# TABLE OF CONTENTS

**EXECUTIVE SUMMARY** 3  
**TREND ANALYSIS (OCTOBER 2015 - MARCH 2016)** 3  
**RISK ANALYSIS OUTLOOK (APRIL - JUNE 2016)** 5  
**CHALLENGES** 6  
**RECOMMENDED ACTIONS** 8  
**TRENDS AND OUTLOOK** 10  
**I. DRIVERS OF HUMANITARIAN NEED** 10  
- **CONFLICT** 10  
- **CLIMATE** 14  
- **ECONOMIC SHOCKS** 16  
**II. IMPACT AND CONSEQUENCES** 18  
- **DISPLACEMENT** 18  
- **PROTECTION OF CIVILIANS** 23  
- **FOOD INSECURITY AND MALNUTRITION** 27  
- **COMMUNICABLE DISEASES** 30  
**III. HUMANITARIAN CHALLENGES** 33  
- **HUMANITARIAN SPACE AND ACCESS** 33  
- **HUMANITARIAN FUNDING** 35  
- **VULNERABILITY HOTSPOTS** 37  
**ANNEX COUNTRY PROFILES** 38
This report has been developed with humanitarian and development partners to inform preparedness, early action and advocacy efforts, and to mitigate and manage humanitarian risk in the Horn of Africa and Great Lakes region. Countries covered in this region are: Burundi, Djibouti, Eritrea, Ethiopia, Kenya, Rwanda, Somalia, South Sudan, Sudan, and Uganda. It presents a six-month trends analysis from October 2015 to March 2016 and an outlook from April to June 2016. It is the third report in the series and updates the previous scenario report published in October 2015. The report was reviewed at a meeting of the Regional Humanitarian Partnership Team for East Africa (RHPT EA) in Nairobi on 11 April 2016, together with Resident and Humanitarian Coordinators in the region, IASC Regional Directors, donors and development partners.

EXECUTIVE SUMMARY

Trend analysis (October 2015 - March 2016)

Since October, the humanitarian situation in the region significantly deteriorated as a result of continuing climactic and economic shocks and an increasing level of conflict. Since October 2015, the number of people in the region suffering from severe (crisis and emergency – IPC Phases 3 & 4) food insecurity and malnutrition has increased from 18.2 million to 19.49 million. The evolving situation in Ethiopia, which has suffered its worst drought in decades, has increased the number of people requiring food assistance in the country from 8.2 million to 10.2 million between October and December 2015.

The deteriorating humanitarian situation is driven for the most part by the global El Niño event which has had a significant impact on parts of Sudan, Djibouti, north Somalia and most notably on northeastern parts of Ethiopia; an upsurge in violence in parts of Sudan, South Sudan, Somalia and Burundi; and economic shocks including the decline of global oil prices and increasing food prices which has exacerbated existing chronic vulnerabilities.

The flooding effects of the El Niño south of the equator were less than anticipated, however they did contribute to a significant increase in outbreaks of waterborne diseases including cholera and other diarrheal diseases. The worst cholera outbreaks since the 1990s have been reported in Tanzania, Kenya and Ethiopia - 31,000 cases of measles have been reported in Ethiopia alone during 2015. In Burundi, some 1,158,439 malaria cases and 520 deaths have been reported for the period January to mid-February 2016, more than double the same reporting period in 2015. The disease burden for many of these countries serves to further compromise the immune system of people living with HIV, and quicken the progress of opportunistic infections leading to full blown AIDS. Together with sporadic cases of meningitis and unusually high numbers of malaria outbreaks in South Sudan, the increase in communicable and waterborne diseases are also possible indications of the consequences of climate change.
Since October 2015, an additional **420,000 people in the region have been displaced**, primarily by conflict and violence, along with natural disasters, including over 62,000 people fleeing to neighbouring countries. In **South Sudan**, violence, mostly concentrated in the greater Upper Nile region since 2013, has further expanded into new areas – Western Equatoria (Mundri and Yambio), and Western Bahr el Ghazal (around Wau). This growing unrest in parts of South Sudan coupled with heightened food insecurity, has resulted in the flight of some 38,000 people into East and South Darfur since the end of January. Of these, 25,000 arrived in Khor Omer camp in East Darfur, 11,000 have arrived in DRC, and 7,000 in the volatile Central African Republic - both new host countries. Ethiopia - host to the region’s largest number of refugees in the region (731,071 as of February 2016) - is itself struggling to deal with an impending humanitarian disaster in the aftermath of El Niño.

In **Sudan**, a major military campaign displaced more than 100,000 people in Darfur as of mid-January. Humanitarian access remains restricted in the Darfur region and areas of South Kordofan and Blue Nile states where a deteriorating food security situation has been reported. Since the beginning of 2016, Al Shabaab has accelerated its offensive in **Somalia** in the face of stalled operations by international peacekeepers and pro-government forces, and in **Burundi** political tensions and violence show no signs of abating. As of March 2016, a quarter of a million Burundians are hosted as refugees in DRC, Rwanda, Uganda, Tanzania and Zambia, and an estimated 85,000 have been internally displaced since the beginning of the crisis in April 2015. There is an increased refugee influx in **Uganda** from DRC (an average of 200 per day as compared to 20-50 in previous months) as a result of increased militia activity and armed conflict in Eastern DRC. This further threatens the stability of a region that is already struggling with the burden of the existing 3.4 million refugees and 11 million IDPs, who are amongst the most vulnerable within their respective countries. The **Yemen** crisis is placing greater strain on the region. According to the UNHCR portal some 82,873 people from Yemen have arrived in the region since the conflict began. Of these, the largest number - a total of 34,464 individuals (6% Djiboutian returnees, 37% migrants and 57% Yemenis) – arrived in in Djibouti.

Protection of civilians remains a serious issue in the region. According to OHCHR, over 4,800 people have been arrested and detained in relation to the crisis in **Burundi**, including human rights defenders and foreign journalists and at least 220 children have been detained and charged with ‘involvement in armed groups’. An alarming 43 percent of children fleeing the **Burundi regional crisis** are unaccompanied, mainly in Tanzania and Rwanda. In **South Sudan**, since October, nine schools were attacked and different armed forces and groups throughout the country recruited 315 boys and one girl. In **Somalia** the recruitment and use of children in armed conflict is a grave concern, and remains the highest reported violation from November to January. Forced eviction in **Somalia** remains a serious concern especially in the Mogadishu IDP settlements. In 2015, some 130,000 persons were forcibly evicted, predominantly from Danyiile and Dharkenley IDP settlements (source: PRMN Database).
Risk analysis outlook (April - June 2016)

1. While the adverse weather effects of El Niño peaked in January 2016 and are expected to wind down by June, the impact on food security, malnutrition and public health is likely to continue throughout 2016. The next three months will be critical for simultaneously increasing preventative action against the cumulative effects of climate and conflict on the region and scaling up a robust response that focuses on preparedness, mitigation and resilience measures. Critical public health, medical, nutrition and water services are currently overstretched, and without support may well be decimated further, resulting in human suffering on an enormous scale.

Record temperatures are expected in the region in 2016, and there is a 50 percent probability that a La Niña event could follow which will further disrupt livelihoods. Previous La Niña events in eastern Africa have resulted in catastrophic droughts. La Niña’s other impacts include heavy rains and flooding in areas previously affected by El Niño-induced droughts. When a strong El Niño in 1997-1998 was followed by a moderate La Niña event in 1998-1999, the drought that followed affected more than 30 million people in the region. La Niña events have often proved to have an even greater overall humanitarian impact, as the preceding El Niño has already eroded coping capacities. Thus there is a very real danger that millions more people will be at risk of hunger and increased malnutrition, disease, water shortages and displacement in late 2016.

As a result of these threats, affected populations may turn to negative coping strategies that places increased risk to life and livelihoods in the mid to long term. This is often evidenced by risky behaviour leading to the transmission of HIV, especially in areas of high burden. At the same time, wetter conditions and excessive rainfall are expected to continue in equatorial East Africa region, including in southern Ethiopia, south central Somalia, Kenya, Tanzania and Burundi. The health implications are likely to be severe, especially in countries with fewer capacities to reduce health consequences or where the health infrastructure has been damaged due to flooding.

2. Protracted and new conflicts will increase in complexity and intensity as armed groups take advantage of the dry season to make military advances in the long-standing conflicts of Sudan, Somalia and South Sudan. In many other parts of the region the lean season is expected to hit earlier than usual, exacerbating tensions between nomadic pastoralists moving in search of pasture and sedentary farmers and resulting in inter-communal violence. In Burundi, violence is expected to persist and perhaps widen if meaningful political engagement does not take place. Some 330,000 refugees are expected to be of concern by the end of 2016. Despite the peace agreement in South Sudan, concerns regarding the security situation remain while genuine peace efforts remain out of reach. Similarly, bleak prospects for a political solution to the conflict in Yemen, now ongoing for one year, will continue to impact the Horn of Africa region. A packed electoral calendar in 2016 across the region, namely in Djibouti, DRC, Sudan and Somalia, and economic tensions which contributed to Ethiopia’s high fatality number over the reporting period, are likely to further increase violence in the region, trigger additional population displacements and exacerbate humanitarian conditions.

The refugee situation inside South Sudan also remains of concern. According to UNHCR, South Sudan hosts nearly 270,000 refugees as of 29 March 2016, predominantly from Sudan. The Government of Sudan military offensive in Darfur, South Kordofan, and Blue Nile state is expected to continue at least until June, leading to further displacements and access restrictions. In Somalia, Al Shabaab is expected to seize the
momentum of its latest military advances to attack more areas in South Central Somalia and increase its presence and disruption in northern areas ahead of elections. UNHCR projects a further increase of 250,971 people to the number of refugees in 2016 in the region, with the largest numbers expected to arrive in Sudan, Uganda, and Ethiopia, from South Sudan.

3. An economic downturn as a result of global trends and local factors will hurt the most vulnerable particularly in oil-dependent South Sudan and aid-dependent Burundi. It is expected that oil will remain at its current price, thus eroding 90 percent of the Government of South Sudan's revenue, greatly affecting government spending, which will in turn adversely impact the population and increase the risk of further violence and insecurity, particularly in Juba. In Burundi, a fall in tax revenue and the suspension of direct financial support for the Government of Burundi by the EU in response to the on-going political crisis there, is already impacting the government's ability to provide essential services to the population, despite assurances that financial support and humanitarian assistance for the population through UN agencies and NGOs would continue. Ruptures in medical supplies will have disastrous results for over 2 million pregnant women and children under five years of age that rely on critical free health services.

The economies of South Sudan and Burundi have also been adversely affected by currency devaluation and rising inflation. The inflation rate in South Sudan reached an all time high of 202.50 percent in February (the rate averaged 25.51 percent from 2008 until 2015). Cereal prices have reached record highs, increasing by tenfold in the past year, while the cost of water has risen by 500 percent. The increase in the price of water was a contributing factor to the 2015 cholera outbreak in South Sudan. In Burundi, the inflation rate was 6.6 percent in February 2016 up from 4.7 percent before the political crisis started in April 2015. According to FSNWG, the cost of living in South Sudan and Burundi has increased, whilst the purchasing power of the consumer is simultaneously being eroded. In Djibouti, a heavy reliance on imported food has made the large urban population vulnerable to the rising cost of food. These countries, particularly their urban poor who are likely to experience a continuing decline in their purchasing power, are at risk of increased vulnerability. In South Sudan, where a greater number of urban poor are at risk, it is estimated that an additional 600,000 people will require support.

