR, 24/11/2014).

As of 15 April, 146,251 South Sudanese refugees had fled to Uganda since December 2013 (IOM, 18/03/2015). Women and children account for 87% of arriving refugees; 65% are children (ECHO, 13/04/2015; FAO, 11/11/2014). South Sudanese refugees continue to arrive at Elegu border point at a rate of 124 persons per day. Priority needs are for NFIs, livelihood and psychological support (ACT, 15/04/2015).

As camps are overwhelmed, preparation of new land in Maaji, Moyo district, is ongoing. As of 4 February, 261 people had been relocated (UNHCR, 04/02/2015).

Ugandan Refugees in Neighbouring Countries

At 1 April, there were 1,669 Ugandan refugees in Kenya (UNHCR, 01/04/2015). At 30 June 2014, there were 1,211 Ugandan refugees in DRC (UNHCR, 30/05/2014).

Food Security

In Karamoja, below-average rainfall has decreased labour demand and lowered incomes, affecting access to food: about 180,000 people are estimated to be in Crisis (IPC Phase 3), especially in Moroto and Kaabong districts, where food stocks have depleted 2-3 months earlier than usual (FAO, 27/04/2015). 700,000 people were Stressed (IPC Phase 2) as of end 2014 (FEWSNET, 31/12/2014).

In bimodal areas, mostly in central and western Uganda, Minimal (IPC Phase 1) food insecurity is expected to last through June.

Harsh climatic conditions and poor yields have deteriorated the food security situation in Arua camp. (UNHCR, 20/01/2015). A general food shortage has been reported in Arua district, which has led to increased cost of food items (UNHCR, 18/03/2015).

Erratic seasonal rains, especially in southern areas, are affecting harvest prospects for June. Prices of food crops rose by 20-40% in March, mainly due to reduced stocks; maize prices increased by about 15%, reflecting a high import demand from Kenya (FAO, 27/04/2015).

Health and Nutrition

The rapid expansion of refugee camps has strained health services (UNFPA, 16/02/2015).

Health centres affected by the refugee influx require immunisation, as well as medical infrastructure and supply support, especially in Arua (UNICEF, 15/04/2015; UNHCR, 20/01/2015). Health education related to HIV counselling and testing among refugees is also needed (UNHCR, 18/03/2015).

Nutrition

In Karamoja, GAM rates of 13.4% are the highest recorded in the last five years, while SAM prevalence remains above 3% (UNICEF, 23/01/2015).

SAM levels of 1.5% have been reported among South Sudanese refugees in Arua, Adjumani and Kiryandongo districts, compared to 4.1% in January (UNICEF, 15/04/2015).

Typhoid

As of 19 March, 4,949 cases of typhoid have been confirmed, more than double the 5 March figure of 1,940 cases. Most cases are located in Kampala (local media, 28/03/2015).

WASH

Boreholes have dried up, so water trucking has been necessary in Adjumani. In Arua, the water supply is 13.8L per person per day, and in Kiryandongo, 16L per person per day, both below the UNHCR standard of 20L (UNHCR, 18/03/2015).

The number of community-based hygiene promoters remains limited, with a ratio of 1:873 (UNHCR, 18/03/2015).
Eritrea is a one-party state governed by President Isaias Afwerk and his party People’s Front for Democracy and Justice (PFDJ). No national elections have been held since Eritrea gained independence from Ethiopia in 1993.

Humanitarian Context and Needs

1.2 million people need humanitarian assistance as of 15 January 2015, including 696,000 children under 18 (UNICEF, 15/01/2015).

Access

There is a lack of updated and reliable data on the humanitarian situation due to limited humanitarian access. Providing direct humanitarian assistance remains a challenge due to limited access, and absence of assessments and humanitarian space (ECHO, 10/2013).

In November–December 2013, several projects in partnership with the UN and the Government began; the Government had previously ordered the end of all operations by non-state development partners by the end of 2012 (IFRC, 30/05/2014).

Displacement

Refugees

As of March 2015, there were 2,758 Somali refugees in Eritrea (UNHCR, 08/04/2015).

Eritrean Refugees in Neighbouring Countries

The entire Eritrean refugee population is estimated to constitute more than 321,000 people (Guardian, 21/04/2015). UN estimates that 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). Eritreans constitute the second biggest group of migrants arriving in Italy by boat, after Syrians (Reuters, 24/03/2015). The high proportion of unaccompanied minors who cross from Eritrea to Ethiopia is a priority concern (UNHCR).

Ethiopia: At the end of March, there were 133,348 Eritrean refugees in Ethiopia (OCHA, 20/04/2015), mainly settled in four camps in the northern Tigray and Afar regions (UNICEF, 21/04/2015). Arrival rates spiked towards the end of 2014, with a total of 33,000 arriving by the end of the year (OCHA, 24/11/2014; UNHCR, 09/02/2015). The recent influx has resulted in shortages of shelter in the camps (OCHA, 26/01/2015). During March, Ethiopia registered 3,636 new arrivals from Eritrea (OCHA, 20/04/2015).

About 90% of those who arrived in October were between 18 and 24 years old, and cited intensified mandatory recruitment into military service as their reason for flight (local media, 15/11/2014).

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

Djibouti: As of 1 January, there were 1,240 Eritrean refugees in Djibouti (UNHCR, 30/01/2015).

Yemen: Reports indicate hundreds of Eritrean refugees are scattered across the streets of Al Safeyah in Sana’a, without proper shelter or livelihood. Refugees have informed UNHCR that many are imprisoned upon arrival in Yemen, on the grounds of security concerns (Yemen Times, 19/08/2014). Several NGOs have called on the Yemeni authorities to stop deporting Eritrean political refugees (UNHCR).

Kenya: As of 31 March, there were 1,543 Eritrean refugees in Kenya; the majority located in Nairobi (UNHCR, 31/03/2015).

Chad: On 6 February, the Chadian Government announced plans to deport a dozen Eritrean refugees from Chad. Humanitarian organisations have protested the move, as the returnees will most probably face indefinite detention in Eritrea (local media, 06/02/2015).

Food Security

A positive rainy season between June and September 2014, may significantly improve the food security situation in highland areas, but not in the coastal lowland regions (UNICEF, 15/01/2015).

It is estimated that Eritrea produces only 60% of the food it needs, and markets appear to be dysfunctional. These two factors suggest that a significant part of the population may be in need of food assistance. Due to extensive national service, farmers are routinely absent during harvest periods (Economist, 10/03/2014). In addition, local food and fuel prices are likely to be high, putting severe pressure on household coping mechanisms. The Government officially denies any food shortages within its borders and refuses food aid (ECHO).

Health and Nutrition

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

Protection

Indefinite national service, and arbitrary arrest and detention, including incommunicado detention and inhume prison conditions, were the focus of a March 2015 UN human rights report (UN Human Rights Council). The UN human rights chief has accused the government of torture and summary executions (UN Human Rights Council, 05/02/2014).

In September 2014, the UN Human Rights Council set up a Commission of Inquiry to investigate human rights abuses in Eritrea; however by January 2015 it had still not been granted direct access to the country (Human Rights Watch, 24/09/2014; UNHRC, 16/01/2015).

Mines and ERW
With only 25% of minefields cleared, UNICEF reported in January 2015 that the impact of landmines and ERWs continue to have a serious impact on the population, including causing deaths, injuries and disabilities. Humanitarian mine action programmes in the country have been scaled down due to limited access (UNICEF, 15/01/2015). There are 995 dangerous areas, 914 mined areas and 702 minefields in Eritrea (UN Mission in Ethiopia and Eritrea).

Reviewed: 22/04/2015

AFGHANISTAN CONFLICT, FLOODS, FOOD INSECURITY, LANDSLIDES, DISPLACEMENT

LATEST DEVELOPMENTS

8 May: Fighting in Kunduz province reportedly displaced 14,000 families (AFP).

8 May: Afghan officials announced that foreign Islamic State (IS) fighters are training Taliban (AFP)

3–7 May: Multiple offences by the Taliban, supported by foreign fighters, are challenging the Afghan National Security forces in Kunduz province (BBC).

7 May: Kunduz city is cut off because of fighting; commercial flights are cancelled (BBC)

KEY CONCERNS

- Between January and March 2015, 1,810 civilian casualties; casualties from ground engagements and mortars and rockets rose 8% and 47% respectively compared to the same period in 2014; women and children casualties continue to increase (UNAMA, 12/04/2015).


- 242,732 refugees from Pakistan since mid-June 2014; long-term concerns from protracted displacement (UNHCR, 22/04/2015; 06/04/2015).

- 829,300 IDPs, including 156,200 people displaced by conflict in 2014 (UNHCR, 28/02/2015; 31/12/2014).

- Nearly 68,000 people (9,300 families) in 137 districts of 24 provinces have been affected by floods, heavy snowfall, and avalanches over 1 February–15 April. Priority needs are for food, NFIs, and emergency shelter (ECHO, 15/04/2015; IFRC, 18/03/2015).

- 3.7 million people are food insecure (IPC, 01/11/2014).

- 517,600 children under five suffer from SAM, and eight provinces show GAM rates above 15%, breaching the emergency threshold (UNICEF, 21/01/2015, OCHA, 31/07/2014).

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 political instability. The security environment is highly volatile and expected to deteriorate as international troops gradually withdraw from the country.

Political Context

Afghan President Ashraf Ghani introduced a list of 16 new cabinet appointments on 1 April, replacing the candidates rejected by Parliament end January (local media, 01/04/2015; AFP, 04/02/2015). Ashraf Ghani and Abdullah Abdullah were sworn in as Afghanistan's new President and Prime Minister, respectively, on 29 September 2014 (Reuters, 29/09/2014). The pair were rival presidential candidates in disputed elections (AFP, 26/09/2014).

Peace Talks with the Taliban

Peace talks with the Afghan Taliban have been stalled since mid-2013. Preliminary contacts between Kabul and the Taliban began December 2014. On 10 January, Afghanistan joined Pakistan in military operations against militants in both countries (British & Irish Agencies Afghanistan Group, 31/01/2015). On 2 May 2015 an Afghan delegation held an open discussion in Qatar with Taliban (Trust.org, 04/05/2015; AFP, 02/05/2015).

Security Context

On 22 April, Afghan Taliban announced the start of its spring offensive, targeting foreign embassies and government officials, as well as military (Trust.org, 22/04/2015). Clashes
between state and anti-government forces, inter-tribal disputes and harassment and intimidation by anti-government forces, remained major causes of insecurity and displacement in February, mostly in Helmand, Kunduz, Kapisa, Logar, and Maidan Wardak. Military operations intensified in the north of Helmand during the second half of February, and turned west/southwest early March (UNHCHR, 28/02/2015).

There were 1,810 civilian casualties between 1 January and 31 March (655 killed, 1,155 injured). Civilian casualties from ground engagements rose by 8%, casualties from mortars and rockets by 47%, and women and children casualties continue to increase. The sustained use of indiscriminate weapons and IEDs is of concern (UNAMA, 12/04/2015). 3,699 civilians were killed and 6,849 injured in 2014, a 22% increase in casualties on 2013 (UNAMA, 18/02/2015).

Taliban

The Taliban claimed victory against NATO as it ended its combat mission at the end of 2014, and said they would continue their fight against remaining foreign forces in the country (Al Arabiya, 29/12/2014). Remote parts of southern and south-eastern Afghanistan, near the border with Pakistan, remain under Taliban control. Taliban numbers have increased by 15% since the beginning of 2013, as the group has intensified attacks. They are increasingly financed by criminal enterprises, including heroin laboratories, illegal ruby and emerald mines, and kidnapping (UNSC, 02/02/2015).

International Military Presence

NATO formally ended its combat mission in Afghanistan on 31 December 2014, moving to the Resolute Support mission made up of 9,800 US troops and 3,000 soldiers from other member states. The mission will focus on supporting Afghan forces’ fight against the Taliban, along with US counter-terrorism operations (Reuters, 01/01/2015). The number of US troops remaining in Afghanistan until end December is significantly higher than the 5,500 initially planned, and has been denounced by the Taliban (Le Monde, 24/03/2015).

Conflict Developments and Incidents

Balgh: Gun and grenade exchanges during a Taliban siege of a court killed at least ten people and wounded dozens on 9 April (AFP, 09/04/2015).

Ghazni: A roadside bomb killed 12 in Khogyani district on 10 April (AFP, 10/04/2015). A landmine explosion killed seven on 30 March (AFP, 31/03/2015).

Helmand: On 20 April, Taliban militants attacked a police station in Lashkargah, killing three officers (Trust.org 20/04/2015). Two Taliban attacks in Lashkargah in March, targeting provincial officials and a police station, killed 11 people and wounded 61 (AFP, 18/03/2015; AFP, 11/03/2015). A Taliban suicide attack targeting an army and police base in Sangin district on 3 March killed nine people, including five civilians, and wounded eight (AFP, 03/03/2015).

Kabul: A Taliban suicide bomber struck a government bus on 10 May, killing three and wounding at least 16 others (AFP, 10/05/2015). A suicide car bombing of a bus carrying civil servants in West Kabul on 4 May killed one and wounded 15 (Trust.org, 04/05/2015). Bombing and suicide attacks targeting mainly government and foreign officials have killed 24 and wounded at least 32 since 26 February (AFP, 10/04/2015; 06/04/2015; 25/03/2015; 17/03/2015; 07/03/2015; 26/02/2015)

Nangarhar: A suicide attack killed 33 people and wounded 115 others in Jalalabad. President Ghani said Islamic State (IS) claimed responsibility, making this its first major attack in the country (AFP, 18/04/2015). A suicide attack targeting a NATO convoy killed three and wounded four (AFP, 10/04/2015).

Kunduz: Taliban offensives took place simultaneously in five districts on 2 and 3 May (Afghanistan Analyst Network, 3/05/2015). The Taliban, supported by foreign fighters, has come close to the provincial capital, cutting it off (Trust.org, 06/05/2015, 07/05/2015; BBC, 07/05/2015; AFP, 08/05/2015). The Government launched a major offensive on 7 May near the city. 100 people, including ten elders, have been killed since an estimated 50 foreign fighters, from an unidentified group, settled in the province. Residents have been asked for money, girls’ education is regulated, and meetings with government officials are subject to authorisation.

Other incidents: Dozens of Taliban fighters attacked local government buildings in Badghis and may have captured the whole area on 10 May (Reuters, 10/05/2015). On 26 April, in Uruzgan, the acting police chief was killed by a fellow officer, about a month after his predecessor was also assassinated (Trust.org, 26/04/2015). On 25 April, five civilians were killed and 11 injured by a mortar attack in Laghman province (AFP, 25/05/2015). A suspected Taliban roadside bomb killed eight civilians in Khosh Rod district of southwestern Nimroz province (23/04/2015). An explosion targeting Afghan police vehicles in Baghlan killed three people on 6 April (AFP, 06/04/2015). An explosion in Logar province killed seven on 3 April (AFP, 03/04/2015). A suicide attack at an anti-corruption rally in Khost killed at least 16 people and wounded 40 on 2 April (AFP, 02/04/2015).

Suspected Taliban gunmen abducted 31 members of the country’s Hazara Shi’ite Muslim minority on 23 February in Zabul province. As of 11 May, 12 are still held hostage and one had been killed (BBC, 11/05/2015; Trust.org 20/04/2015; AFP, 24/03/2015; 17/03/2015).

Humanitarian Context and Needs

Planning figures are for 6.9 million Afghans in need of humanitarian aid in 2015, including 2.8 million children, compared to 7.4 million in 2014 (UNICEF, 21/01/2015). Badghis, Helmand, Kunar, Nangarhar, and Wardak most need assistance (OCHA, 25/11/2014).

Access

As of 8 May, commercial flights to Kunduz have been suspended (AFP, 08/05/2015). As of 30 April, WFP has reported no accessibility to some districts bordering Pakistan, in east Farah, south Ghor and north Helmand as well as to the north of Badghis and south of Jowzjan (WFP, 30/04/2015). Access in January was most constrained in parts of Helmand, Kandahar, Ghor, Paktika, Khost, Nangarhar, and Nuristan (WFP, 19/01/2015).
Security Incidents Involving Aid Workers

In Paktia province, 19 mine clearance workers were abducted and released two days later elders (Trust.org, 20/04/2015; 21/04/2015). Five members of an NGO’s national staff were killed by their abductor on 10 April in Uruzgan (UN, 11/04/2015).

In March, there were 19 incidents against national and international NGOs. Four people were wounded, ten abducted, and two arrested (OCHA, 19/04/2015). There were 293 incidents against aid workers in 2014, including 57 killed (UN, 11/04/2015; OCHA, 31/12/2014).

Disasters

At least 52 people, mostly women and children, after a landslide that swept through a village in Badakhshan province on 28 April. The road to the village is closed six months of the year (AFP, 28/04/2015).

Nearly 68,000 people (9,300 families) in 137 districts of 24 provinces were affected by floods, heavy snowfall, and avalanches over 1 February–15 April. The most affected provinces are Jowzjan, Faryab, Sare Pol, Baghlan and Balkh. 291 people have died. Nearly 9,000 houses have been damaged or destroyed, and communication lines interrupted in some remote areas. Accessibility and security challenges due to road closures and areas controlled by non-state armed groups are hampering needs assessment and aid provision in some provinces. Priority needs are for food, NFIs, and emergency shelter (ECHO, 15/04/2015; IOM/USAID, 15/03/2015; IFRC, 18/03/2015; IFRC; 11/05/2015).

Displacement

There are 829,300 IDPs in Afghanistan and 242,732 refugees from Pakistan in Khost and Paktika provinces; returns from Pakistan are increasing since December 2014, while around 2.5 million Afghans have taken refuge in neighbouring countries.

IDPs

At end February, there were 829,300 profiled IDPs in Afghanistan, including 46% displaced in January, and 156,200 displaced by conflict in 2014. Nearly 213,200 IDPs are in the south, 206,430 in the west, 140,000 in the east and 133,100 in central Afghanistan.

Fighting in Kunduz has reportedly displaced 14,000 families as of 8 May (AFP, 08/05/2015).

Military operations in Helmand have triggered displacement since February and by 31 March, the Kandahar Provincial Disaster Management Committee (PDMC) had reported 1,896 displaced families. Priority needs are food and NFIs; health needs also emerged in the south (UNHCR, 28/02/2015, 31/12/2014, OCHA 19/04/2015).

Refugees

Displacement from Pakistan to Afghanistan’s Khost and Paktika provinces has been ongoing since mid-June 2014. As of 22 April, these provinces were hosting around 242,732 refugees (35,252 families) from Pakistan, 72% of whom are in Khost (UNHCR, 22/04/2015). Urgent needs remain for shelter, nutrition, and WASH (UNHCR, 08/04/2015; 01/04/2015). Spontaneous returns of refugees to Pakistan have been reported, although the number is unknown (UNHCR, 14/04/2015; 08/04/2015).

An additional 600,000 Baloch refugees who have fled insurgency activities in Pakistan since 1986 are living in precarious conditions, notably in Nimroz (AAN, 31/12/2014).

Returnees

Returns of Afghans from Pakistan have increased following security incidents in the country, particularly the December Taliban attack in Peshawar. As of 7 May, 57,000 Afghans have returned home (OCHA, 07/05/2015). 30–40% of undocumented returnees are vulnerable and in need of assistance (OCHA, 28/02/2015; IOM, 13/02/2015).

Afghan Refugees in Neighbouring Countries

As of 30 September 2014, there were 2.5 million Afghan refugees in neighbouring countries (USAID, 01/10/2014).

Food Security

As of April, Badghis province is in IPC Phase 3. Badakhshan, Nuristan, Ghor, Daykundi and Bamyan are in IPC Phase 2 (FEWSNET, 01/05/2015). IDPs and households affected by heavy rains and snowfall in 2015 are expected to remain Stressed (IPC Phase 2) through June (FEWSNET, 31/03/2015). In October 2015, it is estimated that 500,000 to 990,000 people will be in IPC Phase 3 or higher (FEWSNET 20/04/2015).

Agriculture and Markets

Floods and avalanches since 23 February have destroyed farmland and orchards across the country (Government, 28/02/2015).

2014 wheat production was 64% lower than 2013, and January 2015 wheat grain and flour prices have increased 12% on average compared to 2014, leading to excess sales of livestock; Badghis province is most affected (FEWSNET, 11/02/2015).

Livelihoods

Political uncertainty over 2014 led to decreased investment in many sectors, including construction and trade, which are key employers of casual labour. Faryab province saw the largest decline in casual labour wages: rates were 43% lower in September than in 2013 and the five-year average (FEWSNET, 01/11/2014). Decreased prices for some cash crops compared to last year is limiting income (FEWSNET, 01/12/2014).

Opium poppy cultivation in Afghanistan has risen by 7% in a year, from 209,000 hectares in 2013 to 224,000 hectares in 2014 (UN, 12/11/2014).

Health and Nutrition
A spike in pneumonia cases and deaths has been reported among children under five, notably in Takhar province, following severe weather conditions (OCHA, 05/03/2015). Increasing reports of malaria and measles cases, especially in Paktika, Khost, Balkh and Zabul provinces, are a cause for concern.

There is a shortage of trained surgeons, anaesthetists, and trauma capacity in conflict-affected areas (OCHA, 25/11/2014). Nearly 80% of maternal and reproductive health needs are unmet (WHO, 10/12/2014). Tuberculosis is also a high burden for Afghanistan, but many new cases were missed out in 2014 due to lack of close monitoring (Government, 24/03/2015).

Measles

Nine measles outbreaks were reported between 19 and 25 April from Nangarhar, Paktika, and Paktia provinces (Government, 07/03/2015; DEWS-plus, 29/04/2015). 445 laboratory-confirmed cases of measles were reported in the first quarter of 2015, representing a significant increase from last year’s total of 581 cases (WHO, 26/04/2015).

Nutrition

517,596 children suffer from SAM (UNICEF, 21/01/2015). In Urzugan, Nuristan, Khost, Paktia, Wardak, Kunar, and Laghman provinces, GAM rates were breaching the emergency threshold of 15% in mid-2014 (National Nutrition Survey, OCHA 31/07/2014).

An estimated 45% of all child deaths in refugee and IDP camps are linked to malnutrition (UNICEF, 21/01/2015). The presence of common animal diseases in areas of Khost and Paktika have reduced the availability of meat and milk products to Pakistani refugees and host communities (FEWSNET, 11/02/2015). Fewer than 20% of children with SAM and MAM received the treatment they needed in 2014 (OCHA, 25/11/2014).

Polio

One case of polio has been reported so far in 2015, from Helmand province. 28 cases were reported in 2014, mostly in conflict-affected areas, compared to 14 in 2013 and 37 in 2012 (WHO, 26/04/2015; Global Polio Eradication Initiative, 25/02/2015; 14/01/2015).

WASH

1.9 million Afghans are in need of better access to safe WASH facilities (UNICEF, 21/01/2015). Refugee influxes have stretched already limited water and hygiene resources and infrastructure in Khost and Paktika; lack of solid waste management and latrines are major challenges (UNHCR, 08/04/2015).

Shelter

A growing number of IDPs live in informal settlements in major Afghan urban centres, in substandard and crowded accommodation, with insufficient WASH facilities, food, education, and employment opportunities. Women are particularly at risk, with reduced access to education, health, and livelihood opportunities, and facing significant unmet mental health needs (NRC, 23/03/2015). As of 11 December, 40,629 refugees were in 52 informal settlements in the capital. The most populated is Charahi Qamber (7,436 people) (OCHA, 17/12/2014). Overall numbers on people in informal shelters across Afghanistan are missing.

Education

Educational facilities in Khost are overstretched, with 344 schools employing 6,000 teachers and teaching around 360,000 children. There are 50,000 school-aged refugee children in Khost (Institute for War and Peace Reporting, 05/11/2014).

Protection

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, which has been criminalised in December 2014 (Watchlist on Children and Armed Conflict 02/05/2015).

Detention

35% of visited detainees in national facilities have experienced ill-treatment or torture, including 42% of child detainees, in a United Nations Assistance Mission in Afghanistan (UNAMA) study conducted between February 2013 and December 2014. The same type of study over 2011–2012 showed 49% of detainees had experienced ill-treatment or torture (OHCHR, UNAMA, 25/02/2015).

Mines and ERW

4,271 minefields and battlefields remain in Afghanistan, corresponding to almost 536 km² in 255 districts of 33 provinces (MAPA/MACCA, 06/04/2015). As of 23 April, 919,546 m² in Gulan camp has been cleared as well as 1,045,549m² around the camp, where refugees have settled more recently (UNHCR, 23/04/2015).

Sexual Violence

Sexual violence is underreported because of the social stigma attached to it and lack of access to Taliban-controlled areas. Between January 2014 and January 2015, UNAMA registered 44 cases (UN Security Council, 15/04/2015).

Updated, 11/05/2015

IRAQ CONFLICT, INTERNAL UNREST, DISPLACEMENT

For the latest Briefing Notes, visit the ACAPS country analysis page.

For information relating to the Syria crisis, see SNAP’s latest reports.
10 May: At least 11 people were killed and 18 wounded in separate attacks in Baghdad governorate (AFP).

8 May: Clashes between IS and ISF around Baiji oil refinery are accelerating, as IS cut off supply routes and occupied positions within the facility (ISW).

8 May: An IS attack on a Shi’ite mosque in Diyala killed 19 and wounded 15 (AFP).

5 May: Iraq’s 2015 appeal is only 8% funded, leading to serious response cutbacks (OCHA).

5 May: Nearly 47,260 people have been displaced by fighting in Karmah district in Anbar early May, and 133,100 by fighting around Ramadi end April (IOM, 25/04/2015; OCHA).

5 May: The city hospital in Hit district, Anbar, is no longer accessible for civilians; medicine only available to IS fighters (OCHA).

KEY CONCERNS
- Around 810 deaths recorded by UNAMI in April, including around 535 civilians. Approximately 12,000 people were killed in 2014, corresponding to the worst levels of violence since 2006–2007 (UNAMI, 02/05/2015; 01/01/2015).

- Around 8.3 million people are in need of humanitarian assistance, including 2.8 million IDPs and 2.2 million beyond the reach of aid agencies (ECHO, 12/12/2014; IOM, 30/04/2015).

- Access is highly constrained in Anbar, Kirkuk, and Ninewa (2015).

- 248,370 registered Syrian refugees are in Iraq; 64% are women and children (UNHCR, 30/04/2015).

- Protection is a key concern, particularly in areas directly affected by conflict and under Islamic State (IS) control.

OVERVIEW
The IS insurgency has compounded an already fragile political and humanitarian situation, leading to a level 3 humanitarian crisis and international military intervention. Iraq now hosts one of the largest internally displaced populations in the world. Priority needs are food, water, shelter, fuel and access to healthcare. Access constraints and human rights violations, particularly in IS-controlled areas, are of major concern. There are large information gaps on the situation of affected populations outside of the Kurdistan region of Iraq.

The perceived marginalisation of Sunni groups by former President Maliki’s Government is considered one of the main drivers of the current conflict. A unity government, led by President Abadi, was formed in September 2014. While trying to balance sectarian tensions inside the country, Abadi has been seeking to garner international support for the fight against Islamic State, including from neighbouring Sunni Arab states (Foreign Affairs, 16/01/2015).

Kurdistan Region of Iraq (KR-I)
Masoud Barzani’s Kurdistan Democratic Party (KDP) and the Patriotic Union of Kurdistan (PUK) have ruled the autonomous KR-I through a coalition government since 2005. Barzani’s term has been extended to 2015, a move denounced as illegal by the opposition. In mid-November 2014, Baghdad and Erbil reached a budget agreement around oil revenues, which was incorporated into Iraq’s 2015 national budget law late January; political relations are developing positively, as both sides honoured their part of the deal end March (local media, 26/04/2015; UN, 02/12/2014).

Security Context
Around 810 people were killed in acts of violence in April, including 535 civilians, with Baghdad most affected (UNAMI, 02/05/2015). At least 12,000 people were killed and more than 23,000 injured in 2014, in the worst violence since 2006–2007. Reported casualty numbers are hard to verify in conflict areas (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. Abu Bakr al Baghdadi was declared caliph and leader for Muslims worldwide. IS has taken over large areas of northern and eastern Syria, and parts of northern and central Iraq. In September, IS had around 20,000 –31,500 fighters in Iraq and Syria (BBC, 15/09/2014). The group has suffered significant losses, while attracting an increasing number of foreign fighters. It has financed its operations through crude oil and gasoline sale (Le Monde, 07/03/2015).

Government Forces
Iraqi Security Forces (ISF) are made up of around 48,000 troops, involved in offensives around Baghdad, and in central governorates (Foreign Policy, 28/03/2015). The Prime Minister declared in January that falling global oil prices could lead to possible budget deficits, hampering capacity to undertake military operations (Reuters, 22/01/2015).

Shi’a militias
Three militias have been supporting government forces on all major fronts against IS since the beginning of the insurgency, as part of the Popular Mobilisation Forces: Asa’ib, Kita’ib Hezbollah, and the Badr Brigades. The Popular Mobilisation Forces are made up of around 100,000 fighters, including 30,000 reportedly backed by the Iranian Government (Al
KR-I Forces

The Kurdish Peshmerga, supported by Kurdish fighters from Syria and Turkey, are engaged in a counteroffensive against IS. Kurdish fighters receive training and equipment from multiple countries, including the United States (AFP).

International Involvement

In August 2014, US forces started airstrikes on IS locations. On 15 September, 30 additional countries pledged to help Iraq fight IS. Iran has dispatched members of its elite Revolutionary Guards Corps and reportedly carried out airstrikes against IS (The Economist, 03/01/2015; The Guardian, 05/01/2015, 04/12/2014).

Conflict Developments

ISF and Kurdish forces have regained territory, recapturing populated areas of Diyala in January, and Al Baghhdadi in Anbar early March (AFP, 26/01/2015; 08/03/2015). Peshmerga forces are fighting IS in Kirkuk. 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).

Recent Incidents

Anbar: ISF and associated militias launched operations to retake Anbar on 8 April, targeting areas east of Ramadi. By 26 April, however, IS had made significant gains around Ramadi, taking control of the Abu Ghanim area (OCHA, 26/04/2015; ISW, 15/04/2015). Clashes have been ongoing in and around Falluja since 25–26 April, and a curfew is reportedly in place in the southeast of the city (OCHA, 28/04/2015). Three people were killed and 11 wounded by indiscriminate shelling in Falluja on 10 May (AFP, 10/05/2015).

Baghdad has seen nearly daily bombings and shootings since November 2014. At least 11 people were killed and 18 wounded in separate attacks in the governorate on 10 May (AFP, 10/05/2015). An explosion targeting Shi‘ite pilgrims killed at least seven people and wounded 20 on 9 May (AFP, 09/05/2015). A car explosion in Baghdad on 2 May killed 13 people and wounded 39, the deadliest single attack in 2015. On 28 April, eight IDPs were reportedly killed in Baghdad, raising concerns over growing anti-IDP sentiment due to fears of IS infiltration (OCHA, 05/05/2015). 18 people were killed and more than 70 wounded in a wave of car bomb attacks in Baghdad claimed by IS over 27–30 April (AFP, 02/05/2015).

