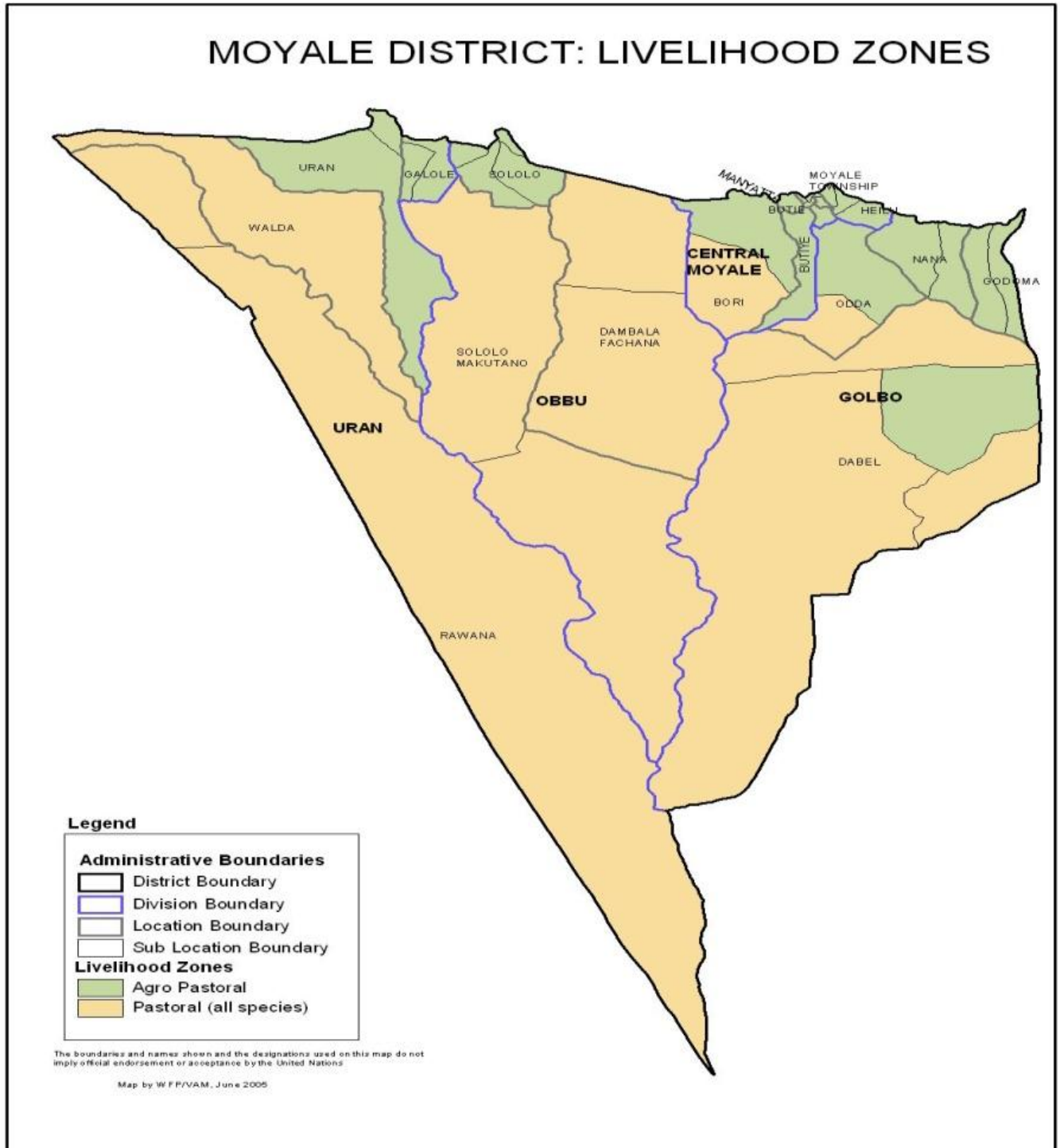


CONFLICT ASSESSMENT REPORT, MOYALE

11-09-2013

ASSESSMENT PERIOD: 04-09-2013 to 07-09-2013

MAP OF MOYALE SUB-COUNTY



1.0 BACKGROUND

This assessment involved KIRA, Nutrition and WASH assessment tools. KIRA is a multi-sector, multi agency rapid assessment tool for assessing onset of rapid humanitarian crisis in Kenya.

