CONFLICT IN BAIDOA DISPLACES OVER 600 INDIVIDUALS

Displaced Families	Displaced Individuals	Cross-border movement	Deaths	Injuries	Incident Date
110	660	0	16	50	**17 August 2026**

BACKGROUND

On 17 August 2026, armed clashes erupted in Baidoa following an attack by fighters reportedly aligned with the former Southwest State administration. The confrontation resulted in heightened insecurity and tensions across the city, affecting both host communities and internally displaced persons (IDPs). The fighting was reported in parts of Baidoa, including Hasey Factory, Bonkay, Idow Dhagaal, Towfik, and Al-Ahmar neighborhoods. IDP catchments 14 and 15 were completely displaced as residents fled the fighting, while catchments 9, 11, 12, and 13 reported injuries and fatalities among civilians resulting from crossfire. The displaced sought refuge in parts of the town, including Berdale, Isha, and Wadajir. While the confrontation has stopped, the situation remains tense and unresolved. Businesses in the city, however, are reopening; civilian movement and vehicle traffic, previously suspended, are also returning to normal, and military patrols are visible throughout the town.

The ongoing fighting stems from a political dispute between the Federal Government of Somalia and forces loyal to the former Southwest State administration over a regional election. Tensions have been brewing since the former President's removal from office on 30 March 2026, when the National Army took over Baidoa.

According to a PSMN partner on the ground, the majority of those displaced were women, children, older persons, and persons with disabilities. Initial reports indicate that 660 individuals were displaced, of whom approximately 75% were children under 18.

PROTECTION RISKS

Attacks on Civilians and Forced Displacement: The use of heavy and small-arms weaponry by both parties within residential neighbourhoods and market areas of Baidoa town has directly exposed civilians to attacks and forced displacement. Households living in densely populated neighbourhoods near the clash zones, including women, children, and older persons, have been compelled to flee without an established early-warning mechanism or designated safe corridors. The absence of safe evacuation arrangements increases the likelihood of civilians being caught in crossfire while leaving their homes or moving through market areas. At least 16 civilians were reportedly killed and 50 others injured, with additional casualties suspected to have occurred but not yet recorded. The displacement has also significantly disrupted access to education, with 254 children identified as out of school because of the crisis.

As one affected man stated, ***"Even after fleeing, we are never safe. Armed groups and soldiers clash near our homes, and our families live in constant fear of attack. We left our homes to escape the violence, but insecurity follows us everywhere."***

Urgent mediation, de-escalation, and conflict-resolution efforts by relevant authorities, with the support of humanitarian and other concerned actors, are needed to end the armed confrontations, protect civilians, and ensure respect for applicable international human rights and humanitarian law.

Psychosocial Distress: The fighting caused significant emotional and psychological distress among conflict-affected and displaced families already coping with drought, insecurity, displacement, and poverty. Sudden violence and fear of renewed clashes disrupted families' limited sense of safety and revived memories of previous displacement and loss. Women

experienced heightened anxiety due to caregiving responsibilities, family separation, and fear of violence, while children faced shock, sleep disturbance, withdrawal, and disruption of their daily routines. Older persons were particularly distressed by mobility constraints, difficulties reaching safety, and weakened family and community support systems. Repeated displacement and loss of homes, livelihoods, and property have left many households mentally and emotionally exhausted. As one affected man stated, ***"We have lost everything more than once. Each time we try to rebuild our lives, the conflict forces us to flee again. Our homes and our dignity are all gone. What hurts most is the constant fear and exhaustion; we no longer feel safe in our camp."***

Family Separation: The fighting across several densely populated neighbourhoods of Baidoa, including the use of heavy and small-arms weaponry in residential and market areas, triggered panic and uncoordinated population movements. Children were at heightened risk of separation from their parents or caregivers as families fled suddenly, sheltered in different locations or moved through crowded streets and markets without early-warning information or safe evacuation corridors. Children, including those with disabilities, faced particular difficulties remaining with their families during the chaotic movement. As one affected woman explained, ***"Our children are no longer safe. Every time fighting forces us to flee, I fear that we will become separated in the confusion. Children run in different directions, and parents do not know where to find them. As a mother, the thought of losing my children while escaping the violence is unbearable."*** Without functioning child identification, registration, family tracing, and reunification mechanisms at the time of displacement, separated children may remain unaccounted for and require immediate identification and reunification with their families.

URGENT PROTECTION AND HUMANITARIAN NEEDS

Emergency Shelter and Non-Food Items (NFIs): More than **100 displaced households** require urgent emergency shelter and essential household items after fleeing without their belongings. Many families are currently staying in overcrowded shelters, open areas, or makeshift structures that provide insufficient privacy and protection from heat and other environmental conditions. Emergency assistance should include tarpaulins or plastic sheeting, poles, ropes, blankets, sleeping mats, and other basic materials required to construct temporary shelters. Shelter allocation should prioritise women- and child-headed households, older persons, and persons with disabilities. Site planning and shelter distribution must also incorporate appropriate spacing, privacy, accessibility, and safety measures to reduce overcrowding and associated protection risks.

