

**MOYALE SUB-COUNTY CROSSBORDER EMERGENCY ASSYLUM SEEKERS  
KENYA INTER-AGENCY RAPID ASSESSMENT REPORT**



**Report compiled by CGM, NDMA, KRCS, National Government and the County Steering Group**

## **1.0 BACKGROUND**

Kenya Initial Rapid Assessment(KIRA) is a multi-sector, multi-agency rapid assessment tool for assessing onset of rapid humanitarian crisis in Kenya. The Kenya Initial Rapid Assessment (KIRA) is a multi-sector, multi-agency tool whose purpose is to provide a fast overview of a humanitarian situation, in order to: support evidence based decision making in the early stages of a humanitarian response, to provide an understanding of how humanitarian needs vary across different affected groups, to identify where gaps may exist between needs and local/national capacity to respond and to identify further detailed information needs.

Moyale sub-county has a projected population of 112629 people as per 2016 KNBS projections at a population growth rate of 2.4%. It's inhabited by the Borana, Gabra, Burji, Garrei, Sakuye and others. 78% of the households live below the absolute poverty line with 84% and 51% of the population in Butiye and Township wards living below the abject poverty line. Moyale sub-county is conflict prone due to its porous borders with the neighbouring Ethiopia, proliferation of arms, under stressed food insecurity phase, malnutrition rates are normal with exceptions of Golbo ward which has alarming nutritional levels, shortage of water, poor sanitation and low literacy levels. Source of livelihoods for the populace are business activities, ago-pastoralism and pastoralism.

The prime minister of Ethiopia stepped down in the month of February 2018, paving way for military rule consequently a state of emergency was declared. The civilians have rebelled against the military rule and about 5 days ago a militia group suspected to be from Oromia state ambushed a military truck that was heading to Oromia state and killed several military officers, injured some and kidnapped a few.

The military later on sort the intervention of the Oromia state (Region 4) to track and apprehend the perpetrators but the region declined hence they were infuriated by this development and on Saturday 10<sup>th</sup> of March 2018 at around 14hrs, they indiscriminately opened fire on civilian in shawabare killing 13 people instantly and injuring another 20 people. As the emergency is situation is worsening, casualties reported have significantly increased to 65, 69 persons injured and 16

missing. Approximately 8200 people are displaced and are hosted in Somare, Dambala Fachana, Kukub, Mayie, Sololo, Sessi, Dambala Fachana, and Butiye while about 1200 people are expected to join the displaced from Olla wako dogo, Telle dambi, Guchi, Argane, Madho, Chana mudha and Mor mora, Mudiambo, Tatesa, Chamuk, Tille madho and Qetal. More displaced persons are also expected to come in through various border villages of Gada Korma, Bori, Kukub, Mado Adhi, Wayegodha and Uran. Notably, it was reported that a total of 210 persons are separated from their ancestral homes. Thus inflicting fears among the civilians and leading to incursion towards Moyale Kenya. Some of the displaced have integrated with their relatives, friend and kins from the Kenyan side while some have camped in schools, churches, mosques and open spaces within individual compounds. Currently the host community are giving all the required humanitarian support. Some households managed to move with their livestock and these were; Camels (600), Cattle (2852), Small stock (700), Donkeys (55) and 14 dogs. These livestock are concentrated around Dambala Fachana and some heading to Amballo.

## **1.1 METHODOLOGY**

Sub-county steering group meeting was held in Moyale where a technical team from different departments and organizations constituted to spearhead the assessment led by the National Drought Management Authority. Secondary data from NDMA, County Government was used to supplement primary data collected from the satellite camps. The assessment team comprised of sectoral specialists who represented National Drought Management Authority, Kenya Red Cross, World Vision Kenya, Concern WorldWide, Strategic for Northern Development, ISID, Agriculture, Water, Public Health, Livestock, Trade and Ministry of Interior and Coordination of National government (Moyale). KIRA 72hour tool was administered to collect data. The sampling areas included Butiye Primary, CIFA, Sololo, Bori, Dambala Fachana, Somare and Governor's residence where the refugees are accommodated. Focus group discussions were conducted in the above mentioned satellite camps by the technical team. 85% of the primary data was collected through focuss group discussion while 15% through community key informant interviews. There was also direct observation as a form of collecting primary data and other source details included opinion leaders from the communities and peace committee members. Community Key informants used were knowledgeable in a wide array of issues affecting the community and the responses

were both quantitative and qualitative. The affected people in these areas include those who live in their individual homes (non-hosted) and the host families.

