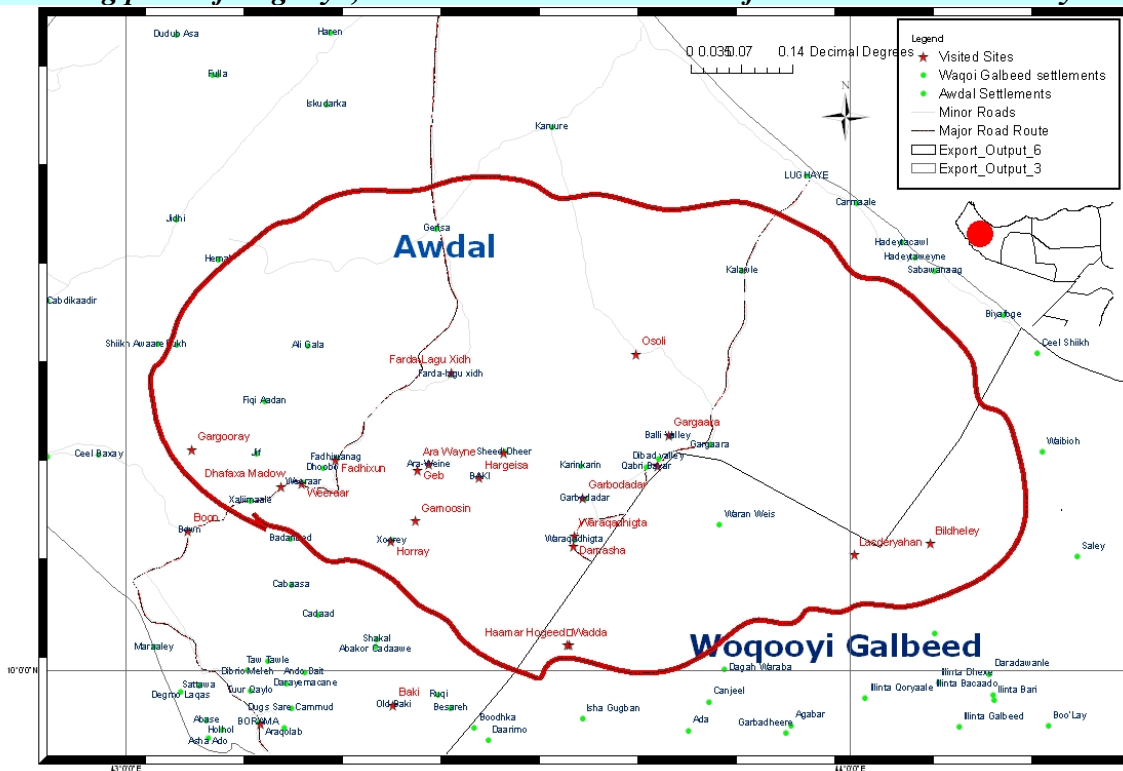


AWDAL INTER-AGENCY REPORT ON COLD RAINS AND LIVESTOCK DEATH.
(Covering parts of Lughaya, Baki and Borama districts—from 2nd to 5th February 2008)



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1) Background

On 17-19th January 2008, cold rains were received in most parts of Awdal Region (mainly Lughaya and Baki districts). These rains have reportedly caused mass death of livestock particularly the shoats. Before the rains livestock condition was reportedly deteriorating due to livestock diseases and lack of pasture. On 22nd January a government (NERAD & Ministry of Planning) coordination meeting was convened with the participation of most humanitarian agencies. In this meeting, it was decided to have inter-government inter-agency assessment. Finally two teams departed on 02 February 2008 with the objective of estimating the scale of the reported problem to identify affected populations, their locations and needs. The two teams consisted of team 1 (FAO, UNICEF, WFP, NERAD) and team 2 (OCHA, WHO, UNHRC and NERAD). Team 1 assessed Baki and Borama districts while team 2 assessed affected areas of Lughaya districts. Although each team produced a separate report, UNOCHA combined the two reports to produce one mission report. However, the team reports contain

more district-specific information and hence can be annexed to this report (by those who are interested in further details).

The report focuses on the most current humanitarian needs of Lughaya and Baki population after livestock depletion due to diseases and extreme cold weather associated with recent Heis rains. Issues related with water and education is not discussed in detail as this was not a community priority at this time of crisis. Major constraint was lack of reliable data at the district and village levels. All figures in this report are estimates based on the interviews with elders, focus group discussions and key informants.