Challenges

The ability of the humanitarian community to meet growing needs continue to be constrained by two factors:

1. Restricted humanitarian access: Increasing access constraints are affecting the ability of humanitarian workers to operate and respond to growing humanitarian needs in the region. Insecurity and bureaucratic impediments imposed on personnel and humanitarian supplies are two major obstacles to effective aid delivery, whilst simultaneously reducing the ability of the people to seek assistance. Diversion of aid and attacks on humanitarian personnel, goods and facilities are the major operational constraints in Somalia and South Sudan, where armed group who are are in control of different parts of the country have proliferated. For example, in South Sudan, more than fifty checkpoints between Juba and Bentiu are slowing supply movements.
At least 18 humanitarian workers (including contractors) were killed in the region during the reporting period, in Sudan (1), Burundi (2), Somalia (5) and South Sudan (12). This accounts for 35 percent of the total number of humanitarian workers killed at the global level. The upsurge of violence against aid workers in South Sudan is particularly alarming. The recent formation of 28 administrative states, and the enactment of the controversial NGOs bill are expected to further complicate aid deliveries in South Sudan in the coming months. Similarly, in Somalia, administrative impediments have been on the rise and continue to result in delays and interruptions in aid programming mainly in Puntland and south-central Somalia. Securing work permits and visas in the region has become increasingly problematic, and is particularly so in Sudan, where 52 percent of organisations were regularly not able to complete their planned missions by December 2015.

2. Underfunding: Humanitarian requirements for the Great Lakes and Horn of Africa for 2016 have not significantly increased except for in the case of Ethiopia, despite the increased needs of the region. This reflects efforts to better target assistance by humanitarian actors, who are struggling with increasing operating costs in insecure settings and in countries with failing economies where local currencies are losing their value relative to the appreciating dollar. Despite the fact that funding needs have remained close to their 2015 levels, the Refugee Response Plans for the South Sudan, Burundi, as well as the Regional Refugee and Migrant Response Plan for the Yemen crisis are amongst the worst funded response plans of 2016, so far receiving funding of 1.1, 8.9 and 0 percent, respectively to date.

There is no doubt that the Horn of Africa region is competing with funding commitments made by donors in response to crises in the Middle East, namely in Syria and Yemen, adding to the risk that funding for the region remains low. As the world turns its attention to other areas and newer conflicts, it is imperative that this does not come at the expense of providing financial support for situations of protracted conflict. In Burundi, early action could prevent a costly, (both from a human suffering perspective, but also from a donor perspective), humanitarian emergency further down the line. It is particularly crucial that development gains made in the region not be reversed.
Recommended actions

1. **Redouble efforts to negotiate humanitarian access and respond to needs, in areas of restricted access:** by strengthening systematic inter-agency assessment and monitoring of response gaps and constraints to provide assistance; engaging in continued and coordinated negotiations with national authorities and non-state actors to minimize bureaucratic impediments that prevent quick deployment of humanitarian personnel. The strategic consultations between the Government of Sudan (GoS) and Armed Opposition Groups which began in March in Addis Ababa, could be an opportunity to negotiate sustained humanitarian access in South Kordofan and Blue Nile as well in the Darfur region which has been limited over the last five years. Such a model could be replicated elsewhere in others contexts in the region. In areas of restricted access, humanitarian partners should also continue to build trust and expand cooperation with local partners to increase assistance delivery.

2. **Increase advocacy on protection of civilians:** the international community should consolidate advocacy efforts and use all diplomatic channels available to urge parties to conflicts in the region to uphold the norms that safeguard humanity and end the deliberate targeting of civilians, indiscriminate or disproportionate attacks and sexual violence. Greater use should be made of social media platforms to bring attention to the protection impacts of political crises using reliable evidence and trend analysis. High-level events should be organized around significant dates, such as the 1-year anniversary of the Burundi crisis, and High-Level visits to conflict centres to highlight protection concerns.

3. **Prepare for a deterioration of situations in Burundi, South Sudan and Somalia crises** by developing regional multi-country contingency plans with aligned scenario planning and analysis to influence early action. This could include anticipating humanitarian access restrictions in Burundi in a worst-case scenario to mobilise stronger efforts to build peace and avert future conflict. A regional protection and gender framework should be developed for the Burundi crisis to harmonise and strengthen protection and gender approaches between the in-country and refugee responses.

4. **Mitigate the Effects of El Niño** by i) increasing funding to areas where El Niño has had a the greatest impact particularly to assist people facing critical and emergency levels of food insecurity and malnutrition; ii) scale-up an integrated multi-sectoral emergency response and recovery, taking into perspective the need to build households and community resilience. This includes strengthening the continuum of support from relief food distributions and cash transfers to social safety nets in order to achieve sustain acceptable levels of food security and nutrition among the worst affected communities; water, sanitation and health interventions to address disease outbreaks including through cross border coordination; and enhance the adaptive capacity of the people through the rebuilding of their assets base and ensuring sustainable, diversified livelihood options; iii) scale up targeted resilience interventions in order to maximize the next season crop and animal outcomes (provision of animal fodder and seeds, destocking and plan for recovery activities if the rains fail again; and iv) preparing for a possible La Niña event in the third/fourth quarter of 2016 by enhancing early warning, regular risk analysis and the updating and implementation of national contingency plans for drought and flood response in “hotspot” areas with key emergency preparedness and response partners; v) build the capacity of Governments, IGAD, and the AU to coordinate and lead La Nina preparedness activities and El Nino response and recovery activities together with the Eastern Africa Regional Humanitarian Partnership Team (EA RHPT), consistent with the principles of localization and a rights-based approach.
5. Engage in coordinated and high level resource mobilization efforts including through joint and coordinated visits to donor capitals to address priority regional humanitarian needs. Hold a follow up meeting of the EA RHPT in April to discuss options.

6. Concretely engage the World Bank, the African Development Bank and the EU, who have recently launched regional initiatives to tackle protracted and complex humanitarian issues in the region, in line with Sustainable Development Goals (SDGs) that affirm that tackling conflict, disaster, climate and other risks and enhancing community resilience is central to the development agenda. IGADs initiative to undertake regular joint humanitarian/development analysis at regional levels through its Programme Coordination Unit should be further supported to ensure humanitarian and development action plans are formed and implemented. Development funding, such as that in Ethiopia, should be further used to strengthen government systems for social protection, food security and basic social services, and to enhance capacities for response to current crises and to strengthen resilience.

7. Increased coordinated engagement with the private sector should also be considered to find innovative ways to collaborate in addressing these challenges. Partnership platforms like the recently launched Humanitarian Private Sector Partnership Platform (HPPP) with support from UNHCR, OCHA and WVI can facilitate increased collaboration.

8. Strengthen collective action in the search of durable solutions in the region to give the millions of displaced persons a chance of a better life with dignity and self-reliance. This should include support to the return process of Somali refugees from Kenya and ensuring that it is voluntary, safe and dignified. Key targeted humanitarian assistance and developmental investments in areas of return have to be initiated and enhanced. This will ensure a realization of an increased absorption capacity in return areas and a sustainable reintegration process within the receiving communities, that mirrors a community-based/area-based approach benefiting returnees, IDPs and the receiving communities. It is equally critical to support a better understanding of political context and incentive structures within which national refugee and IDPs policies are made to have more evidence in support of local integration and the benefit of displaced people economic empowerment for host communities and countries. The provision of adequate long-term and predictable international political and financial support to countries and communities in the region that host refugees and IDPs is paramount. Promote a three pillar approach in contexts such as Burundi where humanitarian, resilience interventions and macro financial support is required to be scaled up simultaneously in response to increased humanitarian threats in order to (1) deliver targeted new humanitarian interventions to meet new acute needs, (2) adjustments to the regular development programme to prevent those in high chronic need falling into need of humanitarian interventions and (3) an evidenced based overview of policy options for alternative delivery mechanisms for service delivery and macro-financial support. External advocacy messaging should clearly communicate the balance of support required from each given the global competition for external support to countries.

9. A fundamental shift in the approach to protracted displacement is needed - one that goes beyond meeting humanitarian needs - to one that preserves the dignity and improves the lives and self-reliance of displaced populations and addresses the impact on host communities. Upcoming High-Level events such as the World Humanitarian Summit roundtable on forced displacement, the various initiatives in Burundi, DRC, Somalia, Kenya, Uganda and Ethiopia and the establishment of regional and national coordination mechanisms to address protracted displacement, including through the mobility pillar of the Regional Strategic Framework for the Great Lakes region which was recently launched by the UN Secretary General, provide critical opportunities to take stock of the state of IDPs and refugees in the region and to support joint actions with partners and member states in the search of durable solutions.
TRENDS AND OUTLOOK

DRIVERS

 OF HUMANITARIAN NEEDS

Conflict

Overview: Conflict remains the primary threat to the safety and dignity of civilians in the region. New and protracted conflicts, election violence, development-induced and inter-communal violence are responsible for at least 4,265 deaths over the course of the reporting period, with the greatest number of casualties recorded in the protracted armed conflicts in Somalia, South Sudan and Sudan. Conflict is also the main driver of displacement, both within states and cross border, in the region. As conflict incidents in the region are expected to increase over the coming months due to an amalgamation of triggers listed below, and the humanitarian impact is expected to be severe on an already vulnerable region.

Source: Armed Conflict Location and Event Data Project (ACLED)
Political instability

South Sudan: Progress with the implementation of the August 2015 peace Agreement has been slow, and both parties to the conflict continue to regularly violate the ceasefire. Violence, mostly concentrated in the greater Upper Nile region since 2013, has further expanded into new areas – Western Equatoria (Mundri and Yambio), and Western Bahr el Ghazal (around Wau). This upsurge of violence is expected to last at least until June, the start of the rainy season, and cause more displacement in and outside the country.

Sudan: Large scale fighting in Jebel Marra that began in February and is anticipated to last until June goes beyond a dry season campaign, and is expected to escalate the humanitarian crises and associated human rights violations and protection issues in the conflict-affected areas and in the region. The “dry season” campaign in South Kordofan started unusually late (March), possibly due to ongoing political negotiations.

Somalia: Since the beginning of 2016, Al Shabaab has accelerated its offensive in the face of stalled operations by international peacekeepers and pro-government forces.

Four lethal attacks have taken place in 2016, including one against a Kenyan AU military camp that led to the withdrawal of AU peacekeepers from the area, and a complex suicide attack in Baidoa that killed at least 30 civilians. Al Shabaab concentrations have been reported across south central Somalia and increasingly in Puntland. The emergence of ISIS aligned elements have also been reported. According to the International NGO Safety Organization (INSO), Al Shabaab attacks in Kenya also continued, predominantly in Lamu County along the coast and Mandera County in the North Eastern province, killing 15 people over the reporting period.

Burundi: Burundi is at risk of descending into a low level and protracted armed conflict, with serious implications for the region. Attacks continue in and around the capital of Bujumbura on an almost daily basis, while sustained regional and international attempts to restart an inclusive political dialogue have yet to produce a breakthrough. There are however some recent positive developments with the appointment of former president of Tanzania Benjamin Mkapa on 2 March to facilitate the political talks between the Government and opposition and the announcement by the AU that Burundi has accepted the deployment of 100 human rights monitors and 100 military observers.

Election and economic related violence

Election related, and development-induced violence, have resulted in an increase in human rights violations, including extra judicial killings, forced disappearances and arbitrary detention. Violent clashes and the excessive use of force by security forces against protestors and political opponents have occurred in relation to elections in Uganda and Djibouti. Presidential elections in DRC, Djibouti, a general election in Somalia and in the self-declared Somaliland region, as well as a referendum in Sudan, all taking place in 2016, may result in an escalation of violence in the East African region in the coming months.
Somalia: Increased clan tensions and violence are expected in the build-up to elections. The state formation process joining the Hiraan and Middle Shabelle regions has encountered major clan resistance, which may exacerbate the current tension in Beletweyne, and trigger new armed confrontations.

Ethiopia: Violence broke out following the announcement of a controversial government development plan to expand the capital - the Addis Ababa Integrated Development Master Plan. The plans, which have since been abandoned, sparked protests from the Oromo ethnic group who feared the forced displacement of Oromo farmers. The Government recognised the legitimate demands of the population but condemned the “destabilizing external forces” that it claimed took advantage of the situation to further their own political agenda in the later stages of the protests.