Moyale District has a population of 80,650 people as per 2009 census but based on the population growth rate of 2.4% the figure is projected at 88,676. It's inhabited by the Borana, Gabra ,Burji,Garrei, Sakuye and others. Most of the households live below the absolute poverty line, malnutrition rates are moderate (SMART SURVEY-AUGUST 2013), shortage of water, poor sanitation and low literacy levels. Source of livelihoods are Agro-pastoral, pastoral in the rural areas and business activities mainly by the populace who lives in town.

Security situation across the livelihood zones greatly deteriorated because there were reported cases of inter-ethnic clashes. Many households in Golbo division (Kate, Funanyatta, Odda, Mansile, Kinisa, Halobula, Kalaliwe, Illadu, Hadhesa and Gimbe) and Central division (Lami, Heillu,Arosa, Goromuda and Mannyatta) were affected. Approximately 6,500 households were affected of which 107 houses were burnt and 186 houses destroyed and looted.

Besides, the following learning institutions were affected; Butiye primary school (1 classroom was completely destroyed), Moyale Girls Secondary School (Libraries, Classrooms, Computer Lab were broken into and learning materials destroyed/looted), St.Mary's Primary School (Gate and Fence destroyed), Illadu and Mansille Primary School's (Building broken into, learning materials destroyed and School Meals Programme food stolen) and Sessi Academy, a private school was burnt.

1.1 METHODOLOGY

Secondary data from NDMA was used to supplement primary data collected from the sites by volunteers. The assessment team comprised of 8 sectoral specialists who represented Concern Worldwide, National Drought Management Authority, Kenya Red Cross, World Vision Kenya, Agriculture, Water, Public Health, Education and Ministry of Interior and Coordination of National government (Moyale). There was a team of 24 enumerators who collected data from Sessi, Heillu, Manyatta, Dirdima, Kinisa, Gurumesa, Lami and Kate and 4 data clerks. The affected people in these areas includes 37.4% who are in their individual homes (non-hosted), 5% staying with other persons and 32.6% hosting displaced people. 84.6% of primary data was collected through community key informant interviews while 15.4% was collected through community group discussions. There was also direct observation as a form of collecting primary data and other source details included old men from the communities, committee members and peace monitors. Community Key informants used were knowledgeable in a wide array of issues affecting the community and the responses were mainly qualitative in nature.

1.2 SUMMARY OF NEEDS IDENTIFIED

1.2.1: Displacement

93% of the respondents have been displaced since the occurrence of conflict of which most of the affected population mainly have been displaced (no-shelter) and displaced hosted by other persons. A paltry proportion of the population have been displaced to public buildings and not displaced but hosting others.

1.2.2: Shelter

78% of the community group discussions and community key informant interviews stated that their communities do not have access to adequate shelter since the emergence of conflict. The affected population does not have adequate shelter because there shelters are damaged, overcrowded, offer insufficient privacy and insufficient security since the onset of the crisis.

1.2.3: Security issues

It has been evident that insecurity has been a main issue amongst the displaced; 93% of the respondents stated that insecurity poses a major threat to their communities. As a result of the conflict, armed violence is the main security threat to the affected communities. Other security threats are; fear of presence of landmines or explosive remnants of war, displacement of population, gender based violence and continuing threat from natural disasters.

1.2.4: Freedom of movement

Peoples' freedom of movement has been curtailed as exhibited by 78.3% of the respondents. The main issues affecting people's ability to safely move from one place to the other are insecurity and unavailable transport services. Damaged or blocked infrastructure partly hinders free movement of people.

