

# Ethiopia- Somali Refugee Emergency Update 02 September 2011



Hand-washing is one of the three key messages being promoted in Dollo Ado to mitigate possible cholera outbreak. Photo: B.Getachew/UNHCR

## Highlights

- Over 13,600 refugees relocated to Hilaweyn camp
- Slight decrease in overall mortality rate, but under 5 mortality rate remains a concern
- Further nutritional interventions agreed to mitigate severe acute malnutrition among new arrivals
- Measles & polio vaccination campaign completed in all camps
- Significant improvement in water supply in all camps
- UNHCR essential relief supply arrived in Gode

## **Current situation**

The four Dollo Ado camps (Bokolmanyo, Malkadida, Kobe and Hilaweyn) and the Transit Centre accommodate a total of 120,871 refugees. This includes 4,464 at the Transit Centre waiting to be relocated to Hilaweyn.

The newest camp-Hilaweyn- is now home to 13,677 refugees that were transferred from the Transit Centre over the last weeks. IOM, which is handling the logistics of the operation, engaged a fleet of 11 locally hired minivans, three of its own buses and one truck for the luggage to facilitate the movement. Together with UNHCR and ARRA, IOM has been transferring an average of 1,000 refugees a day. However, delays in plot demarcation in the camp and related issues have slowed down the pace of the movement. The remaining 4,464 refugees in the Transit Centre are expected to be transported during the course of next week.

## **Health and nutrition**

The overall mortality rate in Kobe camp has seen a slight decrease (from 5.7 deaths/10,000 people/day to 4.9/10,000/day) but death rate among children under five years of age remains a concern. UNHCR's health partners say the suspected measles has been the main cause of deaths in that camp, accounting for 68 per cent of deaths. Other contributing factors are malnutrition, pneumonia and diarrhea.

The mass vaccination campaign against measles covering children from 6 months to 15 years has been completed in all camps, but implementation of the proposal to raise the age group to include those up to 30 years, approved by WHO, is awaiting a go ahead from the Ethiopian Ministry of Health.

Although health services and nutritional feeding programmes are available, many parents still do not take their children for continuing treatment. Decentralization of services therefore remains a key priority in addressing the mortality rates. In addition to the community outreach programme that is now in place, UNICEF's mobile health clinic has started work in Kobe camp to encourage refugees to access the medical facilities available. MSF Spain is due to start construction on a new stabilization centre in Kobe where around 30% of the children in the centre at Melkadida have been referred from.

Meanwhile, in order to augment the delivery of health service to the refugees, UNHCR has just handed over to ARRA three ambulances. ARRA will send the vehicles to Dollo Ado in the coming days for immediate deployment.

Concerned that Somali refugees are still arriving in Ethiopia in a critically poor state of health, UNHCR convened an inter-agency taskforce in Dollo Ado on Thursday 01 September to address the continuing problem. Screening of refugees in all of Dollo Ado's camps have found in the newest



**One of the 3 ambulances UNHCR handed over to ARRA. Photo: A.G.Kidan/UNHCR**

camp Hilaweyn, 16% of children have severe acute malnutrition, whilst Kobe camp, which opened in June this year, has the highest proportion of children with severe acute malnutrition at 19%. In the older camps, the rates are lower: 10% and 7% in Melkadida and Bokolmanyo respectively. UNHCR considers that a rate of over 1% is worrisom. Plans have been agreed to increase the number of food distribution points in the camps, open further feeding centres, and ensure that malnourished refugees receive the appropriate supplementary food. After

consultation with the refugee community, awareness-raising campaigns will be conducted to encourage refugees to seek health services. Outreach workers

will go tent-to-tent to look for malnourished children who are not enrolled in the feeding programmes and to trace children who may not be continuing with treatment. Given the severity of the situation, UNHCR expects that malnutrition rates will remain high for some weeks until the situation stabilizes.

### **Cholera response preparations**

In the context of the reported Cholera outbreak in Somalia, preparations are under way to prevent its spread to the Dollo Ado camps. A dedicated hygiene promotion campaign has begun at the transit centre, where posters have been put up. LWF has distributed soap and a dedicated UNICEF staff member is working on awareness-raising. The district health bureau is also considering a cholera response in the host community. The current water supply is acceptable for the purposes of cholera preparedness, but it has been agreed among all implementing partners that the residual chlorine will be immediately raised to 1mg/L and all jerry cans will be disinfected. UNHCR has pre-positioned six hospital tents.

The three key messages for hygiene promotion for cholera are: **hand washing** after using toilets and before meals (one hand washing kit will be supplied per latrine, and 250g of soap per person per month), - **use of latrines**, particularly for children as parents currently don't always allow children to use latrine, and **visit the health centre when sick**.