Inter-communal violence

Inter-communal violence is often linked to the access, use and management of land and land-based resources. It remains widespread and involves the direct targeting of those not engaged in conflicts, including women and children. In Kenya, 99 people have been killed in 122 inter-communal violence incidents, predominantly amongst pastoralist and agro-pastoralist communities, in the Rift Valley (Turkana, Samburu and Laikipia) and Eastern (Meru and Isilio) regions (source: ISNO); while in Ethiopia, ethnic clashes ignited over land rights between the displaced South Sudanese Nuer and Anyuak ethnic groups killing more than 50 people.

South Sudan: Cattle raids between the Murle and Lou Nuer in Jonglei state, and amongst Dinka groups in Lake states have intensified, following a pattern of an upsurge in conflict incidents during the dry season. Tensions between the Shilluk and Padang Dinka in Upper Nile flared following the presidential order to redraw state boundaries, which led to the establishment of the Tiger Faction New Forces, a Shilluk rebel group, in October 2015. Further inter-communal violence erupted in the UNMISS Malakal Protection of Civilians (PoC) site on 17 February 2016 between youth from the Dinka and Shilluk communities and resulted in more than 25 deaths, and the further displacement of 25,000 IDPs. Humanitarian and peace-building efforts have been set back with the destruction of clinics, schools and shelters and water infrastructure.
**SOUTH SUDAN OUTLOOK**

Sudan: Conflict in the Jebel Marra and the Two Areas will likely intensify until the beginning of the rainy season. Under-development and competition over scarce natural resources such as water, and especially pasturelands, are significant triggers of violence between different ethnic and livelihood groups, and remains a root cause of insecurity in Darfur, South Kordofan and Blue Nile. With the extension of El Niño related drought, tensions are expected to increase. Government-allied militias in West and South Kordofan were involved in cattle raiding against local populations, whilst the newly appointed governors of East and South Darfur have created security buffer zones between warring communities to curb inter-communal violence.

**SUDAN OUTLOOK**

Sources: Seasonal calendar for HOA countries, ACLED data
Climate

Overview: Despite El Niño having passed its peak-strength, and the estimation that it will weaken and fade during the second quarter of 2016, its impact on the region is ongoing, and could further worsen. It remains very strong and is therefore still a key-influencing factor of in the March-May rains in the region. According to the ICPAC regional consensus climate outlook, much of Burundi, Rwanda, Uganda, southern and eastern parts of South Sudan, southern, northern, central and eastern Ethiopia, central Somalia as well as western, northwestern and central Kenya have an increased probability for near normal to above normal rainfall during this season. Enhanced rainfall in these areas is likely to increase waterlogging and possible flooding in flood-prone areas. In these areas, landslides, crop and animal diseases and pests, increase in water-borne diseases, damage to infrastructure, displacement, and post-harvest losses are expected.

El Niño

The El Niño event should be understood in the context of a “livelihoods” crisis, which anticipates a future increase in the scale and frequency of droughts in the region due to climate change. In the northern sector of the region, persistent El Niño-related drought conditions, since May 2015 have affected seasonal performance in most parts of the region. This resulted in below average crop and animal production towards the end of 2015. The areas most affected were parts of Ethiopia, Sudan, Eritrea, Djibouti and Greater Upper Nile of
South Sudan. Parts of northeastern Uganda and northern parts of Somalia saw drier than average conditions for successive seasons. A critical malnutrition situation is likely to persist across these countries, particularly Ethiopia, Somalia and South Sudan. Because of below-normal rains experienced in the upper parts of the Shabelle basin during the previous season, which led to over-utilization of the river water both in Ethiopia and Somalia, water levels in some areas of the Shabelle River are at their lowest in decades (source: Somalia Water and Land Information Management). The rapid deterioration of the water situation has resulted in a critical decline in access to water in Belet Weyne, Bulo Burto and Jalalaqsi towns.

Drought also reduces livelihoods and educational access, and it leads to protection concerns for vulnerable people travelling long distances to collect food and water. Women and children are particularly at risk of child and gender based violence directly related to water shortages. Schools are often closed as a result of lack of water or children are forced to miss school to help their families. Furthermore, drought with its associated income shocks and food insecurity, has been correlated with reduced HIV treatment adherence and increased HIV transmission, a concern particularly for countries with high prevalence in the Great Lakes, such as Tanzania and Uganda.

Ethiopia: After failed spring rains, Ethiopia’s summer rains were severely affected by El Niño. In a country where over 80 percent of the population depends on agriculture for their food and income, this has driven food insecurity, malnutrition and water shortages in affected areas. Crop and livestock production has dropped by 50 to 90 percent in some areas and failed completely in the east of the country. According to regional estimates, seed reserves are severely depleted following unsuccessful planting and re-planting. Currently 838,000 households urgently require belg and long-cycle meher crop seeds before the belg planting window closes (source: OCHA Ethiopia Weekly Humanitarian Bulletin, 7 March 2016).

Djibouti: Delayed and below-average rains have limited pastoralists’ access to pasture. Wells, underground cisterns and other water infrastructures have been seriously reduced. Some 227,463 people are food insecure (IPC October 2015). The most affected areas are Ali Sabieh, Obock and Dikhil.

Somalia: Somalia faces large-scale food insecurity between now and June 2016 in areas dealing with the effects of El Niño after previous periods of below average rainfall. A combination of poor rainfall and drought conditions in several areas, and protracted and new population displacement is cause for alarm - driving food insecurity and malnutrition in affected parts of Puntland and Somaliland. Acute water and pasture

### Drought and Flood Affected People in Eastern Africa by Year

Source: [http://ggweather.com/enso/oni.htm](http://ggweather.com/enso/oni.htm), EMDAT
shortages have been reported in drought-affected parts of Puntland and Somaliland, affecting an estimated 1.7 million people.

**Sudan:** Late rains and below-average rainfall in the second half of 2015 delayed planting, reduced cultivatable areas and reduced water availability for people and livestock. Approximately 70 percent of Sudan’s rural population relies on traditional rain-fed agriculture for food and income, and over 80 percent of the entire population depends on rainfall for their water supply requirements (source: OCHA El Niño Monthly Overview 9 March).

**La Niña**

The World Meteorological Organization (WMO) estimates that there is a 50 percent chance of a La Niña developing in the third or fourth quarter of 2016, and furthermore, La Niña events are likely to be accompanied by record temperatures. According to FEWSNET and the IGAD Climate Protection and Applications Centre (ICPAC), land surface temperatures are predicted to remain above average for the northern and parts of the southern sectors of the region. This is likely to worsen the current situation in north Somalia, Ethiopia, Djibouti and eastern Sudan, as pasture deteriorates and water sources are depleted at a faster rate due to higher than normal temperatures.

**Economic Shocks**

**Overview:** South Sudan and Burundi have experienced currency devaluation and high inflation. According to FSNWG this exposes them to increased vulnerability to economic, political and climate events, and weakens their resilience to such shocks. It is expected that the Government of South Sudan will continue to be severely impacted by the low price of oil. Further, the suspension of direct EU assistance to the government of Burundi will no doubt have longer-term consequences for the country. Djibouti is experiencing rising costs of food, which could have dire consequences for its mostly urban population, which relies heavily on food imports.

**Oil price decline**

The price of crude oil has declined by 33 percent in the last six months alone and has been fluctuating between thirty and forty dollars per barrel since the start of 2016. In the region, this has primarily affected South Sudan, which is highly dependent on the export of crude oil, which accounts for 90 percent of government revenue and hard
currency. As result, the South Sudanese pound has depreciated sharply and the annual inflation rate has increased by 202.5 percent as of February, the highest in the country’s history, mainly due to the elevated cost of transport, hotel and restaurant services, and breads and cereals (source: WFP South Sudan Market Price Monitoring Bulletin, January 2016). The current oil price levels have virtually eroded the profit margin for the Government of South Sudan.

**Currency devaluation and rising cost of commodities**

The cost of food in the region has been rising steadily over the past six years in Africa, with the East Africa region the most greatly affected. South Sudan has seen the steepest increase in the cost of food staples such as beans and maize over the past year as inflation has soared, and the cost of maize has risen sharply in Burundi over the same period.

**South Sudan:** The price of staple food commodities such as sorghum, maize, beans, wheat flour and sugar, has increased, as have official fuel prices. The availability of grains and legumes is reduced in many areas due to low local production last season, combined with reduced import flows. Despite the government waiving import duties on imported foods, the cost of imported food continues to rise as well, as a result of a scarcity of foreign exchange (dollars) available to traders to import, and thereby leading to a scarcity of commodities on markets. These commodities are then sold at higher (devalued) local currency prices. It is believed that prices will continue to rise through the lean season until the next green harvests are realised in August 2016.

**Ethiopia:** Ethiopia has experienced 12.4 percent food inflation and 7.9 percent non-food inflation in January 2016, with an overall inflation rate of 10.2 percent. National wholesale prices have increased (maize +21%, wheat +30%, sorghum, +24%) compared to the long-term average (source:
IMPACT AND CONSEQUENCES

Displacement and irregular migration

Overview: Insecurity, acute poverty, social and political oppression and environmental fragility continue to drive people from their homes. Escalating conflict in the region has meant an increase in displaced persons in the first quarter of 2016, and this number is expected to rise.

From April to June 2016, the complex nature of irregular migration to and from the Horn of Africa is expected to continue. The Yemen conflict is showing no signs of abating, and this will continue to displace and attract migrants and refugees. Increased vulnerabilities of refugees and migrants and the absence of legal channels for migration will lead to a further increase in trafficking in persons. The arrivals in the Horn of Africa from Yemen have sharply decreased in the first months of 2016 as fighting moved to the north of the country, resulting in higher levels of IDPs, but it is uncertain if this will continue. Numbers could spike to much higher levels if violence increases in the south of the country and significant numbers of Yemen’s 2.5 million IDPs decide to seek refuge outside the country.

IDPs

There has been a 3.4 percent increase in the number of IDPs in the region since October 2015 as a result of conflict and natural disasters, primarily in Burundi (31.8%), Sudan (3%) and South Sudan (2.9%). The number of IDPs in Ethiopia increased (16%), mostly as a result of the drought. Despite new conflicts and the intensification of violence in the region, internal displacement in Eastern Africa remains largely of a protracted nature with most IDPs living outside IDP settlements, except in Sudan. The majority of IDPs in Somalia lives in urban areas, with Mogadishu hosting 36 percent of the national caseload of 1.1 million. The disproportionate number of women and children is a prominent feature of displaced populations in Eastern Africa. It is estimated that 90 percent of the newly displaced communities in North Darfur state are women and children.

Burundi: According to the Humanitarian Needs Overview for Burundi, international aid accounts for 51 percent of the government budget, and aid-dependency is even higher in the health and agriculture sectors (60% and 80% respectively). The recent EU suspension of direct assistance to the government - coupled with a fall in tax revenue as a result of the crisis - is crippling the government’s ability to provide essential services to the population. The shortfall in funding is already resulting in a break in supply of essential medicines, and also threatens the payment of salaries for public servants.

WFP, Ethiopia Monthly Market Watch, January 2016). High inflation will no doubt add to the 10.2 million people who are already facing acute food insecurity. This number is already expected to rise with the onset of the early and severe lean season.
Sudan: Over 100,000 civilians have been displaced from the Jebel Marra area since mid-January 2016 as a result of increased hostilities between the Sudanese Armed Forces (SAF) and the Abdul Wahid faction of the Sudan Liberation Army (SLA/AW). In December, the Government of Sudan made public statements relating to the return of IDPs and the closure of camps in Darfur. Such statements, if operationalised, may force people to return to areas where insecurity still reigns.