Diyala: An IS attack on a Shi‘ite mosque in Baladruz district killed 19 and wounded 15 on 8 May (AFP, 08/05/2015).

Kirkuk: Peshmerga forces initiated a wide operation to dislodge IS from areas of southwestern Kirkuk in February; by 18 March, Peshmerga and Popular Mobilisation forces had retaken Bashir and surrounding villages (ISW, 18/03/2015). Both forces, with the support of ISF, are planning an operation in Al Hawijia in the coming months. This cooperation is significant, as visible tensions between Kurdish and Shi‘ite rivals over control of Kirkuk city are raising fears that IS will exploit the divisions to advance (ISW, 13/03/2015; Ekurd Daily, 17/02/2015; The Daily Beast, 17/02/2015).

Nineawa: IS continues to carry out security operations south of Mosul, to control tribal resistance and safeguard one of its most important areas of control.

Salah al Din: On 12 April, IS launched three suicide attacks on Baiji oil refinery, the fiercest since ISF recaptured the area in November. Clashes were accelerating as of 5 May, as IS cut off supply routes and occupied positions within the facility (ISW, 08/05/2015). As of 31 March, Iraqi forces and supporters had reportedly recaptured Albu Ajil, Tal Ksaiba, Al Alam, Al Dour, and Tikrit from IS (local media, 31/03/2015; WSJ, 13/02/2015; Al Jazeera, 08/03/2015). Tensions then rose between government forces and allied militias (Reuters, 04/04/2015).

Humanitarian Context and Needs

As of end March, 8.3 million people are estimated to be in urgent need of humanitarian assistance, including 3.85 million children, compared to 5.2 and 2.6 million, respectively, reported at end February (UNICEF, 31/03/2015; 28/02/2015). As of 5 May, Iraq’s 2015 appeal is only 8% funded, leading to serious response cutbacks, particularly affecting the food, health and education sectors (OCHA, 05/05/2015).

Access

Around 2.2 million people in need of emergency assistance are beyond the reach of aid agencies, and access to the estimated 3.6 million people in areas under control of IS and affiliated armed groups is limited (ECHO, 12/12/2014). Several INGOs have suspended activities in IS-controlled areas, or provide emergency assistance through local partners. High insecurity and unexploded ordnance (UXO) also hinders access, as do long delays in obtaining clearance from Iraqi authorities (OCHA, 05/12/2014).

Border crossings: The Ibrahim Khalil border crossing has been closed to Syrians from Kobane since 2 March; most refugees have entered via the Peshkabour crossing (UNHCR, 15/03/2015). Insecurity prevents most civilian movement at the IS-controlled Al Qa‘im and Al Waleed crossings, as well as at Rabia (Reuters, 23/11/2014; UNHCR, 28/02/2015; 15/01/2015).

IDP movement restrictions: Over 30% of IDPs are forced to stay within their governorate, due to movement restrictions imposed by neighbouring governorates; restrictions have been reported in Baghdad, Salah al Din, and Anbar (IOM, 15/01/2014; Protection Cluster, 15/01/2015). Access to and in KR-I remains challenging for certain IDPs, particularly those of Arab ethnicity (UNHCR/Protection Cluster, 28/02/2015; OCHA, 23/01/2015).

Anbar remains largely inaccessible. One-fifth of Falluja’s population was left in the city in January, and prevented from leaving (ISW, 18/03/2015; REACH, 27/01/2015). IS checkpoints have proliferated in Hit district, preventing civilian movements outside the city (OCHA, 05/05/2015). The three main roads linking Haditha to other cities in Anbar...
are closed (OCHA, 23/03/2015). Control of the roads toward Al Baghdadi continues to shift between ISF and IS, which has delayed transportation of food and medical supplies to both Al Baghdadi sub-district and Haditha district (OCHA, 28/04/2015). Restricted access into Baghdad, Babylon, Najaf, Wassin, Sulaymaniyah and Kerbala has been reported for IDPs from Anbar; IDPs were asked to provide a sponsor for their admission into Baghdad from Bzabz bridge (OCHA, 22/04/2015; 21/04/2015).

Diyala: UN staff members were abducted by unidentified gunmen end April, and have not been located since (UN, 08/05/2015).

Kirkuk: Inaccessibility is hampering the delivery of essential medical supplies, equipment, and vaccines, especially access to Al Hawija and Debes districts, where a significant displaced population is reported (WHO, 12/03/2015; IOM, 24/02/2015).

Nineawa: Access to Mosul is impossible for humanitarian actors and communications with areas outside the city are allegedly cut off. Civilians are prevented from leaving the city. Conditions have dramatically deteriorated since IS took control (OCHA, 02/03/2015; WFP, 02/02/2015).

Displacement

At early April, there are 2.67 million IDPs, 247,860 Syrian refugees, and 1.5 million people in need of assistance in host communities.

IDPs

As of 25 April, more than 2.8 million IDPs are in 3,387 locations in Iraq. 31% are in KR-I (868,960) including 452,496 in Duhok and 247,878 in Erbil. Anbar hosts 422,586 IDPs, Kirkuk 375,120, and Baghdad 412,200. 8% are in 30 IDP camps (mostly in KR-I), 27% in critical shelter arrangements (mostly in Duhok and Nineawa), and 65% in private settings. Priority needs are for shelter, NFIs, income, and food support (IOM, 25/04/2015; 26/04/2015). The number and spread of IDPs pose a major challenge to needs assessment and assistance (IOM, 02/12/2014).

Anbar: Nearly 47,260 people were displaced by fighting in Karmah district in early May: 94% to Fallujah, and 6% to Abu Ghraib in Baghdad. Another 133,100 were displaced by fighting around Ramadi over 8–28 April, to 15 governorates, including 62% to Baghdad and 18% within Anbar. Priority needs are WASH, food, and NFIs (IOM, 25/04/2015; OCHA, 05/05/2015).

Erbil: 150 Sunni IDP families originally displaced from Anbar are reportedly arriving in Shqalaw district from Baghdad each week, due to insecurity. The majority live in poor conditions, mostly in unfinished buildings (OCHA, 03/04/2015).

Salah al Din: At 11 March, nearly 30,000 people had fled operations between ISF and IS in Tikrit for areas in and around Samarra. The majority are living in 127 collective shelters. Priority needs are for food, shelter, health, and WASH (ECHO, 11/03/2015). Numbers have also fled to Baghdad, Kirkuk, and Diyala (UNHCR, 15/03/2015).

The humanitarian situation for IDPs in Najaf, Karbala, Babel, Qadissiya, and Wassin in public buildings or collective shelters, with significant food, WASH, and livelihood needs, is also critical (WFP, 27/01/2015; REACH, 27/01/2015).

IDP Returnees

As of 8 May, around 14,330 IDPs have reportedly returned to Ramadi district in Anbar, and 35,000 to the rest of the province. One reason for the returns is lack of sponsor to enter Baghdad (OCHA, 08/05/2015; 05/05/2015).

Around 116,850 IDPs returned to their areas of origin over 26 March–28 April, including 37% to Diyala, 26% to Salah al Din and 26% to Nineawa. 19% returned to unfinished or abandoned buildings (IOM, 25/04/2015).

Heavily disrupted health and water infrastructure, mines, IEDs, inter-communal tensions and threats by sectarian militia all increase the risks for returnees (OCHA, 20/02/2015; ICRC, 24/02/2015).

Refugees in Iraq

As of 30 April, 248,370 Syrian refugees were registered in Iraq; 43% are women and 41.5% children. KR-I hosts an estimated 97%, with nearly 110,380 in Erbil and 100,050 in Duhok; 4,520 were last known to be in Anbar and 1,310 in Nineawa (UNHCR, 30/04/2015). Around 33,810 Syrian refugees have arrived in KR-I from Kobane since 25 September (UNHCR, 15/03/2015).

37.5% of refugees live in nine camps; over half are in Domiz camp in Duhok (47,940), 10,600 in Kawergosk and 9,750 in Darashakran in Erbil (UNHCR, 30/04/2015). The number of Syrian refugees in Al Obaidy camp in IS-controlled Al Qa’im in Anbar significantly decreased January–March, to 851; understanding the trend is difficult due to access constraints (UNHCR, 15/03/2015, 04/03/2015).

More than 37,660 Syrian refugees returned to Syria over January 2014–March 2015. Reasons for return include high living cost in the KR-I, lack of job opportunities and family reunification (UNHCR, 15/04/2015; 31/12/2014).

There are also 41,700 non-Syrian refugees (UNHCR, 23/04/2015).

Iraqi Refugees in Neighbouring Countries

As of end 2014, there were around 254,000 Iraqi refugees in neighbouring countries, including 200,000 in Turkey, 43,000 in Jordan (the Government estimated 58,000), 8,700 in Lebanon, and over 3,000 in Yemen (PI, 07/01/2015, UNHCR, 01/2015).

Food Security

2.8 million people urgently need food assistance. Needs are particularly high, especially for IDPs, in Anbar (Al Baghdadi, Fallujah, Haditha, Rutba, Ramadi and Ka’im districts), Salah al Din (Tikrit, Baiji and Samarra districts), Kirkuk, Diyala, Nineawa, and Baghdad governorates. Food supply needs also persist for IDPs in the southern governorates of Qadissiya (Diwaniya District), Muthanna, Najaf, Kerbala,
Agriculture

Many farmers and rural households have abandoned their fields (FAO, 11/2014). Some 120,000 farmers in host communities need agricultural inputs for the winter planting season (OCHA, 06/02/2015). IS controls major wheat storage silos in Ninewa and Salah al Din (FAO 10/02/2015). The prospects for the 2015 winter crop are uncertain in conflict-affected parts of Anbar, Salah Al Din, and Diyala (WFP, 11/03/2015).

Refugees: Reduced access to basic feed is posing a significant risk to refugees’ livestock, especially in Ninewa and Dahuk (FAO, 10/02/2015; UNHCR, 18/02/2015).

Livelihoods

800,000 people are in need of livelihood support in Iraq (UN, 18/02/2015). The need for livelihood support is increasing as IDPs’ financial conditions are deteriorating, and unemployment is rising in IS-controlled areas (UNHCR, 15/03/2015; OCHA, 02/03/2015). In conflict-affected areas, casual labour opportunities are limited and wage rates are low (WFP, 11/03/2015). KR-I’s poverty rate increased from 3.5% to 8.1% between 2013 and 2014. GDP growth in Iraq declined by five percentage points to 3% in 2014 (World Bank/Government, 12/02/2015).

In Anbar, Diyala, and Ninewa, purchasing power has fallen by a quarter since February. Food prices are high in Anbar, Ninewa, Kirkuk, Salah al Din, and Dahuk due to conflict and blocked supply lines (WFP, 08/04/2015; 03/2015). In Salah al Din, rice and flour prices have doubled, and increased fivefold in some areas (WFP, 11/03/2015). The conflict in Anbar has dramatically affected agricultural livelihoods.

Refugees: Refugees resort to a rising range of negative coping mechanisms in Dahuk due to high food prices (UNHCR, 15/04/2015). The ability to find sustainable job opportunities is still severely limited, and hampered by competition. As of February, only 5% of refugees targeted for access to wage employment in 2015 had been reached (DRC/UNDP, 28/02/2015).

Health and Nutrition

5.2 million people need health support in Iraq (WHO, 16/03/2015). Acute diarrhoea, acute respiratory infections, and scabies remain a leading cause of morbidity among refugees and IDPs (Government/WHO, 29/03/2015).

A number of health facilities have been damaged by bombing and shelling. None of the three hospitals in Tikrit, Salah al Din, are functioning; in Kirkuk, some 23% of health facilities are not functioning (WHO, 27/04/2015). Recurrent shortages of essential medicines and other supplies remain a challenge, especially in Anbar, Salah al Din, and Ninewa (WHO, 27/04/2015). Difficulties in import and clearing of supplies through customs are reported (OCHA, 23/03/2015). The rapid and massive influxes of IDPs have further strained the health system. Health professionals are in short supply in KR-I and conflict areas, while insecurity hampers access to healthcare in some areas (WHO, 16/03/2015). The influx of under-vaccinated Syrian refugees into KR-I increases health risks (WHO, 11/2014).

Limited or unavailable treatment for tuberculosis, leishmaniasis, and hepatitis are major concerns in Salah al Din and Kirkuk (WHO, 16/03/2015).

Anbar: The two main hospitals in Ramadi have been closed since 16 April due to insecurity (WHO, 27/04/2015). The city hospital in Hit district is also reportedly no longer accessible for civilians, with medicine only available to IS fighters (OCHA, 05/05/2015). Critical shortages of essential medicines are reported by functioning health structures (ECHO, 16/02/2015). Shortages of fuel affecting healthcare delivery has been reported in one hospital in Anbar, while contact has been lost with facilities in western Anbar (WHO, 16/03/2015). Increased acute illnesses and chronic diseases are reported from Al Baghadi district (OCHA, 05/05/2015).

Erbil: Handicap International have interrupted transportation services for people with chronic diseases (OCHA, 21/04/2015).

Mosul: Only two units of the main hospital remain functional, staffing levels are down to 30–50%, and severe medicine shortages have been reported (AFP, 12/2014).

Sulaymaniya: Overcrowding in Arbat IDP camp has reportedly led to referrals to medical facilities in Sulaymaniya city, putting additional pressure on the health infrastructure (OCHA, 23/03/2015).

Refugees: 20% of the non-camp population has difficulty accessing health services, due to cost and perceived availability (WHO/UNHCR, 28/02/2015). Access to specialised primary services, including mental healthcare and control of communicable diseases, remain priorities in camps (WHO/UNHCR, 31/03/2015).

WASH

Five million people need WASH support, while many essential operations face imminent suspension due to funding constraints (UNHCR, 15/03/2015; OCHA, 28/02/2015).

Access to safe water is a critical problem in areas affected by conflict or controlled by armed groups. Power cuts, disruption of supply routes, shortage of chlorine, and broken pipelines have left communities without safe water (WHO, 01/02/2015). IDP sites in Baghdad, Anbar, and Salah al Din, as well as in Babylon and Najaf, urgently need WASH support (OCHA, 28/04/2015).

Refugees: Drainage, waste disposal and water quality remain pressing issues in Darashakran, Akre, Basirma, and Domiz camps (UNHCR, 15/04/2015). In Basirma, the latrine ratio is 27:1, while garbage collection remains an issue in camps in Erbil (UNHCR, 31/03/2015).

Shelter and NFIs

Around 1.7 million people require shelter and NFI support, mainly in non-camp settings in central and southern Iraq; IDPs in informal, unmanaged settlements are of highest concern (UNHCR/Shelter Cluster, 02/05/2015).
Most camp facilities and services do not meet minimum Sphere standards (REACH 31/10/2014). Arbat IDP camp in Sulaymaniya is overcapacity and access to basic services is of major concern, as it hosts 19,500 individuals instead of the planned 7,160 (OCHA, 02/03/2015; CCCM, 01/03/2015). Overcrowded Laylan camp in Kirkuk also needs support (OCHA, 03/04/2015). Eleven camps are under construction for an additional capacity of 384,235 IDPs (CCCM, 02/03/2015).

Many IDPs in Ninewa reportedly live in critical shelter conditions (OCHA, 05/05/2015). 75% of returnee houses in Al Alam in Salah al Din have been demolished (OCHA, 27/03/2015).

Refugees: 20% of refugees live in inadequate dwellings in Domiz camp (UNHCR, 31/12/2014). Basirma, Kawergosk, Akre and Domiz camps’ capacities are exhausted; overcrowding in camps in Erbil is an increasing concern (Government/UNHCR, 31/03/2015; UNHCR, 15/04/2015). In Sulaymaniya, refugees renting houses are facing eviction due to the pressure on accommodation (UNHCR, 15/03/2015).

Education

65% of school-aged IDPs across Iraq are out of school (1.7 million children); IDP children residing among host communities are most affected (OCHA, 05/05/2015; 21/04/2015);. Over 500 schools, including 376 in Anbar, remain occupied by IDPs, and an estimated 130 by the military, affecting 39,000 children.

Refugees: 61% of school-aged refugee children in camps are attending school, compared to 43% of those out of camps (UNICEF/Save the Children, 31/03/2015). Challenges include limited capacity in schools with an Arabic curriculum, shortages of Syrian teachers, increasing schooling demand, and insecurity (UNHCR, 31/12/2014; 12/02/2015). Syrian refugee teachers have not received salaries since the start of 2015, due to the KR-I’s limited budget (UNHCR, 15/04/2015).

Protection

5.2 million people are in need of protection support (OCHA, 28/02/2015). Widespread abuses committed by IS, including targeted attacks, killings, torture, rape and sexual slavery, forced religious conversion, and child conscription, may amount to war crimes, crimes against humanity and genocide. Sharia courts have been established in IS-controlled territories, carrying out extreme punishments against men, women, and children (UN, 19/03/2015; 20/01/2015).

Violations allegedly carried out by ISF and associated militias during their counter-offensives against IS, including killings, torture and abductions, also amount to war crimes. Looting and human rights violations have also reportedly been committed (Reuters, 04/04/2015; 21/03/2015; Amnesty, 02/04/2015).

An increase in detention of IDPs is reported, due to growing mistrust from local authorities and communities (OCHA, 19/12/2014).

Eviction concerns remain for urban families in Kirkuk, where arrests and evictions have been reported (UNHCR, 15/03/2015; OCHA, 27/03/2015).

Documentation

Around 10% of IDPs have no documentation, which is a prerequisite for obtaining residency permits and difficult to obtain outside a person’s area of origin. Up to 50% of displaced families report that at least one family member is missing one or more civil documents (UNHCR/Protection Cluster, 28/02/2015).

Refugees: Refugees are in need of targeted legal responses and services including registration and documentation. Residency in urban areas is reportedly being denied to Syrian asylum-seekers lacking original ID documents (UNFPA, 31/03/2015; Protection Cluster 15/01/2015).

SGBV

Accurate numbers of women and girls affected by abuses across Iraq are hard to obtain. Reports show an increase in sexual violence, abductions, trafficking, and forced recruitment towards women. In particular, IS reportedly carried out systematic sexual violence against Yazidi women and girls in northern Iraq (HRW, 15/04/2015). Due to stigmatisation, many survivors are reluctant to seek assistance (UNAMI, 08/03/2015).

Child Protection

Around 1.3 million children are internally displaced in Iraq, while 561,000 live in areas under IS and affiliated armed groups’ control (OCHA, 28/04/2015). Concerning issues include harmful practices targeting girls, discrimination of children from ethnic minorities, and children born of rape, who risk being stateless (UN, 07/05/2015; OHCHR, 22/01/2015). IS has reportedly sold children as sex slaves, using minors as suicide bombers, and providing military training to schoolchildren in Syria and Iraq (OCHA, 06/02/2015; Radio Liberty, 10/2014).

ERW and Mines

Iraq is heavily mined, with up to 1,838m² of contaminated territory; IS is reportedly planting more (Landmine Monitor/ICBL, IRIN, 06/11/2014).

Updated: 11/05/2015
4 May: Al Sakhour hospital in Aleppo’s main hospitals has suspended all activities after being bombed on two consecutive days at end April. Shelling has seriously damaged medical services in Aleppo and two medical facilities have been targeted since mid-April (MSF).

30 April: US coalition airstrikes on Ber Mahli village near Seren, Aleppo, killed 64 civilians, 31 of whom were aged under 16 (Syrian Observatory for Human Rights (SOHR), 04/05/2015).

KEY CONCERNS
- Over 220,000 deaths documented March 2011–December 2014, including over 63,000 civilians, almost 11,000 of them 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).
- 7.6 million IDPs (OCHA 28/12/2014).
- 4.8 million people live in hard-to-reach areas (OCHA 12/2014).
- 3,988,857 Syrians are registered or waiting to register as refugees outside Syria as of 14 April (UNHCR 14/04/2015). Children make up 51.6% of the refugee population.
- 711 of 1,921 primary health centres and 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).
- 13,000 people have died in detention since March 2011, including more than 100 children, reportedly from torture (SOHR, 13/03/2015).

OVERVIEW
The conflict has killed over 220,000 people and caused large-scale displacement. 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 siege are particularly high because access is obstructed.

Political Context
A new round of Russia-mediated peace talks started on 6 April. The National Coalition did not participate (Al Jazeera, 06/04/2015). On 27 March, main opposition parties inside Syria, Building the Syrian State Party and National Coordination Committee for Democratic Change (NCCDC) announced formal participation in the Russia-peace talks (AFP, 27/03/2015).

On 4 May, the Geneva III conference began. UN envoy de Mistura will hold separate consultations the Syrian Government, some opposition groups, and regional powers such as Turkey and Iran. Opposition groups have criticised the invitation to Iran, which they consider signals that de Mistura is too close to the Government (BBC, 05/05/2015).

Security Context
Widespread conflict and high levels of violence continue, including indiscriminate aerial bombing by government forces and indiscriminate shelling by armed opposition (UNSC 21/11/2014). High frequency conflict locations are particularly Aleppo, Idlib, Damascus, Rural Damascus, Quneitra, and Dar’a governorates (SOHR in SNAP, 03/2015). Central governorates have witnessed an increase in airstrikes and the use of barrel bombs, especially Rural Damascus.

In 2014, 76,000 people were killed in the conflict, the highest toll since the war began. 18,000 civilians, including at least 3,500 children, were among the victims (SOHR, 02/01/2014). At least 6,550 civilians died during airstrikes, half of them in Aleppo. More than 220,000 people have died since fighting began in March 2011 and more than one million people have been wounded or suffered permanent disabilities (SOHR, 02/12/2014, 07/02/2015, UNICEF, 03/2015).

Stakeholders

Government forces: Government forces have control of several areas near Aleppo, in and around Homs city, and several areas in the Qalamoun region in Rural Damascus. Government forces control As-Sweida governorate, Tartous, parts of Dar’a and Lattakia, several areas in Idlib, and positions in predominantly IS or Kurdish controlled areas in Al Hasakeh. Increased Iranian involvement in generating irregular forces to augment pro-Government ranks appears to be fraying government command-and-control structures and challenging direct Syrian state control (ISW, 24/03/2015).

Islamic State (IS, formerly the Islamic State in Iraq and the Levant) declared an Islamic caliphate on 30 June, defining the group’s territory as running from northern Syria to the Iraqi province of Diyala, northeast of Baghdad. IS has been in full control of Ar-Raqqa governorate, its stronghold in Syria, since October 2014. It holds significant swathes of territory in Aleppo, Al Hasakeh, and Deir-ez-Zor, and is fighting in Rural Damascus, Damascus, and Homs.

Democratic Union Party (PYD) and People’s Protection Units (YPG): Syrian Kurds, repressed by the current Syrian Government, have been in de facto control of Kurdish zones in the north since Government forces withdrew mid-2012. Kurdish leaders from the PYD formed an armed wing, the YPG, aiming to secure control over predominantly ethnic Kurdish areas in northern and eastern Syria (ISW 19/09/2014). Media has reported the YPG has 65,000 fighters (Today’s Zaman, 04/01/2015).

Jabhat al Nusra (JAN), linked to Al Qaeda, is increasingly consolidating its control in northwestern Syria, previously held by the collapsing moderate opposition. JAN has turned against other opposition factions, which are considered mainstays of the Free Syrian Army.
(FSA). In contrast, mainstream Islamist groups have begun to strengthen relations with JAN. The dissolution of the Hazm Movement in western Aleppo governorate cements JAN gains in the area (ISW, 02/03/2015).

**Opposition alliances:** The Sham Front, a military command made up of five major factions, including Ahrar al Sham, Jaysh al Mujahideen, and Harakat Nour al Din al Zenki, was dissolved on 14 April (ISW, 30/12/2014). On 26 April, Ahrar al Sham, Jaysh al Islam, and five other Aleppo-based opposition groups announced the formation of the ‘Conquest of Aleppo’ Operations Room in Aleppo city (ISW, 28/04/2015).

**Christian militias:** Christian militias in northeastern Syria, in alliance with Kurdish forces and other armed opposition groups, are attempting to counter IS advances. Reportedly, they number up to 450 (The Guardian, 03/03/2015).

**International intervention:** As part of a multinational campaign against Islamist militant groups, a US-led coalition began airstrikes on IS and JAN military installations in mid-September. In early February, following IS’s execution of a Jordanian captive, Jordan carried out 56 airstrikes on IS targets in three days (BBC, 08/02/2015). More than 2,000 people have been killed by coalition airstrikes since the beginning of the offensive, the vast majority of them IS fighters, according to the Syrian Observatory for Human Rights (SOHR, 23/03/2015). Increasing Iranian involvement may potentially serve their larger strategic objectives by positioning Iranian forces closer to the disputed Israeli-controlled Golan Heights (ISW, 11/02/2015; 10/03/2015).

**Conflict Developments**

IS has come under pressure on four fronts in Syria (ISW, 17/03/2015). The YPG, supported by other armed groups, and coalition airstrikes have considerably challenged IS in the north (ISW, 02/03/2015). The group appears to have shifted the main effort of its military campaign to target the Government in central Syria (ISW, 24/03/2015).

Over 1–12 April, the Government carried out almost 1,500 airstrikes, killing 183 civilians and injuring more than 1,300 people (SOHR, 13/04/2015).

JAN and other Islamist and jihadist groups are increasingly coordinated in northern Syria. The increasingly Islamist and jihadist composition of militant ranks in northern Syria strengthens JAN’s position in northern Syria. The fall of Jisr al Shughur to JAN and allied forces is a key indicator of the Government’s inability to defend terrain against increasingly coordinated anti-Assad forces without the assistance of Iranian proxies such as Hezbollah (ISW, 26/04/2015).

**Aleppo:** On 30 April, US coalition airstrikes on Ber Mahli village near Seren killed 64 civilians 31 of whom were under 16 (SOHR, 04/05/2015). Clashes between IS and regime forces continue in north Aleppo (ISW, 07/04/2015). Kurdish forces have recaptured the Kobane city area and, backed by Ar-Raqqa armed groups including Shams al Shama and Jabhat al Akrad, have gained control over 242 villages around Kobane (SOHR, 19/02/2015).

On 13 April, JAN led an assault on an intelligence base in Aleppo city, and clashed with government forces. Government attacks on civilian infrastructure in the city forced the closure of schools (AFP, 13/04/2015). Aleppo city saw heavy clashes between opposition and government forces in early March, and high casualties on both sides (BBC, 04/03/2015; AFP, 05/03/2015).

**Al Hasakeh:** Clashes continue between YPG and IS in the Tal Tamr countryside (SOHR, 01/05/2015). Following a joint YPG and Syriac Military Council offensive on IS positions, IS began an offensive on Assyrian positions in February (Long War Journal, 24/02/2015; AFP, 07/03/2015). On 11 April, YPG forces pushed back IS from Tal Tamr town (AFP, 12/04/2015).

**Ar-Raqqa:** Kurdish forces made gains against IS, taking over three villages near Ain Issa on 12 April, a town less than 60km from Ar-Raqqa city. Over two days, Kurdish forces took seven villages from IS (AFP, 12/04/2015; SOHR, 12/04/2015).

**Damascus:** Large parts of Yarmouk Palestinian refugee camp were seized by IS on 5 April. Government forces have also reportedly shelled the camp and dropped barrel bombs on it, according to the SOHR (AFP, 05/04/2015; UN, 29/04/2015). As of 15 April, IS had largely withdrawn from Yarmouk, after expelling their main rival group, Hamas-linked Aknaf al Maqdis. JAN is now the main group inside the camp (Reuters, 15/04/2015).

**Dar’a:** Sustained fighting has been recorded since mid-February, when opposition groups launched a large-scale campaign, seizing control of several strategic locations in the governorate (WFP, 31/03/2015).

**Deir-ez-Zor:** In March, pro-government forces made their first attack deep into IS-controlled Deir-ez-Zor countryside since IS’s occupation of the province in July 2014 (ISW, 10/03/2015). IS made minor advances in government-controlled areas of Deir-ez-Zor city in January (OCHA, 16/01/2015; SOHR, 12/04/2014; SOHR, 06/02/2015).

**Idlib:** On 25 April, JAN and other militant groups seized Jisr Al Shughur, one of the Government’s last strongholds in Idlib governorate. The city has since been targeted by at least 20 airstrikes (AFP, 26/04/2015). Over 7–14 April, fighting around Mastumeh was particularly fierce, impacting the movement of civilians southward and putting at high risk the only route available for humanitarian deliveries to government-controlled areas in Idlib from within Syria. 1,500 IDPs were injured (OCHA, 14/04/215). According to community sources, at least two schools have been hit by aerial bombardments; one was being used as a collective shelter for IDPs, many of whom were reportedly killed (OCHA, 08/04/2015). JAN and Ahrar al Sham, backed by other opposition groups, seized Idlib city on 29 March (ISW, 24/03/2015; AFP, 29/03/2015; Syria Comment). The week before, a chlorine gas attack in the opposition-controlled town of Sarmin killed six people and poisoned a further 70. Helicopters were seen dropping barrels (MSF, 18/03/2015).

**Rural Damascus:** The Syrian Government targeted the town of Maydaa on 3 May. Maydaa buffers a crucial opposition supply line into the partly besieged Eastern Ghouta suburbs of Damascus. Clashes are reportedly ongoing in the area (ISW, 04/05/2015).

**Humanitarian Context and Needs**
Some 12.2 million people are in urgent need of humanitarian assistance inside Syria, including 5.6 million children. The humanitarian situation appears most critical in the governorates of Aleppo, Ar-Raqqa, Rural Damascus, and Deir-ez-Zor (SNAP, 28/01/2015).

Parties to the conflict continue to target public infrastructure and facilities. Water cuts in Aleppo, rural Damascus, Deir-ez-Zor, Ar-Raqqa, and Idlib are frequent and deliberate (UNICEF, 15/02/2015). Syria experienced severe drought conditions in 2014, impacting the availability of drinkable water and the health status of the population, as well as reducing agricultural output and local food production. 83% of lights in Syria have gone out since the beginning of the conflict, indicating the impact on infrastructure and supplies (Catholic Agency for Overseas Development, Islamic Relief, et al., 16/03/2015).

The UN's response efforts are chronically underfunded: As of 30 March, 90% of the Strategic Response Plan for 2015 has not been funded (OCHA, 07/04/2015).

Access

4.8 million people are living in hard-to-reach areas, including up to two million children (UNICEF, 12/2014).

