BACKGROUND AND INTRODUCTION

On 27 February 2019, an Oromia-Somali peace conference was conducted with civil and security officials, traditional leaders and communities. Joint committees were established, security arrangements were made and seven bylaws developed on 4 March to maintain the peace. Following these developments, displaced people have reportedly begun to spontaneously return to their place of previous residence.

An interagency observation mission composed of CARE, IMC, OXFAM, WVI, Food Cluster, IOM, OCHA, UNHCR, UNICEF, and WFP went out to visit five return sites in Babile woreda of East Hararge zone from 20 to 23 March 2019.

MISSION OBJECTIVES

- To observe the situation of IDPs/returnees and make recommendations to address their needs.

Situation overview- The majority of the IDPs from this woreda were displaced during the 4-5 August 2018 skirmishes in Jigjiga and the subsequent unrest in other Somali towns. Some 63,000 IDPs were displaced within the woreda (mainly in Babile Town) as well as Somali region.

East Hararge zonal authorities plan to return nearly 63,000 people to areas of previous residence, 10,000 of whom are returning from Somali region. Zonal and woreda authorities appear to be prioritizing the people returning from Somali region in terms of extending system (at least health system) support. Most people observed during the mission were in transit (collective) sites, including schools and health facilities, closer to their previous place of residence. It was observed that the return process was ongoing with people awaiting transport (Government-provided trucks) along main roads, with their belongings, including some food and NFIs.

MISSION FINDINGS

Food- Food is available at the household level from a WFP distribution of a standard food basket (cereals, pulses and vegetable oil) made in the second week of March (starting 7 March). The spontaneous movement of the IDPs disrupted food dispatches to the IDPs for the March allocation in the locations visited by the team.

Livelihoods- Livelihood support was requested by IDPs during focus group discussions, particularly agriculture inputs (seeds and cash crops) and livestock feed. Livestock ownership appeared limited in all visited sites.

Nutrition- The IMC-run Mobile Health and Nutrition Team (MHNT) has reportedly provided nutrition screening support in some sites. Identified MAM cases however went untreated due to lack of TSFP commodities in the sites visited. The lack of MAM treatment commodities was also reported by women focus group participants, who also highlighted the inadequacy of the relief food received for children under 5.

Emergency Shelter/NFI- A critical gap was observed in temporary shelter (plastic sheeting/tarpaulin), and houses were damaged in three kebeles/sites where access to area of previous residence was possible. Most IDP households
had water containers and some blankets were visible (also used to supplement shelter). IDPs in two sites were living in schools/on school grounds. IDPs brought NFIs distributed by Government and humanitarian partners while in Babile. It is unclear how many households already received ES/NFI support while in Babile.

Water, Sanitation and Hygiene (WaSH)- Critical drinking water shortages were reported by women and youth. The zone/woreda officials are supporting water trucking activities in four sites. The water system, including boreholes, hand pumps, and pipes (list not exhaustive) were damaged during the conflict.

Participants in the women focus group discussion reported that they were not using the latrines (where available). The latrines are only available in the collective sites (schools, health facilities). Women felt uncomfortable due to the lack of privacy (no doors) and feared evening use (no lights) and preferred to cross over the barbwire fence for open defecation. All sites have poor hygiene and sanitation conditions.

Education- Most IDP youth participating in focus group discussions reported being out of school since August 2018. Schools were looted and materials (including chairs, blackboards and records) destroyed. If possible, investments through the GEQIP should be made to rehabilitate and resupply schools and enable a return to school. IDPs were vacated from one school to allow the school to reopen. The IDPs are living on the school grounds, which raises protection concerns, particularly in relation to the safety of young girls and boys.

Health- In one site, the zone operated a temporary 24-hour (rotation by health workers) IDP clinic, which included an ambulatory service for referral and childbirth-related needs. There was a health facility in two additional sites.

RECOMMENDATIONS

Food- Food is the highest priority. Emergency food aid is required for the returnees to avoid deterioration of food security.

Emergency Shelter/NFI- IDPs require emergency shelter and Non-food items and dignity kits. There is need to preposition shelter/NFI supplies for additional IDPs that are spontaneously returning.

Health- Urgent deployment of health professionals and provision of equipment, drugs and furniture to health facilities in the zone. In addition, there is need for water treatment chemicals, construction of latrines at health facilities and in communities. There is need for rehabilitation and reconstruction of the damaged health posts with full provision of all health and nutrition supplies.

WaSH: Construction and rehabilitation of water facilities like boreholes, Birkads, water ponds and el-Gof water facility.

Education: Rehabilitation of schools and organization of back to school campaigns. School Feeding Programs for children should also be considered as well as provision of scholastic materials.

Protection: Prioritization, documentation and support of persons with special needs are urgently required.