

## LAS CAANOOD SITUATION - EMERGENCY RESPONSE IN SOMALIA AND ETHIOPIA

19 April 2023



Brothers Noor Musae Noor (right) and Abdi Shukur (left) wait with their children near the border to be relocated to Mirqaan settlement in the Somali region of Ethiopia. © UNHCR/Diana Diaz

### SOMALIA

The general security situation in Las Caanood reportedly remains tense. According to the National Displacement and Refugee Agency (NDRA), there are 154,230 people displaced from Las Caanood town, Sool region, due to the fighting that erupted on 6 February 2023. The newly displaced persons are in 74 locations in Sool, Togdheer and Sanaag regions. No returns have been reported so far.

#### Operational response

**Somaliland:** UNHCR's partner, Norwegian Refugee Council (NRC) has set-up two protection helpdesks in Widh-Widh and Yagori IDP sites in Sool region to identify and support serious protection incidents. At each helpdesk, there is one paralegal and two community-based paralegals/case workers who will undertake protection response and referral services. NRC also established a protection helpdesk at the 18 May IDP site in Burao. NRC has started the necessary community mobilization and engagement processes at site level.

In Kalabaydh, UNHCR's partner conducted outreach activities, visiting some 300 IDP families displaced from Adhicadeeye, Samakab, and Gumays. The new arrivals were in need of emergency shelter, WASH facilities, and protection support.

The joint humanitarian assessment mission to IDP sites affected by the Las Caanood crisis was completed on 11 April.

**Puntland:** UNHCR continued to support individual protection assistance and case management targeting the most vulnerable among the displaced including women and children at risk, gender-based violence (GBV) survivors, and persons with specific needs.

UNHCR through its partner conducted a weekly new arrivals assessment. According to the findings, between 12-18 April, 11 families (95 individuals) had arrived from Las Caanood in 10 IDP sites, 5 each in Bossaso and Garowe.

As of 11 April, 31 households (approximately 186 individuals) had arrived in Kalabaydh (28 km southwest of Las Caanood) from Adhi Adeeye and Yagori. This brings the total number of new arrivals since the renewed conflict to 84 households (approximately 505 individuals). The families reportedly lack safe drinking water and sanitation facilities, shelter, food, and non-food items, as well as health and nutrition services at the place of arrival. Basic services have been overstretched due to the recent influx.

In Bossaso, the Complaint and Feedback Mechanism (CFM) recorded 22 cases. Most of the complaints raised came from newly arrived families from Las Caanood and were related to lack of livelihood, Non-Food Items (NFI), food, and basic needs assistance in Xadole, Raf & Raaxo, and Turjaale internally displaced persons (IDP) sites.

UNHCR will increase its Camp Coordination and Camp Management (CCCM) and protection activities when access improves.

## Operational Challenges

**Food security and Nutrition:** The recently displaced people require emergency life-saving food assistance. Families with severely undernourished children as well as those with breastfeeding mothers and expectant mothers need immediate humanitarian assistance to save their lives.

The following interventions are required:

- Feeding interventions, especially Blanket Supplementary Feeding Program (BSFP) which provides extra food to pregnant and nursing mothers and children under five to prevent acute malnutrition;
- Stabilization Centres for the care of children with medical issues, who are severely undernourished;
- Regular check-ups for acute malnutrition to keep track of the population's nutritional state; and
- Promotion of maternal, infant, and young child feeding and care practices in emergencies, with a focus on the population that has been displaced.

**Health:** As most partners do not have a large medical supply in Las Caanood town and hubs in other towns, it is anticipated that medical supplies will run out in the event of further escalation of the conflict. Moreover, given that the current displacement has already increased demand, it is necessary to scale up health services in areas where new IDPs have relocated.

In addition, if the violence escalates, specific services and resources including trauma kits, first aid kits, and medical teams, will be required. There is a probability that infectious diseases would also spread owing to crowding and poor cleanliness.

**WASH:** The residents of Las Caanood and its neighbouring surroundings require WASH response including urgent water trucking to the relocation sites. To meet the immediate humanitarian demands for at least three months, it will also be necessary to construct new water systems, sanitation facilities, and emergency hygiene promotion programs.

**Shelter and Non-Food Items (NFIs):** Shelter and NFIs are needed for those who have been displaced by the recent conflict, taking into consideration the potential deterioration of the situation in the area.