Assessment methodology

1. Interviews with elders and key informants (sometimes with local authorities).
2. Focus groups and local authority discussion
3. Observations
4. Use of WFP VAM and UNICEF RAT tools.

As this report is summarized from the two field reports (from the two teams that made the assessment), detailed information on the villages assessed are contained in the teams' reports which are annexed to this report.

2) Introduction.

Awdal region is the most western region of Somaliland consisting of about 5 about districts (Borama, Baki, Lughaya, Zeila and Dilla) bordering Djibouti and gulf of Aden in the north, Ethiopia in the west and Hargeisa region in the South. This report covers mainly Lughaya and Baki districts as these were affected the most due to scale of livestock death and implied consequence of the disaster. The population in the visited areas is predominantly pastoralist with shoats as the main livestock holding. More than 60% of the shoats are also goats as browsing is the basic animal feed in the area. 15%-25% of the communities owned camel but with few heads per household. Few agro-pastoral pockets were observed between Gargaara and Garbadadar (Lughaya district).

As there is no national census, NIDs 2000 (Polio National Immunization Days) estimated Awdal population as 221,250 persons. This inter-agency assessment estimates the affected population in the visited areas (mainly parts of Lughaya and Baki districts) as 9092 households (45,460 persons).

3) Findings

Climatic Conditions

In the visited areas, fairly good recovery period of 2 to 3 years improved livestock numbers in general. However, Deyr rains (Nov-Oct 2008) were sporadic and below normal both in Golis mountainous and coastal areas. Normally Heis (Dec-Jan) rains are received in these areas. This year, Heis rains were below normal leading to less fodder for livestock. As result, livestock conditions deteriorated which, in turn, made livestock vulnerable for spread of diseases. However, some of Deyr rains were relatively better in the Golis mountainous range of Lughaya district like Gargaara, Damasha and Teeb. This has attracted in-migration of livestock which can cause quicker depletion of browse. The in-migration from neighboring regions and districts created environment conducive for livestock diseases outbreaks.

From 17th to 19th January 2008 cold rains were received in the region mainly Lughaya and parts of Baki district. The cold rains resulted in mass death of livestock, mostly shoats, because they could not withstand the cold temperature due to weak body conditions. The remaining livestock are weak and unmarketable. Many of them continue to die.

Carcasses were observable in most areas. In many areas, people buried carcasses to avoid outbreak of diseases.

Livestock Conditions and deaths

Mass death of livestock was obvious and carcasses were observable in most visited areas. According to the estimates of the visiting teams, 55-66% of the livestock in the visited areas have been lost. Many others have lost completely their livestock and went into destitution.



As types of diseases required qualified expert investigation, communities reported some symptoms including cough, skin diseases (becoming without wool) and nasal discharge. Somali names reported include Susun, Ajarro, Ged'anod and Hinkaar. Diseases tend to spread to more areas and if not contained will go to new areas particularly southward areas.

As livestock lab facilities are well available in Hargeisa, the ministry of livestock needs to have thorough investigation to identify the clinical types of the reported diseases and mobilize necessary response. More vet teams are needed to cover wider geographical areas to contain the diseases.

Health Problems (Human)

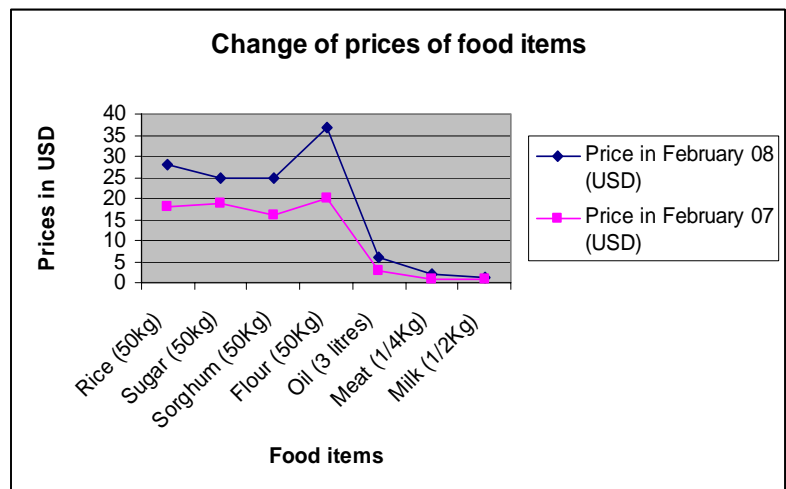
After the rains, human diseases were widely reported in the visited areas at considerable scale. Skin diseases with itching, eye infections, diarrhea, and coughing (pneumonia) are among the widely reported and/or observed diseases. Most areas visited reported lack of health services. Delays of medical supplies from the regional health bureau were also reported. 4 death cases were reported in Lughaya (Source: Mayor of Lughaya). No clinical signs of malnutrition were observed during this assessment. Mobile medical teams should be mobilized to cover the affected districts.