## **1.2 SUMMARY OF NEEDS IDENTIFIED**

### **1.2.1: Displacement and Shelter**

Population displaced since the occurrence of insecurity have moved towards Moyale (Somare, Sessi, Dambala Fachana, Sololo, Bori and Butiye) of which most are living in satellite camps while others are accommodated in host families. The displaced population have gathered in tents which could hardly accommodate them since they are overcrowded, minimal separation in form of gender, age bracket hence no privacy. The condition exposes the children, women and elderly persons to the unprotected cold. Most persons were using the bare ground as their beddings, only few brought along some mats to sleep on. Beddings like blankets, bedsheets were not observed amongst the displaced. Likewise, some homes were burnt

### **1.2.2: Security and Freedom of Movement**

Freedom of movement has been curtailed as exhibited by the majority of the displaced. The main threat affecting people's ability to safely move from one place to the other is insecurity along the Kenya-Ethiopia border. It has been evident that insecurity has been a main issue amongst the displaced. Some satellite camps are not secure (Somare, Gadakorma) due to close proximity to the border however presence of military personnel was noted in Somare and Butiye. Some sites are not fenced and this may expose the population to hazards from wild animals. Isolated cases of rape have been reported.

As a result of the conflict, armed military action is the main security threat to the affected communities. Other security threats are; fear of presence of sophisticated weapons, displacement of population, gender based violence and continuing threat from natural disasters especially drought.

### **1.2.3: Living conditions of vulnerable groups**

Few of the vulnerable groups are living alone whereas majority have been integrated into the communities thus not living alone. The groups of people who are vulnerable and living alone are;



unaccompanied children, older persons, persons with disabilities and female/child headed households.

#### **1.2.4: Food security situation**

Food security situation has negatively affected being in cognizant of the stressed phase food insecurity of the sub-county. Of those interviewed, 100% stated that food security situation in the affected communities are alarming and currently falls at the crisis phase. The main issue that worsens food security is lack of food at the satellite camps and limited market access. The host-families have exhausted their food basket. Other issues that negatively affect food security are poor quality of food, lack of cooking utensils and high cost of food. Coping strategies devised by the affected population are adoption of new livelihood activities, borrowing money, skipping of meals, changes in diet to inferior food, reduction in the size and number of meals and other negative coping strategies. Some communities have also moved with their livestock to areas of Sololo, Kukub and Dambala Fachana.

#### **1.2.5: Infant feeding**

The communities interviewed stated that infant feeding has been negatively affected as a result of the incursion. Since the onset of conflict, main issues affecting infant feeding are mothers not able to adequately breast feed, limited access to supplementary feeds, reduced number of meals and lack of dietary diversity.

#### **1.2.6: Livelihoods**

Livelihoods income, economic activities and resources to survive have been worsened since the emergence of insecurity. Livelihoods have been worse off because there are no livelihood opportunities, livelihood assets were either lost or left behind and insecurity inhibiting engagement on livelihood activities. Coping strategies being used by the affected communities are relief from the county government and non-state actors and isolated cases of early marriages. For the disrupted livelihoods, restoration for livelihood activities should be started with the input of essential items such as small loans, small stock of livestock, improved security and tools. As a result of the crisis, essential non-food items urgently needed by the affected are blankets, mattresses; kitchen sets/cooking utensils and mosquito nets.

### **1.2.7: Water and Sanitation**

The refugees have experienced lack of access to water, sanitation and hygiene. There is no water for household consumption, no safe water for (drinking, cooking and washing) and lack of water storage containers. Most of the affected population mainly disposes their waste in open fields while insignificant proportion use designated locations. In areas where latrines are available they are not adequate and condition is deplorable not fit for use.

### **1.2.8: Health**

The main physical health concern is outbreak of diarrhea in the satellite camps. During the interviews, few diarrhea cases were reported with a likelihood of increasing. Also tuberculosis case was reported in CIFA thus close monitoring and isolation needed to contain the already worsening health situation. It was also reported that approximately over 500 women are pregnant and significant number are breastfeeding. There is no access to adequate health care mainly because of insecurity and inadequate health services. Most of the health facilities are not adequately stocked with drugs and other non-pharmaceuticals. It was also noted that the refugees have inherent social and cultural aspects so they resort to home remedy where they prefer herbal medicine. Reported incidences of unskilled deliveries at the temporary shelters. With no blankets and children exposed to cold, respiratory infections was an issue the team was concerned about.

### **1.2.9: Information and Aid**

Ethiopia telecommunication has been cut off thereby limiting access to communication with those left behind (across the border). The affected communities are therefore not able to access information on the disaster from mobile phone/sms, television or radio. Information was mainly acquired through the communities' key informants. There is also an issue amongst the affected population in regard to insufficient aid and aid in few incidences aid does not address their actual needs.

### **1.2.10: Priority issues**

Food was rated highest as the most priority issue amongst the children, pregnant and lactating mothers and elderly. Secondly, water shortage is also a key priority need. Security for persons with disabilities, older persons and women is not a guarantee. Health services are also key especially under-fives, elderly, pregnant and lactating women and people living with HIV. Other problems faced by the affected communities include distress and panic.

