



## SOMALI SITUATION

### ETHIOPIA UPDATE

22-28 February 2017

### HIGHLIGHTS

- Between 22 and 28 February, 160 new arrivals were recorded. Since 1 January 2017, 4,106 Somali new arrivals have been recorded in Melkadida, Ethiopia, all of whom have been registered as refugees by the Government of Ethiopia and UNHCR and relocated to the Kobe, Hilaweyn, Buramino, Bokolmanyo and Melkadida refugee camps.
- On average, 70 persons arrived daily between 1 January and 28 February 2017.
- 71% of the total registered new arrivals are children, whilst 88% are women and children.
- The new arrivals, mostly originating from the Bay region (72%), Middle Juba (11%) and Gedo (5%), reported to have fled conflicts, exacerbated by food insecurity in Somalia.
- To date, Ethiopia hosts some 245,500 registered Somali refugees in the areas of Melkadida and Jijiga.

### KEY FIGURES

**4,106**

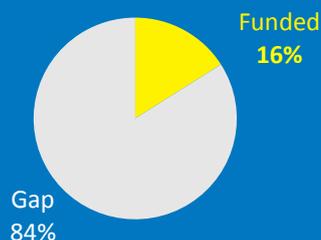
Somali arrivals since 1 January 2017, based on reports from Melkadida (as of 28 February 2017)

### FUNDING

(as of 28 February 2017)

**USD 74.2 M**

Requested by UNHCR for the Somali Refugee Situation in Ethiopia



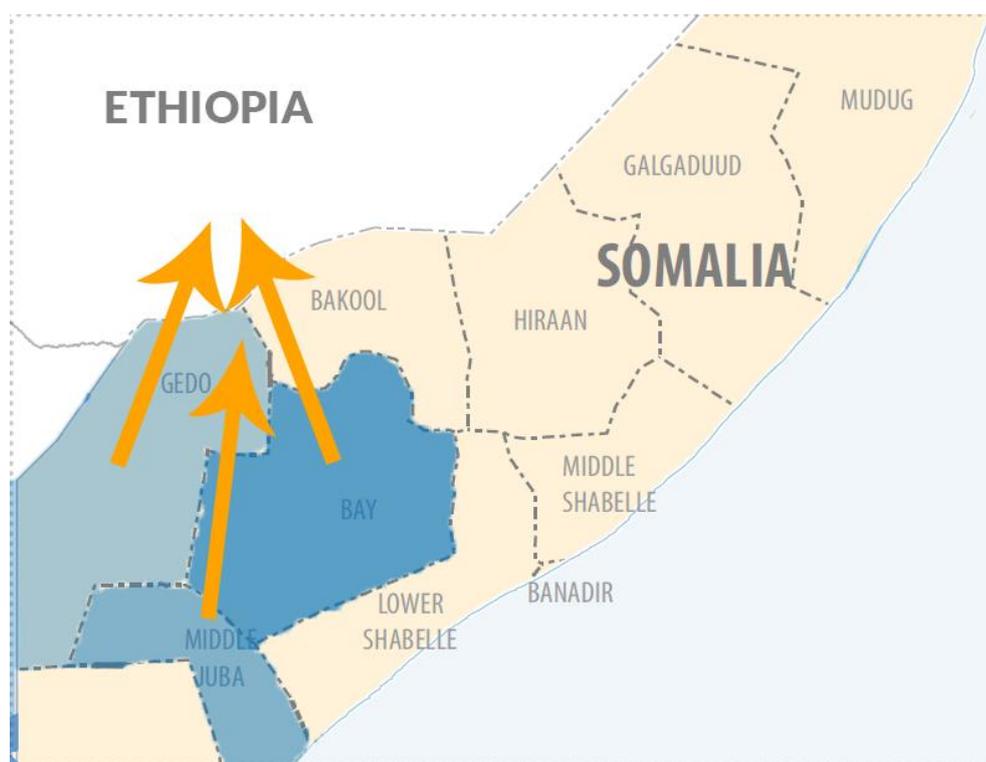
For more detailed information on the Somali Situation response in specific country operations, kindly refer to the latest County Updates available on the portal: [data.unhcr.org/horn-of-africa/regional.php](http://data.unhcr.org/horn-of-africa/regional.php)

UNHCR is grateful for the contributions in 2016 and so far in 2017 from DFID, IKEA Foundation and PRM.