Pattern and Access to Food

As communities in the affected areas are pastoralists, they produce livestock and buy food (mainly imported food items). The main food items locally consumed consist of cereals (rice, sorghum and wheat flour), sugar and oil.

Access to vitamin/minerals and protein is believed to be poor in such dietary combination. Asset (livestock) depletion led to destitution of more than 2000 households. Remaining livestock are unmarketable resulting in loss of income options and affecting access to food negatively. Furthermore, access to milk has been significantly reduced which will, in turn, have negative impact on nutrition of the children. All such negative factors coincided with high prices of stable food items.



For instance, prices of the basic food items have increased by 58% since last February 2007 (see the chart on the opposite side of this page).

Coping Mechanism

Many destitute households gathered (forming hut camps) in the nearby villages to seek assistance from villagers and relatives resulting in high pressure on the host communities. Reduced meals per households (from 3 to 2 or sometimes 1 time per household) were reported to cope with the stressing situation. Few households were reported to have access to remittance from Djibouti. Some men were reported to have gone to bigger towns like Djibouti and Borama for employment opportunities (mainly casual labor). Eating wild fruit was widely reported for most destitute households (mainly those who lost 100% of the livestock). In some areas, selling of pack camels was reported.



Adan Abdilaahi, a 56 year-old man in El-Lahelay with 8 children, used to have 200 heads (shoats) before these rains. Now only one goat and its one calve remain with him. He supports the 8 children with contributions from other community in the village. Most of the time, he is out to collect wild fruit called “Kulanka” to feed his children. The mother of the children died several years ago.

Such coping mechanisms will be overstretched and hence, in such context of deteriorated food security, external assistance is needed to support the households passes this critical period and avoid widespread of malnutrition among children. However, such assistance can be effective when livestock is being treated and allow destitute households restocked to restore their normal livelihoods.

Estimates of the Affected Population and implications

Rains with extreme cold weather were received in Awdal region on 17th-19th January 2008. Coinciding with physically deteriorated body condition of the livestock, this rain resulted in mass death of livestock, the only livelihood assets for the local people. Lughaya and Baki districts were affected the most. Carcasses were widely observed in most areas visited areas contributing to disease outbreaks.

Approximately 9092 households have been affected. This population lost 55-66% of their livestock holding (mainly shoats) while the remaining livestock are sick and continue to die on daily basis.

28% of the affected population (2552) is in destitute conditions as they have lost their livestock completely. 83% of the affected people are from Lughaya district. Within Lughaya district Damasha, Waraqadhigta, Dhagaxtoonle, Beeyocadaadeed and Gargaara include the most affected areas. In most visited areas, destitute households gathered in and around nearby villages forming camps similar to IDP camps with number of huts (Somali Aqals). This data is from 39 villages (64% of them in Lughaya district—see team reports for further details).

Table 2: No. of affected households and their classification

Areas of concern	Population affected (HHs)	% of the affected population (HHs) that lost their livestock completely	No. of HHs who have lost their livestock completely.	Proportion of affected population per districts.
Baki and Borama (14 villages)	1527	28%	428	17%
Lughaya District (25 villages)	7565	28%	2124	83%
Total	9092	28%	2552	100%

⇒ ***NB: The two teams produced two separate reports and this report is the summary of the two. However, team reports contain more detailed district-specific information than this one.***

Fadumo Hirsi Dhawal, a mother of 5 children, used to have 300 heads (shoats) before these rains. Now only 50 sick animals (6%) remain for the family. Due to diseases, none of the remaining livestock can be marketed in order to get income necessary for purchasing food for the family. She decided to go to next village, namely Sheed-Dheer, carrying 2 months old twins, to seek any assistance from the community, government or aid agencies. Her husband stays away with the remaining 50 heads in the neighborhood of the village with some of the children. As the remaining livestock continue to die, she does not know how many of the heads have died since she left the family in the previous day.



