The Forecast

The short October to December rains have started in the region and the overall forecast is that there will be average rainfall in Kenya, Ethiopia and Somalia. The rain, coupled with humanitarian assistance and anticipated decreases in locally produced cereal prices, means that the food security situation in Kenya and Ethiopia is likely to improve over the next few months. However despite average rainfall, ongoing humanitarian assistance and some slight improvements in the food security situation, the situation in southern Somalia remains dire with an estimated four million people in crisis and 750,000 men and women experiencing famine.

Increased and Changing Humanitarian Needs

Good rains are welcome and will bring relief by increasing water availability and pasture, but they will not bring an end to the ongoing emergency in the Horn and East Africa. They are likely to lead to increased and changed humanitarian needs, particularly in health, shelter and water, sanitation and hygiene (WASH) as the nature of the crisis shifts. During the 1991-1993 famine in Somalia, three waves of deaths took place: the first was largely caused by conflict, the second as a result of increased malnutrition and starvation caused by lack of access to food, whilst the third was a result of outbreaks of water-borne disease and malaria, which was exacerbated by the increased vulnerability of communities in crisis. It is crucial that humanitarian actors are prepared and have put measures in place to anticipate and respond to these needs.

In some areas flooding and mudslides are common during the rainy season. For example, in Ethiopia’s Somalia region localized flash floods have already been reported in areas along the Wabishabelle river, affecting an estimated 18,000 people with damage to crops and livestock.

The drop in temperature and the onset of rains can also increase health risks both for humans and animals, already weakened by a lack of food and water. Livestock mortalities (mostly cattle) of between five and ten per cent are anticipated in the region due to the poor physical condition of many animals. This will further undermine people’s livelihoods and coping strategies and ability to recover.

The rains and the risk of contamination of water sources can lead to an increase in water-borne disease such as typhoid fever, acute watery diarrhoea (AWD)/ cholera and hepatitis A. Outbreaks of vector borne diseases, particularly those spread by mosquitoes, such as malaria, dengue and Rift Valley Fever are likely during the rainy season and increases in cases of pneumonia and respiratory tract infections are common. Over 1,200 cases of dengue have been confirmed in Kenya’s Mandera District since 23 September. Flooding in Turkana and Pokot areas (northwest Kenya) has caused a spread of malaria in the Upper Rift Valley, with outbreaks in Turkana, Kakuma and surrounding districts.

3 OCHA (21 October 2011), “Horn of Africa Crisis, Situation Report no. 19”
Internally displaced people within Somalia and those who have crossed into Kenya and Ethiopia are particularly vulnerable as many of them are living in overcrowded conditions, with limited access to water and sanitation facilities and inadequate shelter. Outbreaks of measles, acute watery diarrhoea (AWD), cholera, malaria, and pneumonia have already been reported in internally displaced camps in Mogadishu. In Dadaab refugee camp five measles related deaths and 113 cases were reported during the last week of September. In addition, seven cases of cholera have been confirmed, with one case in Hagadera camp acquired locally.

At the same time that needs are expected to increase, access and movements can be reduced in many places are rivers flood their banks, bridges break or get washed away and roads become impassable. In Ethiopia, access to refugee camps in Dollo Ado is already challenging as the rains make airstrips and roads impassable. OCHA figures from 4 November 2011 show that the numbers of Somali refugees crossing into Kenya has dropped from 3,400 to 101. This could be due to a combination of factors, including the Kenyan military incursion into Somalia, the increased militarisation of the border and the heavy rains, which have made many roads impassable.

**Contingency Measures**

Contingency measures are essential if further loss of lives and livelihoods is to be avoided during the rainy season. Where it is not already too late, measures such as: pre-positioning food, non-food items such as soap, buckets and blankets and essential medical supplies in areas that will become inaccessible; undertaking vaccination campaigns; ensuring health staff are trained and prepared to respond to disease outbreaks; rehabilitating boreholes, particularly in areas where water trucking will not be possible; digging drainage canals; providing chlorine and aqua tabs to communities to ensure safe drinking water; increasing public health promotion campaigns, distributing shelter materials, blankets and mosquito nets; and vaccinating livestock must undertaken without further delay.