There is a trend of tit-for-tat blocking of access between IS and its opponents, making IS-controlled areas hard to reach, particularly from northern Al Hasakeh, underlining the importance of cross-border access (OCHA, 16/01/2015). Similarly, stakeholders do not allow assistance to reach people perceived to be affiliated with opposing parties, for example in government-controlled areas of Lattakia, Hama, and Idlib. Siege tactics are used by all actors in the conflict.

Security Incidents Involving Aid Workers

69 humanitarian workers have been killed in the conflict since March 2011. 27 UN staff (including 24 UNRWA staff) have been detained or are missing (UNSC 21/11/2014). Five aid workers were killed and three injured since the beginning of 2015 (Aid Worker Security, 20/04/2015).

Trapped and Hard-to-Reach Communities

440,000 civilians are besieged (OCHA, 21/04/2015). Since 1 February, IS has cut off access to government-controlled areas of Deir-ez-Zor, leaving an estimated 228,000 civilians under siege. Since then, minimal relief supplies have been airlifted into the city (OCHA, 21/04/2015). 212,000 people remain besieged in Nubul and Al Zahra in rural Aleppo; Eastern Ghouta, Darya, and Moaadamiyah in Rural Damascus; the Old City in Homs; and Yarmouk camp in Damascus (UNSC 21/11/2014; UNICEF, 12/2014).

January 2015 saw a 44% reduction in the amount of food delivered into Syria’s hard-to-reach areas compared to the previous month, primarily as the result of insecurity and delays in approvals (WFP, 04/03/2015).

Aleppo: February saw an increase in clashes on the fronts inside Aleppo city, especially on the Salamiyah and Sheikh Hilal roads that are used by the UN (UNFPA, 10/03/2015).

Ar-Raqqa: As of end January, persistent insecurity continued to render Ar-Raqqa governorate completely inaccessible (WFP, 04/03/2015). IS has closed the Syrian Arab Red Crescent and several small local charities, and appropriated warehouses and equipment. Several INGOs continue to operate cross-border into Ar-Raqqa (OCHA, 30/01/2015).

Damascus: At 6 April, a significant percentage of the 18,000 civilians in Yarmouk camp were in the area controlled by armed groups, according to UNRWA. There are no operational hospitals or medical facilities for the civilian population trapped inside the besieged camp (Save the Children, 07/04/2015; WHO, 10/04/2015). UNRWA has been unable to provide assistance to the camp since fighting broke out in early April (UNRWA, 26/04/2015).

Rural Damascus: It is estimated that close to a quarter of a million people in Ghouta are in urgent need of assistance (WFP, 04/03/2015). Over February–March, an escalation of violence and attacks were reported in several besieged locations of Eastern Ghouta (OCHA, 19/03/2015).

Deir-ez-Zor: IS has cut off access to government-controlled areas of Deir-ez-Zor since 1 February, leaving an estimated 228,000 civilians living under siege (OCHA, 21/04/2015). Volatile security conditions and the presence of armed groups along access routes have prevented WFP deliveries since May 2014 (WFP, 31/12/2014).

Homs: As of 21 April, three inter-agency convoys have reached Homs governorate (Talbiseh, Al Wa‘er and Ar-Rastan). The last time that the city of Ar-Rastan was reached was in March 2014 (OCHA, 21/04/2015). Under partial siege since October 2013, over half of Al Wa‘er’s 350,000 residents are IDPs, who are mostly living in substandard accommodation (WFP, 22/10/2014).

Idlib: As of 14 April, lack of access due to insecurity continues to significantly hamper tracking of population movement, safe registration of IDPs, identification of lifesaving needs and provision of humanitarian assistance (OCHA, 14/04/2015). Aid delivery to Idlib city was possible in March (UNHCR, 26/03/2015).

Border Restrictions

Border closures or tight restrictions by neighbouring countries are dissuading people in life-threatening situations from seeking refuge abroad. Humanitarians have voiced concern over the inconsistent application of regulations at border crossings. Palestinian refugees are particularly affected by closed borders and forced returns from neighbouring countries (UN 24/11/2014).

Turkey: Only Bab al Hawa and Bab al Salam border crossings are open as of 24 April (OCHA, 24/04/2015). Restrictions since 1 January 2015 mean that refugees crossing between Turkey and Syria can only spend three out of every six months in Turkey. Those without a valid passport or travel document will be turned back (IRIN, 14/01/2015).

Displacement

IDPs
There are 7.6 million IDPs within Syria; 50% are children (OCHA 25/11/2014). There are 147 IDP camps in northern Syria, and 175,520 IDPs are sheltering in camp settlements (OCHA, 30/01/2015).

1,755,000 people are displaced in Aleppo; 1,388,000 in Rural Damascus; 918,000 in Idleb; 584,000 in Lattakia; 493,000 in Homs; 464,000 in Deir-ez-Zor; 453,000 in Hama; 437,000 in Damascus; 391,000 in Dar’a; 249,000 in Al-Hasakeh; 202,000 in Tartous; 168,000 in Ar-Raqqa; 73,000 in As-Sweida; and 57,000 in Quneitra (OCHA, 02/04/2015).

Multiple displacement has increased, 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).

In Idleb, at least 101,800 people have reportedly been displaced by fighting since late March, including 20,000 to Government- controlled areas, mainly southern and western Idleb governorate and rural Hama, and almost 81,200 into areas controlled by armed groups. Some sources report higher figures. 20,000 predominantly Shia population in Foah and Kefraya towns in Idleb are cut off and surrounded (OCHA, 08/04/2015).

Palestinian refugees in Syria: There are 560,000 Palestine refugees (OCHA, 21/04/2015). 470,000 Palestine refugees registered with UNRWA are in need of assistance (UNRWA, 21/04/2015). Over 50% have been displaced within Syria (UNRWA 28/10/2014).

Iraqi refugees: There are an estimated 29,000 Iraqi refugees in Syria (UNHCR 25/11/2014).

Syrian Refugees in Neighbouring Countries

3,988,857 Syrians are registered or waiting to register as refugees outside Syria as of 14 April (UNHCR, 14/04/2015). Children make up 51.6% of the refugee population.

Turkey: 1,758,092 registered refugees (UNHCR, 10/04/2015). The Government suspended pre-registration in October to focus on the full biometrical registration process (UNHCR, 05/01/2014).

Lebanon: 1,196,560 refugees (UNHCR 10/04/2015). Lebanon’s borders have been closed to Syrian refugees since 24 October. Since January, Syrians wanting to enter Lebanon must apply for a visa (BBC, 05/01/2015).

Jordan: 628,427 refugees (UNHCR 08/04/2015).

Egypt: 133,862 refugees (UNHCR 14/04/2015).

Iraq: 247,861 refugees (UNHCR 31/03/2015).

PRS: 42,000 have been recorded with UNRWA in Lebanon, 14,348 in Jordan (UNRWA, 02/03/2015) and 860 in Gaza. Around 4,000 are reportedly in Egypt (UNRWA 28/10/2014).

Almost 30,000 IDPs returned to their areas of origin (mostly in Dar’a) in March (OCHA, 21/04/2015).

Food Security

9.8 million people require food, agriculture and livelihoods-related assistance, according to the Food Security and Livelihoods sector analysis. Of these, around 6.8 million people live in high priority districts and need critical food assistance (WFP, 26/03/2015). IDPs outside formal camps are most susceptible to food shortages. The most acute needs are reported in Aleppo, Dar’a, Quneitra, and Rural Damascus (MSNA, 10/2014).

Food dispatches continue to be hindered by worsening security, particularly in the northeast and south (WFP 25/11/2014). Only 304 of the 212,000 people who were besieged were reached with food in January (UN, 26/02/2015).

The food aid basket for 4.2 million Syrians was cut by 40% in October (AFP, 10/2014).

Agriculture and Markets

According to FAO estimates, Syria’s overall cereal production in 2014 was approximately 25% below total production in 2013 (FAO, 05/03/2015). Drought and conflict have both impacted production.

Since August 2014, the price of 1kg of rice has increased by 26%. Between August 2014 and February 2015, the average retail price of bread rose by approximately 33%, while the price of diesel rose by 92% (WFP, 28/02/2015). Since 2011, the average monthly price of wheat flour increased 197%; rice has gone up 403% (WFP, 31/01/2015).

Livelihoods

More than half the population lived in extreme poverty at the end of 2013. Unemployment is at 54% (3.39 million people) (Syrian Centre for Policy Research/UNDP, 19/10/2014). The unemployed must apply for a visa (BBC, 05/01/2015).

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).

Diarrhoea is one of the main causes of death for children under 12 months old (IFRC, 24/07/2014). Tuberculosis, typhoid, hepatitis A and scabies have become endemic in northern Syria (AFP, 28/11/2014). In opposition-held Aleppo, these diseases, as well as cholera, are spreading, according to local doctors (Reuters, 08/01/2015).

Health and Nutrition

Since the start of the conflict, some 200,000 Syrians have died from chronic illnesses due to lack of access to treatment and medicines. Hospitals are unable to cope with the
demand for surgery, due partly to the increase in the number of injured – averaging 25,000 each month (PHR, 10/2014). The number of available health professionals has fallen to approximately 45% of 2011 levels and there are severe shortages of surgeons, anaesthetists, laboratory professionals, and female health professionals (WHO, 27/03/2015). Local production of medicines has been reduced by 70% and many lifesaving treatments are not available (WHO, 27/03/2015).

Only 43% of hospitals are fully functioning (UNICEF, 29/01/2015). 711 of 1,921 primary health centres are out of service (Syrian Ministry of Health/UNFPA, 11/2014). Aleppo, Rural Damascus, Homs, Dar’a, and Deir-er-Zor have the highest number of non-functional public hospitals. As of end February, only four public hospitals remained operational in Aleppo governorate, and only 132 primary health care centres (WHO, 22/02/2015). Al Sakhour hospital in Aleppo has suspended all activities after being bombed on two consecutive days at end April. Shelling has seriously damaged medical services. Two medical facilities have been targeted since mid-April (MSF, 04/05/2015).

In Ar-Raqqa, no obstetric, gynaecological, or paediatric services are reportedly available for the 1.6 million people living there (PHR, 27/02/2015). Little to no mental health services are available (PHR, 27/02/2015).

In Idlib governorate, the escalation of conflict since 26 March has rendered all three Ministry of Health-run public hospitals in Idlib governorate either non-functional or inaccessible. All pharmaceutical warehouses have been destroyed (OCHA, 14/04/2015). Ishan hospital in Saraqab was damaged in an airstrike on 18 April, rendering it non-functional (OCHA, 22/04/2015).

Attacks on Health Workers and Facilities

Since 2011, Physicians for Human Rights has recorded the unlawful killing of 615 medical personnel and 242 illegal attacks on 187 medical facilities throughout the country. At least 36 of these attacks were carried out with barrel bombs. PHR has found that Government forces are responsible for 88% of attacks on medical facilities – including the 36 attacks with barrel bombs – and 97% of medical personnel deaths – including 141 deaths by torture and execution (PHR, 17/04/2015).

Hepatitis A

Some 31,400 cases of hepatitis A were reported in 2014. Since January 2015, 1,000 have been recorded per week (Reuters, 24/02/2015). Hepatitis A is linked with lack of safe water and poor sanitation.

Maternal Health

Three million women and girls of reproductive age are in need of assistance in Syria, including around 432,000 pregnant women. 26 of 41 basic emergency obstetric care centres are reported as non-functional (Syrian Ministry of Health/UNFPA, 30/11/2014).

Mental Health

More than 350,000 individuals in Syria are estimated to suffer from severe forms of mental illness; over two million people suffer from mild to moderate problems such as anxiety and depression disorders, and a large percentage suffer from moderate to severe psychological/social distress (WHO/UNHCR, 19/10/2014).

Nutrition

In areas with high IDP concentration, 2.3% SAM – above the 2% crisis threshold – and 7.2% GAM rate has been reported (UNICEF, 21/10/2014). It is estimated that four million women and children are in need of preventative and curative nutrition assistance (UNICEF, 15/02/2015).

WASH

The availability of safe water is at a third of pre-crisis levels (WHO, 27/03/2015). The reliability of urban piped water is severely reduced and the quality of drinking water cannot be guaranteed due to a lack of testing facilities. Fuel shortages also affect water supply (UNICEF, 15/02/2015). One-third of water treatment plants no longer function, and sewage treatment has halved (PHR, 10/2014; WHO/UNICEF, 22/07/2014).

Shelter and 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).

Dar’a, Lattakia, and Quneitra have acute needs, followed very closely by Hama, Ar-Raqqa, Aleppo, Al Hasakeh and Rural Damascus. 40% of people identified in need of shelter are located in Aleppo governorate, as are 34% of people identified in need of NFI assistance (MSNA, 30/10/2014). Satellite imagery analysis indicated that fighting in Kobane affected 3,250 structures, destroying 1,200 (UNOSAT, 06/03/2015).

2.7 million people are in need of NFI assistance. The dispatch of non-food items (NFIs) has fallen significantly since April 2014 (MSNA, 30/10/2014).

Education

The estimated number of children enrolled in basic education increased from 2.9 million in the 2012/13 academic year to 3.6 million in 2014/15. Likewise, the gross enrolment ratio in basic education rose from 66% in 2012/13 to 79% in 2013/14 (UNICEF, 15/02/2015). In areas of active conflict for a prolonged period, like Aleppo, education enrolment is estimated to be around 6%. (Save the Children, 23/03/2015).

The primary reason for student drop-out is the need to work to support the family. Continued conflict and the recent closure of some schools in Ar-Raqqa and Deir-er-Zor governorates and parts of rural Aleppo in Syria are believed to have disrupted education for 670,000 school-aged children. (Syrian Interim Government/OCHA, 07/11/2014). Around
90% of schools in Idleb city have stopped functioning due to violent conflict (OCHA, 14/04/2015).

In 2014 there were at least 68 attacks on schools across Syria, killing at least 160 children and injuring over 340 (UN, 06/01/2015). 4,000 Syrian schools have been destroyed, damaged, or used to house IDPs. 76 UNRWA schools – more than two-thirds – have become unusable.

**Protection**

Protection is a priority concern. Human and organ trafficking are reported (UNHCR 20/11/2014).

Non-state armed groups continue to commit violations, including summary executions. Ethnic and religious communities in IS-occupied areas have been targeted directly (UN Human Rights Council 11/2014). IS executed 1,429 people in Syria during June - November, the majority civilians (UN Human Rights Council, 14/11/2014; SOHR/AFP, 17/11/2014). On 21 February, it was reported that the Syrian Government had executed at least 48 people, including ten children – the families of opposition fighters – in Rityan village, north of Aleppo (AFP, 21/02/2015).

In **Aleppo governorate**, barrel bomb attacks killed 3,000 civilians in 2014 (Amnesty, 05/05/2015).

**Children**

In 2015 alone, IS has trained over 400 children as fighters (AFP, 24/03/2015). Non-state armed groups and the Government’s Popular Committees are increasingly recruiting children: over 120 cases – more than half by the Free Syrian Army – were documented between 1 January and 19 August 2014, including girls, and some as young as eight (UNSC, 08/2014). In Ar-Raqqa, IS is using education to foster a new generation of recruits (UN Human Rights Council, 14/11/2014).

**Chemical Weapons**

There have been allegations of chlorine attacks. A chlorine gas attack in Idleb governorate, reportedly carried out by government forces, killed six and poisoned over 70 people in March 2015 (MSF, 18/03/2015). A chlorine gas attack was 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). Large quantities of unexploded ordnance and many booby-trapped houses in the Eastern sector of Kobane city and the surrounding countryside are preventing return (OCHA, 17/02/2015). Reportedly, ten civilians have died and around 20 injured by mines in Kobane city (Geneva call, 26/02/2015).

200,000 people are estimated to be in government detention, including 20,000 detainees who are unaccounted for (SOHR/HRW, 02/12/2014). 13,000 people have died in Government detention since March 2011, including more than 100 children, reportedly from torture (SOHR, 13/03/2015).

Some 7,000 government troops held by opposition forces are unaccounted for (SOHR, 07/2014). Another 1,500 IS, other opposition, and Kurdish fighters have been kidnapped during battles in the first half of 2014 (AFP, 07/2014).

IS are holding at least 50 civilians hostage after a raid on Mabujeh village, Hama governorate, at end March (AFP, 10/04/2015). On 24 February, IS abducted between 220 and 300 Assyrian Christians from Tal Tamer, Al Hasakeh governorate. By 2 March, 21 had been released. There are conflicting reports over whether they were released for ransom or following a IS "court" order (Al Jazeera, 02/03/2015).

**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: 04/05/2015*

**YEMEN** CONFLICT, FOOD INSECURITY, DISPLACEMENT

**LATEST DEVELOPMENTS**

**3 May:** The Saudi-led coalition has used cluster munitions on Sa’ada governorate (Human Rights Watch, 03/05/2015).

**1 May:** The collapse of access to healthcare has facilitated the spread of epidemic diseases, with 44 alerts of suspected outbreaks including measles, dengue fever, and meningitis (WHO in AFP).

**29 April:** WFP has been forced to suspend food distributions in Al Hudaydah governorate due to fuel shortages. Fuel stocks are also running out in other governorates where WFP has prepositioned food supplies for its humanitarian operations (WFP).

**27 April:** At least 300,000 people are estimated to have been displaced since March. The number of IDPs has doubled since 17 April (OCHA).
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, UNICEF 06/2014).
- 335,000 IDPs, 227,000 returnees and 245,000 refugees in the country (OCHA, 09/10/2014).
- Extreme access constraints prevail in Hadramaut, Shabwah, and Marib governorates. The governorates with the highest severity of needs are Aden, Abyan, Amanat Al Asimah, Al Jawf, Sa'ada, Hajjah (OCHA, 22/12/2014).

OVERVIEW

The highest priority humanitarian needs include protection, food and nutrition assistance, access to healthcare, shelter – primarily for conflict-affected people, and provision of water and sanitation.

Yemen's political transition has turned into armed conflict between Houthis from the north and the Government. Southern secessionists, Al Qaeda in the Arabian Peninsula (AQAP) activity throughout the country, and recent Islamic State attacks compound the security and political challenges.

Political Context

Instability and violence continue across the country, and attempts at political transition have been upended. In February 2015, the Shia Houthis dissolved Parliament and replaced the Government with a presidential council they claimed will fill the presidential vacuum for two years. The move was condemned as a coup by other parties and Yemen’s neighbours.

President Hadi fled to Yemen in February and called for troop mobilisation in the south (AFP, 21/02/2015). In March, members of the cabinet were released from almost two months of house arrest (NYT, 16/03/2015). On 25 March, Hadi fled Yemen for Saudi Arabia (Huffington Post, 25/04/2015).

On 12 April, President Hadi appointed for Prime Minister Khaled Bahah to Vice President, a move apparently aimed at improving the chances of a peaceful settlement (Reuters, 12/04/2015).

On 24 April, former president Saleh, who had been backing the Houthis’ advance, urged Houthis to heed UN demands to withdraw from territory they have seized (AFP, 25/04/2015). Houthis have demanded the complete cessation of coalition airstrikes and lifting of the naval blockade as conditions for UN-sponsored peace talks (AFP, 24/04/2015).

Members of the Southern Movement who represented the group at the National Dialogue Conference of 2013 and 2014 called for an end to hostilities and a return to dialogue on 7 April (Yemen Times, 07/04/2015). Various leaders of southern provinces had announced their secession following events in Sanaa at the beginning of the year (Reuters, 25/01/2015; Yemen Times, 19/10/2014; AFP, 01/01/2015).

Economic Crisis

Oil production represents over 70% of total government revenue. Production was suspended in the major oil-producing governorates of Shabwah and Hadramaut in January, and is likely to be disrupted in Marib (FEWSNET, 18/02/2015).

Oil revenues had already declined almost 30% between January 2013 and January 2014 (Yemen Central Bank, 02/2014). In July 2014, the Government increased the price of petrol by 60% and diesel by 95%. Observers have warned that the economy will continue to decline if the Government cannot protect pipelines. Attacks on oil pipelines are regularly reported (Al Jazeera).

Security Context

Conflict has escalated significantly since 23 March, affecting 19 of Yemen’s 22 governorates. Over 1,244 people were reported killed and 5,044 wounded between 19 March and 27 April (OCHA, 27/04/2015). Many more people have died or been injured but have not been referred to hospitals or are unreachable in the open conflict (ECHO, 18/04/2015).

Fighting is ongoing in Marib, Taizz, Al Dhalee, Al Bayda, Aden, Lahj and Abyan governorates. Street battles persist in Abyan, Al Dhalee, Aden, and Lahj, between groups supporting members of the popular committees affiliated with the Houthis and local armed groups (UN, 24/04/2015).

On 21 April, Saudi Arabia announced the immediate end of Operation Decisive Storm, its airstrike campaign supported by a coalition, to be replaced with Operation Renewal of Hope, meant to introduce a shift to a political process (NYT, 26/04/2015). Daily airstrikes have continued ever since (AFP, 01/05/2015). The airstrikes have hit 18 governorates since 26 March (OCHA, 13/04/2015).

Stakeholders

Pro-Hadi Forces
Hundreds of young men have been recruited since Hadi called for 20,000 new troops from the south (Yemen Times, 16/03/2015). On 19 April, 15,000 troops in Hadramaut province, on the border with Saudi Arabia, pledged allegiance to President Hadi. There are now ten divisions that back Hadi (Al Arabiya, 19/04/2015).

**Houthis**

The Houthi, also referred to as Ansarullah, are based in Sa‘ada governorate Houthi control Sa‘ada, Hajjah, Al Hudaydah, Al Mahwit, Amran, Sanaa, Al Jawf, Dhamar, and Ibb governorates. They occupied much of the capital in September 2014. Violence persisted despite a peace agreement in September, and an annex covering security and military conditions in other governorates witnessing violence (Yemen Times, 29/09/2014). The Houthi forces have taken up arms before, citing political, economic, and religious marginalisation (Al Jazeer, 16/11/2009). Certain factions in the deeply divided Yemeni army have allied themselves with the Houthi against President Hadi, including members of the former central security force, a unit seen as loyal to ousted president Ali Abdullah Saleh (Reuters, 12/03/2015; ABC, 23/03/2015).

**Al Qaeda in the Arabian Peninsula (AQAP) and Ansar al Sharia**

AQAP, based in the south and east of the country, and backed by Sunni tribesmen, has fought to halt the Houthi advance (AFP, 20/10/2014). AQAP has expanded its presence in Hadramaut, and according to analysts, the Houthi advance has bolstered support for AQAP and Ansar al Sharia (Reuters, 09/11/2014). According to the national security forces, 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, foreigner for abduction, and oil pipelines. In late December and early January, AQAP targeted several members of the security forces, including in Al Bayda and Shabwah. Yemeni authorities blame AQAP for a campaign of targeted killings in which up to 350 senior army officers have died in the past three years (Reuters, 04/01/2014).

**International Involvement**

Saudi Arabia firmly backs President Hadi. UAE, Bahrain, Kuwait and Qatar are providing some of the 100 fighter jets (Washington Post 26/03/2015). Egypt, Jordan, and Sudan have said their forces are involved in the operation, with Sudan pledging ground troops as well as warplanes (Reuters 27/03/2015). The US Government stated it had authorised the provision of logistical and intelligence support to the Saudi Arabian coalition’s military intervention (Amnesty 26/03/2015).

Saudi Arabia has mobilised 150,000 troops (NBC 26/03/2015; IRIN 26/03/2015). Although 3 May, Saudi Arabia stated there were no non-Yemeni forces fighting in Yemen. It said it was retraining Yemeni troops, after 40–50 soldiers arrived in Aden (Reuters, 03/05/2015). On 4 May, approximately 120 soldiers of Yemeni descent arrived in Aden from UAE (Stratfor, 04/05/2015). Senegal will send 2,100 troops to Saudi Arabia for the Saudi-led ground invasion (Washington Post, 05/05/2015).

Iran has been accused of backing Houthi militants financially and materially, a claim the Iranian Government denies (Amnesty 26/03/2015). Iran temporarily deployed a war ship near Yemen (Huffington Post, 08/04/2015), but also presented a peace plan to the UN calling for a ceasefire and the formation of a unity government (AFP, 25/04/2015).

**Security Incidents and Conflict Developments**

**Cluster munitions have been used by the Saudi-led coalition in air strikes on Sa‘ada governorate** (Human Rights Watch, 03/05/2015). According to the coalition, over 2,000 air strikes have been carried out since the start of the campaign (AFP, 20/04/2015).

**Sanaa:** On 28 April, airstrike damaged the runways of Sanaa airport (WFP, 29/04/2015). On 20 April, a Saudi airstrike on a missile depot killed 46 people, injured at least 300 more, and destroyed a large number of houses, according to officials (Los Angeles Times, 20/04/2015). On 26 March, 25 people, were killed in airstrikes. The crowded, low-income suburb of Bani Hewat near Sanaa International Airport was badly damaged (IRIN 26/03/2015).

On 20 March, three suicide attacks on mosques in Sanaa, targeting Shi’ite worshippers, killed 142 people and wounded at least 351. Islamic State claimed responsibility (AFP, 21/03/2015).

**Aden:** Intense battles continue in several areas. There are reports of indiscriminate shelling of houses, restricting civilian movements (OCHA, 19/04/2015; OCHA, 04/05/2015). On 19 April, forces loyal to Hadi regained control of part of the coastline that had been held by Houthi forces and Saleh loyalists (Al Jazeer, 19/04/2015). Health facilities, water and food supply are disrupted (ECHO, 07/04/2015).

**Al Bayda:** Even before the recent escalation of the conflict, fighting between Houthis and AQAP and affiliated tribes was ongoing. Clashes have involved attacks on schools and hospitals used by the warring parties (AFP, 17/10/2014; 20/10/2014; 08/11/2014).

**Al Hudaydah:** Multiple airstrikes have reportedly hit Hudaydah airport and the surrounding area in Hudaydah city (OCHA, 04/05/2015).

**Abyan:** On 9 March, AQAP militants overran the city of Mahfad, a former AQAP stronghold, and held it for eight hours before they were driven out by the Yemeni army (Gulf News, 10/03/2015).

**Hajjah:** On 30 March, an airstrike killed 45 people and wounded 65 in Mazraq refugee camp (Reuters, 30/03/2015).

**Lahj:** Lahj governorate was seized by Houthi militants on 25 March (Washington Post, 26/03/2015). In Al Hawtah, Lahj, clashes were reported near the Ibn Khaldoon hospital, health office and the Central Security Forces camp (OCHA, 19/04/2015). On 20 March, IS claimed responsibility for an attack that killed 29 police (ABC, 23/03/2015).

**Marib:** Loyalist troops shelled Houthi positions in the Sarwah district, with clashes around the country’s main oil export pipeline (AFP, 25/04/2015). Sunni tribes, pro-Hadi security forces and Houthis are fighting, despite a ceasefire agreed in the Qania area on 25 March (Huffington Post, 12/04/2015; Yemen Times, 25/03/2015). According to tribal sources,
upwards of 30,000 armed tribesmen are stationed in Sahil area (Yemen Times, 12/01/2015).

**Sa’ada**: Sa’ada city has been experiencing indiscriminate aerial bombardment. Civilian infrastructure, including the post office, bank, main market area and phone network have been hit, and civilians have fled the city. On 12 March, thousands of Houthi fighters held military exercises in the Al Buqa region, close to the border with Saudi Arabia (Reuters, 12/03/2015).

**Taizz**: Violent demonstrations against the Houthi takeover left eight dead and wounded over 140 people (ICRC; 26/03/2015). On 23 March, Houthi forces seized part of Taizz city and its military airbase (BBC, 22/03/2015; ABC, 23/03/2015).

**Humanitarian Context and Needs**

An estimated 15.9 million people, over 60% of the population, are in need of humanitarian aid. Children under 18 years old represent 50% of people in need. Of the 50% of people in need who are over 18 years old, 4% are elderly (over 60 years old) (OCHA, 05/03/2015).

Civilians’ private homes are being directly affected by airstrikes and armed clashes, particularly in the south (OCHA, 17/04/2015).

**Access**

No humanitarian assistance has been delivered to Al Dhalee (OCHA, 13/04/2015). Lifesaving services and supplies are no longer available for the people in Sa’ada, and the Government is unable to provide any assistance (OCHA, 24/04/2015). **Humanitarian access to Aden, Lahj, and Taizz is intermittent as front lines shift** (WFP, 29/04/2015). Due to access constraints in Abyan, no humanitarian aid can be transported from Aden to Abyan. An estimated 4,000 displaced households are in dire need of food, burdening host communities. In Aden, an estimated 9,000 households have been left with no assistance to date. The main hospital (Al Nasr Hospital) has no electricity or fuel (OCHA, 19/04/2015).

Many aid agencies have suspended their activities and evacuated their staff (IRIN, 27/03/2015). About 90 national and international humanitarian agencies continue to deliver critical lifesaving assistance, mostly through national staff (OCHA, 21/04/2015).

It is extremely difficult to move within the country to evaluate needs and provide assistance (MSF, 01/04/2015). **Most roads connecting Sanaa to Aden, Taizz, Al Dhalee, and Lahj are becoming gradually inaccessible** (WFP, 27/04/2015).

The closure of airspace over Yemen is severely restricting air operations, as are other limitations in neighbouring airspace zones. **Flights to and from Sanaa were suspended on 28 April, after the runway had been damaged in airstrikes** (Logistics Cluster, 30/04/2015). The three main national airports (Sanaa, Aden and Hudaydah) have eall been affected (OCHA, 17/04/2015). The Yemeni government-in-exile has formally banned ships, including those carrying fuel and food, from entering the country’s waters without prior inspection (IRIN, 17/04/2015).

**As of 30 April, Hudaydah Port, Aden Oil Port, Saleef Port, Mokha Port and Mukalla Port are operating, whereas Balhaf Port, Malla Container Port, and Ras Isa Port are closed** (Logistics Cluster, 30/04/2015). The arms embargo on the Houthis has also impacted the supply of humanitarian relief (AFP, 02/05/2015).

Since violence escalated, three volunteers with the Yemen Red Crescent have been killed (OCHA, 07/04/2015).

**Critical Infrastructure**

Lack of fuel is interrupting the transportation of humanitarian relief (OCHA, 10/04/2015). **Key infrastructure, including water, health and telecommunications, are on the verge of breakdown due to the fuel shortage** (AFP, 02/05/2015). WFP has been forced to suspend food distributions in Al Hudaydah governorate due to fuel shortages (WFP, 29/04/2015). The price of fuel has reached USD 200 per gallon in Sanaa and USD 400 per gallon in Taizz (IMC, 28/04/2015).

Phone networks and internet have been disconnected in Al Dhalee (OCHA, 13/04/2015). **Water processing plants in Sanaa city have closed** (Logistics Cluster, 30/04/2015). The Marib central electricity network has been damaged, causing total disruption of the electricity supply to the city of Sanaa and most governorates (WHO, 13/04/2015; 27/04/2015). In Marib, the telecommunications network has been brought down (ECHO, 20/04/2015).