1.2.5: Living conditions of vulnerable groups

71.8% of those interviewed felt that vulnerable people are living alone, 23.1% of the responses showed that vulnerable people are not living alone while 5.1% does not know whether vulnerable people are living or 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.

1.2.6: Food security situation

Food security situation has been adversely affected. Of those interviewed, 100% stated that food security situation in their communities has become worse. The main issue that worsens food security is inadequate food both at household and market level. 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, changes in diet, reduction in the size and number of meals and other negative coping strategy like commercialization of sex which is likely to increase prevalence of HIV/Aid.

1.2.7: Infant feeding

95% of the respondents stated that infant feeding has been negatively affected as a result of the conflict. Since the conflict, the main issues affecting infant feeding are mothers not able to adequately breast feed and reduced number of meals/not enough food diversity.

1.2.8: Livelihoods

Income, money and resources to survive have been negatively impacted since the emergence of conflict. Livelihoods have been worse off because there are no livelihood opportunities, livelihood assets were lost (left behind, destroyed, and looted) and insecurity is preventing livelihood activities. Coping strategies being used by the affected communities are shutting neighborhoods/plots, borrowing money 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.

1.2.9: Wash

There are problems with access to water and sanitation since the disaster. There is no safe water for (drinking, cooking and washing), inadequate water containers, water is unavailable and waiting time is long (6.2hrs). 93% of the affected population mainly disposes their waste in open fields while insignificant percentage (7%) used designated locations. In areas where latrines are used they actually not enough. The main physical health concern is diarrhea. There is no access to adequate health care mainly because of insecurity and inadequate health services. Most of the health facilities have run short of essential medicine. Some of the health in Heillu, Mansille, Kinisa, Odda, Butiye, Arosa and Manyatta facilities are closed due to insecurity and destruction.

1.2.10: Education

Education activities have been negatively impacted on. Schools are closed, students and teachers from the affected communities displaced. This enhances low standard of performance. Five public schools and one private primary school were destroyed, burnt and looted.

1.2.11: Information and Aid

The affected communities are able to access information on the disaster from mobile phone/sms, community leaders and radio. There is also an issue amongst the affected population in regard to insufficient aid and aid does not address their actual needs.

1.2.12: Priority Issues

Other problems faced by the affected communities include distress and panic. Food was rated highest as the most priority issue among the child-headed households and lactating mothers. Secondly, security is of priority for persons with disabilities, older persons and female headed households. Health was also a priority issue and is important to child headed households and people living with HIV.

1.2.13: Psychosocial needs

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

1.3 RESPONSE CAPACITY AND PRIORITIES

The rate of coping mechanisms is low amongst the affected households; they are not able to help one another because of food insecurity. Notable coping mechanisms like borrowing, reduction in the number and size of meals will lead negative consequences if alternative solutions are not found soon. Government response, Kenya Red Cross response, Concern WorldWide response, World Vision Kenya response and local organizations have been executing plans to make the affected communities resilient during disaster.

Taking into account the priority needs identified, and the capacity to respond, there are gaps to be filled. There is low economic activities taking place in the affected areas, this is likely to increase the already high dependency ratio and low purchasing power of the households. Water, health and livestock sectors have gaps to be filled. There is lack of water in almost all the affected areas, household water waiting time is high, household water distance has increased. There is also low standard of sanitation and hygiene. Most of the health facilities have run short of essential medicine. Some of the health in Heillu, Mansille, Kinisa, Odda, Butiye, Arosa and Manyatta facilities are closed due to insecurity and destruction. There is also high influx of displaced patients to health facilities in Dabel, Somare, Kate and Bori hence overstressing the health facilities. Routine monitoring and supervision is not taking place in most of the health facilities. Livestock in the affected areas do not have enough pasture because there was no hay preservation and the existing pasture condition is worse.