### **Water**

Water supply has significantly improved in all sites except Bokolmanyo where the current supply level stands at 10 liters per person per day. Supply at the Reception and Transit Centers as well as in Hilaweyn camp meets the minimum UNHCR emergency standard of 15 liters per person per day. This can be attributed to the reduction in the number of refugees in the reception and transit centres. Melkadida and Kobe camps are each receiving a supply of 14 litres of water per person per day, which is one liter shy of the UNHCR emergency standard. Average overall water supply across all Dollo Ado sites stands at 14.9 litres per person per day.

### **Relief supplies in Gode**

A convoy of UNHCR trucks delivering essential aid items for an estimated 18,500 newly arriving Somalis in the Gode area reached their destination on Wednesday 31 August. They transported supplies such as plastic sheets, blankets, sleeping mats and mosquito nets which the UN refugee agency had airlifted into Addis Ababa from its stockpiles in Dubai last weekend. The relief items are expected to be distributed among new arrivals shortly, with a UNHCR team on the ground coordinating the relief effort. UNHCR's partner, IRC, is also dispatching 1,000 aid kits (CRIs) to the area for immediate distribution by NGOs on the ground.

The new arrivals have been receiving limited support from UN agencies and NGOs with field presences in Gode and surroundings. WFP, which has already distributed a one-month food ration for a small portion of the group, has been requested by UNHCR to extend a similar support to all new arrivals until the registration exercise has been completed. SOS and OFDA also distributed food to most vulnerable households. UNICEF, MERLIN, PIN and other NGOs on the ground are also extending support in the health, nutrition and water sectors albeit on a limited scale.

On Thursday 01 September the UNHCR team learned from the local Ethiopian authorities in Gode and Afder that some of those previously assumed to be refugees are actually displaced just inside Somalia where the border line is not clear. The same day UNHCR has discussed with its governmental counterpart, ARRA, the possible continuation of the cross border assistance already under way, while coordination and distribution mechanisms are being put in place with the UNHCR and other actors inside Somalia.

Meanwhile registration of the group to determine their status has just started. It's not clear how many of them qualify as refugees until the registration is finalized. Refugees will then have the option of being relocated to the established Somali camps either in the Dollo Ado or Jijiga areas.

### **Support from UN agencies**

In addition to WFP and IOM who have been working with UNHCR on a regular basis, a number of UN agencies, most notably UN Women, WHO, UNFPA and UNICEF have been and continue to extend support in different aspects of UNHCR's work in responding to the Somali refugee emergency.