Community and Government Response

Borama community mobilized resources to deliver relief food (mainly sorghum and sugar respectively) to many villages in the affected areas in late January and early February 2008. However, the amount of food distributed was insignificant as the ration per household was enough for one day or two. Scooping almost for every household, the impact of this food was minimum. Communities can be advised to increase ration per household and reduced coverage to make their assistance more effective. Communities also provided second hand clothes to the affected households.

Government have brought food (rice, sugar, wheat flour, dates, oil) enough for 500 households to the region after this disaster. This is only 18% of the affected people in the region. One government representative (ministry of interior) in the field explained food may be distributed to thousands of households instead of 500 as per the request of elders. If such method of distribution is implemented, food ration per household will be significantly reduced making ineffective distribution as well. Targeted distribution of food aid is important when the resources cannot allow blanket distribution. What has been provided is almost a drop in an ocean and these people require humanitarian response.



2 food trucks from government (Garbada)

Two government vet teams were observed in the field to treat sick livestock. As reported by communities and confirmed by the vet team members, livestock is treated using cost recovery policy where animal herders should pay for the vet drugs. However, communities reported to have difficulties in purchasing such drugs during this crisis situation and requested government to reconsider this policy when livestock are dying in masses and purchasing power of the people have deteriorated. Furthermore, teams did not reach most of the affected areas like Osoli, Fardolaguxidh and Gargaara, El-Lahelay, etc. Meeting with one of the vet teams in Bildhaale village which is non-affected area, the team members could not change their plans to go to the most affected areas like Damasha (next village) due to government instructions (according to the team members). Vet teams need to be sent strategically to most affected areas instead spending time and resources in non-affected areas. Communities seemed suspicious about vet drugs available at private vet pharmacies (i.e. in fear of expired vet drugs—most communities reported vet drugs from local dealers as ineffective to treat sick heads) and reportedly the vet drugs from government teams were effective in treating the sick livestock.

Needs and Priorities of the communities

Communities prioritized their needs as indicated in table 1 below: namely food aid, vet drugs, medicine and restocking respectively. However, shelter was a problem in many places as weather hazards become severely cold during the rainy seasons. Restocking can be made after diseases are tackled since disease will catch new heads as well.

Table 3: Needs & Priorities of communities

No.	Villages	Priorities			
		1	2	3	4
1	Waraq-Dhigta	Food	Vet Drugs	Medicine	Restocking
	Tuurka	Food	Vet Drugs	Medicine	Seeds and support in cultivation
2	Garbadadar	Food	Vet Drugs	Medicine	Restocking. Support in agriculture for 15 farmers in the area.
3	Sheed-Dheer				
4	Fardo-Lagu Xidh	Food	Vet Drugs		Restocking
5	Gargaara				
6	Osoli	Food	Medicine	Vet Drugs	Restocking
7	IL HAGAR				
9	Beeyo Adaadeed	Food	Vet drugs	medicine	Restocking.
10	Teeb (Toora Boora)				
11	Damasha	Food	Medicine	Vet Drugs	Restocking
12	Laas-Derahayan				
13	Bil-Dhaale				
14	El-Lahelay	Vet drugs	Food	Restocking.	
Average Priorities		Food	Vet Drugs	Medicine	Restocking

NB: This is sample villages as the mission covered more villages than contained in this table.

There was apparent need for food assistance. With the assumption that livestock will be treated within 3 months and people will be able to market their livestock afterwards, food aid can help people pass this critical time.

In agro-pastoral areas (Tuurka and Sheed-Dheer), people indicated need for support in agriculture such as provision of seeds and insecticides. They also requested relief assistance like other villages.

4) Recommendations

1. Food for 9092 affected households for 3 months. More Veterinarian Teams cover more areas. Government to consider distribution of free of charge vet drugs during this critical time.
2. Mobile medical teams to be mobilized to cover as wider areas as possible.
3. Restocking for 2552 destitute households after the sick livestock is treated. Otherwise new livestock will be also sick. This is to enhance recovering from lost livelihood assets (livestock) in a reasonably short term.
4. Provision of seeds and insecticides to agro pastoral communities between Garbadadar and Gargaara. Few other agro-pastoral pockets also exist in some other areas in the region.
5. Shelter assistance is needed to address weather hazards during the cold rains.
6. Food for assets and cash for work to assist communities during this critical time while improving basic infrastructure like feeder roads to agro-pastoral areas.
7. Contingency planning is needed to mobilize resources before disasters occur. In most cases, humanitarian response is delayed due to lack of emergency supplies.