At least 64 public buildings have been destroyed either partially or completely by fighting (IRIN, 24/04/2015). Reports have also been received of damage to local markets, power stations, and WASH infrastructure in Aden, Hajjah and Sa’ada (OCHA, 17/04/2015). At least five hospitals have been destroyed, damaged or disrupted (Sanaa, Al Dhalee and Aden), and 15 schools and educational institutions (Aden, Al Dhalee, and Sanaa) (OCHA, 17/04/2015).

**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 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**

At least 300,000 people are estimated to have been displaced since March, with the number of IDPs having doubled since 17 April (OCHA, 27/04/2015; IMC, 28/04/2015). As of 13 April there were 59,690 IDPs in Hajjah; 29,290 in Amran; 18,650 in Saada; 8,650 in Abyan; 3,500 in Al Hudaydah; and 1,500 in Al Jawf. In Abyan, displaced included 1,640 people hosted in 15 schools. The rest are living in host communities or with family and relatives. Numbers of newly displaced in Sana’a and Aden are still unclear (OCHA, 13/04/2015).

As of 4 May, local authorities in Aden reported that 98% of Khormaksar’s 62,870
residents had left the district. Remaining families are trapped and awaiting secure conditions to leave. The majority of the residents in Al Muala district were also reported to be leaving. Families are fleeing to Al Mansura, Ash Shaikh Othman, and Dar Sad districts, which are already reportedly experiencing strained resources and overcrowding.

As of end of December, there were 334,000 IDPs in Yemen, the vast majority 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; OCHA, 22/12/2014). 90% of these IDPs are estimated to live outside camps (OCHA, 03/09/2014; Global CCCM Cluster, 27/03/2014).

Over 2014, localised conflicts displaced approximately 100,000 Yemenis – most returned home within days, according to the UN. These conflicts were primarily associated with the movement of Houthi forces into new areas, including Amran, Al Bayda, Al Jawf, Marib, Sanaa, and Ibb governorates (USAID, 13/02/2015).

Refugees and Migrants

Around 800,000 refugees, asylum seekers, and migrants require humanitarian assistance. There are 257,645 registered refugees, most are Somalis (236,803); 5,934 are Ethiopians (Mixed Migration Secretariat, 28/02/2015). Over March, 3,359 mainly Ethiopian refugees, asylum seekers, and migrants arrived in Yemen via the Red Sea (Djibouti) (Mixed Migration Secretariat, 31/03/2015).

In 2014, nearly 91,600 refugees, asylum seekers, and migrants arrived in Yemen, a 40% increase compared to 2013, according to IOM. They have reported abduction, torture, physical assault, and rape as common forms of abuse (Mixed Migration Secretariat, 28/02/2015).

Somali refugees are living in precarious conditions either in the only refugee camp, Kharaz, or in urban areas. One million undocumented Ethiopian migrants also live in Yemen (ECHO, 27/08/2014; UNHCR, 12/2014, ECHO, 09/02/2015).

At least 2,000 Syrian refugees have been registered in Yemen since August 2014. The total number of Syrians in Yemen is estimated to be more than 10,000 (OCHA, 05/11/2014).

Yemeni Refugees and Migrants in Other Countries

Since end March, the UN reports the arrival of Yemeni refugees in Djibouti and in Somalia, in a reversal of migration dynamics (ECHO, 05/04/2015). As of 24 April, 10,000 people have left Yemen for the Horn of Africa. 8,344 of them have arrived in Djibouti (IOM, 24/04/2015).

Yemeni migrants in Saudi Arabia will be given reprieve, with eligible Yemenis being allowed to work and six months visa renewals available to Yemenis in Saudi Arabia (AFP, 04/05/2015).

Food Security

WFP estimates that the number of food insecure people in Yemen has increased to 12 million – a 13% rise since the start of the crisis (OCHA, 17/04/2015). Prior to the escalation of the conflict, five million people were estimated to be severely food insecure (WFP, 31/12/2014). Most areas of Yemen are expected to remain in Crisis (IPC Phase 3) through June 2015, with increased needs for humanitarian assistance as the lean season and political crisis continue (FEWSNET, 03/2015).

Areas of particular concern for deteriorating food security outcomes include Sa’ada, Hajjah, Abyan, Al Dhalee, Lahij, and Shabwah governorates, as well as the city of Aden. If conflict and market disruption continue, and humanitarian access is limited, the worst affected areas of Yemen could fall into Emergency (IPC Phase 4) over the coming months (FEWSNET, 04/2015).

Agriculture and Markets

Acute fuel shortages provoked by the conflict have affected food prices (WFP, 10/04/2015). Food prices have risen by 40% (OCHA, 17/04/2015).

Due to conflict-related disruptions to the imported food supply, as well as the likely reduction in fuel subsidies and currency depreciation, food prices are likely to increase in the coming months. Disruptions to sources of income and the potential increase in the cost of food and other goods are likely to reduce household purchasing power. This is likely to decrease the quantity and quality of food consumed, as almost all poor households rely heavily on market purchases (FEWSNET, 03/2015).

The declining supply of cooking gas led to a 30–40% increase in prices in January. Shortages may worsen if the current political tension in Marib deteriorates, as this governorate supplies cooking gas to Sana’a and other central and northern governorates (FEWSNET, 18/02/2015).

Health and Nutrition

The country’s health system is at imminent risk of collapse due to shortages of medical supplies and fuel for generators. 23 hospitals have been attacked since the beginning of the conflict and health staff are increasingly unable to report to work as the fuel crisis worsens. Non-Yemenis make up at least 25% of health workers and their evacuation has added to shortages. In areas where violence is ongoing, staff are fleeing health facilities that in danger of being hit (WHO, 27/04/2015). Fuel shortages are jeopardising the in-country vaccine stock, worth nearly USD 10 million (WHO, 18/04/2015). Thousands of vaccines in Lahj have had to be discarded for lack of refrigeration (IRIN, 17/04/2015). There are shortages of medicines on local markets and prices of available essential medicines have increased by more than 300% (WHO, 17/04/2015).

Cases of bloody diarrhoea, measles, and suspected malaria have increased (OCHA, 23/04/2015). The collapse of access to healthcare has facilitated the spread of diseases, with 44 alerts of suspected outbreaks including measles, dengue fever, and meningitis (WHO in AFP, 01/05/2015).

Prior to the escalation of the crisis, an estimated 8.6 million people had limited access to health services (OCHA, 09/09/2014). Qualified medical staff was already in short supply,
As was medical equipment.

According to WHO, 200,000 women require urgent health assistance, including an estimated 27,200 pregnant women (WHO, 18/04/2015; 19/04/2015).

On 18 April, the Ministry of Public Health and Population said the only oxygen generating plant in Yemen had ceased to function due to lack of fuel. The plant is located in Sana'a City and is the main source of oxygen for Yemeni hospitals (OCHA, 19/04/2015).

In Sa’ada and Aden, three hospitals and medical facilities were completely or partially destroyed over 7–11 April (OCHA, 13/04/2015). The main hospital in Aden has no water after storage tanks were damaged during fighting (OCHA, 23/04/2015).

In Sa’ada, services at 11 health facilities were suspended due to their close proximity to areas targeted by airstrikes (OCHA, 08/04/2015). Limited access to essential health services as a consequence of ongoing conflict has increased the risk of higher morbidity and mortality from mass casualty events and common diseases (diarrhoea, respiratory infections and vaccine-preventable diseases) in areas such as Al Bayda, Marib, Taizz and Aden.

Over 2015, an estimated 7,500 children are expected to contract vaccine-preventable diseases with serious consequences. 400,000 children are estimated to need psychosocial support due to the humanitarian situation (UNICEF, 29/01/2015).

**Nutrition**

The number of acutely malnourished children under the age of five has fallen from an estimated one million at the end of 2013 to just over 840,000 in 2014, according to the Nutrition Cluster. In the same period, the number of severely acutely malnourished children declined from 279,000 to about 170,000. However, more than one in ten children is still acutely malnourished, with boys more affected than girls (Comprehensive Food Security Survey, 11/2014).

National GAM had 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 had improved considerably in Al Hudaydah, Aden, Lahj, Marib, Al Dhalee, Hadramaut and Al Bayda; but severely deteriorated in Taizz, Ibb, Dhamar and Al Maharah, due to various factors including poor water and sanitation conditions, poor food consumption habits, and scarce health facilities. In early February, 61 out of 333 districts in Yemen were reported to have critical levels of GAM (over 15%) and another 105 serious levels (10–14.9% GAM) (OCHA, 14/02/2015).

**WASH**

Prior to the escalation of the crisis, an estimated 13.1 million people did not have access to safe water (OCHA, 08/09/2014). 12.1 million are without access to improved sanitation, and 4.4 million lack access to adequate sanitation (OCHA, 28/02/2015).

Millions of people are receiving less than an hour of uninterrupted water supply per day. The lack of power combined with damaged water pumps in the south have forced people to resort to water collection from unprotected and abandoned wells. Cases of waterborne diseases are rising as temperatures increase and hygiene deteriorates, with unverified reports of acute diarrhoea resulting in a number of child deaths in Mualla, Aden governorate (UNICEF, 22/04/2015).

An estimated 68,000 IDPs, many of whom are in protracted displacement, and their host communities in Hajjah require WASH assistance. About 9,000 people (1,500 families) affected by conflict in Al Jawf over August–September need WASH assistance (OCHA, 14/02/2015). Open defecation remains standard practice for more than 20% of the population and appears to be higher for young children (UNICEF 2014).

**Shelter**

An inter-agency assessment in Hajjah found that shelter was one of the three greatest needs (UNHCR, 17/04/2015).

In Hajjah, Al Hudaydah and Abyan governorates, around 3,500 families are living in open spaces or in tents and other improvised shelters. Many lost all their belongings. Shelter is a major problem in Lahj and many families have now moved into schools and health facilities where they feel safer. These families lived in mud houses that are now destroyed by the conflict (OCHA, 19/04/2015).

**Education**

Schooling has also been suspended for over 1.5 million children since the crisis began (OCHA, 17/04/2015). 30 schools have been damaged or occupied (UNICEF, 22/04/2015).

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**

Between 26 March and 22 April, an estimated 551 civilians were killed, including 115 children. Another 1,185 civilians, including 67 children, were injured (IRIN, 24/04/2015). This represents roughly half of the total casualties since 26 March.

In Aden, militants were using tanks to fire at residential buildings in Al Ahmadi as well as Crater and Mualla districts (OCHA, 23/04/2015).

Protesters against the Houthi takeover have been illegally detained and tortured, according to several reports. One protester was reported dead on 14 February, after sustaining severe injuries while being detained by Houthi militias (AFP, 14/02/2015; Amnesty, 16/02/2015).

Over January, 1,490 migrants and refugees arriving in Yemen were reportedly abducted. 234 were women. A further 243 migrants and refugees reported being physically assaulted and 63 reported robbery or extortion (RMMS, 31/01/2015).

Due to their marginalisation, the Mumasheen minority has higher humanitarian needs than the average population (UNICEF, 20/02/2015).
Children

Up to 30% of fighters in armed groups are children. Since 26 March, 77 children have been confirmed killed and 44 injured (UNICEF in AFP). In December, the UN estimated that in 2015, an estimated 3.9 million children are living in areas where violations of their rights constitute a serious risk. Of these, an estimated 2.6 million are in need of child protection services (OCHA, 22/12/2014).

Houthis, Ansar al Sharia, AQAP and state forces are all recruiting children (Watchlist on Children and Armed Conflict, 01/10/2014). Armed children guard checkpoints throughout Sa’ada, Ibb, Hudaydah, and Amran (UNICEF, 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).

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 Dhalee, Amanat Al Asimah and Ibb in September and October (UNICEF, 31/10/2014).

In Lahj, local partners report that AQAP has placed landmines in Al Hamra area of Al Hawta district in order to guard against any Houthi advance (OCHA 31/03/2015).

The Yemen Executive Mine Action Center (YEMAC) believes areas in north-western Hajjah governorate are contaminated with cluster munition remnants, but it has been unable to survey them due to insecurity. YEMAC has confirmed the presence of cluster munition remnants in four districts on the border between Sada’a governorate and Saudi Arabia (Cluster Monitor, 04/12/2014).

Updated: 05/05/2015

LEBANON DISPLACEMENT

LATEST DEVELOPMENTS

No significant developments this week, 29/04/2015. Last update 22/04/2015.

KEY CONCERNS

- 1,196,560 Syrians are registered as refugees in Lebanon. 11,319 are awaiting registration. Bekaa is hosting 419,835 refugees; Beirut 347,972; North Lebanon 288,156; and South Lebanon 140,597 (UNHCR 26/03/2015).

- More than three million people are directly affected by the Syrian crisis in Lebanon (UNHCR, 25/01/2015).

- 300,000–400,000 refugee children of school age not being educated within Lebanon; between 210,000 and 320,000 are involved in some form of child labour (VoA, 23/01/2015)

- Only 30% of Syrian children born in Lebanon have birth certificates (UNHCR 10/11/2014).

OVERVIEW

Lebanon has the highest per capita concentration of refugees worldwide. While the country struggles to deal with the refugee influx, which exceeds a quarter of the Lebanese population, tensions between host and refugee populations are increasing due to food price hikes, and pressure on health and education systems, housing, and employment. The number of poor living in Lebanon has risen by nearly two-thirds since 2011, to 2.1 million, and Lebanese unemployment has doubled (UNHCR 18/12/2014).

Political Context

The Lebanese Parliament has extended its mandate until June 2017, on the grounds that elections would present too much of a security risk. The Reform and Change bloc boycotted the extension vote and said it would challenge the extension at the Constitutional Council (Daily Star, 12/11/2014).

The Government was formed in February 2014 after ten months of political stalemate. It brings together the Hezbollah movement and its allies, and the Future Movement bloc, who back opposing sides in the Syria war. Neither side has veto power over the other.

Former president Michel Sleiman’s term expired on 25 May 2014. The March 8 bloc, which includes Hezbollah, has boycotted voting for the new president, arguing that the sessions are futile until rival groups agree on a consensus candidate. The next parliamentary session to vote for a new president has been postponed until 22 April (Daily Star, 02/04/2015).

Security Context

Hezbollah’s involvement in Syria, and the alleged presence of Jabhat al Nusra (JAN) and the Islamic State (IS) in Lebanon, raises destabilisation concerns in Lebanon. Longstanding tensions between Lebanon and Israel have flared occasionally in the context of the Syrian civil war.

The security situation in many Palestinian refugee camps is tense. A Palestinian joint security force deployed to the southern refugee camp of Mieh Mieh in late March, less than a year after a similar security plan was implemented in Ain al Hilweh (Daily Star, 24/03/2015). In Ain Al Hilweh, Lebanon’s largest camp for Palestinian refugees, security forces have reported 46 people joined jihadi groups in Syria. Fighters reportedly transit back and forth between Syria and the camp (Daily Star; AFP, 07/04/2015).

Between 14 October and 16 April, there has been a decrease in the number of cross-
border events, but there were at least 45 cross-border shooting incidents, 7 incidents of cross-border-shelling and 16 rocket attacks from the Syrian side of the border. The Government of Syria has also continued to conduct air raids (UN Security council, 22/04/2015).

South Lebanon: On 12 March, shooting was reported between Israel and Lebanon in the disputed Shebaa Farms. The same day, an Israeli soldier was wounded in a shooting incident near Quneitra in the Golan Heights (Daily Star, 10/03/2015; 12/03/2015). There were a number of incidents between Hezbollah and Israel’s Defence Forces at Shebaa Farms and the Golan Heights in January. 13 were killed, including a UN peacekeeper and a General of the Iranian Revolutionary Guard (UNIFIL/Daily Star, 28/01/2015; NYT, 28/01/2015; Washington Post, 19/01/2015; BBC, 19/01/2015; Middle East Monitor, 21/01/2015).

Bekaa Valley: Along its northern and northeastern border with Syria, Lebanon is engaged in a battle against armed groups reportedly affiliated to IS and JAN. However, analysts estimate that no more than 3,000 IS and JAN fighters are in Syria’s Qalamoun area on the border with Lebanon, which is insufficient to wage a large-scale assault on the country (Stratfor, 03/01/2015; Daily Star, 06/01/2015).

The Lebanese army has maintained a near-daily pattern of attacking militant positions on the outskirts of Ras Baalbek in a bid to repulse new possible attacks. In March several militant positions have been seized (Daily Star, 15/03/2015; 28/03/2015).

Tensions have soared between residents of Arsal and the adjacent Syrian village of Qara amid a spate of tit-for-tat killings and kidnappings among residents (Daily Star, 02/04/2015). 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). Armed fighters briefly took over Arsal in August 2014 (OCHA, 15/01/2015).

Tripoli: On 10 January, a double suicide attack by JAN killed nine people and wounded 37 in an Alawite neighbourhood (AFP, 11/01/2015; OCHA, 15/01/2015). Bouts of fighting took place late in 2014 between Sunni groups in Tripoli 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).

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, and the UN will only carry out critical missions to parts of those areas (WFP 03/12/2014).

Border Restrictions

The Government formally agreed to stop welcoming displaced people in October 2014, barring exceptional cases, and asked UNHCR to stop registering the displaced. The policy raised serious protection concerns and resulted in a drop of monthly refugee registrations by close to 80% compared to a similar period in 2014 (UNHCR, AFP 24/10/2014; UNHCR 07/2014; UNCHR, 20/04/2015).

Since January, Syrians wanting to enter Lebanon must apply for a visa. The visa policy and other new regulations make legal stay more complex for refugees (UNHCR, 25/01/2015; 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).

Displacement

 Refugees in Lebanon

1,185,241 Syrians are registered as refugees in Lebanon. 11,319 are awaiting registration. Bekaa is hosting 419,835 refugees; Beirut 347,972; North Lebanon 288,156; and South Lebanon 140,597 (UNHCR 10/04/2015). 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, Idleb, 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: 45,185 Palestinian refugees from Syria (PRS) reside in Lebanon (UNHCR, 28/02/2015). 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).

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 31 March, 1.5 million people are in need of food assistance (WFP, FAO, Food Security cluster, 31/03/2015). As of end January, significant funding shortfalls for the humanitarian component of the Lebanon Crisis Response Plan resulted in a 30% reduction in the value of the food for targeted displaced Syrians and Palestinian refugees from Syria (WFP/FAO, 31/01/2015). Since February, food vouchers have a value of USD 19, down from USD 27 (WFP, 31/03/2015). After a vulnerability analysis, some 3,017 households (15,291 individuals) have been informed they will no longer be receiving WFP assistance as of 1 May 2015 (UNHCR, 27/04/2015).

41 focus group discussions confirmed that families had already been forced to prioritise their needs and adopt various negative coping strategies, notably reducing the frequency and quantity of meals, prioritising children's food needs and increasingly relying on debt (WFP, FAO, FS cluster, 31/03/2015). The highest levels of food insecurity are found in North Lebanon (Akkar) and the Bekaa Valley (WFP 18/12/2014).

A severe drought has resulted in a substantial decline in agricultural production throughout the country (FAO 11/2014). Aid workers say much of the suffering due to water shortages could be alleviated by repairs to infrastructure (VOA, 23/12/2014).

An increased number of livestock have been crossing from Syria into neighbouring countries and potentially spreading animal diseases (FAO, 17/03/2015).

700,000 people are in need of livelihood assistance (UNDP, 31/01/2015). An ongoing assessment indicates that 36% of refugees are severely or moderately economically vulnerable (UNHCR, 04/03/2015). 78% of refugee households are not able to generate an income, citing a lack of work as the main issue. Newcomers arriving in 2014 are in general more vulnerable: 39% of refugees surveyed in July were unemployed for over 12 months in Syria before fleeing to Lebanon (UNHCR 09/2014).

88% of the employed are paid 40% less than the minimum wage. Female Syrian workers earn 30% less than male workers (UNHCR 09/2014).

Palestinian refugees from Syria: More than 37% of PRS have reported cash and food aid as their main source of income (UNRWA, 03/2014). The majority of employed PRS cannot rely on wages to ensure a decent standard of living. Only 11% of PRS households were able to rely on previous savings and remittances.

Health and Nutrition

3.3 million people are in need of healthcare (WHO/UNHCR, 31/01/2015). Health services are available, but are costly (WHO, 01/2015). Short opening hours and lack of trained health personnel further limit access.

72% of primary health centres assessed by UNICEF in 2014 lack sufficient essential drugs, 67% lack sufficient medication for chronic diseases, and 49% lack sufficient antibiotics for children (UNICEF, 08/2014). In early 2013, a nationwide survey among refugees aged over 60 was carried out. Two-thirds of the sample described their health status as poor or very poor. Most reported at least one non-communicable disease, physical limitation and needs for medical aid. Difficulties in affording medicines were reported by 87% (Biomed centre, 20/04/2015).

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).

Data collected in early 2013 showed that 61% of older refugees reported feeling anxious, and significant proportions reported feelings of depression, loneliness, and believing they were a burden to their families (Biomed centre, 20/04/2015)

WASH

3.9 million people are in need of WASH assistance (UNICEF/UNHCR, 31/01/2015). As of mid-2014, 33% of refugee households do not have drinking water, compared to 28% in 2013 (VASyR 08/2014; UNHCR 07/2014).

WASH conditions are worse for refugees in informal settlements, in difficult-to-access locations in the Bekaa Valley and the north, and PRS (UNHCR 07/2014). Informal settlements have limited or no sanitation facilities.

Approximately 12% of households (twice the percentage in 2013) do not have access to a place for washing. Of those who had access, over 7% were sharing bathrooms and latrines with 15 people or more (VASyR 08/2014).

Only 8% of wastewater in Lebanon is treated, and the increase in the population has led to an 8–14% increase in the amount of wastewater generated (Ministry of Environment; UNHCR 16/12/2014).

Waste management: Waste management remains poor in most places where refugees live. Diminishing funding has reduced waste management activities in Bekaa and the north, and municipalities do not have the capacity to collect (UNHCR 09/2014).

Shelter and NFIs

1.8 million people are in need of shelter assistance (UNHCR, 31/01/2015). 55% of Syrians are living in poor shelter conditions compared with 32% in 2013; 36% are sharing accommodation with other families (UNHCR 24/04/2014).

The number of refugees forced to move to tents in informal shelters continues to grow (MSF, 26/01/2015). As of 1 September, 1,392 informal settlements house 186,240 refugees; in June 2012, there were 282 informal settlements (UNHCR 09/2014, 07/2014). Their populations are highly dependent upon assistance and loans (UNHCR/ REACH 11/2014). In Beirut, many Syrian refugees have settled in Palestinian refugee camps, where WASH and shelter conditions are often substandard (IFRC, 03/02/2015).
Palestinian refugees from Syria: The PRS population has increased from 110,000 to 140,000 since 2011: 44,000 are Palestinian refugees from Syria (OCHA 09/2014; 01/2015). PRS households are residing in alarmingly crowded dwellings, with an average of 4.6 persons per bedroom; 8.4 people on average share one bathroom. Most households (71%) reported paying rent for shelter. Slightly over a quarter of households (27%) were hosted free of charge.

Lebanese returnees: At least 20,000 Lebanese nationals had returned from Syria by mid-December (UNDP, UNHCR, 18/12/2014). Assessments indicate that at least 51% of returnees are shelter insecure: 27% live in single-room structures, warehouses, garages, or unfinished buildings; 4% live in informal settlements and collective shelters; 4% are classified as homeless (IOM/OCHA 09/2014; UNHCR 07/2014).

Education

750,000 children are in need of education assistance (UNICEF, UNHCR, 31/01/2015). According to ILO estimates, 300,000–400,000 refugee children of school age are not being educated (VoA, 23/01/2015). 90,000 Syrian refugee children between the ages of 5 and 17 were enrolled in public schools in 2013/2014. A total of 502,000 school-aged Syrian refugee children in Lebanon (aged 3-18 years) are registered by UNHCR (31/01/2015). According to UNHCR, 106,000 Syrian refugee children were enrolled in public schools as of end February (UNHCR, 28/02/2015).

The biggest barrier to schooling is financial. Other obstacles are a lack of awareness of available educational support; a lack of space in public schools; and the cost of transportation. Language barriers and safety concerns contribute to a high drop-out rate among refugee children (REACH 11/2014; UNHCR 09/2014).

Palestinian refugees from Syria: About 6,600 PRS students have enrolled in 60 UNRWA schools for the 2014/2015 school year (UNRWA 03/12/2014). School enrolment rates have doubled since the previous academic year, to 64%. Enrolment rates are lower for PRS living outside camps, and decrease as children grow older (even within the same household): children aged 13 years and older are facing difficulties adjusting to UNRWA’s Lebanese curriculum, taught in English or French.

Protection

Members of the Lebanese army have committed serious violations, including violations of the rights of detained refugees, evictions, and threats of eviction. 45 Lebanese municipalities have imposed curfews on Syrian refugees since the clashes in Arsal in August, which violate international human rights law and appear to be illegal under Lebanese law (HRW 10/2014). As of February, the Lebanese army has ordered 17,000 refugees in eastern Bekaa Valley to vacate informal tented camps, according to UNHCR, reportedly in an attempt to prevent infiltration by militants (Daily Star, 07/02/2015). Around 4,000 people have already left camps and around 65 sites are believed to be at risk (UNFPA, 28/02/2015).

Statelessness: Stateless refugees in Lebanon include Syrian Kurds who were denaturalised in Syria in 1962. Between March 2011 and August 2014, 34,272 Syrian refugees have been born in Lebanon. 72% do not possess an official birth certificate (UNFPA 30/11/2014). The exact number is difficult to ascertain.

Sexual and Gender-based Violence

The mobility of refugee women in Lebanon is reportedly restricted due to fear of sexual harassment and exploitation (UNFPA 13/08/2014). 25% of survivors of reported SGBV cases are under 18 years of age. A weak legal framework, limited resources, and social barriers prevent refugees at risk of SGBV, or victims, from seeking and receiving adequate protection. Other challenges include lack of documentation and growing tension between refugees and host communities.

There are no official statistics on child marriage, which exists in some areas; but the rate has risen with the influx of Syrian refugees (UNICEF, AFP 08/2014).

Child Protection

Only 30% of Syrian children born in Lebanon have birth certificates (UNHCR 10/11/2014). According to ILO estimates, between 210,000 and 320,000 refugee children of school age who are not in school, are involved in some form of child labour (VoA, 23/01/2015). The main factors that cause children to live or work on the streets are social exclusion, vulnerability of households, the influx of Syrian refugees into Lebanon, as well as organised crime and exploitation of children (ILO et al., 16/02/2015). According to UNHCR, consultations with refugees confirmed increased trends in child labour and early marriage. Young people reported security concerns and fear of harassment. (UNHCR, 28/02/2015; 20/04/2015).

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).

On 27 March, eight children were wounded when a landmine exploded in Zebqin, Tyre region (AFP, 27/03/2015). The biggest danger to children is unexploded remnants of landmines,炮弹, and other ordnance. According to UNICEF, around 91,000 children are at risk of landmine-related injuries. The biggest danger to children is unexploded remnants of landmines, cannonballs, and other ordnance. According to UNICEF, around 91,000 children are at risk of landmine-related injuries. The biggest danger to children is unexploded remnants of landmines, cannonballs, and other ordnance. According to UNICEF, around 91,000 children are at risk of landmine-related injuries.
22–25 April: The Gaza Power Plant stop working due to the closure of Kerem Shalom crossing during Israeli holidays (OCHA, 30/04/2015).

23 April: Palestinian armed groups fired two rockets into Israel. Neither caused any damage. Israeli forces responded by with an airstrike on a Hamas military site.

March–April: 11 Palestinians were injured and one killed by explosive remnants of war (OCHA, 30/04/2015; 16/04/2015; 02/03/2015; UNRWA, 12/03/2015).

KEY CONCERNS
- 1.9 million people need humanitarian assistance; 1.3 million in Gaza and 600,000 in the West Bank (OCHA, 31/03/2015).
- 1.45 million people, or 33% of the people in oPt, are estimated to be food insecure (WFP, 19/12/2014). 868,000 people in Gaza alone require food aid (UNRWA, 05/02/2015).
- 1.4 million people are in need of WASH assistance, particularly access to water (OCHA, 31/03/2014).
- Continuity of medical care is threatened by the financial crisis and electricity shortages in both the West Bank and the Gaza Strip (OCHA).
- The ongoing blockade of the Gaza Strip limits access and movement of both people and goods.

Political Context

The Palestinian reconciliation Government, made up of members of both Hamas and Fatah, was sworn in before President Abbas in June, ending seven years of division (AFP, UN, 02/06/2014). It had a six-month mandate, but no formal announcement regarding the passing of the six months was made (UNRWA, 14/12/2014).

On 27 March, the Palestinian Liberation Organisation ended its security cooperation with Israel, in response to the Israeli Government withholding the Palestinian Authority’s tax revenue (Reuters, 05/03/2015). The PA had threatened to appeal to the International Criminal Court (ICC) (AFP, 05/04/2015; BBC, 06/03/2015) but the Israeli Government has now released the funds (AFP, 20/04/2015). The PA announced they will now pay the salaries owed to public employees, which has been a source of unrest for months (AFP, 20/04/2015).

On 26 March, three Palestinian children were injured during clashes between Palestinian security forces and gunmen in Balata refugee camp near Nablus (AFP, 26/03/2015). The United States and Israel opposed the move, citing that oPt is not a sovereign state.

On 28 February an Egyptian court declared Hamas a terrorist group, increasing tension along the Gaza border (UNRWA, 06/03/2015).

Security Context

Gaza

On 23 April, Palestinian armed groups fired two rockets into Israel. Neither caused any damage. Israeli forces responded with an airstrike on a Hamas military site. On 20 April, Egyptian patrol boats fired towards Palestinian boats west of Rafah, southern Gaza (UN, 23/04/2015). Israeli forces opened fired into the Access Restricted Area approximately 18 times in the week ending the 30 April (OCHA, 30/04/2015). Between March 31 and 13 April, members of an armed group fired on Israeli forces and communities in southern Israel and along the border (OCHA, 14/04/2015). There were no casualties.

Unrest

On 29 April, a Palestinian unity rally ended in clashes between Hamas and Fatah supporters. It is unclear if anyone was injured (Reuters, 29/04/2015). Growing tensions have been attributed to the slow pace of reconstruction in the aftermath of Operation Protective Edge.

Operation Protective Edge

Israel launched Operation Protective Edge on 8 July 2014, striking Gaza with intensive aerial bombing, aimed at ending cross-border rocket fire. Hamas and Israel agreed to a permanent ceasefire on 26 August (AFP). At least 2,257 people were reported killed, including 559 children: an estimated 1,473 victims were civilians (UNICEF, 02/01/2015). Thousands of structures were destroyed. On the Israeli side, 66 soldiers, and five civilians, including one child, were killed (OCHA, 29/08/2014).