Somalia: 90,000 people were temporarily displaced in Galkayo, including 40,000 IDPs when fighting broke out between Puntland and Galmudug forces in November. The re-displacement of IDPs is a common feature in both events, which further compounds the already vulnerable state of these displaced communities.

Kenya: In February, the Government of Kenya ordered the closure of 39 IDP camps across the country hosting 11,000 households following the 2007 post-election violence. Yet conditions, including security, justice and land rights, are not sufficiently guaranteed for IDPs to return to their place of origin or settle sustainably elsewhere.
Refugees

According to UNHCR, the number of refugees has increased by 2 percent in the reporting period with 62,000 new refugees in the region, placing additional strain on countries with existing high caseloads of refugees. This number is expected to rise as tensions grow in the coming months. Active hostilities in Burundi, South Sudan, Somalia and Yemen have increased the refugee populations in DRC, Kenya, Rwanda, Tanzania, South Sudan and Uganda since September 2015.

Since the beginning of the year, there has been a significant rise in the number of people leaving South Sudan, with the majority fleeing to Sudan or Uganda. In the past two months alone, 25,000 South Sudanese have arrived in Khor Omer camp in East Darfur, and according to the Sudanese Red Crescent, of those who have arrived in West Kordofan state during the first week of March, 80 percent have been children. A decrease in new arrivals in Uganda in mid-February coincided with the presidential and general elections held on February 18. However, numbers began to rise again in March.

**CURRENT REFUGEE CASELOAD (AS OF 26 FEB 2016)**

Refugees caseload as of Oct 2016

- Sudan: 3,164,076
- Kenya: 3,226,260
- Ethiopia: 731,071
- Uganda: 304,375
- Djibouti: 27,973
- South Sudan: 145,920
- Rwanda: 47,718
- Tanzania: 44,864
- Burundi: 27,973
- Somalia: 43,049
- Yemen: 11,618
- DRC: 53,363
- ERITREA: 2,353

Percentage change since Oct 2015

- Sudan: 0.8%
- Kenya: 2.0%
- Ethiopia: 14.7%
- Uganda: 10.15%
- Djibouti: 35.9%
- South Sudan: 7.6%
- Rwanda: 35.9%
- Tanzania: 7.6%
- Burundi: 1.5%
- Somalia: 5.6%
- Yemen: 13.3%
- DRC: 2.4%
- ERITREA: 52.81%

Projected refugees arrivals in 2016

- Sudan: 15,818
- Kenya: 71,181
- Ethiopia: 3,614
- Uganda: 13,096
- Djibouti: 5,281
- South Sudan: 1,534
- Rwanda: 2,534
- Tanzania: 145,920
- Burundi: 27,973
- Somalia: 43,049
- Yemen: 11,618
- DRC: 53,363
- ERITREA: 2,353

**WEEKLY REFUGEE INFLUX (SOUTH SUDAN SITUATION)**

Graph showing weekly refugee influx from October 2015 to March 2016 for Sudan, Kenya, Ethiopia, and Uganda.
Ethiopia saw one of the highest influx of refugees in the region over the reporting period (+5.4%), mostly originating from South Sudan, straining depleted coping capacities. A further 41,000 South Sudanese refugees are expected to arrive during 2016.

Over 246,000 people have left Burundi since the beginning of the crisis in 2015, yet over the first few months of the year these numbers have dwindled. This is the result of several factors: violence has predominantly remained contained to Bujumbura and its surroundings; increased restriction of movement for the affected population; and intimidation by security forces and imbonerakure at the borders towards those attempting to flee the country.
Migrants

The Horn of Africa is a key source and place of transition for migrants within the region, heading north through Egypt into Israel; eastwards towards Yemen with the Gulf States as an envisaged final destination; southwards through Kenya toward South Africa; and the “Northern route” towards Europe. Despite the ongoing conflict in Yemen, some 92,446 people arrived there by boat in 2015. This is one of the highest annual totals of the past decade. Two thirds arrived since March 2015 when the conflict began (source:RMMS: http://www.regionalmms.org/index0b30.html?id=2).

Migrants and refugees from the Horn of Africa feature prominently in the unprecedented influx into Europe in 2016, with over 129,000 total arrivals and 418 deaths in the Mediterranean. The entrenched nature of unresolved conflicts and political issues, combined with limited job opportunities and a “culture of migration” means that complex migration flows in the region are unlikely to decrease. Of concern are the growing patterns of irregular migration, including of transnational networks that exploit and abuse vulnerable migrants, including in the form of trafficking.

With continuing conflict in Yemen, the traditional “one way” migration route from the Horn of Africa to Yemen has become “bidirectional” in 2015, causing additional stress on the region. According to the UNHCR portal, 82,873 individuals from Yemen have arrived in the Horn of Africa (Djibouti, Ethiopia, Somalia & Sudan) as of 1 March 2016. Of these, approximately 30,000 arrived between October and December 2015. Most were national returnees in Ethiopia and Sudan and Somali nationals in Somalia. The majority of individuals leaving Yemen for the Horn of Africa have entered through Djibouti (+33,000 individuals).

Whilst the majority of arrivals from Aden have declined to register as refugees, as they prefer to use Djibouti as a transit country to unknown final destinations, their arrival in the country has placed additional strain on services there.
Protection of Civilians

Overview: The protection of civilians in the region has seen no improvement. Armed conflict and widespread violence remain the primary threats to civilians. Violations of international humanitarian and human rights law aimed at protecting civilians include the deliberate targeting of civilians, indiscriminate use of explosive weapons in populated areas, sexual violence, forced displacement, destruction of civilian property and objects, and the recruitment of children. Such violations have resulted in high levels of trauma and psychosocial distress in the region, especially amongst displaced populations and communities living in areas where IHL violations are systematically committed against civilians.

Violations of international humanitarian and human rights law

The use of indiscriminate tactics, such as the recent intensive shelling and aerial bombardment in Jebel Marra, South Kordofan, and Blue Nile; the use of improvised explosive weapons in Somalia; and grenade attacks in urban and civilian areas in Burundi, have caused injury and unnecessary suffering to the civilian populations.
Extra-judicial killings, arbitrary arrests and detentions, the use of torture, abductions and enforced disappearances, intimidation of the media and civil society remain characteristic of the acute protection crises in Sudan, South Sudan, Burundi and Somalia, and have increasingly emerged in Uganda and Djibouti.

The human rights situation in South Sudan has deteriorated, in particular in the Equatorias where fighting between government forces and rebel groups is more intense. Attacks against civilians in their homes, in churches, mosques, medical facilities and UN bases were reported and were mostly committed by government forces and allied militia.

In Sudan, over 280 incidents of human rights violations were reported between October and January particularly in Darfur and South Kordofan and Blue Nile by government forces and militia (source: SUDO UK). These include the direct attack on over 115 villages (110 in Darfur) in the month of January.

In Burundi, regular searches for weapons by police in Bujumbura neighbourhoods suspected of supporting the opposition involve the harassment and intimidation of civilians and a growing number of mass arrests, mainly of young men and adolescents. According to OHCHR, over 4,800 people have been arrested and detained in relation to the crisis, including human rights defenders and foreign journalists. The Burundi Inter-Agency Humanitarian Needs overview 2016, reported that at least 220 children have been detained and charged with ‘involvement in armed groups’ and are often kept for lengthy periods in dire conditions, and in some cases not separated from adults. Since the December attacks on military installations in Bujumbura a sharp increase in cases of enforced disappearance, use of torture and ill treatment has been recorded coinciding with reports of the existence of illegal detention facilities and at least nine mass graves.

During the pre and post-election period in Uganda, and in the lead up to Presidential elections in Djibouti, there have been persistent allegations of harassment and the arbitrary detention of political opponents, journalists and human rights defenders as well as reports of excessive use of force by security forces.

**Grave child rights violations**

Many instances of grave violations against children have been reported and documented in the region. Despite progress in commitments by some armed actors to put an end to grave child rights violations, an increased number of children have been subjected to such violations, in particular child recruitment, perpetrated by different parties to the armed conflicts in the region.

South Sudan: The SPLM/A signed an action plan on 26 December to cease and prevent the recruitment and killing or maiming of children. However, during the reporting period, nine schools were attacked and 315 boys and one girl were recruited by different armed forces and groups throughout the country, including Greater Upper Nile, Eastern Equatoria, Warrap and Western Bahr el Ghazal. By the end of January, 39 schools were still being used for military purposes. Since the beginning of the conflict on 15 December 2013 to February 2016, 1,949 incidents were reported affecting 68,714 children, of which 1,496 incidents have been verified, affecting 39,717 children.

Somalia became the 196th State to ratify the Convention on the Rights of the Child on 1 October 2015. In spite of this positive development and the Government’s commitment to implement Somalia’s action plans
on children in armed conflict, the recruitment and use of children remains the highest reported violation across November to January, affecting 244 boys and 16 girls in South Central, especially in Middle Juba and Galgadud.

In Burundi, the police and military are reportedly occupying at least six schools in the contested neighbourhoods of Bujumbura and there have been several attacks on schools grounds. Children in Burundi are at heightened risk of recruitment, particularly male adolescents who face increasing intimidation and suspicion of collaborating with a rebel movement.

Sudan: Seasonal recruiting of children by government forces and allied militias throughout the country to fight in Darfur, South Kordofan and Blue Nile has been extensively reported by humanitarian and human rights organisations. A lack of access to these areas means that independent investigations into the issue cannot be conducted. In March the Government of Sudan signed an Action Plan with the United Nations to prevent the recruitment and use of children by Sudan Government Security Forces. The completion of the measures agreed to in the plan by the government will be verified by the United Nations.

REGISTERED NUMBER OF CHILDREN AFFECTED BY GRAVE CHILD RIGHTS VIOLATIONS

<table>
<thead>
<tr>
<th></th>
<th>Boys affected</th>
<th>Girls affected</th>
<th>Unknown sex affected children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Somalia</td>
<td>40</td>
<td>245</td>
<td>314</td>
</tr>
<tr>
<td>South Sudan</td>
<td>2,841</td>
<td>542</td>
<td>736</td>
</tr>
<tr>
<td>Burundi</td>
<td>2</td>
<td>8</td>
<td>11</td>
</tr>
</tbody>
</table>

Note: Monitoring and reporting of grave child right violations in Burundi has recently begun thus the above figures are not complete. February figures for Somalia and Burundi are not yet reported.

Source: UNICEF
Unaccompanied and separated children

The number of children separated from their families continues to increase, mainly due to violence in populated areas, the targeting of civilians and forced displacement. However it has also been exacerbated by the gradual depletion of coping mechanisms in protracted conflict situations, where families are no longer able to support children in their care. In the South Sudan regional crisis, unaccompanied and separated children (UASC) represent 10 percent of the total number of refugee children in Kenya and Ethiopia. In the Burundi regional crisis, an alarming 43 percent of UASC are unaccompanied, mainly in Tanzania and Rwanda. Most of the UASC across the region are boys attempting to flee heightened risk of forced recruitment, arrest and intimidation. Unlike in other host countries, in Rwanda there are nearly twice as many unaccompanied girls than unaccompanied boys. All UASC face increased risk of abuse, exploitation and neglect; however unaccompanied girls are most vulnerable to sexual exploitation, sexual violence and trafficking.

Gender Based Violence (GBV)

GBV has been used as a weapon of war, particularly in Somalia, South Sudan, Sudan, DRC and most recently, Burundi. Spikes in GBV incidences were noted in South Sudan, linked to the illegal use of arms, new mass displacements, cattle raiding and food insecurity. The most grievous cases reported included gang rape and sexual slavery. In Burundi, increased incidences of GBV are attributed to the political unrest and subsequent civilian displacement, with documented cases of rape occurring during search operations. In Sudan, new cases of sexual violence continued to emerge in North Darfur, close to the Jebel Marra area whilst in Somalia the large majority of GBV cases recorded came from the IDP community. Across the region, GBV incidents remain largely under-reported owing to fear and stigma of survivors.