In Kenya Oxfam is mapping which areas will be inaccessible for long periods of time and which will be inaccessible for only a few days after each rainfall and working with partners to devise contingency plans to meet the needs. Public health promotion teams are doing environmental clean-up and awareness raising campaigns. Boreholes are being rehabilitated and chlorine kits and aquatabs have been distributed. In the areas where Oxfam has been distributing cash to vulnerable households which will be cut off during the rains, a double payment was made to cover the period October/November so people do not go without.

In Ethiopia Oxfam has expanded its public health promotion and acute watery diarrhoea preparedness activities, with a particular focus on women who manage water and sanitation at the household level. Oxfam teams are working with NGOs and other local partners to ensure a strong response to any outbreaks of acute watery diarrhoea. As the rains commence, water trucking activities are being reduced and teams are supporting regional and zonal authorities to ensure emergency stocks and water treatment kits can be mobilised. Cash for work activities and market-support activities are ongoing and animal health interventions, such as vouchers for veterinary visits and vaccinations, have started up.

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5 Ibid
6 OCHA (4 November 2011), “Horn of Africa Crisis Situation Report no. 21”
In Somalia Oxfam partners have been preparing for outbreaks of acute watery diarrhoea by setting up oral rehydration corners / focal points (areas that contain oral rehydration sachets, sugar and salt, soap for washing hands, chlorine bleach etc) in strategic areas of internally displaced persons’ camps, increasing the frequency and methods for public health messaging and forming/supporting Water, Environment & Sanitation committees to oversee water, sanitation and hygiene installations. Oxfam partners are also intensifying public health promotion activities, particularly in feeding centres and during cash distributions.

**The Emergency Response and Issues of Concern**

In Kenya, Ethiopia and Somalia, the UN, government and non-governmental actors have prepared contingency plans to respond to any increase in needs. As the rainy season gets underway, strong coordination and monitoring of the needs, gaps and response is essential.

The agriculture, health and water and sanitation sectors in both Kenya and Ethiopia have put measures in place to prepare for the rains. In Kenya the Food and Agriculture Organisation is in the process of delivering veterinary drugs, cold chain equipment and supporting increased animal disease surveillance for Rift Valley Fever. In Ethiopia OCHA reports that 90 per cent of boreholes in Somali region, 81 per cent in Oromia, and 70 per cent in Afar regions are now functional. However OCHA reports that inadequate drug supplies and human resource shortages pose a challenge to the health response in Kenya.  

The delivery of food aid remains a key concern. In Kenya the World Food Programme has reported delays in food aid distribution in Wajir, Garissa and Mandera as roads are impassable. Roads in Garissa and Hola, key entry points into the Dadaab refugee camps, are completely cut off. According to WFP, pipeline difficulties and port congestion have prevented the pre-positioning of food in some of the worst affected areas. WFP is aiming for a rapid scale-up of cash distributions in a number of districts in Kenya, however there do not seem to be any other contingency plans in place.

Ongoing conflict, insecurity and restrictions on the delivery of humanitarian assistance in Somalia are the key factors which will hinder a more effective response to the increased needs caused by the rains. For example, armed groups in many parts of South Central Somalia are not allowing mass public immunization campaigns despite outbreaks of deadly diseases like measles. In Mogadishu OCHA reports that difficulties in negotiating access to affected men and women are hampering distributions of essential shelter materials. The emergence of new actors and coordination challenges are also undermining a more effective response. As many actors are not reporting their activities, it is difficult to map the response and identify existing gaps and any new gaps caused by the rains.

The recent military incursion by Kenyan forces into Somalia, as well as insecurity in refugee camps on the Kenyan side of the border, is also impacting on the humanitarian situation in certain areas of Kenya and Somalia. Fighting in Somalia is likely to cause further civilian displacement and casualties at a time when thousands of people risk imminent death due to famine.