West Bank and East Jerusalem

On 24 and 25 April, two Palestinian men were shot and killed in the West Bank and East Jerusalem, one after stabbing a police officer. On 25 April a Palestinian allegedly rammed his car into a crowd of police officers, injuring three, in the third deliberate car ramming this year (AFP, 18/04/2015; BBC, 06/03/2015). The same day, a bus in the West Bank was hit by a petrol bomb (AFP, 25/04/2015). In the week ending 27 April, 49 Palestinians were injured by Israeli forces (OCHA, 30/04/2015). Between 31 March and 13 April, Israeli forces shot dead two Palestinians (OCHA, 16/04/2015).

On 26 March, three Palestinian children were injured during clashes between Palestinian security forces and gunmen in Balata refugee camp near Nablus (AFP,
26/03/2015). On 13 March, Israeli forces opened fire on more than 100 Palestinian protesters at the entrance of Jalazun refugee camp, injuring one Palestinian, (AFP, 13/03/2015). Clashes associated with the construction of the West Bank Barrier, or during search and arrest operations, are the most frequent cause of injury and death.

Settler-related Violence

In the week ending 27 April, five Israeli settler attacks on Palestinians resulted in injury or property damage (OCHA, 30/04/2015). There have been two hit-and-run incidents so far in 2015 (OCHA, 09/02/2015). 184 structures have been demolished and 227 people displaced in 2015 (OCHA, 31/03/2015).

590 buildings were destroyed and 1,177 people displaced in 2014. 330 incidents of settler-related violence resulted in Palestinian casualties or property damage in the West Bank and 237 incidents resulted in Israeli casualties or property damage in 2014 (OCHA, 16/02/2015).

Humanitarian Context and Needs

Access

On 14 April, Israeli authorities allowed Palestinian medical staff working in Israel to enter from the West Bank with their own vehicles for the first time in 15 years (AFP, 14/04/2015).

Material for reconstruction in Gaza continues to be restricted and delayed (UNRWA, 31/03/2015). On 14 April, it was reported that the delivery of wood would be heavily restricted. Israeli authorities believe Hamas may use it to construct tunnels to launch attacks on Israel (Gisha 14/04/2015).

Egyptian authorities last opened the Rafah crossing in both directions on 9 and 10 March. It has only opened for 13 days since October 2014 (OCHA, 16/03/2015). 30,000 people are waiting to exit Gaza; 17,000 are registered with the border authority (OCHA, 08/02/2014).

A European Union delegation was denied access to the Gaza Strip by the Israeli authorities in March (UNRWA, 24/03/2015).

Critical Infrastructure

The Gaza Power Plant shut down between 22 and 25 April due to the closure of Kerem Shalom crossing during Israeli holidays (OCHA, 30/04/2015). Sewage systems and the electricity grid remain damaged throughout the Gaza Strip (ICRC, 20/02/2015). Fuel shortages and infrastructure restrictions, mean 12–18 hours of blackout per day (UNICEF, 26/03/2015).

Displacement

As of 6 March, 100,000 people remain displaced since the July–August conflict, and are residing in schools or temporary shelters (IFRC, 06/03/2015).

Between 27 January and 2 February, at least 162 Palestinians were displaced in the Jordan Valley and Hebron by the Israeli military, due to their proximity to an Israeli-declared ‘firing zone’ (OCHA, 02/02/2015).

Food Security

1.45 million, or 33% of Palestinians, are food insecure: 57% of the population of Gaza and 19% of the population of the West Bank (WFP, 19/12/2014). 868,000 people in Gaza require food aid, including 65% of the registered refugee population (UNRWA, 14/04/2015).

Electricity shortages have impacted food production and refrigeration. Delays at crossings are complicating deliveries. Destruction of tunnels bringing inexpensive goods has also impacted access to food and supplies.

Livelihood

The unemployment rate in December 2014 in oPt was 29.1%. Unemployment in the West Bank was 17.4%, and Gaza 42.8% (UN, 21/04/2015).

Health and Nutrition

Child Health

Between 300,000 and 400,000 children are in need of direct and psychosocial support in the Gaza Strip (UNICEF, 26/02/2015, World Vision, 13/04/2015).

WASH

90% of the water in Gaza fails WHO standards for safe drinking water (UNWRA, 24/03/2015). The groundwater level is declining, and the aquifer is infiltrated by seawater and wastewater.

Although solid waste is being collected in most areas, it is being left in temporary sites rather than dumped in designated landfills.

Shelter

An estimated 500,000 Palestinians are in need of shelter assistance (OCHA, 31/03/2015). As of 30 April, 9,161 Palestine refugee houses are still considered totally destroyed by Operation Projective Edge. 5,066 have suffered severe, 4,085 major, and
124,782 minor damage. UNRWA has only received funding to construct 200 homes (UNRWA, 30/04/2015). As of mid-April, none had been built yet (UNRWA, 14/04/2015). In total, approximately 16,000 new housing units are needed to replace homes destroyed or rendered uninhabitable during Operation Protective Edge (Washington Post, 31/03/2015).

Education

The last of the 83 schools damaged or destroyed has been restored (UNRWA, 24/03/2015). 90% of the 252 UNRWA schools in Gaza run on a double shift basis, and some on triple shifts, affecting some 400,000 students (UNRWA, 29/01/2015; OCHA, 12/02/2015).

Protection

18,000 Palestinians live in or near the 18% of the West Bank designated by the Israeli authorities as “firing zones”, areas of land claimed by the Israeli military for training and security purposes. Palestinians who live in these zones face severe access restrictions, recurrent demolition, and incidents of forced displacement and home demolition (OCHA, 12/01/2015). Most of the around 7,000 Palestinian Bedouins and herders, some 60% of them children, have demolition orders pending against their homes, and over 85% lack connection to the electricity and water networks. (OCHA, 23/09/2014).

Child Protection

Approximately 30 children were injured by live ammunition in the first quarter of 2015 (Defence for Children International, 23/03/2015).

Up to 1,500 orphaned children need sustained physiological and social support (OCHA, 04/09/2014; UNICEF, 02/01/2015).

As of December 2014, an monthly average of 185 Palestinian children were in Israeli detention (OCHA, 31/03/2015).

Mines and ERW

In April and March, 11 Palestinians were injured and one killed by ERW across oPt (OCHA, 30/04/2015; 16/04/2015; 02/03/2015; UNRWA, 12/03/2015).

It is estimated that more than 1,900 ERW have yet to be secured (UNRWA, 23/09/2014). In 2014, ERW killed 31 civilians and injured ten in Gaza, and injured 18 in the West Bank (UNICEF, 23/10/2014; 27/10/2014; OCHA, 02/02/2015).

Journalists

It has been alleged that an increasing number of journalists are being targeted and injured by Israeli forces during clashes. Rubber bullet and live ammunition has been used. It is allegedly due to a policy change. Palestinian journalists have been the most affected (AFP, 08/04/2015).

Updated: 06/05/2015

PAKISTAN CONFLICT, FLOODS, DISPLACEMENT, EARTHQUAKE

LATEST DEVELOPMENTS

2 May: At least 44 suspected militants were killed in government airstrikes in North Waziristan and Khyber Agency (local media).

1 May: An Afghan refugee camp of around 1,200 houses that was built on valuable land was demolished in Peshawar (local media)

1 May: A windstorm and heavy rains in the northwest have killed 49 people and injured 26 since 26 April (Government)

KEY CONCERNS

- Nearly 860,000 displaced by military operations in Zarb-e-Azb in North Waziristan and Khyber Agency (UNHCR, 16/03/2015). There were already 1.1 million IDPs in Khyber Pakhtunkhwa and FATA as of mid-December 2013.
- Ongoing chronic drought conditions in Tharparkar in Sindh. As of 23 March, 211 children have died from malnutrition in Thar in 2015 (local media, 23/03/2015; USAID, 04/12/2014).

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.

Security Context

Militant attacks continued in the first quarter of 2015, including in Balochistan. In March, however, militant attacks declined by 23% compared to February, with up to half taking place in FATA (DAWN, 02/04/2015; ACLED, 26/03/2015). Sectarian violence is mounting against Shi’ites, especially in Sindh.

Government military operations in tribal areas have escalated, notably since the Taliban attack on an army-run school in Khyber Pakhtunkhwa in December 2014, which 141 people, in retaliation for government operations in the region (ICG, 05/01/2015; BBC News, 17/12/2014).
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 September 2014, a new branch of Al Qaeda was announced, covering Pakistan (Financial Times, 03/09/2014).

1,781 civilians were killed in terrorist violence in Pakistan in 2014, compared to 3,001 in 2013 (SATP, 01/01/2015).

Federally Administered Tribal Areas (FATA) and Khyber Pakhtunkhwa

In June 2014, the Taliban vowed to start an all-out war against the Government, and the Government launched operation Zarb-e-Azb in North Waziristan Agency. A second operation began on 18 October in Khyber Agency, and was expanded mid-March 2015 to cover Landi Kotal, Jamrud and Bara districts. The military claims to have cleared two-thirds of the tribal regions (local media, 30/03/2015; 23/03/2015). At least 44 suspected militants were killed on 2 May in government airstrikes in North Waziristan and Khyber Agency (local media, 05/05/2015).

On 16 April, militant group Islamic State’s (IS) commander-designate for Pakistan was killed along with two others while planting a bomb in the Toor Dara area in Khyber Agency. IS has not confirmed this (local media, 21/04/2015).

A roadside bomb targeting security forces killed one and injured one in Peshawar at end April (AFP, 28/04/2015). Three people were killed, including two children, after a bomb concealed inside a toy went off in the Swat Valley in Khyber Pakhtunkhwa on 17 March (AFP, 17/03/2015).

Balochistan

The Baluch Liberation Front (BLF) 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.

Three people were killed and 20 injured by an explosion on 16 April (AFP, 26/04/2015). BLF gunmen killed 20 workers after identifying that they were from outside the province on 11 April (local media, 11/04/2015). On 13 April, 13 suspected militants belonging to the BLF were killed in a raid by security forces (Local media, 21/04/2015). One person was killed and one severely injured by a landmine explosion and an attack in Kech district on 11 March. Both attacks were reportedly targeting military administrative staff (DAWN, 11/03/2015).

Sindh

A report from the Human Rights Commission of Pakistan highlights that killing, including both terror attacks and other crime, dropped 34% in the first quarter of 2015 compared to the same period in 2014 (local media, 21/04/2015). Two people were killed and 13 wounded in an explosion targeting police in Karachi on 27 March (DAWN, 27/03/2015). An explosion targeting a Shi’ite mosque killed at least two people and wounded another seven in Karachi on 20 March (AFP, 20/03/2015). A bombing targeting a Shi’ite mosque in Shikarpur on 30 January killed more than 60 people (AFP, 30/01/2015).

Punjab

17 people were killed and more than 70 injured in twin Taliban suicide attacks on churches in Lahore in Punjab on 15 March, sparking protests which led to three more deaths, including two suspected militants (AFP, 16/03/2015). A Taliban attack near police headquarters in Lahore on 17 February killed five and injured 17; the attack was in retaliation for the execution of imprisoned Taliban members (AFP, 17/02/2015).

Humanitarian Context and Needs

Access

Access in Balochistan remains challenging due to insecurity (ECHO, 20/10/2014).

Security Incidents Involving Aid Workers

An explosion in South Waziristan on 4 April killed two bomb disposal technicians (local media, 06/04/2015). At least three peace volunteers were killed and a further two injured on 2 February in a bomb blast in Tirah Valley in Khyber Agency (DAWN, 03/02/2015).

A member of a polio vaccination team and a police guard were killed on 17 March during a vaccination campaign in Sheikhabad in Balochistan (AFP, 17/03/2015). Five people were killed in attacks on polio vaccination teams in Balochistan in February (AFP, 18/02/2015; AFP, 04/02/2015; DAWN, 05/02/2015). Three polio workers were attacked in January, including two killed (OCHA, 03/03/2015).

In 2014, 79 aid workers had been attacked as of November, in 71 incidents mostly in Khyber Pakhtunkhwa, FATA, and Sindh, 51 of which were linked to polio (OCHA, 30/11/2014).

Disasters

Drought

As of 23 March, 211 children have died from malnutrition in Thar in 2015, as the area continues to suffer food shortages due to chronic drought conditions (local media, 23/03/2015). The drought situation is expected to worsen in the coming months (Government, 19/03/2015).

Drought in Tharparkar affected nearly 1.74 million people (259,946 families) in 2014 and killed 650, mostly children. Many families have migrated (USAID, 04/12/2014; Inter Press Service, 03/01/2015; DAWN, 16/02/2015). 50,585 hectares have been damaged in Dadu district, affecting around 50,000 people (DAWN, 21/01/2015).

Rains and Storms

A windstorm and heavy rains hit Peshawar on 26 April and killed 49 people and injured 26, as of 1 May. The information minister for Khyber Pakhtunkhwa declared a state of emergency at all hospitals in the province (Government, 1/05/2015; Al Jazeera, 26/04/2015). Initial assessment showed damage to housing, electricity and
communication infrastructure, crops, and orchards in the outskirts of Peshawar. The motorway was also damaged. Urgent food needs for 12% of interviewees, severe damage to houses for 32%, tents were required for 15%. Charsadda, Nowshera and neighbouring areas were also affected (local media, 05/05/2015; Government, 30/04/2015).

At least three people were killed, 16 injured and hundreds of houses damaged by heavy rains in Balochistan on 14 March and early April (local media, 16/03/2015; 05/04/2015). Five people were killed and 11 injured in rain-related accidents in Shikarpur in Sindh on 3 April (DAWN, 03/04/2015). Strong winds and a hailstorm in Khyber Pakhtunkhwa and FATA killed four people and injured a six on 2 April. A landslide near an Afghan refugee camp in Quetta, Balochistan, killed four the same day (DAWN, 02/04/2015).

Displacement

IDPs

As of 31 March, there were nearly 1.9 million IDPs (284,240 families) in FATA and Khyber Pakhtunkhwa, half of whom were displaced by the 2014 military operations. 30% of IDP families are in Bannu (85,730), another 27% in Peshawar (78,230), and 15% in Dera Ismail Khan (44,210). 3% are in three IDP camps in Khyber, Orakzai, and Kurram agencies in FATA (UNHCR, 31/03/2015). Lack of identification documents, education facilities and psychological support were reported as priority needs, according to a 2014 assessment (Protection Cluster, 31/12/2014).

Returnees

The phased return of people displaced in FATA started mid-March. As of 15 April, approximately 121,300 individuals have returned including, 88,000 individuals in Khyber, 1,540 in North Waziristan and 32,100 in South Waziristan, where a third were not registered (OCHA, 15/04/2015; local media; 05/05/2015). Returning families require reconstruction support (DAWN, 31/03/2015; local media, 23/03/2015). A FATA Sustainable Return and Rehabilitation Strategy has been put into place for the first time to ensure safe and sustainable returns of IDPs (UN, 07/04/2015).

Refugees in Pakistan

Returns of undocumented Afghans from Pakistan have increased in 2015 following security incidents in Pakistan, particularly the Taliban attack in Peshawar in December. As of 23 March, between 48,000 and 55,000 undocumented Afghans had returned home in 2015 via the Torkham border crossing, twice as many as in all 2014 (local media, 30/03/2015; USAID, 16/04/2015). Another 15,000 holding a Proof of Registration card have also reportedly returned between January and March (DAWN, 15/04/2015).

354,670 Afghans are registered as refugees in Pakistan as of end March (local media, 30/03/2015; 23/03/2015). At end December, 1.5 million Afghan refugees were estimated to live in Pakistan, mostly in Khyber Pakhtunkhwa, although numbers are difficult to ascertain. The majority live in host communities (UNHCR, 29/12/2014; 01/11/2014).

At 8 April, nearly 242,732 refugees (35,252 families) from Pakistan had arrived in Afghanistan’s Khost and Paktika provinces since mid-June 2014 (OCHA, 14/04/2015).

Food Security

67 districts are in Phase 2 food insecurity, 28 are in Phase 3, and ten in Phase 4. Phase 3 and 4 districts are mostly in the Balochistan, Sindh and FATA (Food Security Cluster, 24/04/2015). As of February, 1.83 million people were in need of food assistance (Food Security Cluster, 04/02/2015). Economic access to food continues to be the main limitation to household food security. Households in Tharpakar and surrounding districts in Sindh continue to be severely affected by persistent drought; they were in Emergency food insecurity (IPC Phase 4) at November (FAO, 20/03/2015; USAID, 04/11/2014).

Almost half of returnees in FATA (49%) reported taking loans to meet their basic needs in a recent assessment. Overall, only 28% of returnee households had acceptable food consumption (Food Security Cluster, 24/04/2015).

Displaced populations in FATA are also still vulnerable due to insecurity (FAO, 20/03/2015). Most conflict-related IDPs rely on negative coping mechanisms and require support (ECHO, 20/10/2014).

Health and Nutrition

1.1 million people, including displaced populations, are in need of basic health and quality maternal and child health services (OCHA, 31/01/2015). The influx of IDPs has severely strained health facilities and the lack of medical staff to provide care for displaced women is a critical challenge (UN Population Fund, 03/10/2014). Concerns are rising over shortages of vaccines against tuberculosis (DAWN, 26/02/2015).

Polio

22 new polio cases have been reported so far in 2015 from Balochistan, Khyber Pakhtunkhwa, Khyber Agency, South Waziristan, and Sindh (Alhassan Systems, 21/04/2015; local media, 21/04/2015). In 2014, 306 polio cases were confirmed, the previous peak was 199 cases in 2000 (WHO, 24/04/2015; Global Polio Eradication Initiative, 15/01/2015; DAWN, 01/01/2015).

Over 16,400 families across the country refused to get their children vaccinated and 610,333 children were missed during the first two days of the third round of the 2015 National Polio Campaign initiated on 16 March (DAWN, 19/03/2015).

Nutrition

An estimated 2.86 million children and pregnant and breastfeeding women are undernourished in Pakistan, including one million IDPs (OCHA, 31/01/2015). In Sindh, 1.1 million children under five are acutely malnourished; 400,000 of them are suffering from SAM (ECHO, 20/10/2014). In Dadu district, Sindh, 3.8% of children under five were found to suffer from severe acute malnutrition in December 2014 (ACF, 03/02/2015).

In Balochistan, maternal mortality rates have been increasing due to malnourishment and...
WASH

1.1 million people are in need of WASH, including 500,000 IDPs (OCHA, 31/01/2015). Over 80% of water resources in Pakistan’s southern Tharparkar district have become unsafe for drinking due to the drought (Reuters, 02/02/2015).

Shelter and NFIs

1.1 million people are in need of emergency shelter, including 530,000 IDPs (OCHA, 31/01/2015). Inadequate shelter services, overcrowding, harsh weather conditions, and high rental charges are key challenges for the displaced (OCHA, 15/08/2014). 50% of the population in Tirah valley in FATA has been living in makeshift shelters after having been displaced in 2013 (IOM, 14/11/2014).

An Afghan refugee camp that was built on valuable land was demolished in Peshawar on 1 May. The district administration demolished around 1,200 houses after the deadline to evacuate the camp, 30 April, had passed (local media, 05/05/2015).

Education

450,000 children are in need of education, including 205,000 displaced children. Educational supplies are a major gap in the education response (OCHA, 31/01/2015).

Almost 275 schools in Khyber Pakhtunkhwa are non-functional, including 40 in Mansehra and 37 in Swat districts, due to lack of staff, land disputes, and security issues. Around 33% of children in Balochistan are also out of school (DAWN, 13/03/2015; 20/02/2015).

The majority of school-aged Afghan refugees in camps in Pakistan are unable to attend school after sixth grade due to lack of means to attend private schools (Inter Press Service, 22/12/2014).

Protection

An estimated 1.08 million people are in need of protection, including 500,000 displaced people. This group largely consists of IDPs and returnees in KP and FATA. Women, children, the disabled, and the elderly need referral assistance and specialised protection in displacement and returnee areas (OCHA, 31/01/2015).

Sabeen Mahmud, a rights activist, was killed on 24 April, shortly after hosting an event in Karachi, on disappearances in Balochistan: 2,825 people are missing to date (Al Jazeera, 25/04/2015).

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: 06/05/2015

INDIA INTERNAL UNREST, FLOODS

LATEST DEVELOPMENTS

21 April: At least 32 people were killed and more than 80 injured in a storm in Bihar state (local media).

20 April: At least 616,140 people are displaced in India due to conflict and inter-communal violence (IDMC).

17-19 April: Violent protests in Kashmir left one protester dead and about 30 police officers injured (AFP).

KEY CONCERNS

- An estimated 616,140 people are displaced due to armed conflict and inter-communal violence (IDMC, 20/04/2015).

- Landslides and floods triggered by heavy monsoon rains in Jammu and Kashmir affected 1.9 million people and left 67,934 left homeless in September. Cyclone HuhHud in October left close to 1 million people affected. In March 2015, fresh landslides in the area caused the destruction of buildings and evacuations (Times of India, 30/09/2014; OCHA, 20/10/2014; Government, 30/03/2015).

- 35,138 cases of swine flu and 2,172 deaths have been confirmed nationwide since the outbreak began in mid-December (local media, 11/04/2015).

For more information, visit the ACAPS country analysis page.

Political Context

Despite general stability, pockets of the country experience insecurity and conflict. The Government of India, the Government of Pakistan, and Kashmiri insurgent groups have fought over control of the disputed region of Kashmir since the Indo-Pakistan War. Pakistan controls the northwest portion, India controls the central and southern portion and Ladakh, and China controls the northeastern portion (Aksai Chin and Trans-Karakoram Tract). Although thousands have died as a result of this conflict, the situation has become less deadly in recent years. UNHCR-supported elections in 2008 resulted in the creation of a pro-India Jammu and Kashmir National Conference, which formed a state government.

Security Context
Kashmir

During violent protests in Srinagar between 17-19 April, a 16-year-old boy was killed by security forces, and around 30 police officers were injured (AFP, 19/04/2015). Between August 2014 and January 2015, cross-border fighting between India and Pakistan left 23 dead, a majority of them civilians (AFP, 08/10/2014, 29/10/2014, 27/11/2014, 03/01/2015). More than 10,000 villagers were displaced in Samba and Kathua districts in Jammu and Kashmir, seeking refuge in Hariachak, Hiranagar, Plat, Kanha, Baniyari, and Chadwal (Times of India, 07/01/2014).

Chhattisgarh

Tensions are rising in the Bastar region of Chhattisgarh after several Naxal attacks mid-April. In the first major attack of the year, seven policemen were killed and ten injured on 11 April in a Naxal attack in the Sukma district of Chhattisgarh. According to police officials, up to 20 militants were also killed in the attack (Reuters, 14/04/2015). On 12 April, one policeman was killed in a firefight between Border Security Forces and suspected Naxals in Kanker district of Chhattisgarh. On 13 April, five policemen were killed and eight injured in an explosion in Dantewada district of south Chhattisgarh (local media, 12/04/2015; 13/04/2015). On 15 April, a police officer was found dead in Bastar region after he was abducted by Naxals April 7 (local media, 15/04/2015).

Humanitarian Context and Needs

Displacement

As of April 2015, an estimated 616,140 people were displaced in India due to armed conflict and inter-communal violence. 251,000 of these are in Jammu and Kashmir, and around 113,000 in Assam. At least 346,000 of the IDPs were newly displaced between January 2014 and March 2015, with the majority fleeing inter-communal violence in Western Assam (IDMC, 20/04/2015).

The majority of the IDPs live in camps, where they often have limited access to food, clean water and adequate sanitary facilities (IDMC, 20/04/2015).

Humanitarian Context and Needs

Disasters

Avalanche

An avalanche triggered by heavy snowfall in Ladakh region, Kashmir, on 4 April killed four soldiers travelling through the Changla Pass (AFP, 04/04/2015).

Drought

Nine million farmers have been affected by drought in Maharashtra, particularly Marathwada and Vidarbha regions, following a delayed and inadequate monsoon season (Times of India, 06/02/2015).

Health and Nutrition

Swine Flu

As of 11 April, 35,077 cases of swine flu have been confirmed nationwide; 2,172 people have died since the outbreak began in mid-December (local media, 11/04/2015). 6,563 cases, including 439 deaths have been reported in Gujarat, 6,675 cases and 430 deaths in Rajasthan, and 4,259 cases and 12 deaths have been confirmed in Delhi (local media 11/04/2015). Public gatherings in Ahmedabad, the largest city in Gujarat, have been restricted (local media, 25/03/2015). Government restrictions and licensing issues have made it difficult for hospitals to obtain adequate quantities of antivirals (Al Jazeera, 23/02/2015).

Protection

A landmine explosion on 4 April in the Line of Control in Jammu and Kashmir’s Rajouri district killed three civilians and injured one (Government, 04/04/2015).

Displaced women and children living in camps are at significant risk of gender-based violence, including domestic violence, trafficking and prostitution (IDMC, 20/04/2015).

Updated: 22/04/2015

JORDAN

DISPLACEMENT
No significant developments this week, 06/05/2015. Last update 29/04/2015.

KEY CONCERNS

- 628,676 Syrian refugees (UNHCR, 18/04/2015). Another 100,000–200,000 may be unregistered (PI, 12/11/2014).

- Syrians continue to face increasing difficulty accessing Jordan. Official border points have closed or become inaccessible, and entry restrictions have increased (RRP6, 2014-2015).

- Since early 2014, a more rigorous approach to the encampment policy of Syrian refugees has reportedly been implemented (PI, 08/01/2014).

- An estimated 52,000 other refugees are registered with UNHCR, mostly Iraqis (UNHCR, 15/03/2015).

Security Context

Concerns over spiralling crises in Iraq and Syria and extremist infiltration have increased since Jordan joined the US-led airstrikes against Islamic State (IS) in September, and reinforced its participation since the assassination of a captured Jordanian pilot on 3 February. Jordan may increasingly be the target of asymmetrical attacks against its civilians or security services, and social divisions amplify (ISW, 19/02/2015; Al Jazeera, 12/02/2015).

Jordan has a substantial home-grown extremist movement. Thousands of Jordanians are reportedly fighting for opposition groups with links to Al Qaeda, particularly Jabhat al Nusra (JAN) and IS, despite the military’s tight control of cross-border movements (NYT, 12/04/2014). The country is also home to several prominent extremist religious leaders of an older generation, linked to Al Qaeda ideology and who generally support JAN (Al Jazeera, 07/07/2014). Jordan has increased pressure on the Muslim Brotherhood, arresting one of its prominent leaders in November (Jordan Times, 22/11/2014).

Social tensions between refugees and host communities are a concern, primarily due to a sense of competition over housing, jobs, and assistance (Mercy Corps, 12/2014). Despite few notable incidents, refugees report widespread discrimination and harassment (The Guardian, 01/12/2014).

Humanitarian Context and Needs

The influx of Syrian refugees has placed significant additional stress on Jordan's already-strained public services. Public health and education services, which Syrians can access, are particularly affected, and water infrastructure, waste collection, and the cost to the national budget of subsidised goods are significant issues (Government, 12/2014).

Access

International NGOs working in Jordan are required to get all projects approved by the Government, and frustration persists among NGOs about the lengthy approval process, and lack of clear guidelines. Aid agencies assisting Syrians also need to include vulnerable Jordanians as 30% of their beneficiaries; some have faced pressure to increase this proportion to 50% (PI, 06/2014).

Tension between humanitarian agencies and the Government may increase, as the Jordan Response Plan (JRP) 2015–16 attempts to channel the bulk of international assistance to Syrians through government institutions, rather than humanitarian actors (JRP, 12/2014). At 17 March, only 5.5% of the funding for the JRP has been secured (Government, 17/03/2015).

Displacement

Syrian Refugees

As of 6 May, 627,287 Syrian refugees were registered in Jordan; 52% are children and 3.5% are aged over 60. Around 83% live in urban areas and the remainder in three camps (UNHCR, 31/03/2015; 14/04/2015; 27/04/2015; 06/05/2015). Another 100,000–200,000 refugees may be unregistered (PI, 12/11/2014).

A spike in the number of arrivals was reported 12–19 March, mostly due to a surge in fighting in Dar’a governorate in Syria. Daily arrivals averaged 250. Refugees reportedly arrived in poor condition, and were transferred to camps (UNHCR, 31/03/2015; 19/03/2015).

76,000 Syrian refugees have reportedly returned to their country since the beginning of the crisis (Jordan Times, 10/02/2015). As of 27 April, 100–150 people are returning to Syria every day. Drivers include reunion with family members, increasing vulnerability with reduced aid, lack of livelihood opportunities, and a desire to continue education. (UNHCR, 27/04/2015).

Palestinian Refugees from Syria (PRS)

UNRWA records 14,736 PRS who have approached the agency for support since the start of the Syrian conflict (UNRWA, 03/12/2014). 183 PRS, along with a similar number of Syrians, are held in the Cyber City facility near Ramtha, a government-appointed holding facility for Palestinian and Syrian refugees; this number has dropped from 201 at the start of October (UNRWA, 18/11/2014, 28/10/2014, 03/10/2014).

Since late 2012, the Government has explicitly stated that it would not allow PRS to enter Jordan. Those who do enter are subject to a number of protection issues, including refoulement, confiscation of documents and, for those with Jordanian citizenship, de-nationalisation (HRW 05/2014, 04/07/2012). UNRWA reports 106 cases of PRS deported in 2014, a 40% increase on 2013, but warns the actual number of deportations is likely much higher (UNRWA, 03/12/2014).

Non-Syrian Refugees

- An estimated 52,000 other refugees are registered with UNHCR, mostly Iraqis (UNHCR, 15/03/2015).
As of 15 March, UNHCR had registered around 52,000 refugees, including 47,554 Iraqis (UNHCR, 15/03/2015; 02/05/2015). A surge in the registration of Iraqi refugees was reported between September and December 2014, but new registration numbers have significantly decreased in 2015; no reason is known for the decrease (UNHCR, 23/09/2014; PI, 11/03/2015).

Food Security

In October 2014, WFP began to replace blanket food distribution with targeted distributions, and cut assistance to 37,000 urban refugees (WFP, 11/11/2014, CFMSME, 07/08/2014). This reduction in aid has led to negative coping mechanisms. 13% have stated that they would move to camps, 12% would return to Syria, and 25% of those staying said they would withdraw their children from school (WFP, 23/04/2015). Out of about 12,000 households excluded, 38% have been re-included (Multi-Sector Working Group, 13/04/2014).

An additional 34,000 people living above Jordan's absolute poverty line will be removed from assistance; 239,000 living between the absolute and abject poverty lines will see the value of their food vouchers reduced from USD 18/person/month to USD 14; for the nearly 180,000 refugees living under the Jordan abject poverty line, assistance will be increased from USD 18/person/month to USD 28 (WFP, 19/03/2015).