Housing, land and property violations

There are increasing reports of the destruction of homes, crops and property as a consequence of conflict and violence, most recently in the Jebel Mara region of Sudan. In South Sudan and Burundi, homes of displaced people are being occupied or used by other IDPs or military personnel, posing serious obstacles for those who may seek to return. During search and arrest operations conducted in Bujumbura neighbourhoods suspected of supporting the opposition, property has been destroyed and homes and businesses looted. In Somalia, forced eviction remains a serious concern. In 2015, nearly 130,000 persons were forcibly evicted, predominantly from Danyile and Dharkenley IDP settlements, during the reporting period (source: PRMN Database). This number is more than four times the number of evictions reported in 2014 (32,500). Many IDPs have been pushed into unsafe areas on the outskirts of towns where services and livelihood opportunities are limited. In Ethiopia, the drought has exacerbated land issues in the Oromia region, as well...
as amongst pastoralist communities.

**Explosive hazards**

The presence and use of explosive hazards in the region has resulted in civilian death and injury, restricted freedom of movement for civilians, impeded humanitarian access, and has undermined the possibility for durable solutions for IDPs and refugees. During the reporting period, 37 people in South Sudan were killed or maimed by Explosive Remnants of War (ERWs) and landmines. In both South Sudan and Somalia, most casualties of ERWs are children, especially boys, who pick up and play with unexploded ordnances. In Burundi, 170 attacks took place involving explosive grenades. These were mainly executed in the populated urban neighbourhoods of Bujumbura, killing 22 people and injuring 109 others from November to January, with an increasing trend in February of targeting civilian places, such as bars and markets. The prohibited use of improvised explosive devices (IEDs), frequently deployed in Somalia by Al Shabaab, continues to cause a high level of casualties among civilians. Eritrea remains highly contaminated by landmines, with only 25 percent of minefields cleared by end of 2015. More than 650,000 people currently live in areas impacted by landmines and ERWs, which significantly impacts both their safety and livelihoods. Seventy percent of reported casualties from landmines and ERWs are children, primarily boys (source: UNICEF, 2016 HAC).

**Food insecurity and malnutrition**

**Overview:** As of February 2016, close to 19.49 million people are facing severe (crisis and emergency - IPC Phases 3 & 4) food insecurity and malnutrition in parts of Ethiopia, South Sudan, Sudan, Somalia, Burundi, Djibouti and Uganda. They require urgent live-saving humanitarian assistance. A situation of critical malnutrition is likely to persist across these countries.

**FOOD INSECURE POPULATION ('000)**

<table>
<thead>
<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Burundi</td>
<td>400</td>
<td>800</td>
<td>1300</td>
<td>1900</td>
<td>2500</td>
<td>3100</td>
</tr>
<tr>
<td>Djibouti</td>
<td>160</td>
<td>320</td>
<td>480</td>
<td>640</td>
<td>800</td>
<td>1000</td>
</tr>
<tr>
<td>DRC</td>
<td>6000</td>
<td>6000</td>
<td>6000</td>
<td>6000</td>
<td>6000</td>
<td>6000</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>900</td>
<td>900</td>
<td>900</td>
<td>900</td>
<td>900</td>
<td>900</td>
</tr>
<tr>
<td>Kenya</td>
<td>4500</td>
<td>4500</td>
<td>4500</td>
<td>4500</td>
<td>4500</td>
<td>4500</td>
</tr>
<tr>
<td>Somalia</td>
<td>300</td>
<td>300</td>
<td>300</td>
<td>300</td>
<td>300</td>
<td>300</td>
</tr>
<tr>
<td>South Sudan</td>
<td>1450</td>
<td>1450</td>
<td>1450</td>
<td>1450</td>
<td>1450</td>
<td>1450</td>
</tr>
<tr>
<td>Sudan</td>
<td>1900</td>
<td>1900</td>
<td>1900</td>
<td>1900</td>
<td>1900</td>
<td>1900</td>
</tr>
<tr>
<td>Uganda</td>
<td>800</td>
<td>800</td>
<td>800</td>
<td>800</td>
<td>800</td>
<td>800</td>
</tr>
</tbody>
</table>

*Source: FSNWG, FEWSNET*
UNICEF reports about 1.44 million children under 5 years are acutely malnourished in Ethiopia in 2016. The 2016 projection for South Sudan is around 700,000 cases, and in Somalia 300,000 cases are expected, with sustained high malnutrition rates among IDPs.

The main drivers of food insecurity and malnutrition, significantly affecting the most vulnerable households in the region, are conflict in the Greater Upper Nile states of South Sudan, eastern Darfur region and central North, South Kordofan and Blue Nile states of Sudan, south-central Somalia; economic shocks particularly in South Sudan, Djibouti and Burundi; recurring droughts, especially Ethiopia; and floods especially in parts of Kenya, Somalia, Sudan and Uganda.

Along with these factors, in recent years, per capita agricultural production has remained stagnant or even declined in the Horn of Africa, resulting in a lower food yield per person under normal rainfall conditions. This lower yield compounds the effects of more frequent droughts. There is consensus among climatologists that climate change will continue to increase the negative effects of El Niño and La Nina on rainfall. Alongside the increasing human pressures on natural resources, it means that there is a higher probability of famine in the region.

Burundi: harvests have suffered as a result of internal displacement and reduced access to land. Following the EUs suspension of critical development funding to the Ministry of Agriculture in Burundi, there is grave concern the consequences for the 690,00 people who are already facing Crisis and Emergency (IPC Phase 3 and 4) food insecurity will prove disastrous.

Ethiopia: Following the worst drought in decades, a major food security emergency is ongoing in central and eastern Ethiopia. According to the Ethiopia Humanitarian Requirement Document (HRD), as of December 2015, 10.2 million people are facing Crisis and Emergency (IPC Phase 3 and 4) and are in need of emergency food assistance. 435,000 children under five and 1.7 million children, pregnant and lactating women require specialised nutritional support, especially in the central and eastern parts of the country where no improvement is expected in the coming months. Refugees have been receiving reduced rations since November 2015. To date, the HRD has only received approximately a quarter of the total resource requirement for 2016. At present, the food stocks available for two of the three main operators (NDRMC and WFP) will be exhausted by the end of April 2016, and the third, JEOP, will face a pipeline break in August.

Sudan: FSNWG reports 4 million people are facing Stressed and Critical (IPC Phase 2 and 3) food insecurity levels (Sept-Nov 2015). Parts of Kordofan and Darfur region are facing Crisis food insecurity (IPC Phase 3) due to the effects of conflicts (caused by displacement and limited access to markets). A very poor 2015 seasonal performance in western Darfur and Kordofan States and El Niño-affected eastern areas has driven below-average national production and very large pasture deficits. The number of rural, resident households expected to be in crisis is about twice as high as in a typical year. Imports and above-average carryover stocks from 2014/15 are substantially reinforcing cereal availability at the national level. In western Sudan, below-average production and poor market integration with eastern and central Sudan are likely to lead to significant staple food price increases (source: FEWSNET).

South Sudan: According to the December 2015 IPC assessment, 2.84 million people are facing Crisis and Emergency (IPC Phase 3 and 4) food insecurity levels. Food insecurity is likely to persist and peak during the lean season (April – July 2016) particularly in inaccessible areas of Unity State where an estimated...
40,000 people are likely in Catastrophe food insecurity (IPC Phase 5) (source: FEWSNET February 2016). Malnutrition is reportedly above emergency thresholds (GAM >15 percent) in Unity, Upper Nile, Jonglei, Warrap, Northern Bahr el Ghazal and parts of Eastern Equatoria States. UNICEF estimates 237,000 children will suffer from severe acute malnutrition (SAM) in 2016.

Somalia: FSNWG reported by January 2016, 950,000 people were facing Crisis and Emergency (IPC Phase 3 and 4) food insecurity levels including IDPs. The number of food insecure is expected to rise by June 2016 during the lean period because there are reported 3.9 million people facing Stressed (IPC Phase 2) food insecurity levels in danger of slipping in Crisis and Emergency. GAM levels have remained persistently above 15 percent in many areas. UNICEF reports that some 108,800 children under the age of five (one in eight children), will require treatment for severe acute malnutrition. The lack of access to basic services continues to undermine the resilience of communities. Conditions are likely to improve slightly in April as average Gu rains are expected to improve pasture and water availability. However, given the depletion of assets and increasing debt levels, poor households are expected to remain in Crisis (IPC Phase 3) even after the February-March lean season. The scaling up of humanitarian assistance is necessary to avert this food security crisis in northern Somalia.

Eritrea: The effects of El Niño and pre-existing stressors, related to household food and livelihood security, have exacerbated women and children’s vulnerability, leading to high levels of malnutrition among children under 5, especially in the lowlands. Acute malnutrition remains one of the major underlining causes of deaths. An estimated 15,000 children under five require treatment for SAM in 2016 (source: UNICEF, 2016 Humanitarian Action for Children (HAC)).

Uganda: FSWNG report that 130,000 people are facing critical food insecurity levels in Moroto and Kaabong Districts, after depleting food stocks four months early in December 2016. They are now relying heavily on borrowing (51% of assessed households in December 2015) while safety net programmes providing food, nutrition support and cash, are ongoing for the vulnerable throughout Karamoja. The situation is expected to improve to Stressed (IPC Phase 2) in July when green harvests increase food availability. For the rest of the country, the upcoming rainy season is forecast to be near average in terms of cumulative rainfall with a near
normal start in March/April. This is expected to provide agricultural labor opportunities, lead to average harvests, and improve pasture and water resources.

**Burundi**: As of Feb 2016, 3.6 million people are food insecure, of which 689,571 people are facing Crisis and Emergency (IPC Phase 3 and 4) food insecurity levels. Food insecurity is likely to deteriorate in conflict-affected areas (Bujumbura, Bujumbura rural, Kirundo, Makamba, Rumonge, Cibitoke, Bubanza, and Ruyigi).

**Kenya**: Despite a significant improvement (a 41 percent decrease in food insecurity in the past six months), as of March there remain 640,000 people facing Crisis and Emergency (IPC 3 and 4) food insecurity, and requiring immediate humanitarian assistance (FEWSNET).

**Djibouti**: There are 227,463 people facing Crisis and Emergency (IPC Phase 3 and 4) food insecurity levels in Djibouti (IPC October 2015). The most affected areas are Ali Sabieh, Obock and Dikhil.

**Communicable diseases**

**Overview**: Pronounced changes in the incidence of epidemic diseases have been observed in parallel with the extreme weather conditions associated with the El Niño cycle in the region, and climate change more generally. Unusually heavy rainfall in parts of the Horn of Africa region, including Somalia and parts of Kenya, increased the risk for waterborne and vector borne diseases due to a combination of water shortages, poor sanitation and hygiene conditions, high malnutrition levels and population displacement. It is probable that decreased water supplies and water quality due to El Niño-induced and likely La Niña-induced droughts will lead to increased incidences of waterborne diseases, including cholera and other diarrheal diseases. As the availability of water becomes more severely limited, sanitation, hygiene, water quality and food supplies will become inadequate, increasing the risk of outbreaks. The concentration of people around diminishing water sources also increases the risk of transmission. Health implications are likely to be severe, especially in countries with fewer capacities to reduce health consequences or where the health infrastructure has been damaged due to flooding. Critical public health, medical, nutrition and water services are currently overstretched. Specialised feeding programmes require specific attention at health facilities to allow the continuation of care and treatment including clinics offering HIV services especially Prevention of Mother to Child (PMTCT) services.

**Malaria**

Malaria outbreaks could increase due to stagnant waters that are conducive for vector multiplication. The number of malaria cases in Burundi has doubled compared to the same period last year. This is partly due to increased flooding but also due to increased reporting by health partners. Some 1,158,439 cases and 520 deaths have been reported for the period January to mid-February 2016; compared to 512,664 cases and 241
deaths for the same period in 2015. Although the Ministry of Health (MoH) has not declared an epidemic, 18 out of the 46 health districts are highly affected. (UNICEF). The malaria outbreak in South Sudan has been contained since December 2015, and cases are expected to decline during the current dry season.