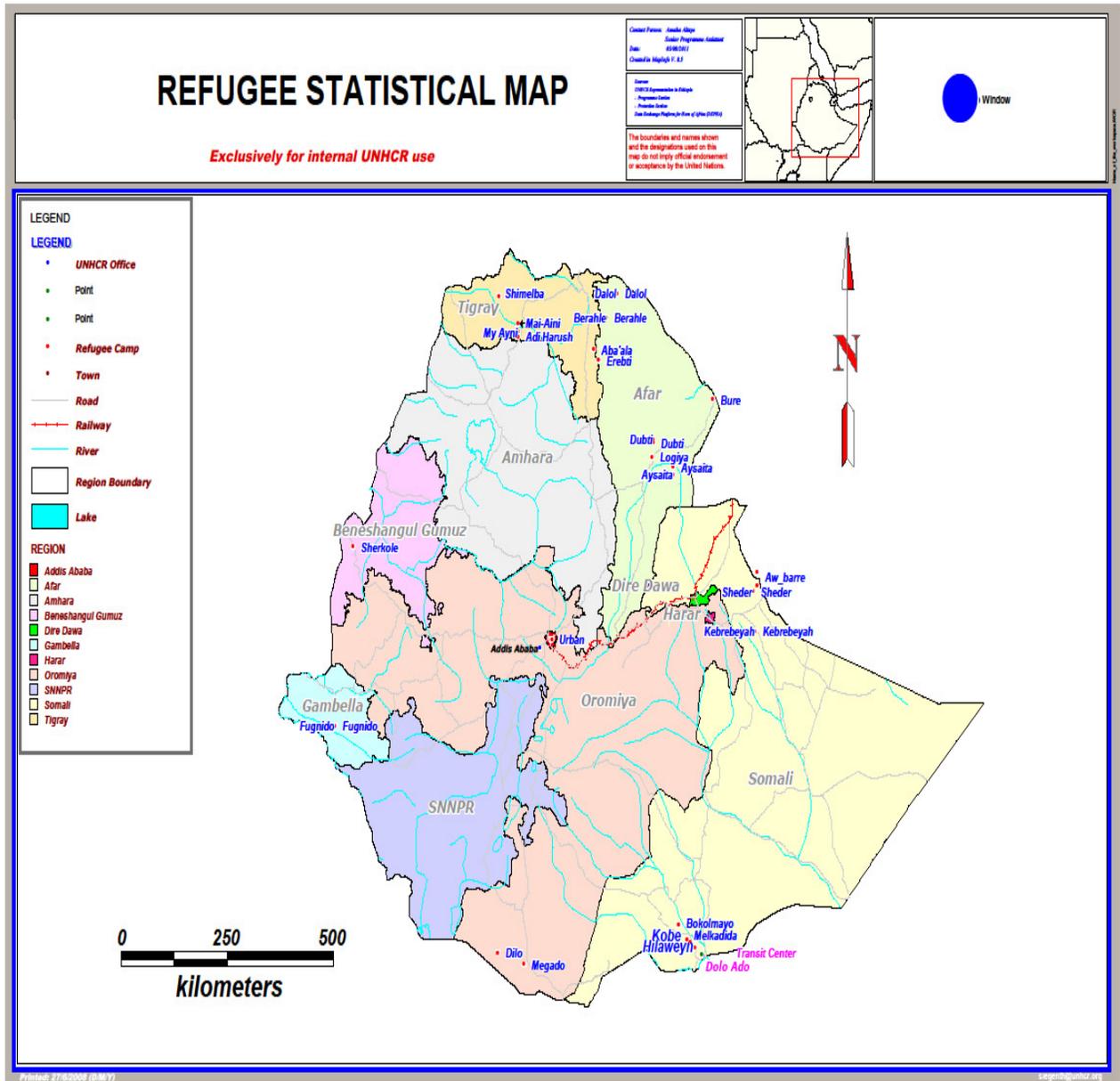
### **Statistics**

Ethiopia is host to over 260,000 refugees including an estimated 18,500 Somali new arrivals in the Gode and Afder Zones of the Somali Regional State. Out of the total, some 180,000 are Somalis, more than 80,000 of the arriving so far this year. The other refugee groups in the country include over 50,000 Eritreans, some 26,000 Sudanese, who include recent arrivals of about 500 from Abiye and South Kordofan in Sudan.

**The table below shows total number of refugees in the Dollo Ado camps as at 27 August 2011 and those that arrived since the beginning of the year**

	Current total		As of Dec 2010		Arrivals in 2011	
Site/Camp	Households	Individuals	Households	Individuals	Households	Individuals
<b>Bokolmanyo</b>	9,401	37,546	3,988	14,988	5,413	22,559
<b>Melkadida</b>	9,825	39,825	6,452	25,491	3,373	14,151
<b>Kobe</b>	5,679	25,359	n/a	n/a	5679	25,359
<b>Hilaweyn</b>	2589	13,677	n/a	n/a	2,589	13,677
<b>Camp Sub-Total</b>	27,494	116,407	10,440	40,479	17,054	73,614
<b>D.Ado Transit C.</b>	1,641	4,464	n/a	n/a	1,641	4,464
<b>Reception C.</b>		n/a	n/a	n/a	n/a	n/a
<b>Temporary locations Sub-Total</b>	1,641	4,464	n/a	n/a	1,641	4,464
<b>Grand Total all locations</b>	29,135	<b>120,871</b>	10,440	40,479	18,695	<b>80,212</b>

# Location Map of Refugee camps



### **Coordination arrangements:**

In addition to the Government refugee agency-ARRA-, a number of NGOs and other partners, are part of the implementation arrangement in providing protection and assistance to the refugees in the three Dollo Ado camps as well as in the Reception and Transit centres. Most have signed sub-agreements with UNHCR as implementing partners while some are operational partners. An agreement has been reached on the coordination arrangements, in particular, who is doing what and where to ensure effective delivery of services as well as accountability and monitoring. The agreement has been discussed and agreed with the government and all NGO partners.

### **The table below shows who does what**

Sector	Implementing agency(ies)
Registration	ARRA/UNHCR
Camp management	ARRA
Water	IRC/LWF/Oxfam GB
Sanitation & hygiene promotion	ARRA/Oxfam GB/LWF/IMC
Nutrition (TFP & SFP)	MSF-S/IMC/ACF
Blanket feeding	ARRA/IMC/SC-US
School feeding	ARRA/SC-US
Hot meals	ARRA
Primary health care & health promotion	ARRA/MSF-S/MSF-H
Mental health	IMC
Child friendly spaces	SC-US
Emergency education	SC-US
Primary education (1-8)	ARRA
SGBV	PAPDA/IMC/IRC
Environment	PAPDA/PWO
Food supply	WFP
Food distribution	ARRA
NFI distribution	ARRA/UNHCR
Shelter	AHA/NRC/DRC/UNHCR
Shelter production	AHADA
Transporting refugees	IOM
Coordination on Refugees	UNHCR/ARRA

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