Livelihoods

Two in three refugee households live below the poverty line and one in six lives in abject poverty (UNHCR, 27/04/2015). One in five Syrians in Jordan is supported by the social safety network (Government, 17/03/2015). With an average expenditure 1.6 times greater than income, refugees increasingly resort to a range of coping strategies (UNHCR, 15/01/2015; UNICEF, 10/03/2015). 69% of refugee households surveyed in a December 2014 multi-agency assessment had had to sell their assets or borrow money in the three months prior to assessment (international organisations, 31/12/2014). 18% of the 3,300 beggars arrested in Jordan in 2014 were Syrian refugees (UNHCR, 30/11/2014; Jordan Times, 18/03/2015). 60% of refugees in Za'atari camp earn some form of income within the camp (UNHCR, 27/04/2015).

Health and Nutrition

The Government decision to halt free access to health services for refugees in November 2014 has led to a marked reduction in Syrians accessing such services, and increased returns to camps to receive healthcare. Three in ten families could not access healthcare services when needed between October and March due to financial reasons. Maternal health is of particular concern: half of pregnant women were unable to afford antenatal care, and 60% of new mothers could not afford postnatal care (CARE, 06/04/2015). Mental health services, including severe emotional disorders, and lack of vaccination among many Syrian children are also an issue (IMC, 16/03/2015; UNHCR, 10/03/2015).

Shelter and NFIs

Refugees in Host Communities

Most of the 83% of Syrian refugees living outside camps are concentrated around the major urban areas of the northwest, such as Amman and Irbid. While 91% are renting homes, over half live in substandard shelter, and many are struggling to pay the bills (UNHCR, 01/21/05). A December 2014 multi-agency assessment showed that 25% of refugee households outside camps were living in overcrowded shelters (international organisations, 31/12/2014).

In Mafraq governorate, almost half of refugee households have no heating, a quarter have unreliable electricity (UNHCR, 27/04/2015).

An urban verification exercise, which requires biometric registration of all Syrians outside camps and the reissuing of key documents, has been ongoing since 15 February. As of 29 March, only 4% of urban refugees had received Mol documents (UNHCR, 06/04/2015). Non-participation could affect refugees' legal status and limit their access to government services, although the impact on refugees' access to protection is yet unknown (PI, 24/02/2015).

Camps

Za'atari camp hosts about 83,496 people of concern (UNHCR, 27/04/2015). Since the beginning of 2015, significant numbers of refugees have been returning to the camp from urban areas, probably linked to 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 the camp through both official and unofficial channels (including returns to Syria).

The population of the Azraq camp has risen by 7% in one month to 18,063 refugees. There are 5,366 refugees in the Emirati-Jordanian Camp (EJC), that is a 5% increase in one month (UNHCR, 08/04/2015; 26/04/2015). The EJC has received extensive support, primarily from the UAE Red Crescent; however, refugees have complained about limited freedom of movement in the camp (UNHCR, 15/03/2015; Financial Times, 2014).

WASH

While Jordan has an effective public water system, reports suggest these facilities are under significant strain in areas with high concentrations of Syrians. The per capita water share in the northern governorates has dropped from 110 litres/day to 84 litres under significant strain in areas with high concentrations of Syrians. Municipal sewage and garbage removal services are also unreliable electricity (UNHCR, 27/04/2015).

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Education

59% of the roughly 220,000 Syrian school-aged children in Jordan are enrolled in the public school system. An additional 30,000 are attending informal forms of education, while the remaining 60,000 are not attending any form of education (UNICEF, 19/03/2015).

Barriers to attendance and reasons to drop out include distance; overcrowding; safety in and on the way to schools; lack of resources to pay for school material, and needing to work for household income — especially boys aged 12-17 (UNHCR, 31/03/2015; REACH,
37.5% of Iraqi refugees were not enrolled in schools in 2014, and non-attendance was reported among 40% of those enrolled, mostly for financial reasons, fear of bullying, and level differences (UNHCR, 31/01/2015).

**Protection**

**Entry restrictions**

The average number of Syrians able to enter Jordan on a daily basis has dropped significantly since 2013 (RRP6, 2014–2015). The number and accessibility of entry points has been limited, and entry restrictions have increased, forcing Syrians to travel to remote informal crossing-points in the eastern desert (IOM, 2014). The border crossing leading to Syria’s Dar’a governorate was closed in March for reasons of insecurity (AFP, 01/04/2015). By early April an estimated 2,500 Syrians had accumulated at the Rukban and Hadalat borders (UNHCR, 31/03/2015, updated early April).

There has been increasing evidence in the second part of 2014 that the Government is returning screened refugees to Syria. Jordanian officials maintain that the border is open to refugees, and that Jordan is simply instituting security measures to exclude people connected to “terrorist organisations” (Al Ghad, 14/12/2014; Jordan Times, 11/12/2014). Numbers are hard to estimate. The most vulnerable refugees likely include those without identity documents, or with forged documents, and those who had previously returned to Syria (PI, 29/09/2014).

**Encampment**

Since early 2014, the Government appears to be implementing a more rigorous approach to its encampment policy of Syrian refugees. Significant numbers of refugees are being forcibly returned to camps (NRC-IRC, 13/11/2014, PI, 03/12/2014, 12/11/2014). This has often resulted in separation of family members between camp and urban settings (UNHCR, 27/04/2015).

Refugees living in urban areas are required to obtain a service card from the Ministry of Interior in order to access public health and education services, or register marriages, births or deaths. The Government has instructed humanitarian agencies not to provide assistance to Syrians who do not have service cards. There is no sign this decision has been enforced, but it creates a vulnerability (PI, 08/01/2014, 03/12/2014).

Refugees in camps and who wish to move to urban areas must obtain “bail” from the government. However, large numbers of refugees have left the camps without obtaining bail. The Government has asked UNHCR not to issue asylum-seeker certificates to Syrians in urban areas who left the camp after 14 July 2014 and who did not obtain bail (PI 16/07/2014 R1, PI 07/2014 R1).

**Child Protection**

There are reports of recruitment of child soldiers in Syrian refugee camps in Jordan (Norwegian Peacebuilding Resource Centre, 16/02/2015).

The prevalence of child labour, often resulting in children withdrawing from school, raises concerns (UNHCR, 28/04/2015).

**Women and Girls**

In the first quarter of 2014, about 32% of all registered Syrian marriages were classified as early marriages, compared to 25% in 2013 and 11% in 2011. Early marriage is perceived as a form of security among Syrian refugees, but also as a way to circumnavigate government restrictions, such as the bailout rules in camps (which require a close relative for sponsorship).

**SGBV**

Forced marriage (33%), physical assault (25%) and psychological/emotional abuse (26%) are the most commonly reported SGBV incidents among refugees, according to research in Amman, Irbid, Mafraq and the three camps from 1 May to 31 December 2014. Women and girls make up 90% of people reporting SGBV. 82.1% of incidents disclosed were perpetrated by members of nuclear families (GBVIMS Task Force, 28/04/2015).

Updated: 06/05/2015

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**MYANMAR**

**INTERNAL UNREST, FLOODS, DISPLACEMENT**

**LATEST DEVELOPMENTS**

29 April: 300 people are reported to have fled Pyingso village in western Rakhine state, following continuing fighting between government troops and the Arakan Army (Radio Free Asia, 29/04/2015).

**KEY CONCERNS**

- Repeated bloodshed between Buddhists and Muslims in Rakhine state since 2012, with human rights abuses reported against the Muslim minority (UN).

- 244,000 IDPs, resulting from years of internal conflict, including mainly Rohingya Muslim 146,400 IDPs in Rakhine state (OCHA, 27/02/2014).

**Political Context**

Myanmar’s first democratic elections in 25 years will take place in October or November 2015 (local media, 21/10/2014). Foreign observers will be invited to monitor the election (Reuters, 24/03/2015). On 12 February, the President approved a law allowing a referendum on changes to the constitution. This move could lift Aung San Suu Kyi’s ban from the presidency (Reuters, 12/02/2015). Unprecedented talks were held between President Thein Sein and his political rivals, including Suu Kyi, as well as senior military and election officials, in 2014. Nonetheless, local activists report that the prosecution of...
Peace Negotiations

In 2013, the Government made peace deals with a number of ethnic groups involved in armed insurgency, with the exception of the Kachin Independence Army (the armed wing of the Kachin Independence Organisation, or KIO), and the ethnic Ta’ang army (TNLA). On 12 February, four ethnic armed groups signed a Deed of Commitment for Peace and National Reconciliation, agreeing to build a union based on democratic and federal principles and a nationwide ceasefire, ahead of the 2015 elections (local media, 13/01/2015). On 17 March, the KIO met with the President and affirmed its commitment to the ongoing peace process (Government, 17/03/2015). On 30 March, the Government and 16 ethnic opposition groups agreed on the draft text for the ceasefire agreement. The draft text will be officially signed after a conference of opposition groups (AFP, 30/03/2015).

Security Context

Despite peace negotiations, the security situation remains tense in parts of Myanmar. The Government came under criticism in October 2014, for what has been perceived as a series of offensives against ethnic armed groups in Kachin, Karen, Mon, and Shan states (local media, 20/10/2014). In early December, the United Nationalities Federal Council, the largest coalition of ethnic armed organisations, announced the establishment of the Federal Union Army, an umbrella group that has been trying to negotiate a nationwide cease-fire between ethnic minorities and the national military. It is unclear if this establishment will help or hinder the peace process (VoA, 02/12/2014).

In the west, massive human rights infringements against the Rohingya Muslim minority in Rakhine state continue to be reported.

Kachin State

The KIO still has administrative control over several key areas of Kachin, and there are intermittent clashes between its army, known as the KIA, and the Myanmar army (local media, 06/10/2014). On 15 January, there was fighting in the area of Hpakan. The KIA took the state transport minister and three police hostage, releasing them on 20 January (AFP, 15/01/2015; local media, 20/01/2015). On 26 January, a bomb exploded in Hpakan township, injuring two people. No group has yet claimed responsibility for the attack (local media, 27/01/2014). In November 2014, there were reports of shelling by government forces near Laiza and Mai Ja Yang and an attack on a KIA camp near Laiza, killing 23 members of KIA-affiliated militias (OCHA, 24/11/2014; local media, 28/11/2014).

Kayah State

According to reports from early December by local activists, government military forces have been expanding their presence in Kayah state by various measures, including the confiscation of land (local media, 08/12/2014).

Kayin and Mon States

In November, fighting between a Karen armed group and the military displaced 700 people (WFP, 15/11/2014). Fighting in October reportedly displaced 2,000 people towards Thailand (local media, 08/11/2014). In September, in some of the worst fighting since 2012, mortar fire and rocket-propelled grenades were reported in Mon state’s Kayikma four days towards Mae teammate town near Kayin state’s Myawaddy town (local media, 29/09/2014).

Rakhine State

The Arakan army, an ethnic insurgent group, has been fighting with government troops in Rakhine (formerly Arakan) state’s Kyauktaw township since 17 April. The insurgent group has also opened a new front in western Rakhine state, with the aim to pressure the government to include it among other insurgent groups engaged in peace talks. The group has joined forces with the Myanmar National Democratic Alliance Army (MNDAA) in Kokang region, Shan state (Reuters, 23/04/2015) members of KIA-affiliated militias (OCHA, 24/11/2014; local media, 28/11/2014).

Shan State

Fighting broke out in early February between Myanmar’s army and Myanmar National Democratic Alliance Army (MNDAA), an insurgent group in Kokang area of Shan state near the Chinese border, displacing tens of thousands of people (AFP, 10/02/2015; Radio Free Asia, 23/02/2015).

On 18 February, the President declared a 90-day state of emergency and imposed martial law in the Kokang region. This is the first time military rule has been invoked under Myanmar’s 2008 constitution (Reuters, 18/02/2015; AP, 21/02/2015). Other groups have joined the fight, including the KIA, the Ta’ang National Liberation Army, the Arakan Army and the Shan State Army-North, as well as former Chinese soldiers (Deutsche Welle, 13/02/2014; Al Jazeera, 21/02/2015). 61 soldiers from Myanmar’s military and more than 70 MNDAA soldiers were reported dead on 21 February (international media, 21/02/2015). A prison convoy was attacked, injuring 45 (AFP, 24/02/2015). On 10 March, two children and more than 10 people were injured after a shell exploded at a crowded market in Laukkai (Radio Free Asia, 10/03/2015). The conflict has spilled over across the border in China, with warplanes from Myanmar killing four people and injuring nine others in China. Both parties blame each other for the incident. China’s air force is patrolling the border (Radio Free Asia, 14/03/2015). On 12 April, renewed fighting was reported between the MNDAA and government troops, with opposition group claiming that 35 casualties were reported among government troops and four casualties among MNDAA soldiers (local media, 09/04/2015).

Prior to the most recent fighting, clashes between the same parties had been reported in July, October and December 2014. In 2009, serious clashes between MNDAA and the army almost wiped out the MNDAA (Deutsche Welle, 13/02/2015).

On 28 February, fighting broke out after a member of Shan State Army-South (SSA-S) accused government troops of staging an attack on the SSA-S base in Mauk Maetownship. No casualties were reported. The SSA-S was a signatory to February’s the Deed of Commitment for Peace and National Reconciliation (local media, 3/03/2015).

Humanitarian Context and Needs
According to local NGOs, the delivery of aid to conflict-affected communities in remote areas within Shan and Kachin states is hampered by the categorisation of some areas as "black zones" by the Myanmar army, restricting foreign groups' access (IRIN, 08/10/2014). Insecurity also impedes access.

**Kachin state:** There has been no cross-line humanitarian assistance to non-government-controlled areas in Kachin state since September, due to the volatile security situation and delays in government authorisation – more than 50,000 IDPs are living in camps under KIO management (local media, 05/12/2014).

**Rakhine state:** Access to services is impeded by tension and restrictions on freedom of movement. As of mid-July 2014, a vulnerability mapping exercise showed that 36,000 Rohingya Muslims in 113 isolated villages in Rakhine state have no or limited access to basic services, including markets, education, and healthcare (OCHA). Buddhist Rakhine activists and politicians have campaigned to restrict healthcare and other aid for Rohingyas.

International media reports from the end of July indicate that access to northern Rakhine state along the Myanmar–Bangladesh border is tightly restricted. NGOs and UN agencies say the limited space allocated to them in Sittwe's Southern Quarter is a key constraint to operating at full capacity (USAID 02/07/2014).

Local relief workers in Kyauktaw Township said that military checkpoints in the township were preventing access to and provision of aid to displaced persons (local media, 22/04/2015).

**Shan state:** Roadblocks and border closures are restricting the movement of civilians fleeing fighting between government troops and MNDA. Chinese government officials have increased border controls (Radio Free Asia, 25/02/2015). The Government intensified airstrikes in early March, and recaptured some strategic hills, which has improved access between Laukkai and Chinswehaw, a town near the Chinese border. Many displaced persons in Laukkai are fleeing to China (Xinhua, 9/03/2015).

On 17 February, unknown attackers shot and wounded two people in a convoy of eight Myanmar Red Cross Society vehicles in the Kokang area, Shan state. The vehicles were carrying civilians displaced by fighting in Laukkai (Reuters, 17/02/2015). On 22 February, five more people were wounded in an attack on a local aid organisation's vehicle. Government troops blamed MNDA for both the attacks; the group has denied responsibility (AFP, 22/02/2015).

Nearly 90,000 civilians in northeastern Myanmar are believed to have fled clashes between troops and MNDA and allied insurgent groups since 9 February 2015. 40,000 people, mainly ethnic Chinese Kokang, have crossed the border into China (AFP, 18/02/2015).

450 people have fled the villages of Pinglong, Aung Lan Chaung, Dan Chaung and Kalakya to the village of Zapazeik, Kyauktaw Township, Rakhine state following clashes between Arakan Army and government troops (local media, 22/04/2015). On 29 April, 300 people were reported to have fled Pyingso village for Kywaytaung village, Paletwa township, Rakhine state following continuing fighting between government troops and the Arakan Army (Radio Free Asia, 29/04/2015).

An estimated 244,000 people are displaced and living in camps in Rakhine, Shan, and Kachin states (OCHA, 27/02/2015). As of February 2015, more than half of the 98,500 IDPs in Kachin and Shan states were living in areas where government services are not available (OCHA, 12/2014; OCHA, 27/02/2015).

**Shan:** An unconfirmed but estimated 62,000 people are internally displaced from Kokang region; about 13,000 have fled to central Myanmar through Lashio; another 40,000 people from Kokang and other ethnic minorities have fled to areas near the border (OCHA, 27/02/2015; AFP, 18/02/2015; WFP, 03/2015).

**Rakhine:** 146,000 Rohingya Muslims live in closed camps following inter-communal violence in 2012 (OCHA, 27/02/2015).

**Kachin:** 560 people were displaced in Hpakant, after fighting at the end of 2014 (OCHA, 27/02/2015). An estimated 20,000 IDPs live with host communities in Kachin (OCHA, 27/02/2015).

**Refugees from Myanmar**

According to UNHCR, as of late March, over 415,000 refugees originate from Myanmar. In early November, UNHCR reported that an increasing number of people, mainly Rohingya, are setting out to sea on smuggling boats; many capsize. As of end November, the number of Rohingyas to have fled since early October was thought to have reached 19,000 (AFP, 30/11/2014).

**China:** Since early February, according to unconfirmed media reports, an estimated 40,000–100,000 people, mainly ethnic Chinese Kokang, have fled fighting into Nansan, in Yunnan province, China (AFP, 18/02/2015; local media, 25/02/2015). The Chinese Government has yet to release official figures (AFP, 10/02/2015). Refugees are moving back and forth across the border to seek shelter, food, and employment, according to aid agencies (RFA, 23/03/2015).

**Bangladesh:** Most Rohingyas are denied refugee status by the Bangladeshi authorities. 200,000 reside in unofficial camps or villages where they get little or no humanitarian assistance and almost no protection from human rights abuse. An estimated 30,000
Rohingya Muslims live in official camps and receive assistance from aid agencies. In November 2014, the Bangladeshi Government announced that Rohingya refugees will be relocated from the existing camps, as the area will be developed for tourism (local media, 09/11/2014).

**Malaysia:** As of end November, over 40,000 Rohingya registered with the UN are in Malaysia. Rohingya activists say a roughly equal number are unregistered (AFP, 30/11/2014).

**Thailand:** Since June 2014, movement restrictions have been more strictly enforced; Myanmar refugees are banned from leaving camps, confined to their homes 1800–0600, and threatened with deportation if they do not comply (Refugees International, 29/08/2014). In July, the Thai authorities pledged to send about 100,000 of the 120,000 refugees living in border camps back to Myanmar (UNHCR has registered 76,000 refugees). According to senior Thai military officials, measures are in place to deter boats from approaching the country’s shores (Reuters, 15/11/2014). Rohingya Muslims are reportedly subject to human trafficking in Thailand (international human rights organisations, 12/2013).

**Food Security**

Overall, the food security situation has improved, although recurrent inter-communal tensions have negatively impacted the situation, mainly for IDPs (FAO, 24/09/2014). 70,000 people are food insecure in Rakhine state (OCHA, 31/10/2014).

**Livelihoods**

The trend for poppy cultivation in Shan state, which was once on course to be wiped out ten years ago, has reversed. Poppy cultivation has tripled since 2006, with close to 60,700 hectares of poppy farms, according to UN surveys (NYT, 03/01/2015). Rohingya fishermen of Maungdaw township, Rakhine state, have been barred from fishing since 7 November (local media, 10/11/2014).

**Health and Nutrition**

Access to healthcare is a major challenge in Rakhine (OCHA, 30/09/2014). If Rohingya camp residents wish to leave their camp to see a doctor, they must first obtain a referral by a government doctor and reportedly must also often bribe the security guards (Center for International and Strategic Studies, 22/10/2014). Only patients in the most critical condition tend to reach hospital.

**Nutrition**

In Rakhine state, GAM is above 20% in some areas (UNICEF, 01/02/2015). In June 2014, 2.1% SAM and 6.8% MAM was found among 32,000 children under five screened in Rakhine, indicating a deterioration in parts of the state since March. Severely malnourished children are being referred to Sittwe hospital; fewer referral services, high transportation costs, and fear of travelling to Sittwe are preventing many children from receiving medical care (OCHA, 30/06/2014).

**Shelter and NFIs**

In Rakhine state, 15,000 people are in urgent need of assistance to repair shelters. In Kachin, there is a major need to scale up maintenance and repair work, to reduce the need for reconstruction (OCHA, 31/10/2014).

Displaced people and vulnerable communities in Rakhine have limited access to cooking fuel and energy. The situation is particularly difficult for over 80,000 IDPs who have been in camps in Sittwe Township for over two years. Households in camps and isolated villages are using shelter materials or unsustainable and hazardous materials as fuel, the exchange of food rations for fuel, and over-exploitation of surrounding forest and woodland (OCHA, 30/11/2014).

**WASH**

In Rakhine state, a general deterioration in the WASH situation in camps is aggravating health problems and increasing the risk of waterborne disease (OCHA, 11/09/2014).

**Education**

In Rakhine state, 28,000 vulnerable children require education support. 60,000 adolescents in isolated communities are without any education opportunities (OCHA, 08/2014).

**Protection**

About 200 Shan people are alleged to have been forcibly recruited into the Kachin Independence Army since the start of armed clashes with the army in June 2011 (local media, 11/11/2014). Local media has accused government troops of rape, beatings, and shooting of unarmed civilians in the Kokang region, Shan state (RFA, 25/03/2015).

**Legal Status of Rohingya Muslims**

In early April, the Myanmar Government started taking back temporary identity cards issued to those without full citizenship, including Rohingya Muslims, which expired at the end of March 2015. As of 6 April, 40,000 cards were collected, according to local media (local media, 07/04/2015). These identity cards were part of a citizenship application process. This move came after dozens of protesters gathered in Yangon to call on the Government not to allow people without full citizenship to vote in the referendum on amending the constitution (AFP, 11/02/2015).

Over 800,000 people are estimated to be without citizenship in the northern part of Rakhine state, mostly Rohingya Muslims (UNHCR). Myanmar continues officially to state that the Rohingya Muslims are migrants from neighbouring Bangladesh, thus excluded from citizenship under the 1982 Citizenship Law. The Government has drafted a plan which would force Rohingya Muslims either to register as Bengalis or be detained. Rakhine authorities would construct temporary camps for people who refuse to be registered or who are without adequate documents (local media, 12/10/2015). Rights advocates say this could put thousands of Rohingya at risk of indefinite detention. Accepting the term Bengali could leave the Rohingya vulnerable if authorities class them as illegal immigrants and attempt to send them to Bangladesh (Reuters, 27/09/2014).
42 children were released from the armed forces on 24 January. In 2014, 376 children were released (AFP, 24/01/2014).

**SGBV**

In 2014, the Women’s League of Burma released a report that documented more than 118 victims of sexual violence at the hands of the Myanmar army since Thein Sein’s government took power (local media 26/11/2014).

Assessments in northern Shan state indicate that domestic violence is prevalent in IDP camps. Drug consumption and other negative coping mechanisms among men were identified by the women as a contributing factor. Adolescent girls are exposed to particular protection risks, according to the assessment findings. Cross-border trafficking for the purposes of domestic servitude, sexual exploitation, and forced marriage was identified as a major protection concern by respondents (OCHA, 30/11/2014).

**Mines and ERW**

Around five million people in Myanmar live in mine-contaminated areas (Mines Advisory Group, 05/2014). In Kayah state, around 15–20 people are injured annually, although the number of fatalities is unknown. More than 34,000 IDPs are at greatest risk due to their being in unfamiliar areas.

An assessment in Kachin and Northern Shan states concluded that the majority of reported landmine victims over the second half of 2014 were male farmers, and 56% were displaced people. Most of the accidents registered happened while people were travelling on foot to areas they visit often, such as fields. More than 25% of landmine victims knew the area was dangerous before entering it (UNICEF, 30/11/2014).

According to local media, citing intelligence reports by the Bangladeshi border security forces, Myanmar security forces have planted mines along the border between Myanmar and Bangladesh (local media, 23/11/2014). Myanmar has previously denied this practice, while Bangladesh has claimed to have found and removed mines in the border area.

Updated: 29/04/2015

**PHILIPPINES** CONFLICT, FLOODS, TYPHOON

**LATEST DEVELOPMENTS**

April 22: Dry spells are affecting crops and WASH services in central and southern Philippines (local media).

April 20: 53, 280 people remain displaced in Maguindanao after the military campaign in March (OCHA).

**KEY CONCERNS**

- Over 26,000 people remain displaced ten months after Typhoon Haiyan and more than two million lack adequate shelter or housing (FAO, 09/10/2014).
- 30,000 people who fled fighting in Zamboanga in September 2013 are still displaced (AFC, 20/03/2015).
- The Philippines is one of the most hazard-prone countries in the world, experiencing several large-scale natural hazards a year.
- 53, 280 remain displaced after a month-long military campaign against BIFF in Maguindanao in March (OCHA, 20/04/2015).

**OVERVIEW**

A series of natural disasters, most significantly Typhoon Haiyan in November 2013, has caused widespread damage across the Philippines and affected millions. The overall political situation had been relatively stable until January 2015, when fighting broke out in Maguindanao. Although tensions remain high, the peace deal with MILF has not derailed.

For more information, visit the ACAPS country analysis page.

**Political Context**

Since October 2012, the Government has been engaged in finalising a lengthy peace process with the Moro Islamic Liberation Front (MILF), the country’s largest Muslim separatist group. Draft legislation for the 2014 March Comprehensive Agreement on Bangsamoro was submitted to Congress in September 2014 (AFP, 10/09/2014). The agreement paves the way for the creation of a new Muslim autonomous entity called Bangsamoro, replacing the current Autonomous Region in Muslim Mindanao (ARMM). The government aims to set up the region by 2016. The agreement allows for a Muslim self-rule area in southern Philippines in exchange for the decommissioning of MILF forces.

The disarmament process for Philippine Muslim opposition groups started in September 2014. The decommissioning of a first batch of firearms was scheduled for late 2014 (AFP, 28/09/2014). The parties met on 30 January and signed the protocol for its implementation (Government, 28/01/2015; local media, 31/01/2015). The Independent Decommissioning Body has not yet reported on the process.

**Security Context**

Various armed groups in Mindanao, among them Bangsamoro Islamic Freedom Fighters (BIFF), who split from MILF in 2008, and New People’s Army (NPA), continue their violent opposition against the state. Thousands were displaced by fighting between the Philippine army and BIFF in 2014 (IRIN, 22/07/2014; OCHA). Increased violence between the Philippine armed forces and opposition groups was reported in November and later in...
January as a consequence of government efforts to capture militants.

On 25 January Philippine security forces entered the remote village of Mamasapano, in Maguindanao, which is held by MILF. However, they had not coordinated with MILF beforehand, as required under the ceasefire agreement. In the worst fighting since the peace agreement of 2014, 44 police officers, 11 militants and two civilians were killed (AFP, 26/01/2015, ECHO, 28/01/2015; OCHA, 02/02/2015).

In the aftermath of the 25 January clashes, the national army launched a military offensive against BIFF in Mindanao (local media, 22/02/2015). On 26 February, troops were sent to Cotabato, Sultan Kudarat, and Maguindanao. On 30 March the Philippines military chief announced that the offensive had ended. 139 insurgents were killed, 12 captured, and bomb-making bases seized during the five-week campaign (AP, 30/03/2015). As of 31 March, government reports indicated that 132,870 people have been affected (Government, 31/03/2015). On April 12, BIFF detonated a roadside bomb in a town in Maguindanao as military vehicles were passing through the district. No one was injured in the blast (local media, 13/04/2015). On April 14, the military reported that a substantial military presence will remain in affected areas and that the armed forces will continue to conduct operations against militant groups (OCHA, 20/04/2015).

On April 21, an IED exploded in a shopping centre in Surigao City in northeastern Mindanao. No one was hurt in the explosion (local media, 21/04/2015).

On April 20, a roadside bomb was detonated in Makilala, North Cotabato. NPA is suspected to be behind the explosion, in which two people were injured (local media, 20/04/2015).

Humanitarian Context and Needs

Access

Insecurity in parts of Mindanao and nearby areas is limiting humanitarian access. Concurrent natural disasters have hampered further aid delivery to affected populations.

Disasters

Typhoon Maysak, locally known as Chedeng, weakened into a tropical storm as it made landfall on 5 April in Dinapigue municipality, Isabela province in north Luzon, with no reports of casualties (OCHA, 06/04/2015). 2, 140 people that were pre-emptively evacuated in Isabela and Aurora provinces have returned home. (OCHA, 06/04/2015).

Category 5 Typhoon Hagupit, locally known as Ruby, made landfall on 6 December 2014 in Eastern Samar province (Eastern Philippines), (GDACS, 06/12/2014). 3.8 million people were affected across nine regions (WFP, 15/12/2014). Around 38,100 houses were destroyed and 203,600 partially damaged (OCHA, 15/12/2014).

Displacement

As of February 2015, reports suggest that nearly 500,000 people are displaced. Around 80% of the 3 million displaced in 2014 fled natural disasters. An estimated 95,000 fled conflict and violence in Mindanao. The total number of people displaced by conflict and violence reached its lowest level since 2011 (IDMC, 10/02/2015).

Maguindanao

Fighting in Maguindanao between January and March caused the displacement of 125,000 people. As of 15 April, about 70,000 have returned home, while 53,280 remain in 41 evacuation centres across nine municipalities. Insecurity deters them from going home (OCHA, 20/04/2015; ICRC, 20/04/2015; OCHA, 20/04/2015). Food, clean water, medical supplies, emergency shelter and psychosocial and protection support have been identified as priority needs (OCHA, 31/03/2015). The prolonged dry season is further affecting the health and incomes of the IDPs (ICRC, 20/04/2015).

Typhoon Haiyan

Little information is available about progress towards solutions for the approximately four million people who have returned home, although it is believed that livelihood, food, and housing needs remain considerable in Haiyan-affected areas (IDMC, 10/02/2015). Longer-term assistance is required, such as supporting self-recovery, assisting households in no-build zones, helping with safer reconstruction, and enabling access to healthcare, schools, public transportation, and livelihood opportunities (UNHCR, 30/09/2014). Larger shelter gaps persist in Western Leyte (EU Red Cross, 20/03/2015).

Zamboanga

18 months after fighting in the city, 32,000 people are still in evacuation centres or transit sites, including 15,000 who are staying with host families (OCHA, 31/03/2015). Those in evacuation centres are in tents or makeshift huts made of wood and tarpaulin (ACF, 20/03/2015). In late 2014, disease outbreaks and sanitary conditions were a main concern (OCHA, 09/09/2014). Protection concerns remain critical; women and children in particular are at risk of abuse and exploitation (OCHA, 01/10/2014).