**Cholera**

A cholera epidemic in the region affected 21 counties in Kenya, with multiple cases reported in southern Somalia, Uganda and South Sudan. Cases of acute watery diarrhea continue to be reported in Ethiopia, Somalia, Sudan, Eritrea and South Sudan. Extreme conditions could exacerbate cholera outbreaks which, according to WHO, are worst since 1997-1998 in Tanzania, Kenya and Ethiopia. Tanzania registered over 12,000 cholera cases as January 2016. In the past, a surge of malaria and diarrheal diseases has been experienced during prolonged rains.

**Measles:** Both Kenya and Ethiopia are battling a measles outbreak. In Kenya, an outbreak of measles is ongoing since February 2016 in Mandera and Awjirir. In Ethiopia, six regions have been affected by measles, with some 258 outbreaks and 31,000 cases reported since last year. By the end of January, 3,300 suspected measles cases had been reported in Somalia. Across South Sudan, measles has been the fourth most common cause of morbidity in 2015, with most cases being reported in Central Equatoria and Unity states. According to WHO, augmented malnutrition, especially in IDP camps, may cause increased incidences of measles. Sudan is currently undergoing prolonged outbreaks of measles and dengue fever. A total of 612 suspected dengue fever cases, including 106 deaths, were reported in there between 29 August 2015 and 7 February 2016, according to the Ministry of Health.
HIV and AIDS

Across the region there is a significant range in national and sub-national HIV epidemics and availability to life saving medication. Kenya, the fourth largest epidemic globally is estimated to stand at six percent. In nearly all settings, there has been substantial improvement in halting and reducing national HIV epidemics. However, national aggregates mask high prevalence, notably in the case of concentrated epidemics among key populations, which, in the face of the current and projected humanitarian crisis is set to increase. Humanitarian crises highlight and compound vulnerabilities as highlighted by research conducted in Sudan and Somalia, where prevalence among key populations is many times greater than national averages. Humanitarian situations can increase the vulnerability of most at risk populations impacted by the stigma and discrimination against people living with HIV (PLHIV). Routinely, owing to fear of exposure, the needs of PLHIV are left out of rapid assessments. In many countries, those areas with the highest HIV prevalence are also designated risk-prone areas, such as provinces in western Kenya. In some countries, disruption of treatment regimens, unavailability of health services, and the absence of health personnel trained in the administration of ART is becoming an increasing problem in the delivery of public health and protection services. Migrant and population movement further add to vulnerability and presents major challenges in providing access to treatment. In many countries in the region, different treatment protocols exist regarding ART. Internal and cross border mobility mixes low and high rates of HIV and can serve to increase epidemic levels. Migration is often to urban centres and informal slum settlements exhibiting very poor health outcomes.
HUMANITARIAN

CHALLENGES

Humanitarian space and access

Overview: Many areas of the region remain hard-to-reach or inaccessible due to a combination of increasing insecurity, bureaucratic impediments and logistical constraints, and high operational costs, which also reduce the ability of the people to seek assistance. The upsurge of violence against aid workers in the region, particularly in South Sudan, is deeply alarming.

Restrictions (both bureaucratic and caused by insecurity) on the mobility of humanitarian staff internationally and intra-nationally, and interference with implementation and administration activities, will remain a challenge for the coming months in the region. Securing work permits and visas has become increasingly problematic, particularly in Sudan. The imposition of arbitrary fees, interference with staffing choices, and restrictions on and control of implementing partners are increasingly common. Reduced operational capacity and field presence has significant impacts on an organisation's ability to deliver timely quality assistance, and is expected to continue.

Bureaucratic constraints on personnel and humanitarian supplies

These are the most commonly cited restrictions by NGOs operating in the region.

Systematic and Structural State Impediments: In states such as Ethiopia and Sudan, access is controlled in some regions through the implementation of effective bureaucratic hurdles, both structural and systematic, and is fully denied in conflict areas. In Sudan, parts of South Kordofan, Blue Nile and Darfur states, have not been accessible for at least five years, and this is expected to continue in the coming months as fighting intensifies.

Sudanese government restrictions have become more stringent in the reporting period as a new military campaign against opposition groups began. Humanitarians are experiencing grave difficulties in assisting some 100,000 IDPs caused by the Jebel Marra crisis. 37.5 percent of field level access requests have been rejected. In most cases, authorities cited insecurity as a reason for the rejection or claimed that the situation was 'under control' and denied the need for intervention in the process. Increased government sensitivity regarding the humanitarian narrative is a significant challenge – a lack of agreement on the numbers and needs of affected people impacts planning, fundraising and program management, and ultimately limits effective humanitarian responses. Access to the 20,000-30,000 people forcibly displaced in Blue Nile from Baw County to the outskirts of the state capital Damazin last April-August 2015 remains limited.

In Darfur, UNAMID and humanitarian mission escorts continue to be hampered by restrictions and delays in permits, communications and resource challenges, including limited staff presence. The operating environment is particularly difficult for INGOs that, in some cases, even face de facto evictions. Their operations are tightly controlled through “Technical Agreements” with the Humanitarian Aid Commission and their personnel is under constant scrutiny, with de jure or de facto expulsions continuing. Several INGOs were affected between November 2015 and February 2016. In December 2015, one INGO had its programming halted, offices closed and assets confiscated on instruction from the GoS. The following month,
the organisation was asked to leave Sudan. At the same time, the stay-permits of the country directors of two major INGOs were not renewed, with one being asked to leave the country. In all cases, no clear reasons have been given.

**Inconsistent and Incoherent State Bureaucracies**: In new state formations or in fragile states such as Somalia and South Sudan, access challenges stem from dealing with fledgling, and often incoherent, bureaucracies, imposing irregular and conflicting regulations, limited infrastructure, surging insecurity, violence against humanitarian personnel/assets, and limitations on capacity. The formation of 28 administrative states in South Sudan, and the enactment of the NGOs bill, is expected to hamper effective and timely aid delivery. Furthermore the slow implementation of the Government and SPLM-IO humanitarian commissions merger poses additional bureaucratic burdens to the process. In Somalia, administrative impediments have been on the rise and continue to result in delays and interruptions in aid programming mainly in Puntland and southern central Somalia.

**Insecurity and attacks on humanitarian personnel, goods, and facilities**

Attacks on humanitarian personnel, goods and facilities are rising in countries with active conflicts such as Sudan, South Sudan, Somalia and Burundi, exacerbated by increasingly insecure operating environments in conflict areas.

**South Sudan**: Violence against personnel and assets is the main constraint to humanitarian operations with 12 workers killed during the reporting period (including contractors) and 12 injured. At least 63 incidents were reported in January 2016, 53 percent (35 cases) of which involved violence against personnel and assets, mainly occurring in the capital Juba and in Unity state. More than half were robberies or burglaries. Numbers are higher than in December (55), but lower than the 2015 average of 76 incidents per month. Given the slow implementation of the peace agreement, numbers are expected to remain high in the coming months.

Parts of Western Equatoria, Wau area in Western Bahr al Gazal and Upper Nile, were inaccessible during the reporting period due to increasing insecurity, disrupting the provision of humanitarian assistance and protection in these areas, and also affected the pre-positioning around the country. At least 45-50 checkpoints were active on the Juba-Rumbek-Wau-Bentiu road in January, operating mostly in isolation from the central government. This number is expected to increase as road accessibility increases during the dry season, leading to delays and an increased cost of humanitarian supplies.

**Somalia**: Non-state armed actors continue their attempts to control aid delivery. Attacks and threats against humanitarians have been on the rise. Beneficiary communities are also subjected to intimidation and threats that can escalate to violence aimed at coercing them into rejecting humanitarian assistance, and that, in many cases leads to a postponement of the assistance.

**Burundi**: While the government is not openly impeding access, it is using indirect methods to constrain humanitarian action. These include an increasing number of checkpoints, paucity of the provision of security to humanitarian workers, and threats to media and civil society actors. Thus far access constraints have been mostly limited to the capital but security is expected to deteriorate as the political stalemate continues and militarization of the country and its neighbours increases.
Humanitarian funding

Overview: Funding shortfalls are expected to continue to impact humanitarian response in the East Africa region – it is one of the most under-funded regions globally. In line with global trends, the funding requirements for eastern Africa have increased significantly. This is due to increased humanitarian needs caused by a number of factors, including the current El Niño event in several countries, and the presence of sudden, slow-onset, and protracted conflicts across the region. To address these needs, closer cooperation with development partners, as well as non-traditional donors, and collaboration with the private sector, is required.

Funding needs for the region this year total $5.5 billion (this excludes the Sudan HRP which has not yet been finalized) of which 14 percent is funded so far. Last year the figure was 7.1 billion (inclusive of Sudan HRP), of which only 42.6 percent was funded. These ongoing and significant shortfalls in funding will have a severe impact on aid programming in the region and will be particularly devastating for health and WASH sectors across the region.

The El Niño event is at the center of the greater funding requirements for Ethiopia, Somalia and Djibouti. Ethiopia has registered an increase from $368 million in 2015 to $1.4 billion in 2016 in order to address the deteriorating El Niño related drought conditions affecting a large section of the country. The Ethiopia appeal is the best-funded appeal in the region at 48 percent. Sudan has issued a specific El Niño event preparedness and response plan, seeking $82 million. Authorities in Puntland and Somaliland and the Federal Government of Somalia have made appeals for international aid for drought-affected northern regions. Humanitarian partners have developed a Call for Aid, to be formally launched on 31 March, seeking $105 million to save lives and build resilience for over one million people in critical need in the two regions. Much of the requirement in this Call for Aid is already in the 2016 Humanitarian Response plan as was envisioned in the preparedness planning in 2015, but currently not funded.

As the region is among the most under-funded regions globally, it received nearly two thirds ($64 million) of the January 2016 CERF Under-Funded Window allocation. This amount will support humanitarian partners in reaching 1.7 million refugees and host communities. In 2015, the eastern Africa region received over $112 million in CERF Under-Funded and Rapid Response funding, which accounts for nearly 24 percent of all CERF allocations done that year.
## HUMANITARIAN CHALLENGES

### 2015 HRP

<table>
<thead>
<tr>
<th>COUNTRY</th>
<th>REQUIREMENTS</th>
<th>FUNDING</th>
<th>% FUNDING</th>
<th>GAP</th>
<th>Funds allocated</th>
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Source: OCHA/FTS/CERF
To ensure a collective response to save lives and strengthen the resilience of communities to shocks, closer co-operation with development partners is needed. This can be done through new instruments such as the $2 billion European Union Emergency Trust Fund for Africa, and the new World Bank’s Global Programme on Forced Displacement.

A Humanitarian Private Sector Platform (HPPP) was launched on 8 March 2016. The cross-sector HPPP will enable systematic long-term private sector (including local business), community, Government, UN, NGO partnerships to better prepare for, mitigate against, and address impact of, natural disasters, long-term emergencies due to conflict, complex urban and out-of camp displacement situations. This will render opportunities more visible and accessible to scale-up, create better resilience through sustainability self-reliance for affected communities.

**Vulnerability hotspots**

**MPI AND CONFLICT HOTSPOTS**
1.1 million people in Burundi are considered in need of humanitarian assistance, including access to essential services and basic livelihoods, as a consequence of the ongoing political crisis that began in April 2015.

This political crisis is affecting one of the most fragile countries in the world. According to the 2015 UNDP report on Human Development, Burundi occupies 184th place (out of 188 countries) with 10.1 million inhabitants having a life expectancy of 56.7 years and a mortality rate of 82.9 under five years per thousand births.