Persons with disabilities, child headed and female headed households require additional priority targeting since they are the most vulnerable groups during the crisis.

Concrete solutions have to be drawn to address the above worrying gaps.

1.4 CONSTRAINTS

- Inadequate funding
- Disenfranchised Population
- Logistics are fair

2.0 NUTRITION ASSESSMENT

Table 2.1 DISTRIBUTIONS OF AGE AND SEX FOR CHILDREN < 5 YEARS

Age(Months)	Boys		Girls		Total		Ratio
	No.	%	No.	%	No.	%	Boy: Girl
6-17	27	54.0	23	46.0	50	21.6	1.2
18-29	23	46.9	26	53.1	49	21.2	0.9
30-41	36	49.3	37	50.7	73	31.6	1.0
42-53	28	58.3	20	41.7	48	20.8	1.4
54-59	5	45.5	6	54.5	11	4.8	0.8
Total	119	51.5	112	48.5	231	100.0	1.1

Table 2.2: PREVALENCE OF ACUTE MALNUTRITION BASED ON MUAC CUT OFF'S (AND/OR OEDEMA) AND BY SEX

	All	Boys	Girls
Global Acute Malnutrition	4.2%(2.3 - 7.6 95% C.I.)	4.8%(2.2 - 10.2 95% C.I.)	3.6%(1.4 - 8.7 95% C.I.)
Moderate Acute Malnutrition	3.4%(1.7 - 6.5 95% C.I.)	4.0%(1.7 - 9.1 95% C.I.)	2.7%(0.9 - 7.5 95% C.I.)
Severe Acute Malnutrition	0.8(0.2 - 3.0 95% C.I.)	0.8%(0.1 - 4.4 95% C.I.)	0.9%(0.2 - 4.8 95% C.I.)

Table 2.3: PREVALENCE OF WASTING, UNDERWEIGHT AND STUNTING (SMART SURVEY)

	All	Boys	Girls
Global Acute Malnutrition	6.5% (4.8-8.6;95 CI)	6.8% (4.6 - 9.8; 95 CI)	6.1% (4.3 - 8.6; 95 CI)
Severe Acute Malnutrition	1.3% (0.8 - 2.3; 95 CI)	1.6% (0.8 - 3.1; 95 CI)	1.1% (0.5 - 2.3; 95 CI)
Underweight	16.0% (13.1 - 19.3; 95 CI)	16.5% (13.0 - 20.7; 95 CI)	15.5% (12.3 - 19.2; 95 CI)
Severe Underweight	2.6% (1.7 - 4.0; 95 CI)	2.8% (1.5 - 5.1; 95 CI)	2.5% (1.4 - 4.4; 95 CI)
Stunting	26.8% (23.6 - 30.3; 95 CI)	29.4% (25.4 - 33.8; 95 CI)	24.2% (20.2 - 28.7; 95 CI)
Severe Stunting	7.6% (6.0 - 9.5; 95 CI)	9.0% (6.6 - 12.2; 95 CI)	6.1% (4.4 - 8.5; 95 CI)

Table 2.4: PREVALENCE OF ACUTE MALNUTRITION BY AGE, BASED ON MUAC CUT OFF'S AND/OR OEDEMA

Age(Months)	Total	Severe wasting (<115mm)		Moderate wasting (≥115 and <125)mm		Normal > 125mm		Oedema	
		No.	%	No.	%	No.	%	No.	%
6-17	49	2	4.1	3	6.1	44	89.8	0	0.0
18-29	46	0	0.0	0	0.0	46	100.0	0	0.0
30-41	71	0	0.0	2	2.8	69	97.2	0	0.0
42-53	47	0	0.0	3	6.4	44	93.6	0	0.0
54-59	11	0	0.0	0	0.0	11	100.0	0	0.0
Total	224	2	0.9	8	3.6	214	95.5	0	0.0