Fires

Almost 50,000 people have been affected after a number of fires broke out in Parola compound in Tondo, northwest Manila, on 2 March. 800 houses have been severely damaged. Around 25,000 people are being housed in six evacuation centres (IFRC, 08/03/2015).

Food Security

Food remains a priority need for people affected by typhoon Haiyan, more than a year after the event. Food prices are inflated and thousands of people still do not have the means to buy food or have sufficient access to markets (EU Red Cross, 20/03/2015).

The mild El Niño this year is expected to further inflate food prices. In southern and central Philippines the drought is intensifying and has already started to affect agriculture production, in particular in Mindanao (local media, 21/04/2015). Affected crops include corn, rice, high value crops, and vegetables (Government, 22/04/2015). The dry spells are expected to affect even more provinces by May (local media,
Due to the dry spells, water levels in dams in southern Philippines have been reduced. In Tampakan town in South Cotabato, 70% of households have reportedly lost sources of drinking water (Government, 22/04/2015).

Health

Dengue: Since the beginning of 2015, the Department of Health has recorded 19,946 suspected cases of dengue and 53 deaths, a 6.5% increase in cases from the same time last year (local media, 17/04/2015). Since mid-February, the weekly number of dengue cases reported in the country has declined (WHO, 08/04/2015).

According to the Health Cluster, diarrhoea cases have been rising in several areas of Ormoc and Leyte since 30 November 2014 (EU Red Cross, 20/03/2015).

Nutrition

A SMART survey of displaced communities of Zamboanga indicated high malnutrition rates among children under five (ACF, 20/03/2015).

Education

Schooling in Pagalungan (Maguindanao province) and Pikit (Cotabato province) has been suspended following the fighting (ECHO, 24/02/2015). Almost 50 schools, and 20,630 children, have been affected (Government, 13/03/2015).

Protection

BIFF continues to actively recruit and train child soldiers (international media).

Updated: 22/04/2015

Democratic People's Republic of Korea

Floods, Food Insecurity, Epidemic

KEY CONCERNS

- Information on the food security situation remains limited. An estimated 18 million people (70% of the population) are food insecure (WFP).
- According to the 2012 National Nutrition Survey, the chronic malnutrition rate is at 27.9% and the acute malnutrition rate is at four per cent of children under five (WFP).
- DPRK is disaster prone, regularly experiencing intense rain, floods and droughts (UN).
- Humanitarian access remains extremely limited (UN).

Political Context

In November 2014, the UN General Assembly approved a resolution condemning DPRK for human rights abuses and recommending the prosecution of its leaders for crimes against humanity at the International Criminal Court (international media, 19/11/2014).

DPRK is subject to sanctions by the UN, EU, and the US, amongst others. The most recent UN sanctions were implemented in a 2013 Security Council resolution following DPRK nuclear threats against South Korea and the US (international media).

Security Context

DPRK–South Korea

In early March, following the annual joint US-South Korean military exercises, DPRK officials reiterated nuclear threats against the US. According to South Korean officials, that same week DPRK fired two short-range missiles off the coast (Reuters, 03/03/2015).

In February 2014, Seoul and Pyongyang held their first high-level talks in seven years, in the Panmunjom truce village. Relations subsequently deteriorated. In April 2014, 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 remains extremely limited. Humanitarian agencies do not have the ability to freely access communities, conduct assessments, or run monitoring and evaluating processes. International sanctions are further complicating assistance, in particular due to the suspension of banking channels for fund transfers (UN, 01/04/2015).

Food Security

An estimated 18 million people, of a total population of 24.6 million, are considered food insecure and are highly vulnerable to shortages in food production. Of these, 1.8 million children, elderly, and pregnant and lactating women, are in particular need of food assistance (UN, 01/04/2015).
The food system in DPRK remains highly vulnerable to shocks and serious shortages exist, particularly in the production of protein-rich crops. Lack of agricultural inputs, such as seeds, fertilizer and plastic sheets, is a fundamental challenge for food production (UN, 01/04/2015). According to FAO, food production remained stagnant in 2014, after an improvement of the harvest in previous years. FAO estimates that the food security situation for 2015 is likely to remain similar to 2014 (FAO, 12/02/2015).

In August 2014, the official Public Distribution System food rations were cut by almost half, from 400 to 250 grams per person per day. The rations have since increased, however there is concern that the decreased ration size reflects general food scarcity (WFP, 25/03/2015).

WASH

Seven million people need access to clean water and sanitation. There is a notable lack of proper sanitation in rural areas and in institutions such as nurseries, kindergartens and orphanages (UN, 01/04/2015).

Education

Lack of teaching/learning materials in addition to the lack of adequate sanitation facilities in school buildings remain a challenge in providing education to six million school-aged children (UNICEF, 26/01/2015).

Health and Nutrition

More than six million people need access to essential health services, including vaccines. Other medical products and life-saving equipment, such as ambulances, remain limited. Furthermore, health facilities often lack functioning water systems, increasing the risks of hospital infections and the spread of diseases (UN, 01/04/2015).

Tuberculosis and malaria are considered major health challenges, with 2,500 people dying of TB every year (UN, 01/04/2015).

Nutrition

Chronic and acute malnutrition remains one of the major contributors to maternal and child mortality (UNICEF, 26/01/2015). According to the 2012 National Nutrition Survey, among children under the age of five, the chronic malnutrition rate is at 27.9% and the acute malnutrition rate is at four per cent, a small reduction from previous years (UN, 01/04/2015). Decreased production of vegetables and soybeans, a major source of protein, contributes to the lack of food diversity for the general population (UN, 01/04/2015).

Reviewed: 22/04/2015
The ceasefire has been broken repeatedly. The presence and use of heavy weapons continues to be reported along the frontline. On 14 April, the February deal was extended smaller-calibre arms (Le Monde, 14/04/2015; OSCE, 21/03/2015).

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 (international media, 15/11/2014). Since 1 December, state allocations to these areas have been halted, including social payments (UN, 15/12/2014).

Security Context

As of 24 April, at least 6,225 people had been killed in the conflict and 15,551 wounded, though the death toll may be higher, since access to conflict-affected areas is restricted (OCHA, 17/04/2015).

Armed groups control most of eastern Donetsk region, including Donetsk’s airport and Debaltseve, and a small area of southern Luhansk region (Government, 13/01/2015; international media, 22/01/2015). Non-government forces reportedly comprise around 35,000 to 40,000 fighters, including up to 10,000 Russian fighters (AFP, 23/03/2015).

Violence has abated since the February roadmap, but fighting continues in certain locations, notably in and around Donetsk airport and to the east of Mariupol. Intensive fighting has been reported in Shyrokyne and around Donetsk city since 11–12 April; casualty numbers are unspecified, as access to the areas is severely constrained (OSCE, 16/04/2015; 12/04/2015). The security situation has significantly deteriorated around Donetsk airport since 26 April, especially around Shyrokyne. The OSCE mission was involved in several incidents over 2–3 May (OSCE, 01/05/2015; 03/05/2015).

Humanitarian Context and Needs

Nearly five million people are affected by the crisis in Ukraine, including 3.6 million in non-government-controlled areas, 954,000 in government-controlled areas in Donetsk and Luhansk, and 310,000 in Dnipropetrovsk, Kharkiv and Zaporizhia regions, the main IDP reception areas. More than 1.6 million are in need of humanitarian support (MSNA, 30/03/2015). At 3 April, 18% of the December 2014 humanitarian plan has been funded (OCHA, 03/04/2015).

Access

Getting in and out of the conflict zone is becoming more difficult (MSF, 23/01/2015). Lack of available and affordable transport, insecurity along exit routes and administrative barriers are preventing civilians from reaching safety (UNHCR, 10/03/2015). Only four international humanitarian organisations are operating in conflict zones (OCHA, 16/03/2015).

Corruption allegations led to the dismissal of key government representatives in March, including members of the emergency services, putting additional pressure on the delivery of humanitarian assistance (OCHA, 27/03/2015).

Administrative constraints are increasingly complicated, and entry in non-government areas is most difficult for humanitarian organisations (Logistics Cluster, 06/03/2015). Obligatory permits to cross the lines separating government- and opposition-controlled areas have been enforced since 21 January but are inconsistently applied. The permit is not easy to acquire and corruption is reported (UNHCR, 20/03/2015; OCHA, 06/03/2015). Since the ceasefire, many instances of extensive delays or refusal of permission for aid trucks to enter non-government areas have been reported (UNHCR, 20/03/2015). Volunteer organisations working in both self-declared republics have made similar reports (HRW, 13/03/2015). Bureaucratic procedures are constraining access to health services and markets in non-government areas (OCHA, 24/04/2015).

Logistical Constraints

The Government has decided to halt public transport in non-government areas, hampering humanitarian access (OCHA, 09/01/2015). Months of conflict have severely damaged Donetsk international airport (international media, 01/12/2014).

Luhansk region is difficult to access due to deteriorated road conditions, UXO and IEDs, and damage to the Stanytsia Luhanska bridge, which can now only support small vehicles (OCHA, 27/02/2015).

Bus connections and private vehicles crossing the administrative border to and from Crimea are often delayed for several days (UNHCR, 06/02/2015). International shipping has been prohibited from the ports of Yevpatoria, Kerch, Sevastopol, Theodosia, and Yalta, on the Crimea peninsula, since 15 July (GARD, 17/07/2014).

Trapped and Hard-to-Reach Communities

Many civilians remain stranded in hard-to-reach areas in conflict and non-government controlled areas. 500,000 people are living in underground shelters in conflict areas, with little or no access to humanitarian aid (OCHA, 16/03/2015). 150,000 remain in non-government-controlled Horlivka in Donetsk (OSCE, 17/03/2015). 5,000 civilians are estimated to be trapped in Debaltseve as of 20 February. Some 4,000 people remain in 21 institutional care facilities in hard-to-reach areas not controlled by the Government (ICRC, 22/02/2015; OCHA, 06/03/2015). 3,000 people remain in Kuibyshevskyi district in Donetsk city and have not been reached by humanitarian aid; priority needs are for shelter, water and health support (OCHA, 22/03/2015).

Displacement

IDPs

By 27 April, nearly 1.26 million IDPs have been registered in eastern Ukraine since March 2014, including 158,300 children and 52,000 disabled people. 60% are pensioners; the proportion rises to 72% and 74% in Luhansk and Donetsk regions, respectively. Key reception areas are areas under government control in Donetsk.
(460,200) and Luhansk regions (170,700), and Kharkiv (165,100), Zaporizhzhia (88,600), Kyiv (88,400), and Dnipropetrovsk regions (73,200) (UNHCR, 30/04/2015; OCHA, 07/04/2015). 19,000 people are estimated to be displaced within Crimea (IDMC, 31/10/2014).

A discrepancy between the real and registered numbers of IDPs is a significantly hampering delivery of assistance (OCHA, 30/01/2015). Many pensioners have registered as IDPs solely to be able to access their pension payments, and then moved back home (UNHCR, 06/02/2015). Other IDPs and affected populations continue to commute to their areas of origin, to receive assistance or scope out damage to their homes (OCHA, 22/03/2015).

IDPs need information, notably regarding evacuation, safe roads, travel permits, markets, laws and regulations, and where to access humanitarian aid (IO, 02/2015).

The Government is encouraging IDPs to move west, to ease pressure on accommodation, but coordination is lacking (OCHA, 13/02/2015; UNHCR, 06/02/2015).

Refugees in Neighbouring Countries

822,700 Ukrainians are seeking asylum or other forms of legal stay in neighbouring countries, including 678,200 in Russia and 81,070 in Belarus (UNHCR, 30/04/2015).

Since July, Russian authorities have prevented Ukrainians from obtaining refugee status in several regions, including border areas and major cities such as Moscow. Most asylum seekers have been unable to collect the required documents and access refugee status (IO, 09/12/2014).

Food Security

More than 1.3 million people are in need of food assistance, including nearly 1.1 million in non-government areas, and 200,000 in government areas in Donetsk and Luhansk. 673,290 people with a poor food consumption score should be prioritised for assistance (MSNA, 30/03/2015). Food shortages have been reported especially in Luhansk, significantly affecting IDPs (OCHA, 10/04/2015; FAO, 26/01/2015). IDPs in Kharkiv are also in need of food and nutrition support (OCHA, 24/04/2015).

A 36% year-on-year rise in the national food price index was reported in February (WFP, 31/03/2015). Increased food prices, disrupted transport systems, high insecurity, remoteness and lack of hard currency limit access to markets for at least 20% of the population in Luhansk, Donetsk, Kharkiv, Dnipropetrovsk and Zaporizhzhia (HNO, 12/2014). Populations in non-government areas are particularly affected (OCHA, 24/04/2015).

Livelihoods

Households’ poor financial situation is the main driver of need (MSNA, 30/03/2015). 2.7 million people are in need of a livelihood (OCHA, 24/02/2015). Access to social services, such as pensions and salaries, remains suspended in many conflict and non-government-controlled areas; teachers’ salaries have been reduced in Mariupol in Donetsk and in non-government areas (OCHA, 10/04/2015).

IDPs from Crimea are often unable to transfer their pensions to mainland Ukraine since banks ceased the use of electronic banking (UNHCR, 06/02/2015).

As of 10 October, nearly 40,000 small and medium businesses in the Donetsk and Luhansk regions had ceased activity (OCHA, 10/10/2014). Industrial production had declined 60% in Donetsk region and 85% in Luhansk by September 2014 (OCHA, 08/12/2014).

Health and Nutrition

More than 1.5 million people are in need of health support, including nearly 1.1 million in non-government areas, and 300,000 in government areas in Donetsk and Luhansk (MSNA, 30/03/2015). The devaluation of the Ukrainian currency means the health budget for 2015 will only cover an estimated 30% of needs (OCHA, 24/02/2015).

There are critical shortages of basic and specialised medicines and medical supplies in eastern Ukraine, especially in conflict areas in Donetsk region, and many people cut off from medical care in non-government areas. Average vaccination coverage in the country is well under 50%, while a significant increase in medicine prices affects access to basic medication and treatment for chronic illnesses (OCHA, 21/03/2015; MSF, 04/03/2015; WHO, 16/01/2015).

More than 100 health facilities in Donetsk and Luhansk regions have been destroyed or damaged, while 30% and 70% of health workers are no longer at their posts in the respective regions (OCHA, 21/03/2015; WHO, 16/01/2015). The safety and security of health workers remains a major concern in conflict areas; targeted attacks on ambulances have been reported (OCHA, 17/10/2014; IMC, 31/01/2015).

HIV/AIDS

Insecurity, damaged infrastructure, landmines, and lack of resources are delaying agricultural activity in many conflict areas (OCHA, 10/04/2015). Some farming enterprises close to the conflict zone have reportedly lost up to 30% of their winter harvest. 80,250 people living in small farming households in rural areas need assistance in the next six months (FAO, 31/01/2015).

13% of wheat, barley, and maize, and up to 30% of sunflower crops were not harvested in 2014 due to displacement, corresponding to losses of 530,000 and 400,000 metric tons (FAO, 31/01/2015).

Refugees

Population in Luhansk, Donetsk, Kharkiv, Dnepropetrovsk and Zaparizhia (HNO, 12/2014). Populations in non-government areas are particularly affected (OCHA, 24/04/2015).
government areas, including over 7,000 people receiving antiretroviral therapy, whose treatment is endangered (HRW, 13/03/2015). Over 800 babies born to HIV-positive mothers in non-government areas are in urgent need of replacement feed (OCHA, 10/04/2015).

**Opioid Substitution Treatment (OST)**

Restrictions on the delivery of narcotic drugs since December 2014 for people undergoing OST in Donetsk and Luhansk regions has resulted in discontinuation of treatment for more than 300 of the 899 patients residing in the area (OCHA, 23/01/2015).

**Mental Health**

Children are showing signs of stress and anxiety in all areas; 200,000 kindergarten and school-aged children are affected, especially in Donetsk region (UNICEF, 03/04/2015; MSNA, 30/03/2015). Soldiers’ access to psychological services is reportedly severely insufficient in Lviv region (OCHA, 22/03/2015).

**Tuberculosis (TB)**

At least 2,400 people in non-government areas with TB, including 530 people with multidrug-resistant TB, lack consistent treatment provision and follow-up, and are at risk of treatment interruption (HRW, 13/03/2015). In areas under government control, stocks of drug supplies for HIV and TB patients were used up in March 2015 (OCHA, 23/01/2015). New TB cases are estimated to have increased by 5% in non-government areas of Donetsk, mainly among the elderly and combatants (OCHA, 06/02/2015).

**Shelter and NFIs**

Nearly 600,000 people are estimated to be in need of shelter assistance, including 270,000 in government areas in Donetsk and Luhansk, 179,000 in non-government areas, and 148,000 in Dnipropetrovsk, Kharkiv and Zaparizhia regions (MSNA, 30/03/2015).

**IDPs**

Housing solutions are provided to only 3–5% of IDPs in temporary collective centres (UNHCR, 20/03/2015). 95% of IDPs are in private accommodation and are often excluded from humanitarian assistance (OCHA, 24/02/2015; UNHCR, 06/02/2015). The absorption capacity within host communities is exhausted in high reception areas and in Odessa. Tensions are rising between the host population and IDPs. A likely increased influx of IDPs to Kyiv could further increase social tensions (OCHA, 16/03/2015; 06/02/2015).

**Conflict Areas**

**Repair needs are high along the conflict line (UNHCR/Shelter cluster, 30/04/2015)**. 60% of Shyrokyne’s buildings have been destroyed by shelling, while shelter and food support remain urgent priorities in Debaltseve, as reconstruction has not yet started (MSF, 21/04/2015; OSCE, 27/03/2015). People left in cities where shelling is ongoing, especially near Donetsk airport, are living in underground shelters, in acute need of basic NFIs (OCHA, 30/01/2015; MSF, 03/03/2015).

In Luhansk region, more than 10,000 houses need emergency repair (OCHA, 13/03/2015). 30,000 in Donbas are without electricity (OCHA, 03/04/2015). 1,522 social facilities are in need of restoration (OCHA, 10/04/2015).

**WASH**

More than 1.3 million people need WASH assistance, including nearly 1.2 million in non-government areas (MSNA, 30/03/2015). More than 2,000km of pipelines have reportedly been damaged in Donbas, significantly hampering water supply (OCHA, 10/04/2015).

Numerous cases of intestinal diseases have been reported in Horlivka, Donetsk region, due to lack of access to clean water (OCHA, 13/02/2015). WASH needs are increasing in health structures, schools and other social facilities in conflict zones (OCHA, 27/03/2015).

**Education**

600,000 people in Donetsk and Luhansk need education support (OCHA, 24/02/2015). The conflict has disrupted the education of up to 25,000 children in Donetsk and Luhansk cities (OCHA, 13/03/2015). Lack of transportation, mines, and overcrowding are main barriers to school attendance in Donetsk, where 523 facilities need repair (OSCE, 22/04/2015; UNICEF, 20/03/2015; 09/01/2015).

50% of teachers are thought to have left non-government areas (OCHA, 27/03/2015). 7,000 students in non-government areas are unable to access their final high school examination, which may lead to displacement (UNHCR, 10/04/2015).

16% of schools in non-government areas have been damaged, and 20% of those in government areas in Donetsk and Luhansk (UNICEF, 03/04/2015; MSNA, 30/03/2015).

**Protection**

A fourth wave of military mobilisation has been launched. Men of military-draft need permission from local military commissions to leave the country (OCHA, 06/02/2015). There are concerns that military-age men are not registering as IDPs for fear of being drafted to the army (OCHA, 10/04/2015).

Human rights abuses by armed groups continued to be reported, including abduction, torture and ill-treatment, unlawful detention, execution, forced mobilisation of civilians, and seizure and occupation of public buildings (Amnesty, 09/04/2015; OHCHR, 15/11/2014).

**IDPs**

The requirement to register as an IDP in government-controlled areas to be eligible for social payments and pensions is causing displacement and confusing overall IDP numbers. People who have not registered are at risk of financial and other hardship (UNHCR 31/12/2014; 23/01/2015). IDPs from Crimea are particularly vulnerable, as transport communications to Crimea have ceased (UNHCR, 31/01/2015).

An increasing number of unlawful refusals of registration and financial assistance,
violations of employment rights, and limited access to social benefits is reported among IDPs (OCHA, 13/03/2015). A mechanism for verifying current IDP addresses could lead to 20–30% IDPs losing their status and benefits; 3,000 IDPs who were not found at their registered address in Dnipropetrovsk have reportedly lost their status (UNHCR, 10/04/2015).

Discrimination and stigmatisation of IDPs on political grounds has been reported (IOM, 22/10/2014).

Minorities

Minority issues have become highly politicised since the start of the unrest. The situation of minority communities in Crimea, including Crimean Tatars and ethnic Ukrainians, among others, is of concern, while there has been an apparent escalation of anti-Roma sentiment in the country (UN, 27/01/2015). An estimated 260,000 Roma live in Ukraine.

In Crimea, at least nine people have reportedly been abducted; intimidation and restrictive laws have been used to silence the media and NGOs, and public protests have been banned since annexation (UNHCR, 31/01/2015; Amnesty, 17/03/2015). All Crimean Tatar media outlets except one were shut down on 1 April for not having re-registered under a Russian law, despite several applications having been submitted on time (local media, 01/04/2015).

Vulnerable Groups

The 48,000 disabled people in eastern Ukraine constitute the most vulnerable in the population (MSNA, 30/03/2015; UNHCR, 20/03/2015).

50% of state and municipal institutions for the care and guardianship of minors in Donetsk and Luhansk regions are not functioning (international media, 07/10/2014). There are also concerns over militarisation of children in non-government areas (Protection Cluster, 04/03/2015).

The situation for older people in Donetsk and Luhansk is worsening, and particularly alarming in remote rural areas and areas with active military conflicts. Lack of pension income means they cannot meet basic needs. Access to food and medicine is almost non-existent for many who are not mobile (OCHA, 20/02/2015). Almost 4,000 remain in nursing homes in non-government areas and need NFI support (Protection Cluster, 28/01/2015; OCHA, 13/03/2015). Members of armed groups are not allowing their evacuation to government areas (Help Age, 25/02/2015; OCHA, 20/02/2015).

Mines and ERW

At least 109 children have been injured and 42 killed by landmines and UXO in Donetsk and Luhansk regions since March 2014 (UNICEF, 31/03/2015). Contamination of agricultural land is a major concern as the planting season begins: 30,000 hectares of land along the frontline in Novoazovskyi and Artemivskyi districts in Donetsk region are reportedly contaminated (UNHCR, 10/04/2015).

Use of cluster munitions by government and non-government forces was reported in seven villages in eastern Ukraine in January and February, killing at least 13 civilians (HRW, 19/03/2015).

Updated: 04/05/2015

NORTH AMERICA

HAITI FOOD INSECURITY, EPIDEMIC, HURRICANE

LATEST DEVELOPMENTS

24 April: Basic food prices have reportedly increased since January, a result of depleted food stocks. Dry conditions are predicted to continue, compounding food security (Government).

KEY CONCERNS

- Ongoing severe dryness, particularly in the southern peninsula and the Central Plateau, and below-average rainfall through December, is likely to result in the second consecutive below-average harvest and increase food insecurity (FEWSNET, 18/12/2014).

- Despite a progressive decrease in cholera cases since January 2013, a spike in cases was reported over the September–November rainy season, and a 300% increase has been reported for January-March 2015 compared to same period in 2014 (PAHO, 03/03/2015; 02/12/2014; OCHA, 31/03/2015).

- 64,680 IDPs remain in 66 camps as a result of the 2010 earthquake. 59% of camps are tents and make-shift sites (IOM, 31/03/2015).

OVERVIEW

An estimated three million Haitians have both chronic and acute humanitarian needs, and are facing displacement, food insecurity, and malnutrition. Haiti’s political and economic situation is extremely fragile, and the country is vulnerable to natural
Disasters, including hurricanes, floods, earthquakes, landslides, and droughts. The resilience of the population is extremely low.

**Political Context**

President Martelly appointed a unity government on 19 January, and on 22 January the new Prime Minister set up a new electoral council. Tensions with opposition demonstrators are expected to persist, however, as new ministers have been reshuffled from the previous Government (AFP, 19/01/2015, 22/01/2015). A calendar for legislative, presidential, and local elections was formally presented on 12 March; the first round is scheduled to start on 9 August. Elections have been delayed since 2011 (AFP, 20/04/2015; UN, 18/03/2015).

Armed criminal violence is reportedly increasing in the country (Alter Press, 24/02/2015). While the UN stabilisation mission, MINUSTAH, maintains police in regions, the Haitian National Police are not yet fully capable of dealing with civil unrest (OCHA, 31/07/2014).

**Humanitarian Context and Needs**

**Access**

A UN peacekeeper was killed on 14 April near Ouanaminthe in Nord-Est department, during a violent protest to authorities’ lack of solutions for the recurring lack of electricity (UN, 14/04/2015).

The number of humanitarian actors has continued to decrease, from 512 in 2010 to 147 by the end of 2014, and government capacity has not always improved, creating critical sectoral gaps (OCHA/UN, 31/12/2014). The UN launched a Transitional Appeal Process in March, requiring USD 401 million, in an effort to address basic development challenges that result in persistent humanitarian needs and risks (OCHA/UNCT, 11/03/2015). Between 20 April and July, the UN peacekeeping force will be cut in half again to 2,350 (AFP, 20/04/2015).

**Disasters**

Heavy rainfall leading to flooding in Ouest and Grande Anse departments over 4-5 April killed six and affected nearly 50,000 people. 8,800 houses were damaged, including 85% in Cité Soleil in West department. Priority needs are for food and NFIs, as well as cleaning of the drainage system (OCHA, 20/04/2015; UN, 15/04/2015; ECHO, 08/04/2015).

Displacement

IDPs

As of 31 March, 64,680 IDPs remain in 66 camps following the 2010 earthquake, including 43% in Delmas (27,914), 16% in Croix des Bouquets (10,636), and 9% in Port au Prince (6,114). 39 IDP sites closed between 1 Jan - 31 March (IOM, 31/03/2015). Priority needs include the provision of minimum basic services, protection monitoring, 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 (OCHHR, MINUSTAH, Protection Cluster, 30/06/2014). 56 camps are targeted for closure, affecting 16,760 IDPs (CCCM, 27/01/2015). Basic services in camps have declined faster than the pace of return or relocation. Only one-third of camps have access to water and access to healthcare is problematic due to lack of infrastructure and funding (OCHA/UN, 31/12/2014).

**Food Security**

Basic food prices have reportedly increased since January, a result of depleted food stocks. Many areas in Sud, Ouest, Nord and Plateau Central are likely to remain Stressed (IPC Phase 2) until at least June, as dry conditions are predicted to continue (Government, 24/04/2015).

As of end 2014, 605,000 Haitians were food insecure, including 165,000 in Crisis (IPC Phase 3) food security due to early exhaustion of food stocks as a result of the drought (OCHA/UN, 31/12/2014).

**Agricultural Outlook**

Urgent agricultural support, including seeds, is required, especially in Cap-Haitien, Gonaïves and Ouanaminthe, Thomazeau, and Plateau Central (Alter Press, 25/03/2015). Around 67,500 people (16,000 families) are reported affected by the drop in cereal production in Central Plateau, Nord-Ouest, Sud-Est, and Ouest departments (FAO, 02/12/2014).

The rainy season in most of the country is late. In parts of Grand-Anse, Sud, Sud-Est, and Ouest departments it is 1-2 weeks late; it is up to four weeks late in the Nord-Est department, and hasn’t started at all in Artibonite department. This has delayed planting activities in some areas (FEWSNET, 20/04/2015).

**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 (MSF, 08/01/2015). Lack of mental health support is also reported (Alter Press, 10/01/2015).

Cholera

The upward trend in incidence continues at the beginning of 2015, with 11,400 new cholera cases reported, including 105 deaths, from January–March, a 300% increase compared to the same period in 2014 (OCHA, 31/03/2015). In March alone there were 3,040 cases reported (OCHA, 31/03/2015). Ten communes in Nord, Ouest, Artibonite, Centre and Nippes departments have been placed on red alert (Alter Press, 13/04/2015).

27,753 suspected cases of cholera and 296 deaths were recorded in 2014, a 53% and 50% reduction on 2013, respectively; an increase was reported over September–November however, with 918 weekly cases on average, compared to 251 in the previous months (PAHO, 30/01/2015; 02/12/2014).
Nearly 733,000 suspected cholera cases and 8,930 deaths have been reported since the start of the epidemic in October 2010 (OCHA, 07/04/2015).

Nutrition

At March, 85,000 children suffered from acute malnutrition, including 17,000 requiring immediate assistance (OCHA/UNCT, 11/03/2015).

Malnutrition rates in IDP camps are of great concern. In May, GAM in 20 camps stood at 12.5% (OCHA, 20/08/2014).

WASH

More than 3.4 million Haitians lack access to safe water (one-third of the total population and 47% of the rural population) (UN, 30/09/2014). 38% do not have access to improved water sources and 69% lack access to improved sanitation (World Bank, 30/09/2014). 60% of schools have no toilets and more than three-quarters lack access to water (HRW, 08/10/2014). Waterborne diseases are one of the main causes of infant mortality (World Bank, 09/10/2014).

Access to water sources in Belladere in Centre department is reportedly limited (Alter Press, 14/01/2015). As of June, 50% of camps lack adequate sanitation facilities; only one-third have a water point.

Shelter

The majority of remaining IDP sites are in Port au Prince (21), Delmas (15), and Leogane (11). 59% of sites are tents and make-shift centres, 9% are mixed sites and 32% transitional shelters (IOM, 31/03/2015).

96% of people left homeless by the 2010 earthquake have been relocated outside camps (IOM, 31/03/2015). Overall, 3.5 million people live in precarious neighbourhoods and informal settlements in urban areas in Haiti, suffering from socio-economic deprivation, and elevated risk of disaster impacts and forced eviction. Around a third do not have legitimate status/rights for the land they occupy. Land disputes and tensions are common and have been accompanied by coercion, violence and forced eviction (OCHA/UNCT, 11/03/2015).

Protection

Children

Five years since the earthquake, many children still show signs of emotional and psychological stress and remain in need of protection; minors in camps are particularly at risk of exploitation, with sexual violence commonplace (Save the Children, 08/01/2015). 

Risk of Deportation

Hundreds of Haitians living irregularly in the Dominican Republic, and more than 300,000 Dominicans of Haitian descent, are at risk of forced expulsion from 16 June, when the regularisation process will end (OCHA, 26/03/2015).

In total, an estimated 600,000 Haitian nationals or people of Haitian descent face an elevated risk of forced expulsion and deportations from countries of the Caribbean region. Most of them are unable to obtain birth certificates (OCHA/UNCT, 11/03/2015). 892 irregular migrants have been repatriated to Haiti in 2015 and returns are expected to rise in the coming months (GARR, 06/03/2015).