Protection is the main humanitarian threat, particularly in relation to political violence, intimidation against the civilian population and violation of human rights. According to UNICEF, 249 children have been arbitrarily detained since April 2015. At least 743 people have been killed and hundreds others injured. More than 4,800 cases of human rights violations have been recorded since the beginning of the crisis. Rape and sexual assaults against women and girls have increased, while men and young people are victims of arbitrary arrests and summary executions.

According to UNHCR, some quarter of a million Burundians - more than half of them children - have fled to five neighbouring countries in search of asylum. Current estimations expect some 330,000 refugees to be of concern by the end of 2016. IOM estimates that 70,000 people are displaced inside the country and 70 percent of them live in families in the provinces of Bujumbura Mairie, Rutana, Makambe, Gitega, Ruyigi and Bujumbura Rural. The internal flows of displacement are increasing the pressure on host communities whose resources and access to services are limited, as well as on levels of food security, nutrition and livelihoods.

690,000 people in need of food assistance (IPC Phase 3 and 4). The rate of malnutrition is rising, with 50,000 children under five years suffering from severe acute malnutrition (SAM).

Insecurity and violence have limited the whole populations access to basic social and health services. It has also had a significant impact on an already stagnant and slow economy generating higher food prices in the markets, and interrupting educational activities in many parts of the country. According to UNDP, the political crisis is already impacting the delivery of social services with dramatic cuts in the 2016 budget for health (54%), agriculture (14%), education (27%) and human rights (65%). Donors have limited and/or reallocated their direct contributions to the government budget, further aggravating the situation.

Burundi is also prone to natural disasters such as localised flooding, particularly affecting the most vulnerable segments of the population, such as women and children, and forcing them to adopt unfavorable coping strategies. The country experienced a major flooding in November 2015 that affected at least 30,000 people, resulted in 52 deaths, and damage to more than 5,000 houses and 13,000 agricultural hectares.
Decades of successive shocks in DRC have intensified the humanitarian needs of 7.5 million people (9 percent of the population), leaving them vulnerable to the multiple shocks caused by conflicts, epidemics, malnutrition and natural disasters. Eastern DRC continues to be the theatre of a complex and protracted humanitarian crisis affecting at least 1.6 million IDPs, 90 percent of whom are displaced due to armed attacks and violence. Only 22 percent of the population has access to drinking water.

4.46 million people are facing Crisis and Emergency (IPC 3 and 4) food insecurity (FSNWG March 2016). Some 2.5 million children under the age of five are severely malnourished, and almost half the children under the age of five are chronically malnourished. Acute malnutrition is estimated at 8 percent, which is above the emergency threshold. Measles and cholera outbreaks are ongoing and particularly affect children who are already weakened by high rates of malaria and malnutrition.

Protection concerns remain high, with civilians regularly falling victim to a myriad of armed groups and explosive remnants of war contamination. The rise in human rights violations in the run-up to the forthcoming elections raises concerns that the security situation could deteriorate if the political crisis deepens. While serious insecurity continues to prevail in some areas of DRC, the country is also suffering the consequences of instability in the broader Great Lakes region. In the past two years, DRC has experienced an influx of 100,000 people uprooted by violence in CAR and 18,000 people who fled electoral-related violence in Burundi. As a result, there are now approximately 250,000 refugees and asylum seekers in DRC. The population movements from outside DRC combined with those inside the country greatly increase the vulnerability of host communities. In 2016, DRC is likely to continue receiving refugees and asylum seekers from neighbouring countries, while also facing internal pressures.
Years of consecutive drought in one of the most arid countries of the world continue to have a harsh impact on the lives and livelihoods. There are 227,463 people facing crisis and emergency IPC Phase 3 and 4 food insecurity levels in Djibouti (IPC October 2015). The most affected areas are Ali Sabieh, Obock and Dikhil.

With staple food prices continuing to rise in the country (Djibouti imports over 90 percent of its food needs), high unemployment and 23 per cent of the population (282,000) living in extreme poverty (World Bank), access to food is very limited for many vulnerable people. These include those living in rural areas as well as refugees and migrants hosted in the country. In addition, many rural dwellers that lost their sources of livelihoods, and an increasing number of families who saw their income being drastically reduced have been forced to abandon their homelands and seek refuge in urban centers.

Drought has further compromised poor water and sanitation coverage, severely affecting more than 35 percent of the rural population, particularly in the regions of Dikhil, Tadjourah and Obock, and is a serious concern for more than 171,000 people in the country.

As a consequence, Djibouti is also facing a nutritional crisis. In Obock - the worse affected region - Global Acute Malnutrition (GAM) rates are at 29.9 percent, with nearly one out of three children under five years of age acutely malnourished. The rate of severe acute malnutrition (SAM) varies between 2.1 percent to 6.9 percent in the most affected areas.

A large proportion of people in Djibouti require urgent assistance to maintain or increase access to primary health care. Because of high vulnerability, every year many people die of preventable and treatable diseases, such as acute pneumonia, diarrhea, malaria, measles, tuberculosis, HIV and non-communicable diseases.

An inflow of refugees and asylum seekers to Djibouti, mostly from Somalia and Yemen, as well as a continuous inflow of transiting vulnerable migrants transiting, are putting additional stress on the country’s limited resources and local coping capacities.

UNHCR projects that by the end of 2016, 25,000 refugees and asylum seekers will be hosted in the Ali Addeh and Holl Holl camps, as well as in Djibouti city. Moreover, despite the conflict in Yemen, Djibouti is still a transit zone for an estimated 150,000 people - mostly from Ethiopia - who stay in the country for some weeks, months or years, on their way to the Gulf of Aden and beyond, in search of better lives.
Eritrea is vulnerable to recurrent droughts and variable weather conditions due to its geographical location in the arid Horn of Africa region. Slower economic growth and the residual effects of war also perpetuate the vulnerability of approximately two thirds of the population (AfDB, OECD, UNDP, 2014).

It is estimated that in a year of good agricultural production, the country can produce a maximum of 70-80 percent of its annual cereal requirements, and in a bad year, as little as 20-30 percent (ADB, 2011). This situation makes 80 percent of the population directly vulnerable as their livelihoods largely depend on subsistence agriculture and pastoralism (National Statistical Office, 2010 Eritrea Population and Household Survey).

On average, the country suffers a drought every three to five years (FAO). Eritrea’s annual economic performance has been constrained by variable climate conditions; economic controls (limited foreign investment outside the mining sector, reduced aid inflows); the unresolved border dispute with Ethiopia; and a decline in remittances and scarcity of foreign exchange.

The Eritrean economy remains depressed and will operate below potential in 2016-17 due to a lack of capital, near absence of private sector participation and foreign investment (except in the mining sector) and unfavourable government policies (Economist Intelligence Unit, 2016; African Development Bank, 2015). Nevertheless, annual real GDP may grow from about 1.8 percent in 2015 to 3.4 percent in 2017 driven by growth in the mining sector. A second mine, Koka, in addition to Bisha Mine, commenced commercial production in January 2016 (Economist Intelligence Unit - EIU, 2016). However, the marginal economic gains are yet to materialize into improved living standards for the general population. Inflation is expected to increase from 10.1 percent in 2015 to an average of 12.3 percent in 2016-17. A decline in remittances is expected due to the imposition of sanctions, although the largely unofficial remittance inflows are difficult to analyse (EIU, 2016). Lack of foreign currency may reduce capacity to import food that the country relies on to offset perennial food deficits. In light of the acknowledged 2015/2016 poor harvest period, as well as economic constraints, food insecurity is a concern (FAO 2016).

Eritrea is also vulnerable to natural hazards such as floods, volcanic activity, earthquakes, desert locust infestation and disease outbreaks.

Population influxes are also placing additional stress on the country. According to UNHCR as of Feb 2016, Eritrea hosts 2,426 refugees (2,359 camp-based Somali refugees and 67 urban-based refugees of other nationalities).
Ethiopia

Although Ethiopia was the world’s fastest growing economy in 2015, registering an annual economic growth of 11 percent during the past few years, it remains one of the most underdeveloped countries in the world, because of its susceptibility to shocks. Chronic humanitarian needs in areas with insufficient development investments remain high.

The country is suffering from one of the worst droughts in the past few decades, with devastating effects on the lives and livelihoods of over ten million people. A lack of rainfall and the subsequent drought have caused a massive spike in humanitarian needs which is expected to continue through much of 2016, with some regions experiencing between 50 to 100 percent crop loss. Coping mechanisms are stretched to their limits, household debts are rising sharply and dietary diversity has narrowed significantly, with affected populations consuming a diet consisting predominantly of cereals.

10.2 million people are facing Crisis and Emergency (IPC Phase 3 and 4) and are in need of emergency food assistance. Access to emergency health services is needed for the approximately 435,000 children projected to be severely acute malnourished, 1.7 million moderately malnourished, pregnant and lactating mothers and the projected 820,000 displaced for the year 2016. The Meher 2015 assessment indicated that poor water availability, lack of sanitation coupled with decreased food availability, displacement, malnutrition, and outbreaks of communicable diseases (measles, meningitis, malaria, dengue fever, diarrheal disease and acute respiratory infection) will significantly increase the risks of increased mortality and morbidity. It is estimated that 20 percent of the expected 435,000 severely malnourished children will develop medical complications that need intensive lifesaving medical treatments in hospital-based therapeutic feeding centers. Malnutrition amongst pregnant women increases the risk of miscarriage, fetal death and bleeding, contributing to increased maternal and neonatal morbidity and mortality. Stresses from displacement are also linked with increasing psychosocial and mental health effects.

Despite tremendous progress in the WASH sector, water supply and sanitation coverage is not equitably distributed. Access to water and sanitation in the highland regions often exceeds 80 percent and access in the lowland regions is often below 5 percent. According to the Meher 2015 seasonal needs assessment, 6.5 million people and girls were affected by drought. The impact of poor water access on the nutritional status of children, breastfeeding mothers and on waterborne diseases is considered urgent and critical. It is expected that an additional 104,450 people will be affected by flooding, which will require water purification, and related sanitation and hygiene services. Shortage of water and pastures resulted in the estimated death of hundreds of thousands of livestock particularly in parts of Afar and Somali regions.

The education system is heavily impacted when flooding destroys schools (i.e. in regions like Afar and Somali) and droughts force families to abandon their homes in search of food, water and protection. The loss of assets and livelihoods has compromised the capacity of parents and caregivers to send their children to school and cover costs of clothing, school materials, and food. 2,104,913 primary school students (47 per cent girls) have been affected by drought and in some areas by floods (Shabelle zone, Somali region) and conflict (West Hararge zone, Oromia). Schools in drought-affected regions have closed due to pastoralists moving with their children in search of water and pasture.
Despite a growing economy, Kenya is still highly vulnerable to shocks, with more than half a million people requiring humanitarian assistance. The country faces a range of humanitarian challenges including food insecurity, critical levels of malnutrition, and disease outbreaks. These are driven by increased inter-communal conflicts over access to natural resources and recurrent drought and floods resulting in continuous internal displacement. The areas most affected are the arid and semi-arid areas (ASALs) zones, largely inhabited by pastoralists, agro pastoralists and marginal mixed farmers and consisting of 23 counties.

Although there has been a significant improvement in food insecurity in the past six months (a decrease of 41%). As of March there are 640,000 food insecure people in Crisis and Emergency (IPC Phase 3 and 4), requiring immediate humanitarian assistance (FEWSNET).