## ETHIOPIA

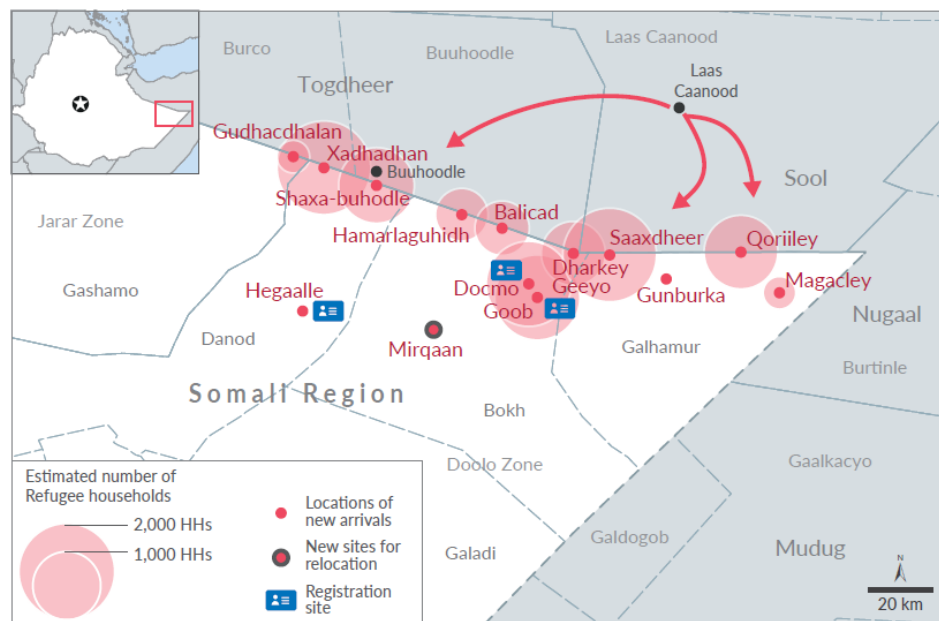
On 8 April, the [relocation of newly arrived refugees](#) in the Somali region of Ethiopia began. As of 17 April, a total of 5,649 of the most vulnerable people were transferred from border areas to a new settlement that is located some 50 kilometres from the border in Mirqaan, Bokh district.

The establishment of the Mirqaan site will respond to the ever-increasing needs and facilitate the provision of assistance – including shelter, core relief items, food, and water – to those without ties to the communities where they are currently staying. The Refugees and Returnees Service (RRS) and UNHCR, with logistical support from IOM, are organizing transportation of the refugees to the new site. Upon arrival, refugee families are biometrically registered and provided with a tent and other essential relief items.

Efforts continue in Mirqaan site to ensure adequate construction of WASH facilities and the installation of family tents. So far, 1,200 family tents have been installed, with 5,017 refugees provided with emergency shelters. High-energy biscuits and date bars are also provided to all refugees upon their relocation to Mirqaan.

One UNHCR rub hall is now on site and set for installation which commenced on 18 April. A registration site has also been constructed; the facility includes a registration office with 20 partitioned rooms, two structures for the nationality screening area, a waiting area, two toilet blocks, and a generator house.

UNHCR has also ensured that an additional water truck of 18,000-litre capacity is operational under UNHCR direct implementation, aiming at improving water supply for the settlement, supplementing the existing capacity limited to 10,000 litres.



*The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.*

UNHCR, RRS and the Woreda Health Bureau assessed the health centre in Mirqaan and identified challenges in the availability of health services, including the absence of an ambulance and inadequate staffing. There is a need to strengthen the capacity of the health centre to cater to the medical needs of refugees. Platform construction for water storage tanks as well as distribution for installation of plumbing work is ongoing.

An information campaign prior to relocation was conducted in Docmo and Goob, targeting refugees and representatives from the host community. The purpose of the information campaign was to provide refugees with key information prior to relocation. The information includes the conditions of the new site, Mirqaan. Some refugees in Docmo expressed their interest in remaining in Docmo and requested assistance from UNHCR and the RRS in the said location.

Those who wish to remain within host communities will be supported through targeted assistance.

During the information sessions, UNHCR also received feedback on the protection issues affecting refugees. Refugee leaders mentioned lack of shelter, inadequate latrines, lack of appropriate food, especially for children with cerebral palsy, lack of fresh water and limited health care as key challenges.

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## Operational response

**Registration:** As of 4 April, the Refugees and Returnees Service (RRS), with UNHCR's support had registered 91,000, people, most of whom were women, children, and the elderly. This figure is subject to change once individual biometric registration is conducted. Among them were more than 3,400 unaccompanied and separated children (UASC) and adolescents who told UNHCR harrowing stories of how they were separated when clashes began and have since been unable to re-establish contact with their families or guardians.

**Protection referrals:** UNHCR and the Refugees and Returnees Service (RRS) teams have set up protection desks to provide counselling and related support to the most vulnerable refugees.

The International Committee of the Red Cross (ICRC) continues to support with family tracing and reunification. Persons with disability and with mental health conditions, including trauma, have also been identified for specialized care and support.