### **1.2.11: Psychosocial needs**

The affected population encountered ordeal experiences during conflict. Some lost property, displaced, lost loved ones and some are living in fear, distress and panic. The local and government officials, non-state officers and especially security also experienced chilling accounts at the scene of the crisis.

## **1.3 RESPONSE CAPACITY AND PRIORITIES**

Coping mechanisms are high as the refugees are adopting severe strategies more frequently due to lack of food, loss of livelihoods and lack of opportunities to survive. Notable coping mechanisms like borrowing, reduction in the number and size of meals will lead to negative consequences if alternative solutions are not found soon. Emergency response from the county government, Kenya Red Cross, UNHCR, National Drought Management Authority, CIFA, World Vision, Concern Worldwide, Strategy for Northern Development and ISID have been executing emergency response to cushion the refugees from the emergency situation.

Taking into account the priority needs identified, and the capacity to respond, there are immediate humanitarian needs to be filled. There are no economic activities taking place in the affected areas, livelihoods have been distorted and lost, abnormally high dependency ratio noted and low purchasing power of the households. Important sectors like food security and nutrition, water, health and livestock sectors also have gaps to be filled. There is lack of water in all the affected areas and household water waiting time is high. Only one water bowser is available which cannot efficiently serve the refugees and its condition is wanting. Deplorable sanitation and hygiene standards is widespread across the satellite camps. Most of the health facilities have run short of essential medicine and non-pharmaceutical and routine monitoring and supervision is not taking

place in most of the health facilities. Persons living with disabilities, children under the age of five years, elderly, pregnant and lactating women require special/additional priority targeting since they are the most vulnerable groups during this emergency. Therefore, concrete and need based solutions should be drawn to address the above worrying and response gaps.

## **RECOMMENDATIONS**

1. There is urgent need for general food distribution to 8200 displaced persons. The required food items are as follows: cereals(110.7MTs), pulses(14.76MTs), vegetable oil(7.38MTs), salt(1.23MTs) and sugar(3.69MTs).
2. Water trucking should be upscaled in form of additional water bowsers as only one water bowser is available and not in good condition. The displaced and host communities should immediately be provided with water and 16 water storage tanks (each 1000Litres), water filters, water treatment chemicals (24600 Aqua tabs or PUR) and 2700 jeriicans (each 20Litres)
3. Redeployment of surge team to support in provision of the basic primary health care services, supply of drugs and non-pharmaceutical, provision of 400 dignity kits/mama kits, supplementary feeding to children under the age of 5 years and integration of medical outreaches in the satellite camps.
4. Immediate provision of 1500 transitional shelters, mats and turplines to the satellite camps
5. There is also a need for provision of reproductive health and immunization services as the influx population has huge proportion of expectant women as well as children less than five years.
6. Provision of 500 portable latrines in the satellite camps to avert outbreak of water borne diseases. 520 and 500 cartons of bathing and laundry soaps respectively should be provided.
7. Immediate identification of camp sites.
8. Non-food items should be provided to the affected population.
9. Sub-County security team should coordinate continuous cross-border dialogue meetings to avert the volatile security situation. Tangible and long-term solutions should be reached.
10. There is need to convene an urgent education stakeholder forum to ensure learning in public schools is not affected.



11. Kenya Red Cross and department of health should provide psychosocial personnel to counsel the affected population who have been traumatized and set-up a missing person desk.
12. Livestock disease surveillance and treatment in areas where livestock have migrated to especially Sololo and Dambala Fachana.
13. Provision of livestock feeds as pasture will be depleted in Sololo and Dambala Fachana.

## **ASSESSMENT TEAM**

1. H.E SOLOMON RIWE – DEPUTY GOVERNOR
2. MALICHA BORU- COUNTY SECRETARY
3. GUYO GOLICHA-COUNTY DROUGHT COORDINATOR-NDMA
4. ABOTO ALA- SUBCOUNTY ADMINISTRATOR-MOYALE
5. JOHN OUGO-COUNTY DROUGHT INFORMATION OFFICER-NDMA
6. TALASO CHUCHA- REGIONAL COORDINATOR-KRCS
7. DANCAN ODAWO- WORLD VISION KENYA
8. IMMACULATE NTHIGA- CONCERN WORLDWIDE
9. ADAN WAKO- CIFA
10. JAFFREY MUTUA- CIFA
11. TACHE ELEMA- SND
12. SALAT DENGE- ISID
13. MBATIAN KANTAI- D/OCPD
14. HARON CHABARI- DCIO
15. VICTOR WANJOHI- ASSISTANT COUNTY COMMISSIONER
16. FRANCIS KIRIRI- AGRICULTURE
17. ALEX MBUNDU- LIVESTOCK
18. DAVID GUBO- WATER
19. HALIMA IBRAHIM- DEPUTY SUBCOUNTY ADMINISTRATOR
20. KUSSU ABDUBA- HEALTH
21. MESHACK WIJAS- TRADE