Table 2.5: ACTION REFERRED TO SPECIAL FEEDING PROGRAMME

ACTION REFERRED TO SPECIAL FEEDING PROGRAMME		
SEX		Percent
MALE	AT RISK	7.4
	HEALTHY	63
	NO	29.6
	Total	100
FEMALE	AT RISK	12.5
	HEALTHY	62.5
	NO	25
	Total	100

Table 2.6: ACTION REFERRED TO ITC/OTP

ACTION REFERRED TO ITC OTP		
SEX		Percent
MALE	HEALTHY	25
	NO	75
	Total	100
FEMALE	HEALTHY	20
	NO	60
	YES	20
	Total	100

2.7: PSYCHOLOGICAL STATUS OF FEMALE CARETAKER/MOTHER

25% of the affected mothers are pregnant, 28% are lactating while 47% are not pregnant nor lactating.

2.8: CHILD ILLNESS

There were reported cases of diarrhea, skin rashes and fever in children below the age of 5 years. Therefore, there is need for the medical staff to act so as to avert the above diseases.

3.0: WASH ASSESSMENT

It's a dry season and most households lack water. Water has become a crisis in terms of access and availability. The long dry spell is expected to end by October during the onset of short rains. The main borehole at Odda that supplies water to households is non-functional.

Table 3.0: MAIN WATER SOURCES

		MAIN SOURCE OF WATER FOR COOKING AND DRINKING						
		Hand dug well protected	Hand dug well not protected	Spring protected	Spring not protected	Borehole with Hand pump	Motorized system	River stream
LOCATION	AROSA	1	0	0	0	0	0	0
	BUTIYE	20	3	0	1	1	0	0
	DABEL	0	0	0	0	2	3	0
	GOROMUDA	3	0	0	0	0	0	0
	HARSAQO	2	0	0	0	0	0	0
	HEILLU	6	4	0	0	2	0	0
	KINISA	2	6	0	0	0	0	4
	MANSILE	2	0	0	0	0	0	0
	MANYATTA	10	1	0	0	0	0	0
	ODDA	0	0	0	0	0	5	0
	QATE	0	0	0	0	0	0	0
	SESSI	3	0	0	0	0	0	0
	SOMARE	9	0	0	0	7	7	3
	TOWNSHIP	2	0	1	0	0	0	0

The table above illustrates that most of the households draw their water from protected hand dug well especially in areas like Butiye, Manyatta and Somare. Therefore due to lack of water points in the affected areas, there is need for the water department and various lead agencies involved in the wash programme to map areas which have underground water like Qate and other best alternatives in order to alleviate households from unwanted suffering.

Table 3.1: HOUSEHOLDS WATER DISTANCE

DISTANCE FROM WATER POINT TO WATER HOUSEHOLDS				
		DISTANCE FROM THE WATER POINT		
		Less than 500m	Between 500m but less than 1km	More than 1km
LOCATION				
	AROSA	0	3	0
	BUTIYE	1	3	2
	DIRDIMA	1	1	31
	FUNAN NYATA	0	0	1
	GOROMUDA	2	17	2
	HARSAQO	0	5	17
	HEILU	1	7	14
	KINISA	0	0	1
	LAMI	0	1	1
	MANYATTA	6	8	2
	QATE	0	0	25
	SESSI	1	6	2
	SOMARE	0	11	9
	TESO	0	1	6

From the table above, we can deduce that households from Dirdima, Qate, Harsaqa and Heillu are far away from the water sources because household distance to water in the said areas are more than 1km hence require immediate water intervention. Households at Teso, Somare and Sessi are less bad off. Households distance to water at Arosa, Funanyata, Kinisa and Lami is fairly better. Since water distance in most of the affected areas is more than 1km, there is need for urgent response to water shortage.