Special thanks to our partners at the Reception Centre: ARRA, IOM, IMC, MSF, NRC, SCI, UNFPA, WFP

New arrivals since 1 January 2017

New Arrivals	4106
Registered New Arrivals	4106
Relocated	4106
Pending relocation	0



# UPDATE ON THE SITUATION

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## Melkadida

- **Protection:** Weekly Protection meetings are being held to discuss priority issues as well as to improve coordination amongst partners in the Reception Centre. Upon registration, new arrivals are provided with high energy biscuits, BP5 (Compact Food is a high-calorie, vitamin fortified, compact, compressed and dry food), dignity kits and soap. Persons with Specific Needs (PSN) are identified at the reception centre, and an updated list is shared along with the manifest for relocation, targeted assistance and referrals. Information sessions are held on the reporting of protection issues, services in the reception centre and in the camps. Awareness-raising is being conducted on health and hygiene promotion for women as well as on the reporting of Sexual and Gender-Based Violence (SGBV) incidents.

Moreover, a Save the Children-run protection help desk has been established in order to identify Unaccompanied and Separated Children (UASC), as well as other vulnerable refugees under the age of 18. To date, 49 UASC have been identified amongst the new arrivals. Tea talks are held with children to discuss their rights, and child friendly spaces are operational.

- **Food & nutrition:** Nutritional screening was carried out for the newly arriving refugees. A total of 60 under-five children and 20 pregnant and lactation women (PLW) were screened to measure their nutritional status. Accordingly, the prevalence of Severe Acute Malnutrition (SAM) and Global Acute Malnutrition (GAM) among the under-fives was found to be 5% and 53% respectively which is slightly lower than earlier weeks but still way above the emergency threshold of 15%. This indicates the level of malnutrition among the new arrivals is still at an alarming level. The average GAM rate among new arriving children under 5 is 73% since 1 January 2017. The prevalence of malnutrition among the pregnant women was 15% which is lower than the previous week.

Food is provided through a mix of wet and dry feeding. Children aged up to 10 years and pregnant and lactating women receive, twice a day, a fortified porridge (CSB) as wet feeding, as well as High Energy Biscuits. Upon arrival in the camps, all refugees are provided with monthly food rations and Core Relief Items (CRIs). All children and PLW with SAM are provided with Plumpy Nuts and admitted to therapeutic and supplementary feeding programmes when relocated to camps.

- **Health:** MSF is providing 24/7 emergency healthcare service which includes emergency OPD and emergency admission at the health post located in the reception centre. During the reporting week, a total of 56 OPD consultations were made out of whom 17 were under-five children. With around 29%, acute upper respiratory tract infection accounted for the majority of the consultation, followed by suspected malaria (24%). Two cases of diarrhoea within the children under the age of five were reported. An intensive surveillance activity is going on in collaboration with the Woreda Health Bureau, ARRA and MSF and there were no reports of diseases with epidemic potentials such as measles, acute watery diarrhoea (AWD). In addition, routine vaccination was provided to 63 under-fives and 36 women of reproductive age group. There was no death reported amongst both the children under and above the age of fives in the reception centre.
- **WASH:** At least 20 litres per person per day (lit/p/d) of water are being provided to new arrivals at the Reception Centre. The latrine coverage stands at a ratio of 15 persons per latrine drop hole against the UNHCR minimum standard of 20. Disinfection and regular water quality monitoring is being carried out by trained personnel. WASH services at the camps are available for new arrivals.
- **Gaps:** In spite of the efforts to address the nutritional needs of new arrivals, malnutrition continues to pose a challenge, especially considering the already high rates at the receiving refugee camps.