The country is prone to epidemics. The cholera outbreak, which began in December 2014, affected 29 counties. 17 counties have managed to successfully control the outbreak, but the situation could significantly worsen with the arrival of the rainy season. As of 28 March 2016, a total of 13,572 cases and 221 deaths have been reported nationally. Of these, only 1,580 (12%) were laboratory confirmed. Twelve counties are experiencing active cholera outbreaks. Seven of these counties are experiencing the first wave of the outbreak (in Wajir, Marsabit, Tharaka Nithi, Tana River, Meru, Vihiga, Nandi), one is reporting the second wave (in Garissa where the Daabab refugee camp is located), two are reporting third wave (in Nakuru, Isiolo), and two are reporting the fourth wave (in Siaya and Migori). An outbreak of measles is ongoing since February 2016 in Mandera and Wajir. Overcrowded settings pose a challenge for the adequate provision of potable water and sanitation, and there is need to put in place adequate intervention measures while at the same time relying on accurate surveillance data to monitor the evolution of the outbreaks.

Heavy rains were recorded in many parts of the country during the first quarter. The October - December (OND) rains were driven by El Niño conditions and the distribution closely matched the El Niño forecasts. The rains resulted in flash floods mainly in urban areas (Narok and Nakuru), several floods, landslides/mudslides (in Mt. Elgon, Kisii, West Pokot, Narok and Nandi), road traffic accidents and lightning strikes (Kisii). These have cumulatively led to loss of 130 lives and 73 recorded injuries.

Violent inter-communal conflicts continue to occur in the northern Rift Valley. In the past months, humanitarian access and delivery of essential basic social services has been significantly constrained by continuous inter-communal conflict and AOG attacks, especially in northern, eastern and Coast regions. The resulting mass exodus of teachers and health workers since December 2014 has negatively impacted the quality of education, health care and the provision of nutritional assistance. Poor roads and hilly terrain contribute to the high levels of insecurity and inaccessibility in some regions. Kenya will hold presidential and parliamentary elections in August 2017. Formal and informal media all over the country has registered increased political tensions.
Although Rwanda is experiencing economic growth and performing well on its MDG goals, extreme poverty still affects a good part of its population. According to the Multidimensional Poverty Index (MPI) method, 1,050,135 people are severely poor and 2,818,321 moderately poor. The vast majority of them live in rural areas, which have both a higher number of poor people (about 3.7 million) and also a higher relative incidence of poverty (42%), compared to urban areas (15%). Western and Eastern provinces are found to be the poorest. However, in the Eastern part of the country agricultural productivity is higher than in other areas, resulting in better consumption, while infrastructure and services (electricity, clinics, schools, etc.) are less developed, and malaria (a big contributor to child mortality) has a disproportional effect.

Events in neighbouring countries present the greatest risks to Rwanda. Civil unrest in Burundi risks destabilizing the whole region, with more than 75,700 Burundians arriving in Rwanda so far (source UNCHR March 2016). Many of them have been placed in Mahama camp. According to some media sources (Al Jazeera), Rwanda’s government plans to relocate Burundian refugees to other countries after being accused of involvement in “destabilising activities” in Burundi. Further, the unresolved armed conflict in eastern DRC and its regional impact continues to fuel political tensions among countries in the Great Lakes region, including between Rwanda and DRC.
Despite having achieved steady progresses with increasing of political stability, the humanitarian crisis in Somalia is among the most complex protracted emergencies in the world. Resurgent conflicts across the country and endemic environmental hazards render the majority of Somalia’s 12.3 million inhabitants chronically or acutely vulnerable.

The country suffers from cyclical natural disasters. Flash floods, drought and limited infrastructure exposes many communities to seasonal effects - often with disastrous consequences for majority of Somalis who depend on subsistence farming and pastoralism for their livelihoods. The country is in need of an effective and functional disaster management system at all levels. Large gaps remain in the provision of basic services, demanding a humanitarian response across a range of sectors. A chronic lack of development and accountability mean that access to basic services such as health and education are well below internationally accepted levels. Somalia scores extremely low across a range of human development indicators and is consistently at the bottom of development and humanitarian ranking lists. More than 73 percent of the population lives below the poverty line; 1 in 18 women dies during childbirth; some 1.7 million children are out of school; 82 percent of the population does not have access to safe water and basic sanitation.

Some 4.65 million people are in need of humanitarian assistance until June 2016. 950,000 people are facing Crisis and Emergency (IPC Phase 3 and 4) food insecurity between February and June, 68 percent of them IDPs. A further 3.7 million people are in Stressed phase and will require assistance, including livelihood support, to prevent them from slipping into Crisis and Emergency phases. More than 1.3 million people are in need of nutritional assistance. Malnutrition rates remain high - 308,000 children under the age of five are acutely malnourished, and 56,000 children are severely malnourished.

The overall burden of acute malnutrition in 2016 is estimated to be more than 800,000 cases. Health conditions are a serious concern. Frequent outbreaks of acute watery diarrhea (AWD)/cholera (some 4,000 cases) and 5,700 suspected measles cases have been reported this year with 85 percent of the cases among children under the age of five.

Over 1.1 million people remain in a protracted internal displacement situation. Many live in terrible conditions and do not have adequate access to basic services and livelihoods. They are marginalised and are at risk of human rights violations including forced evictions, discrimination and pervasive gender-based violence (GBV). Family separations, GBV against children, forced recruitment and abductions are among the main violations against displaced children. In addition, GBV is exorbitantly high in IDP settlements. 75 percent of all GBV-survivors are IDPs.

There are over 1.2 million Somali refugees living in the region and in Yemen, and some are under increasingly pressure to repatriate. As of late November 2015 close to 30,000 people fleeing the crisis in Yemen had arrived in Puntland, Somaliland, and southern central Somalia (89% Somali). A total of 50,000 refugee returnees are expected to return from Kenya in 2016 under the framework of the Kenya/Somalia/UNHCR Tripartite Agreement, as well as 1,000 from Ethiopia. An additional 18,000 Somali refugee returnees (refugees and migrants) are expected to arrive from Yemen in 2016. The priority needs of refugee returnees include family and community based humanitarian assistance aimed at addressing multi-sector humanitarian needs upon arrival and initial reintegration in areas of return, from the time of their arrival until medium and longer term interventions are in place.
Despite the signing of the Agreement on the Resolution of the Conflict in August 2015, economic decline, deterioration of food security, outbreaks of disease, and climactic shocks are affecting about 6.1 million people. In addition, communities are struggling with inter-communal violence, including as a result of cattle raiding. In Lakes State, there is an average of 60 deaths per month. This is compounded by the absence of justice and the rule of law. South Sudan's economic crisis has been driven by the rapidly depreciating value of the South Sudanese pound (SSP), shortages of hard currency, global declines in oil prices, and significant dependence on imports. The price of staple foods, such as sorghum, maize and beans, are at record highs (up to 150% compared to average). The decline in oil price has crippled the Government's social services sector and negatively affected more than 40 percent of the population.

About 2.3 million people have been forced to flee their homes since the conflict began, including 1.66 million internally displaced people (with 53.4 per cent estimated to be children) and nearly 644,900 refugees in neighbouring countries. Some 185,000 IDPs have sought refuge in UN Protection of Civilians (PoC) sites, while around 90 percent of IDPs are on the run or sheltering outside PoC sites. Due to the fluidity of displacement, it is difficult to determine the number of IDP returnees. However, humanitarian partners estimate that some 300,000 will be in need of assistance in 2016 and an estimated that 1.9 million of people in need of shelter assistance. Due to instability in neighbouring countries, the refugee population in South Sudan has increased. It is expected that the number of refugees in South Sudan will rise to 304,072 by the end of 2016. With nearly 90 percent of refugees living in camps in Upper Nile and Unity States where the conflict has been particularly intense, tensions over scarce resources have increased between refugees and host communities.

2.84 million people are facing Crisis and Emergency (IPC Phase 3 and 4) food security levels. In December 2015, reports estimated that 40,000 people were facing Catastrophe food insecurity (IPC Level 5) in parts of Unity State. More than 686,200 children under the age of five are estimated to be acutely malnourished, including more than 231,300 who are severely malnourished. Livelihoods have been decimated by the conflict (livestock has been looted or killed), crops diseased, destroyed or planting delayed due to violence, displacement, and unfavorable weather. Nearly one in every three pregnant and lactating women is malnourished. More than 4.7 million of people are in need of basic health care. Mortality has been exacerbated by acute malnutrition and disease, including an unprecedented malaria and cholera outbreak in 2015 for the second year in a row. Thousands of people living with HIV have seen their life-sustaining treatment interrupted without possibility of resumption due to displacement. As of September 2015, some 55 percent of the health facilities in Unity State, Upper Nile State and Jonglei were no longer functioning. The rising cost of living and impact of the conflict have undermined people's ability to access safe water, including due to the destruction of water points. As a result 4.7 million people are estimated to be in need of WASH assistance.

South Sudan is one of the most logistically challenging places in the world and has one of the most underdeveloped communications technology infrastructures. The severely underdeveloped and under-maintained road network makes 60 percent of the country inaccessible during the rainy season (April-November). In addition, 110 million square meters of land is contaminated by landmines and explosive remnants of war (ERWs).

Infrastructure losses are extensive. Nearly one in every three schools in South Sudan has been destroyed, damaged, occupied or closed, affecting the education of more than 900,000
children. It is estimated that armed actors have recruited some 15,000-16,000 children. Over 10,000 children have been registered as unaccompanied, separated or missing. An adolescent girl in South Sudan is three times more likely to die in childbirth, as a result of the practice of early marriage, than complete primary school. An estimated 1 million children are believed to be in psychosocial distress.

Sudan continues to face complex humanitarian challenges, and serious protection concerns persist in many areas. In Darfur, at least 100,000 people fled fighting in the first half of 2015, increasing pressure on services in long-established IDP camps that are now home to well over 1 million people. In South Kordofan and Blue Nile states, humanitarian organisations are still unable to reach the people most severely affected by four years of war.

As of March, an estimated 4 million people are facing Crisis and Emergency (IPC Phase 3 and 4) food insecurity levels, driven by conflict mainly in Darfur, South Kordofan and Blue Nile, and drought in central eastern Sudan.

By November 2015, the number of South Sudanese refugees who have arrived since December 2013 reached 197,000 people. This includes an influx of more than 40,000 people between June and July alone. The nutritional status of children remains a countrywide challenge, while a prolonged measles outbreak demonstrated Sudan's continuing vulnerability to public-health emergencies.

El Niño brought reduced rainfall in key agricultural areas, reducing yields and the regeneration of water and pasture resources.

Funding shortfalls, as well as the GoS’s increasing limitations on humanitarian access is forcing many NGOs to reduce or suspend projects in IDP camps, particularly in the health sector.
Uganda has remained a peaceful haven in a turbulent region, and is a major destination for refugees from Democratic Republic of Congo, South Sudan and Burundi, being one of four countries involved in the Inter-Agency Regional Refugee Response Plan (RRRP) for the South Sudan situation as well as for Burundi. There are currently 509,077 refugees and asylum seekers in the country (25,000 arrivals since January 2016). The refugee population is mostly composed of South Sudanese (39%) and Congolese (38%), with a projected 10,000 refugees expected to arrive from Burundi by the end of 2016 (UNHCR).

The extremely long dry spell and delayed rains have led to increased food insecurity in the northeastern Karamoja sub-region. 130,000 people are in Crisis and Emergency (IPC Phase 3 and 4) food insecurity. This is mainly due to poor rainfall performance during the first season 2015 and long dry spells. As a result most households have already depleted their food stocks and are relying heavily on markets and 200,000 people are being supported by humanitarian assistance. More than 41 percent of the population in Karamoja is engaged in emergency coping strategies; about half of the projected population 1,054,900 (UBOS, 2015) have borderline and poor FCS (Food Consumption Score) with GAM (Global Acute Malnutrition) rates of 14.1 percent, just below the emergency threshold.

Despite high levels of public discontent following the disputed presidential Elections of 18 February 2016, tensions are unlikely to result in any significant level of insecurity within the country. The country continues to enjoy relative peace but a number of security risks remain, including spillover of conflict in the region, notably South Sudan, DRC, Somalia, and violence from inter-communal tensions.

Uganda contributes troops to AMISOM in Somalia and therefore remains an Al-Shabaab target.