Table 3.2: RELATIONSHIPS BETWEEN MAIN SOURCE OF WATER AND HOUSEHOLD DISTANCE

CORRELATION BETWEEN MAIN SOURCE OF WATER AND HOUSEHOLD WATER DISTANCE			
		MAIN SOURCE OF WATER	HOUSEHOLD WATER DISTANCE
MAIN SOURCE OF WATER	Pearson Correlation	1	0.510
	Sig.(2-tailed)		0.000
HOUSEHOLD WATER DISTANCE	Pearson Correlation	0.510	1
	Sig.(2-tailed)	0.000	

From the table above, Pearson correlation coefficient is 0.51 which implies that there is a positive moderate correlation between household water distance and main source of water for cooking and drinking. Therefore as main source of water diminishes, distance from water point also moderately increases. Therefore we are 99% sure that during the ongoing water crisis, there is a significant difference between the two parameters hence correlation is significant at the 0.01 level.

Most of the affected households mainly use Jerricans to draw and store water. Buckets are partially used by the households to store water. The average size of water containers by the affected households is 20Litres per day. The average total water per household is 30Litres which is used by 6 household members. Hence each household member uses only 5Litres per day. On average Household water waiting time is 6.2hrs.

The main technical details concerning water points are: borehole fencing, long duration of time taken to fill reservoirs, long distance walk, traditional fencing, motorized scheme-generator type, BH depth, external aid and Odda pan. Poor water drainage and turbidity affected water quality.

Sanitation is also a serious issue of concern since most people have overcrowded to safer areas. It was observed that few households have pit latrines which at the moment are overstretched. Most of the affected members use open defecation and compounds are not clean. There are only 28 pit latrines in the affected areas. Areas like Somare and Teso almost don't have pit latrines as a result sanitation is adversely affected hence the need to reinforce the level of sanitation in the said areas.

The main resources available in the affected communities are stones, trees, grass which can be used for hay preservation and mud which the already suffering communities can use as building material.

There are few cattle troughs and hand dug well for livestock water. Some households walk with their livestock in search of water for an average distance of 8kms and the existing water reservoirs are drying up. Some water pans are also jointly used by livestock and households hence affecting the hygienic condition of household water consumption.

RECOMMENDATIONS

1. DSG, county government and water lead agencies should urgently solve water crisis in Moyale. Affected households should also be immediately provided with water and water storage containers. There should be water tracking, provision of filters and water treatment to the affected population.
2. There is urgent need for general food distribution to 6500 displaced households. The required food items are as follows: cereals (538.2 MT), pulses (93.6MT), vegetable oil (31.2MT), tea leaves (13MT) and sugar 65(MT).
3. Supplementary feeding to children under the age of 5 years should be enhanced by various health actors to reduce poor nutritional levels.
4. Non-food items should be provided to the affected population.
5. There should be provision of outreach services to the displaced persons especially to areas where beneficiaries cannot access medical services.
6. The communities should be educated and sensitized on the importance of maintaining peace, harmony and good inter-clan relations. There should be peace building initiatives by all stakeholders for sustainable development. Without strong education and sensitization campaigns, gains made will be eroded.
7. District security team should coordinate continuous dialogue meetings to weed out and address inter-ethnic conflict. Tangible and long-term solutions should be reached.
8. There is need to convene an urgent education stakeholder forum to ensure learning in public schools resumes.
9. Agriculture department and other organizations should provide the affected households with certified and drought tolerant seeds.
10. Ministry of Health and other organizations should provide psychosocial personnel to counsel the affected population who have been traumatized.
11. There should be restocking of small herds of livestock such as goats and sheep since most of the affected households are pastoralists.
12. The affected whose houses were burnt, properties damaged, lost loved ones should be supported by organizations and other stakeholders in terms of building shelter and empowering them.

13. Schools which were destructed, learning materials destroyed and class rooms burnt should be funded by education and non-education actors for the construction of the affected classrooms. Special provision funds should be solicited from G.O.K and other actors to bring back the school operation to normalcy as soon as possible.

14. Security officers should be more equipped with knowledge so that they can counter sophisticated weapons during conflict.

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