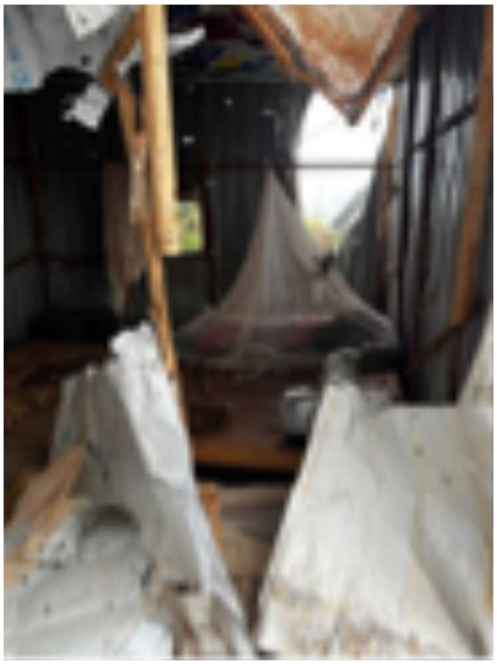
Food Assistance: The displaced require urgent food assistance, as many fled suddenly without food stocks, household assets, or sufficient financial resources. Displacement has disrupted access to markets, livelihoods and established sources of family and community support, increasing the risk of acute food insecurity. Children under five, pregnant and lactating women, older persons, persons with disabilities, and female- or child-headed households are particularly vulnerable to inadequate food intake. Timely, accessible, and sustained food or cash-based assistance is needed to meet immediate needs, prevent harmful coping strategies, and preserve household resilience. Distribution arrangements should be safe, inclusive and informed by current market conditions and protection-risk assessments.

Water, Sanitation and Hygiene (WASH): Displaced households urgently require safe drinking water, adequate toilets, handwashing facilities, hygiene kits and appropriate waste-disposal arrangements. Overcrowding and poor sanitation in informal displacement sites increase the likelihood of cholera, acute watery diarrhea and other communicable diseases. Women, girls, children, older persons and persons with disabilities may face particular barriers in accessing distant or unsuitable WASH facilities. Accessible, gender-sensitive and safely located water and sanitation facilities are needed, supported by regular water-quality monitoring and hygiene-promotion activities. Community members should participate in identifying safe locations and managing facilities to ensure that services remain accessible, culturally appropriate and responsive to protection concerns.

Protection, Health, and Psychosocial Support Services: Conflict-affected civilians, particularly those injured during the fighting, require timely identification, safe referral, and access to appropriate medical treatment and specialized protection assistance, including psychological first aid and structured psychosocial support, to address fear, distress, and the emotional consequences of sudden violence and displacement. Health and protection partners should coordinate referral pathways, facilitate access to emergency and follow-up healthcare, and address any protection barriers that prevent injured civilians from accessing services. Children are particularly affected, with parents reporting bed-wetting, restlessness, and other behavioural changes among children following the fighting. Protection agencies should deploy trained personnel to provide psychological first aid, child-friendly activities, individual counselling and appropriate referrals for specialized mental health services. Caregivers should receive practical guidance on supporting distressed children and recognising signs that require further assistance. Services must be confidential, age-appropriate, culturally sensitive, and accessible to persons with disabilities, while avoiding the stigmatization of affected individuals.

Protection Services: Women, children, older persons, minority groups, and persons with disabilities face heightened protection risks following displacement, including gender-based violence, family separation, and exploitation. Protection monitoring and service delivery for partners operating in some areas will resume soon to identify affected individuals, document risks, and connect vulnerable people with appropriate services. In some IDP sites, NRC and other humanitarian partners are providing protection services through protection desks (mobile and static), case management, and functional referral pathways. Continuing support for peaceful co-existence initiatives and community-based protection structures to share early-warning information, identify persons at risk, and facilitate safe referrals while upholding informed consent, confidentiality, and the principle of do no harm.

Education Support: **254 displaced children** are reportedly out of school following the conflict and displacement, increasing the likelihood of prolonged learning disruption. Immediate educational assistance should include temporary learning spaces, teaching and learning materials, school supplies, and community-based educational activities. Education actors should work with local authorities, schools, and affected families to support children's safe enrollment or return to existing schools where capacity and safety permit. Temporary learning spaces should be accessible, inclusive, and linked to child protection and psychosocial support services. Teachers and community facilitators should be trained to recognize distress and to safely refer children who require specialized assistance. Priority should be given to separated children, children with disabilities, and those from marginalized households.



An IDP house partially destroyed during the recent fighting in Wadajir 4 IDP site

The PSMN (Protection & Solutions Monitoring Network) is a UNHCR-led project that identifies and reports on displacements, as well as the protection risks and incidents driving such population movements. On behalf of UNHCR and the Norwegian Refugee Council (NRC), 10 local partners across Somalia conduct data gathering—primarily through interviews with affected communities and key informants—and monitor displacement trends at strategic locations.

To request further details on displacement, please contact **SOMMOPMN@UNHCR.ORG**