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7 OCHA (4 November 2011), “Horn of Africa Crisis Situation Report no. 21”
8 Ibid
9 OCHA (21 October 2011), “Horn of Africa Crisis, Situation Report no. 19”
Overall funding for the UN Consolidated Appeals Process for the four affected countries – Djibouti, Ethiopia, Kenya and Somalia - stands at 75 per cent, however key sectors remain underfunded and this is particularly concerning when faced with the increased needs that the rains will bring. In Somalia there is a shortage of essential shelter materials due to funding shortfalls and the UN CAP appeal has recently been revised upwards from $983 to $1 billion due to the increased funding requirements for shelter and WASH. UN agencies and donors have yet to ensure that key sectors, such as Shelter in Somalia and Health or Water, Sanitation and Hygiene in Kenya are adequately funded.

**Impact of Rains on Longer-term Recovery**

In many areas of north-eastern Kenya, south-eastern Ethiopia and southern Somalia emergency conditions are expected to persist well into 2012. Households remain extremely vulnerable to additional shocks as the severe drought has compromised pastoral assets and crop production. Several good seasons are required to rebuild herd sizes, improve crop production and reduce debt levels.

The rain forecast is not encouraging in this regard. FEWSNET predicts that the rains will be shorter than normal and are likely to stop in early December rather than late December, meaning that pasture will not be sufficiently regenerated and harvests will not be enough to last people through the next long rains in March-June 2012. In Somalia the harvest from the current *Deyr* rains normally only provides 35 per cent of the annual food production in the South of the country and will not be able to sustain farming livelihoods until the harvest from the next *Gu* rains which should start in April 2012. Planting activities have started in many parts of southern Somalia, but the harvest is expected to be lower than normal due to the large population migration from affected areas in recent months. In Ethiopia, the National Meteorological Agency (NMA) forecast for October 2011 to January 2012 confirms the re-emergence of weak *La Niña* conditions, which could lead to lower than average long rains in pastoral areas of Ethiopia next year contributing to continued water shortages, reduced availability of pasture and further delay recovery.

Recovery in the short- and medium-term assumes a continuation of ongoing cross-sectoral interventions. Large scale lifesaving and livelihood interventions will be needed throughout next year. A focus on building resilience and supporting sustainable livelihoods will be essential to prevent a disaster of this scale from re-occurring.

**Oxfam recommends:**

- Better coordination of the emergency response in light of emerging needs – as the situation evolves and new needs emerge, strong coordination of the humanitarian response is essential. National governments, UN agencies and non-governmental actors should continue to work together to share information, identify needs and gaps and ensure a rapid, effective response.

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12 OCHA (17 October 2011) “Ethiopia Humanitarian Bulletin”
• **Increased funding for priority/neglected sectors** – As the rains present the likelihood of increased and acute health, water, sanitation and hygiene, shelter and other non-food items needs, national governments and international donors should increase funding to these sectors by making new pledges and allocating funding that has already been pledged but not yet committed. International donors should also ensure that funds are available directly to NGOs and can be quickly released for any rapid scale up in activities. Large scale lifesaving and livelihood interventions will be needed throughout 2012 and funding must be provided for this.

• **Removal of restrictions and increased and coordinated diplomatic efforts for scale up of Humanitarian Assistance in Somalia** – all armed actors in Somalia should remove restrictions on the delivery of impartial aid and allow organisations to scale up their assistance, both in terms of experienced staff and essential materials such as food, water and medicine. Oxfam also encourages international donors and other actors to enhance diplomatic efforts and engage with all parties to the conflict in order to ensure the unhindered delivery of humanitarian aid throughout Somalia.

• **Better information sharing from WFP on food aid** – faced with pipeline breaks and ongoing and increasing challenges to delivering food aid to affected communities, WFP is encouraged to share timely, accurate information about its activities so that the humanitarian community and affected people can collectively plan to overcome challenges in the response together and work to ensure all men and women are able to receive the basic requirements needed for humanitarian relief and recovery.