**Protection from violence:** On 3 April, UNHCR, UNICEF, and the Bureau of Women and Children Affairs (BOWCA) conducted a joint gender-based violence (GBV) assessment at the health centre in Bokh with the objective of mapping out available medical services to support GBV survivors. BOWCA has recruited social workers from the host community, to be trained in GBV case management, as part of the community-based approach to protection.

**Health and Nutrition:** The nearest health centre is located some 70 kilometres from where registration is taking place. However, the Regional Health Bureau (RHB) continues to play a central role in the health response, through the deployment of two mobile health teams to the Danod and Galhamur districts and the development of a sustainable outreach strategy (SOS) in Bokh, with the aim to include refugees into the provision of health care services in the area.

With support from GOAL, UNHCR is undertaking nutritional screening in hard-to-reach sites through the mobile medical and nutrition team, which is also facilitating the referral and transportation of acute emergency cases to the health center. 94 children of 6-59 months of age were screened for nutritional status and 26% were identified with medium acute malnutrition.

General food distribution is ongoing in Doqmo with close to 90% of refugees having received mixed food items.

**Community Engagement:** As part of efforts to establish and strengthen community engagement, UNHCR held a session with 18 members of the Settlement Central Committee to brief them on principles guiding their voluntary work including neutrality, impartiality, and confidentiality.

UNHCR and the community structures identified and assessed specific needs among the refugee population and identified 32 (16 Female and 16 Male) persons with specific needs (PSNs), mainly separated children, persons with disabilities, single parents, and older persons. Since the beginning of Level 2 registration, vulnerability screening has been done for a cumulative figure of 68 PSNs (35 Male and 33 Female).

The Protection team organized a community leaders meeting with the International Committee of the Red Cross (ICRC) and Ethiopian Red Cross Society (ERCSS) who shared information on their tracing and family reunification services during the registration exercise in Mirqaan settlement. The ICRC team requested the

committee to disseminate the information to the entire community in order for the concerned children to be brought to the ICRC/ ERCSS reception point at the settlement to discuss with them the availability of tracing and family reunification services.

## Administration

Bokh is currently hosting 40 staff comprising 19 National staff including 10 drivers, and 21 International staff.

UNHCR set up a very small aperture terminal (VSAT) at Shoobane Hotel to allow more stable corporate internet.

The space for the Humanitarian Hub was confirmed and UNHCR will avail a room in the new office/Hemo hotel to be used by humanitarian actors to access the internet provided by Refugee Emergency Telecommunications Sector (RETS).

A Swedish Civil Contingencies Agency (MSB) mission took place from 10-12 April to conduct an assessment on the establishment of a base camp.

## Partnerships and External Engagement

UNHCR and nine partners comprising 5 UN agencies, 2 INGOs and 2 NNGOs, published the [Inter-Agency Emergency Refugee Response Plan for the influx of refugees in the Somali region of Ethiopia, 2023](#), covering the period of February to December 2023. The response plan requires USD 116 million to provide humanitarian assistance for some 100,000 refugees. The plan may be revised later in the year as the situation evolves, including peace efforts in Somalia. [A joint media release](#) was issued to announce the response plan and funding requirements.

A regional donor virtual briefing on the Inter-Agency Refugee Response Plan and Appeal for new Somali refugees into the Somali region of Ethiopia took place on 27 March with various donors at country and regional level and Permanent Missions in Geneva in attendance.

UNHCR's [Supplementary Budget Appeal](#) for a total of USD 41.7 million was published on 23 March. This requirement is in addition to the Ethiopia Approved ExCom annual budget, which included the needs to respond to the wider Drought Situation in Ethiopia (and were included in UNHCR's Horn of Africa Drought Situation Appeal released in February) but did not anticipate these additional new arrivals. (UNHCR's Supplementary Budget Appeal is reflected in the Inter-Agency Refugee Response Plan.)

UNHCR continues to call on the international community to support the Ethiopian government, UNHCR, and other organizations to deliver life-saving aid and basic services.

### Contacts

**Joyce Wayua Munyao-Mbithi**, Senior Donor Relations Officer, Regional Bureau for the East, Horn of Africa and Great Lakes, Nairobi - [munyao@unhcr.org](mailto:munyao@unhcr.org)

**Kabami Kalumiya**, Reporting Officer, Regional Bureau for the East, Horn of Africa and Great Lakes, Nairobi - [kalumiya@unhcr.org](mailto:kalumiya@unhcr.org)

**Evelyne Waikwa**, Reporting Associate, Regional Bureau for the East and Horn of Africa, and the Great Lakes, Nairobi – [waikwa@unhcr.org](mailto:waikwa@unhcr.org)