Sexual and Gender-based Violence

The number of rapes reported in the first half of 2014 was 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, 30/04/2015

OCEANIA

KIRIBATI CYCLONE

LATEST DEVELOPMENTS

No significant developments this week, 06/05/2015. Last updated 30/04/2015.

Humanitarian Context and Needs

Disaster

Category 5 Tropical Cyclone Pam caused severe bad weather on the islands of Kiribati. 4m waves and heavy rain were experienced on 11–13 March, causing widespread coastal flooding, with damage in the capital, Tarawa (UNICEF, 15/03/2015; Red Cross Movement, 16/03/2015). The southern islands, including Tamana and Arorae, were especially affected by high tides exacerbated by strong winds (FAO, 23/03/2015; international media, 16/03/2015). The storm hit after several weeks of severe flooding (international media, 16/03/2015).
In early April, IFRC estimated the cyclone may have affected up to 4,000 people, but preliminary results indicate the number of affected households is less than anticipated (USAID, 13/04/2015; international organisation, 23/04/2015). Results of initial assessments show that affected people still need assistance accessing water, sanitation, and food (UNICEF, 27/04/2015). Emergency relief items, food rations and WASH supplies are being provided (USAID, 13/04/2015). Key priorities on Tamana Island are water, NFIs and sanitation. On Arorae island, immediate needs included water and water containers, latrines and kitchen utensils (Red Cross Movement, 10/04/2015).

**Access**

Extensive damage was caused to the Dai Nippon causeway, an important connection between Betio town and Bairiki in the most populated Tarawa atoll. Temporarily closed, it re-opened at limited capacity a few days after the storm (international media, 16/03/2015). The Onotoa Island causeway was damaged, preventing vehicles from crossing to the islet (UNICEF, 24/03/2015). There has also been damage to major bridges, disruption to communications, and constraints on travel. There is only one ferry (OCHA, 22/03/2015). In Betio, power and mobile phone networks have been working intermittently (Red Cross Movement, 16/03/2015).

Recovery work has been made more difficult by the high tides, as a lot of coastal infrastructure has been affected (international media, 24/03/2015).

**Food Security**

Seawater has heavily impacted food crops and other valuable plants, and salinization means large areas cannot now be cultivated. Food crops at the shoreline were uprooted or wiped out. The impact on food security is significant, as most families cultivate fruit trees and food plants around their homes (FAO, 23/03/2015).

**Health**

The Betio national hospital, Tarawa, was damaged, requiring temporary relocation of patients. Some ten days after the storm the hospital was running again at its usual location, but much of its equipment has been damaged (international media, 24/03/2015).

**In the week to 19 April, 126 cases of diarrhoea were reported in the country (WHO, 19/04/2015). An outbreak of chikungunya virus was declared in most of the outer islands. Two of the islands have reported more than 200 cases (international media, 27/04/2015).**

On Tamana island, six children under five have been reported with diarrhoea and vomiting (Red Cross Movement, 10/04/2015).

**Shelter and NFIs**

According to UNICEF, on the southern island of Tamana, around 65 houses were reportedly destroyed. Affected families are staying with host families and relocating inland. Another 41 houses were flooded. 407 people were affected by damage to their homes (UNICEF, 24/03/2015; Red Cross Movement, 10/04/2015). On the Arorae island some 20 houses were destroyed, and the affected families have found temporary shelter in schools and community centres (UNICEF, 13/04/2015).

Other sources indicate the damage on Tamana and Arorae islands is much more extensive. Hundreds of homes have been destroyed, leaving about half the communities on both islands displaced (international media, 24/03/2015; USAID, 13/04/2015). In many villages seawalls have collapsed, allowing high tides and storm surges to flood and damage property (UNICEF, 14/03/2015; international media, 12/03/2015; international media, 16/03/2015). Strong winds have also caused damage, prompting families to relocate (Red Cross Movement, 16/03/2015).

**WASH**

Local sources report the main concerns on Tamana and Arorae Islands are fresh water and sanitation (international media, 24/03/2015). Freshwater wells have filled with seawater (UNICEF, 24/03/2015). Toilets and latrines have been destroyed on Tamana island, leaving those rebuilding their houses without sanitation. Many people are practicing open defecation. 51 wells were severely damaged and require rehabilitation (UNICEF, 08/04/2015; Red Cross Movement, 10/04/2015).

Assessments are still underway on Arorae island.

Red Cross staff returning from the outer islands of Kiribati reported an urgent need for water pumps. Wells that were damaged or affected by the waves have been contaminated, with high concentrations of E. coli and salt water. Affected communities requested support to repair and construct toilets (UNICEF, 22/04/2015).

**Education**

Schools are open but lack of transportation means a lot of children cannot reach school (UNICEF, 17/03/2015).

Updated 30/04/2015.

**VANUATU DISPLACEMENT, CYCLONE**

**LATEST DEVELOPMENTS**

No significant developments this week, 06/05/2015. Last update: 29/04/2015.

For more information, visit the ACAPS country analysis page.

**Humanitarian Context and Needs**

**Disasters**

Category five Tropical Cyclone Pam hit Vanuatu in the evening of 13 March 2015, with winds of more than 250km/hr. It has affected the entire country, but particularly the central and southern provinces. 188,000 people on 22 islands were affected by the cyclone and...
are in need of assistance (Government, 17/04/2015). 11 people died (Le Monde with AFP, 20/03/2015). Damage is widespread and severe. The worst impacted provinces include Shefa, Tafea, Malampa and Penama (Government, 16/03/2015). Other reports also indicate that Tanna Island has been severely hit. (Radio New Zealand, 01/04/2015).

Preliminary estimates place the total economic value of effects caused by Cyclone at nearly US$400 million or nearly 50% of Vanuatu’s GDP (Secretariat of the Pacific Regional Environment Programme, 06/05/2015).

Access

The chair of the New Zealand Disaster Relief Forum says transport and communication challenges have prevented aid from reaching some communities (Radio New Zealand, 09/04/2015). The Government of Vanuatu still requires Emergency and Telecommunications support and maintenance on Tanna (ECT, 29/04/2015).

Generators have been put in place but more are needed on Tanna, Tafea province, to ensure that systems are functioning (Government, 09/04/2015).

Food Security

Food shortages are a serious concern for the majority of the population. In all provinces, much of the population will be without local staple food supply until at least mid-June, when fast-growing crops can be harvested if replanting starts immediately (FAO, 23/03/2015).

Agriculture

In Vanuatu, around 80% of the population relies on agriculture for their livelihoods; 70% of the rural population depends on subsistence farming (OCHA, 02/04/2015; WFP, 31/03/2015; FAO, 23/03/2015).

Cyclone Pam destroyed approximately 96% of crops in the country (OCHA, 02/04/2015). In the affected areas, as much as 75% of coconut, 80% of coffee, 80% of leaf vegetables, 70% of taro and 65% of kumala was irretrievably damaged. Agricultural equipment and assets worth over VT 34,500,000 (USD 330,400) were damaged or destroyed. Pigs (69%), poultry (26%), fishing equipment and bee hives (5%) were all significantly affected, with a devastating impact on the availability of protein for households (Government, 17/04/2015).

Tafea, Shefa and Malampa provinces were the most impacted. 90–95% of farming and fishing equipment has been destroyed in the Shepherd Islands and the outer islands surrounding Efate (OCHA, 02/04/2015).

Health and Nutrition

On affected islands, 70 of the 71 health facilities (not including first aid posts) were assessed and 54 had minor or no damage; six were destroyed and ten severely damaged. As of 17 April, 64 facilities are functioning, partially or fully. The Tafea and Shefa provinces are most affected (Health cluster, 11/04/2015; Government, 17/04/2015).

There were two medical evacuations in week 18, lower than in week 12 (over 30) but a lot higher than the average at the same time last year, 0.58 per week (Health cluster, 11/04/2015; 19/04/2015; 02/05/2015).

Acute diarrhoea cases are still reported on Tanna Island and in Shefa province although numbers are lower. Two cases of bloody diarrhoea reported in Tanna (Health Cluster, 02/05/2015). 45 cases of acute fever and rash (AFR) on Erromango were diagnosed as chicken pox. There has been an increase in reports of AFR in Port Vila and influenza-like illnesses Tanna. Cases of the rare mosquito-borne Zika virus have been confirmed (Australian Broadcasting Corporation, 28/04/2015). Symptoms of Zika virus are relatively mild.

It is expected that at least 50% of children under five (17,000 children) will be at risk of worsening childhood illnesses and nutritional status (OCHA 15/03/2015). Measles is present in Vanuatu, and a breakdown in sanitation could facilitate transmission (UNICEF 15/03/2015). Immunisation and child nutrition are priorities (OCHA 15/03/2015).

Nutrition

Adequate nutrition is required for over 160,000 affected people, in particular nutritional support for pregnant and lactating women and children under five years (OCHA, 03/04/2015). 27 children, aged 6-59 months, were admitted for inpatient treatment for severe acute malnutrition in Santo, Tanna, and Port Vila (Health Cluster, 02/05/2015).

Shelter and NFIs

Approximately 13,574 houses were damaged (Government 17/04/2015). More than 70% of houses on Tanna, Erromango and Emae have been destroyed or seriously damaged. Between 40% and 70% of houses have been destroyed or seriously damaged in East Ambrym, Paama and the Shepherd Islands (WFP, 31/03/2015). As of 1 April, OCHA estimates that 75,000 people are in need of shelter assistance (OCHA, 01/04/2015). As of 17 April, the Government highlights that gaps remain on Tanna and urban Port Vila (Government, 17/04/2015).

WASH

A second harmonised assessment released 17 April showed that two-thirds of the communities surveyed had severe WASH needs requiring immediate attention (Government, 17/04/2015).

Water

110,000 people are in need of clean drinking water (OCHA, 03/04/2015). A tenfold increase in WASH supplies will be needed for the next 2–3 months (OCHA 15/03/2015). More than 50% of the communities reported access to less than three litres of drinking water a day. An estimated 68% of the rainwater harvesting catchment structures are broken, 70% of the wells have been contaminated, and piped water systems have been damaged.

The provinces of Tafea and Shefa have much less access to water than Penama and Malampa. In particular, north Tanna and the Shepherd Islands (Mataso, Tongariki, Puninga) have poor access to fresh water (Government, 17/04/2015; Logistics Cluster, 28/04/2015). Water quality is poor everywhere except Port Vila, but only half of the...
households reported using water treatment methods. Health risk is high (Government, 17/04/2015).

Sanitation and hygiene

68% of the sanitation superstructures have been destroyed, such that open defecation was reported to be up to 45% in Tafea. Open defecation presents urgent health, protection and dignity risks to children, women, and vulnerable groups (Government, 17/04/2015).

Nearly half of the households have access to soap, but less than 30% are using it. Use of soap was as low as 7% in Penama. Two-thirds of communities did not have access to sanitary protection materials for girls and women, especially in Malampa (Government, 17/04/2015).

Education

More than half (53%) of all assessed primary and secondary schools were found to have been affected: 16% have been destroyed; 24% have sustained major damage; 13% have sustained minor damages (Government, 17/04/2015). Latest assessments indicate 60,000 school-aged children have been affected (UNICEF, 22/04/2015).

Most of the schools in the Tafea province and half of the schools in Shefa province were damaged (Government, 17/04/2015). Materials and resources in many schools have been damaged and are needed, in addition to regular supplies (OCHA, 01/04/2015).

Protection

Displacement continues to be a concern with some people still in unofficial temporary shelters. There are gaps in communication and a lack information about remote affected communities. Physical security for the affected population is at risk with increased crime rates in the aftermath of the cyclone. Assessment identified a gap in attention toward housing, land and property issues. Reporting mechanisms and support services for survivors of gender-based violence or child abuse are inadequate. Targeted assistance is needed for persons living with disabilities, female headed households and older persons (Government, 17/04/2015).

Updated: 07/05/2015

SOUTH AMERICA

COLOMBIA

CONFLICT, DROUGHT, DISPLACEMENT, INSECURITY

LATEST DEVELOPMENTS

No significant developments this week, 05/05/2015. Last update 30/04/2015.

KEY CONCERNS

- 4.2 million people are in need of humanitarian assistance (OCHA, 20/01/2015).
- 5.7 million cumulative IDPs, including 224,300 in 2014 (IDMC, 10/2014; HDMX, 2015).
- From January-March 2015, 186,390 people have been trapped in their communities due to armed violence (OCHA, 18/04/2015).
- Approximately 1.3 million people are affected by natural disasters (flood, wind, heat wave, drought) every year (OCHA, 24/02/2015).

OVERVIEW

Five decades of armed violence coupled with the country’s frequent natural disasters have had serious humanitarian consequences. Forced displacement, landmine contamination, and gender-based violence are among the major concerns. For rural communities, movement restrictions by armed groups limit access to basic health services, crops and labour markets, especially in the country’s Pacific region.

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 stated aim is to “end social, political, and economic inequalities”. The ELN was founded on Marxist-Leninist ideals (In Sight Crime). Attempts at peace negotiations in the 1980s and 1998-2000 failed. The latest FARC-EP–Government peace negotiations began in November 2012 in Havana, Cuba. Agreements have been reached on agrarian
reform, political participation, and illicit drugs. Negotiations resumed on 2 February and will focus on the end of the armed conflict (World Bulletin, 20/01/2014; AFP, 02/02/2015). Another round of peace talks began on 25 February prior to the arrival of former UN Secretary General, Kofi Annan, to Cuba (international media, 25/02/2015). On 3 March, the FARC-EP declared a peace agreement wouldn’t be signed if its members were to be tried and jailed (AFP, 03/03/2015).

Security Context

The intensity of the armed conflict has decreased substantially since peace negotiations began in 2012. Disarmament, demobilisation and reintegration programmes have been operational since 2003: 56,903 people have been demobilised from armed groups, including 47,770 people who have gone through reintegration programmes with the Colombian Reintegration Agency (Government, 16/12/2014).

Nonetheless, violence and insecurities persist, including kidnappings and extortion by armed groups and BACRIM.

On 20 December 2014, FARC-EP announced a unilateral ceasefire (Washington Office on Latin America, 2014). On 7 February, the FARC-EP stated that it would be ready to give up its arms and become a political party if the Colombian Government meets its side of recent agreements, which include a bilateral ceasefire, the suspension of investments in mining projects, and the reform of armed forces and state security (El Espectador, 07/02/2015). A month later, the Colombian Government and FARC-EP agreed to remove landmines and explosives, with a target of 2025 to complete demining (Reuters, 09/03/2015). On 10 March, the Colombian Government declared it would halt bombing raids against FARC-EP for one month (Al Jazeera, 11/03/2015; BBC, 11/03/2015). On 19 March, the FARC-EP threatened to end the unilateral ceasefire unless the President called off all attacks, stating that while air raids had stopped, other offensive manoeuvres had continued (Reuters, 19/03/2015). On 9 April, the President announced an extension to the suspended air strikes against the FARC-EP. The suspension was lifted following an attack by the FARC-EP, which left eleven soldiers dead and eighteen wounded in Cauca department (local media, 15/04/2015).

Despite the recent attack on the Colombian armed forces by the FARC-EP, both the government and the armed group remain committed to continuing the peace negotiations (Reuters, 21/04/2015; Colombia Reports, 21/04/2015).

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, Norte de Santander, Cauca and Antioquia. In November 2012, the group joined peace negotiations with the Government.

**ELN**: The National Liberation Army is a left-wing militant group formed in 1965 and composed of 1,500 fighters. On 7 January, it stated that it intended to join the peace talks and would consider disarmament (AFP, 07/01/2015; BBC, 07/01/2015). The ELN has been active in Arauca, Norte de Santander, Nariño and Cauca Departments (Kienyke, 2013).

**Government forces**: The Government of Colombia's strategies to combat non-state armed groups have been closely linked to eliminating the cultivation of illicit crops in the country, which finance the armed groups.

**BACRIM and post-demobilised armed groups**: Criminal gangs (bandas criminales) under the names Black Eagles, Erpac, and Rastrojos, among others, are generally made up of former paramilitary fighters and another former armed group, the United Armed Forces of Colombia (AUC). They are involved in drug-trafficking and extortion throughout the country and in Venezuela and Panama. These groups are particularly active in Antioquia department, as well as the Pacific and Caribbean regions (BBC 29/08/2013).

Conflict Developments

During the fourth quarter of 2014, Antioquia, Cauca, Arauca, Meta, and Norte de Santander departments were the most affected by armed activity (OCHA, 07/01/2015). Following the 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).

Recent Incidents

On 14 April, an attack by the FARC-EP left 11 soldiers dead in Cauca department; in nearby Suarez municipality five civilians were killed by an unidentified group (local media, 15/04/2015; 16/04/2015). The FARC-EP recommitted to the unilateral ceasefire in the days following the attack in Cauca department (international organisations, 21/04/2015).

On 6 April, three police officers were killed by an unidentified armed group in Norte de Santander department, bordering Venezuela (Colombia Reports, 06/04/2015).

Three FARC-EP fighters and one soldier were killed on 22 March when members of the FARC-EP were caught collecting an extortion payment from a farmer (local media, 23/03/2015). A suspected ELN attack against the police in Bogotá in March resulted in eight injured (local media, 12/03/2015).

Humanitarian Context and Needs

4.2 million people are in need of humanitarian assistance in Colombia, including 1.5 million affected by natural disasters and 262,000 in trapped communities, primarily in Chocó department and made up mostly of indigenous communities and Afro-Colombians (OCHA 2014; 20/01/2015).

Access

**Trapped Communities**

From January-March, 186,390 people have been affected by access and mobility constraints, including 28,790 who were affected by access constraints in March (OCHA,
18/04/2015). Since end February, movement has been restricted and humanitarian assistance blocked for 1,200 members of indigenous and farming communities in Caceres, Antioquia department, due to fear of potential clashes between ELN and a ‘demobilised’ armed group (OCHA, 11/03/2015). A community of 912 Eperera Siapidara, an indigenous people, are confined to a rural zone in Timbiquí, Cauca department, due to security threats – school was cancelled and daily activities ceased (OCHA, 19/03/2015). Some 990 people are confined to their homes in Bagado, Choco department, due to a military offensive on the ELN from end March to 19 April (OCHA, 27/04/2015).

Disasters

From January 2014 to February 2015, 1.3 million people were affected by natural disasters (OCHA, 24/02/2015). In March, 22,370 people were affected by natural disasters (OCHA, 18/04/2015).

Drought

In January and February, the prolonged drought, primarily in the Caribbean coast, affected 86,500 people. It limited access to water, affected food security, health services, and education because classes were cancelled (OCHA, 28/02/2015). Six forest fires have been reported in the department of Antioquia (Ituango, Anzá, Urrao, Caicedo, Itagui and Medellín municipalities). 24 of the southwestern municipalities are on red alert (PAHO, 13/03/2015). As of early April, more than 600 emergencies have been recorded due to forest fires in southern Atlantic department (Manati, Candelaria, Suan, and Campo de la Cruz municipalities).

Floods

Heavy rains affected 1,200 people and killed one in the departments of Tolima, Valle del Cauca, and Caldas on 22 March, marking the beginning of the rainy season. Many houses were destroyed and the Cahaveral River in Valle del Cauca department overflowed (RedHum, 23/03/2015). On 21 March, 100 people were affected by a landslide in Bogota. Three people were injured and 150 houses were damaged in Bogota (ECHO, 27/03/2015).

Some 2,000 people were trapped when heavy April rains caused the San Juan, Taparto and Santa Rita rivers to overflow, destroying buildings and bridges in Antioquia department (PAHO, 14/04/2015).

Nariño department has been one of the most affected by heavy rains in terms of damaged infrastructure and livelihoods; more than 400 people have been left without shelter (El Espectador, 21/04/2015).

Earthquake

On 10 March, a 6.6 magnitude earthquake at a depth of 147km occurred in Santander department in the north. 200 households were affected as well as some roads and buildings (ECHO, 11/03/2015; Government, 11/03/2015).

Displacement

IDPs

Colombia has 5.7 million IDPs (IDMC, 10/2014). In 2014, there were 224,300 new IDPs (OCHA, 20/01/2015), compared to 228,526 in 2013 (Reuters, 25/02/2015). 39% of the IDP caseload between 2012 and June 2014 was concentrated in the Pacific region. In 2014, new displacement was primarily concentrated in Cauca and Chocó (OCHA, 07/01/2015).

The total number of people displaced by armed violence from January-March 2015 was 3,040, including 1,470 who were displaced in March. This is an 8% reduction compared to September-December 2014 (OCHA, 18/04/2015). OCHA reports that those responsible are primarily the ELN, post-demobilised armed groups and other unidentified armed groups (OCHA, 18/04/2015).

Chocó: 655 people were displaced at end February from rural communities in Bajo Baudó, Chocó department due to clashes between the ELN and a post-demobilised armed group. Those affected include five indigenous Embera communities and three Afro-descendant communities. More than 1,000 others are trapped and at risk of displacement. Access to the region is difficult, and populations have limited access to food, water, education, and health services (OCHA, 04/03/2015; 06/04/2015). 711 indigenous people from five communities in Bagado, Choco department were displaced due to a military offensive against the ELN from end March to 19 April (OCHA, 27/04/2015).

Guaviere and Meta: Two minority groups, the Nukak (120 people), at risk of extinction, and the Jiw (136 people), who were displaced from 2001–2005, are in Guaviere and Meta departments, respectively, and require assistance with shelter, WASH, and education. The Jiw community in Puerto Concordia, Meta, also needs seeds for food security and livelihoods (OCHA, 21/03/2015; 31/02/2015).

Antioquia: 145 people from Angostura municipality, Antioquia department were displaced due to clashes between armed forces and armed groups (Instituto Popular de Capacitacion, 23/04/2015).

Cauca: 909 indigenous people have been displaced due to the presence of an unidentified armed group on the reserve Calle Santa Rosa, Timbiquí municipality, since 3 March (OCHA, 22/04/2015).

Returnees

206 Embera Katio, an indigenous people, will return to Pueblo Rico municipality in Antioquia department (Government, 19/03/2015).

Colombian Refugees in Neighbouring Countries

400,000 Colombians have sought refuge in neighbouring countries. Some 900–1,000 arrive in Ecuador every month; the rate has dropped by 30% since 2012 (Nuevo Municipio, 26/11/2014).

Food Security

1.2 million people are food insecure, due to in part to low food production, poverty and...
internal displacement from conflict (OCHA, 20/01/2015; USAID). 557,000 require food assistance. Indigenous communities in Nariño are among the most affected (OCHA, 20/01/2015).

Health and Nutrition

Only 30% of victims of armed conflict have access to healthcare (OCHA, 20/01/2015).

Chikungunya

At least 213,000 people have been infected with chikungunya, including 90,000 who are predicted to suffer from long-term arthritis as a side-effect of the disease. The outbreak began in September 2014 (local media, 19/03/2015; 12/03/2015). The Caribbean region is the most affected (local media, 19/03/2015).

30,230 cases of chikungunya were reported from November 2014 until April 2015 in the Valle del Cauca department (local media, 07/04/2015).

WASH

1.1 million people are in need of WASH (OCHA, 20/01/2015). Only 35.5% of the population consumes safe drinking water, with only 15% of rural areas consuming treated water (OCHA, 20/01/2015).

Flooding in Quibdo, Bojaya, and Alto Baudo (Choco department), has caused river sedimentation, cutting off access to water (OCHA, 03/02/2015).

Attacks on the petroleum industry in Putumayo department in 2014 are still affecting nearby communities, who have little access to water. Some companies have taken charge by providing each family with 20-40L of water per week, which is below standards (OCHA, 23/04/2015).

The indigenous communities on the reserve Calle Santa Rosa rely on four water tanks that do not meet their needs, resulting in use of river water contaminated by mining activity (OCHA, 22/04/2015).

Shelter and NFIs

916,000 people need shelter (OCHA, 20/01/2015). Many of those displaced by armed conflict come from rural areas and have difficulty re-obtaining rights to their homes upon their return. A legal process is in place in the departments of Atlantico and Magdalena in northern Colombia, though some claimants have received threats from paramilitary groups (Amnesty, 23/01/2015).

Protection

Afro-Colombians and indigenous peoples are highly vulnerable groups, as they are minorities and generally live in areas more likely to be trapped by conflict (NRC, 09/2014).

In 2014, there were 626 registered attacks against human rights defenders, a 147% increase compared to 2013. 73% of attacks were carried out by post-demobilised armed groups. Many local NGOs are concerned that successful peace negotiations may not result in a decrease in such attacks (OCHA, 28/02/2015).

Child Protection

There are approximately 2,000 underage fighters in the FARC. The government is urging for their release (Reuters, 15/04/2015).

Reports show that since peace negotiations began in 2012, 76% of children fighting with the FARC-EP and 18% with the ELN have been reintegrated into society (UNICEF, 2014).

Sexual and Gender-based Violence

52% of displaced women have suffered some type of sexual violence after displacement, according to a study by OHCHR. Women in the Pacific region are particularly affected (NRC, 09/2014).

Updated: 06/05/2015

BOLIVIA DROUGHT, FLOODS, FOOD INSECURITY

LATEST DEVELOPMENTS

No significant developments this week, 07/05/2015. Last update: 29/04/2015.

KEY CONCERNS

- 1,159,100 people affected by heavy rains, 32 people have died and six are missing (ECHO, 14/04/2015).
- Around 130,000 affected by drought (Government, Media, 10/12/2014).
- A series of natural disasters has affected Bolivia since the beginning of the rainy season in October 2013 and has had a severe impact on livelihoods and food security.

Humanitarian Context and Needs

Disasters

Drought

1,545 hectares of crops from 461 families (1,844 individuals) suffered from drought in Cochabamba (local media, 28/04/2015). Around 130,000 people have been affected by drought, including an estimated 20,000 farmers (Government, 05/01/2015).

Estimates indicate that close to 63,000 hectares of crops, including rice, maize, and cassava, have been negatively impacted. Another 120,000 hectares of soy have been lost in Cuatro Canadas and Pailon, Santa Cruz (local media, 22/02/2015). It is estimated that 20,000 farmers in 20 municipalities in Cochabamba are affected (Government,
The Ministry of Agriculture and Livestock estimates that 132 municipalities have an 80% risk of major drought, while 90 municipalities have a 50% risk of flooding. Departments most at risk are Beni, Pando, and Santa Cruz (local media, 28/04/2015).

Heavy Rainfall and Floods

159,203 people have been affected by heavy rains since last October. The three provinces with the most people affected are Chuquisaca, with 38,585 people affected; Cochabamba, 39,508; and La Paz, 38,442. A total of 20,846 hectares of land have been affected. The rains have had an impact on 119 municipalities in 9 departments. 32 people have died and six are missing (Government, 22/04/2015, ECHO, 14/04/2015).

Hailstorms have damaged 400 families’ (1,600 individuals) agricultural production in Potosí as well as 42.75 hectares in Cochabamba (Local media, 28/04/2015; Government, 28/04/2015).

On 21 April, flooding in Guanay, La Paz province, affected 150 people and damaged 15 houses (local media, 21/04/2015). As of 5 May, flooding is reported in Cochabamba, Santa Cruz, Beni, Pando y Chuquisaca, where orange alert is declared. Number of affected people is not yet available (local media, 05/05/2015).

Landslides

In Cochabamba, 66 people were evacuated due to the landslide risk where their houses were built (Government, 09/04/2015).

Cold Wave

Cold waves have affected 2,200 people in three municipalities of Oruro department (local media, 27/02/2015).

Access

On 27 February, a bridge connecting Cochabamba to Santa Cruz was destroyed. Reconstruction of this bridge will take six months, and metal bridges will be set up in the meantime (Government, 05/03/2015). Heavy rains on 27 March required the temporary bridge to be blocked (local media, 28/03/2015). As of 27 March, there were three routes closed to traffic: Siles-Paraiso in Beni department; Route 4 in Espiritu Santo II and Villa Tunari in Cochabamba department; and Route 25 Abra Poea-Licoma in La Paz department (local media, 28/03/2015). In Chuquisaca department, heavy rains and landslides have damaged numerous roads in the Heredia stretch of San Juan del Pirai (Government, 09/03/2015).

Food Security

Despite losses in the department of Beni, harvest prospects for 2014’s verano season (November to March) are favourable, since the main cereal-producing departments of Santa Cruz, La Paz, and Cochabamba were less severely affected by drought, and the abundant rains may have benefited the developing crops in some places (OCHA, 26/01/2015; 09/02/2015; 23/02/2015). In Azurduy municipality, Chuquisaca department, more than 2,000 families have missed the planting season due to heavy rains and crops were severely impacted (local media, 02/02/2015).

Health and Nutrition

As of 29 April, 1,200 cases of chikungunya have been confirmed in Bolivia and 3,000 are suspected. No state of emergency has been declared. (Government, 21/04/2015; 24/04/2015). Between January and February 2015, 25 cases of dengue were reported in Beni department and 206 suspected cases exist (Government, 24/02/2015). As of 21 April, 6,542 cases of respiratory infections have been reported, reaching the epidemic threshold. The epidemic is less serious than during the same period last year, when 49,000 cases were reported (International Media, 21/04/2015).

WASH

Water is still cut off in municipalities affected by the rains (UN, 05/03/2015). Shelters do not have proper waste collection and the number of functioning latrines is limited (UN, 05/03/2015).

Reviewed: 07/05/2015
Introduction to the Global Emergency Overview

The Global Emergency Overview (GEO) is a weekly update that provides a snapshot of current humanitarian priorities and recent events. Its primary objective is to rapidly inform humanitarian decision makers by presenting a summary of major humanitarian crises, both recent and protracted. It collates information from a wide range of sources, including Reliefweb and media, and displays this information to enable quick comparison of different humanitarian crises. 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? (Snapshot and Latest Developments)
3. What is the situation in the country affected by a crisis? (Latest Developments and Narrative)
4. Which countries could be prioritised in terms of humanitarian response? (Prioritisation)

The world map and the table provide an overview of how the countries are prioritised. The countries are subdivided by four priority levels: "watch list", "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 under-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.

The snapshot briefly describes major events in the seven days to the date of publication.

Narratives for each country in the GEO reflect major developments and underlying vulnerabilities of the country over recent months. They are based on secondary data. The latest developments for each country cover the incidents over the past seven days, and key concerns highlight humanitarian priorities.

More information on the Global Emergency Overview Methodology can be found in the Global Overview Methodology Brief and the Frequently Asked Questions.

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.


Updates

The Global Emergency Overview prioritisation will be updated once a week and the results will be available every Tuesday. 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

While ACAPS has defined a methodology striving to ensure accuracy, the information provided is indicative and should not be used in isolation from alternative sources of information for any decision making. ACAPS is not responsible for any damage or loss resulting from the use of the information presented on this website.