UNICEF Namibia – Drought Situation Report #2
22 August 2013

Situation Overview & Humanitarian Needs

According to the Namibian Meteorological Services, the rainy season of 2012-2013 in Namibia is among the driest on record. The summer season in Namibia (September 2012 - May 2013) has been the second driest of the last 25 years. The European Commission’s Joint Research Centre (JRC) July 2013 report on “seasonal monitoring in Namibia (2012/2013)” showed a number of provinces in Namibia, especially in the north and center of the country, have been directly affected by a severe rainfall deficit starting in late 2012 and showing a strong impact on agricultural and natural vegetation from March through to May 2013. The most affected provinces are Omusati, Kunene, Erongo, Otjozondjupa, Khomas, and Kavango according to the low resolution satellite images.

The report also highlighted that maize, sorghum and even more ‘drought resistant’ millet, are very likely to have been affected, in some places perhaps resulting in failure. Pasture will not support the livestock it does in more average years. These findings are based on the analysis of low resolution satellite images and on satellite-derived rainfall estimates, and will need to be validated by ground observations and field surveys.

Kunene Region, which is experiencing the second consecutive year of drought, reported loss of livestock and failure of crops. Epupa constituency is considered the most affected areas in the region due to loss of grazing grounds, crops failure and increased distance in accessing water for both human and livestock consumption. There is a strong demand from communities in Epupa Constituency for support with feeding of their cattle since that is the major livelihood for many in that area.

Between June and July 2013, six suspected cases of Cholera were admitted to Opuwo District Hospital of which two cases were confirmed positive by laboratory tests whereas the other four were negative. Those patients crossed the border from Angola through Kunene River to seek treatment in Namibian side. All cases were treated successfully without any causality and patients were returned to their homeland. Preventive measures have been carried out with the support of Health Extension Workers (HEWs) for public awareness on household water treatment, handwashing and notification of suspected cases to health centres and clinics.

Kunene Regional Health Directorate also instructed social workers to follow up malnourished children and their families discharged from the hospital and link them up with the Regional Council for additional food supplementation to prevent recurrent malnutrition problem among those children.

Engela District of Ohangwena Region bordering Ondjiva District of Angola reported 76% increase in hospital admission of malnutrition cases among under-5 children between March and July 2013. In that same report, 53% of admissions and 11% of in-patient deaths among malnutrition children of under 5 were from Angola who came to seek treatment on this side of the border.

Namibia Red Cross Society and UNICEF commissioned a Rapid WASH assessment in the four affected regions of Kavango, Kunene, Ohangwena and Oshikoto from 8 - 26 July 2013. The assessment found that in Kunene region where a substantial proportion of households rely on livestock, people are adversely affected by reduced pastures and water stress for both livestock and human consumption. Whereas in three other regions namely Ohangwena, Kavango and Oshikoto, where households mainly rely on crop and partially on livestock, the effects were more on household food insecurity due to crop failures, and partially attributed to water stress for livestock and human.
Many communities are exercising a variety of coping mechanisms such as migrating to other areas in search of grazing or water. As the drought conditions intensify, community coping mechanisms have gradually been eroded. This situation is likely to result in over utilisation of limited resources such as water and grazing areas. This in turn has significant impact on health, nutrition and wellbeing of the people and susceptibility to water and sanitation related diseases. Some of the findings from this assessment are as followed.

**Kunene**
- High breakdown of existing water points due to over usage e.g. Directorate of Water receives about 20 requests for repair per day since the drought started (Opwo constituency).
- Dried up water points, particularly traditional dug wells, springs and small ponds in the river beds exacerbate limited access to water supplies. Hence, high competition for water between livestock and humans (Epupa and Sesfontein constituencies)
- Migration of people away from water sources in search of grazing results in increased number of people travelling more than two kilometres a day to the nearest water source. (Epupa, Sesfontein constituencies)
- Increased number of people resorting to sourcing water from unprotected sources (open dams, rivers) hence increased exposure to water and sanitation related diseases (Epupa, Sesfontein constituencies)
- Increased tension among communities due to increased competition for limited water resources and grazing grounds

**Ohangwena**
- Dried up traditional dug wells and ponds in already water stressed communities resulting in critical water shortage e.g. Onuno (Ondobe constituency).
- Boreholes broken or collapsed in Epembe, Okongo and Omundangilo
- Ponds and dams have dried up resulting in community migrating to other villages or walking long distances to available water sources - Okongo, Oshengel

**Kavango**
- Increased number of people resorting to sourcing water from unprotected sources e.g. river, hence increased exposure to possible water and sanitation related diseases
- Reduced borehole yields in some villages

**Oshikoto**
- Dried up traditional dug wells resulting in critical water shortage in already water stressed communities e.g. South west of Oshikoto region

**Humanitarian leadership and coordination**

The National Drought Emergency Response Plan (July 2013 – March 2014), developed by the Directorate of Disaster Risk Management (DDRM) with inputs from the relevant government line ministries, the Namibia UN Country Team and CSOs, was shared with the stakeholders on 15 August 2013 with key target beneficiaries of:
- 463,581 food insecure
- 109,000 children under 5 at risk of malnutrition
- 60,000 children between 6-15 years at risk of malnutrition
- 23,180 pregnant women at risk of malnutrition

Table 1 shows that total funding required for the 9-month long national response plan will be nearly US$64 million of which US$23 million have been already allocated leaving a funding gap of US$41 million.

<table>
<thead>
<tr>
<th>Sector</th>
<th>Available Budget</th>
<th>Planned Total</th>
<th>Funding Gap</th>
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</thead>
<tbody>
<tr>
<td>Food security and livelihoods</td>
<td>133,180,000</td>
<td>250,372,145</td>
<td>117,192,145</td>
</tr>
<tr>
<td>Agriculture</td>
<td>55,000,000</td>
<td>64,700,000</td>
<td>9,700,000</td>
</tr>
<tr>
<td>Health and nutrition</td>
<td>5,000,000</td>
<td>66,071,972</td>
<td>61,071,972</td>
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<tr>
<td>WASH</td>
<td>31,282,382</td>
<td>249,356,939</td>
<td>218,074,556</td>
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<tr>
<td>Cross-Cutting</td>
<td>0</td>
<td>1,000,000</td>
<td>1,000,000</td>
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<tr>
<td><strong>Total (N$)</strong></td>
<td><strong>224,462,383</strong></td>
<td><strong>631,501,056</strong></td>
<td><strong>407,038,673</strong></td>
</tr>
<tr>
<td><strong>Total (USD Equiv)</strong></td>
<td>22,850,000</td>
<td>64,290,000</td>
<td>41,440,000</td>
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</table>
The Permanent Secretary (PS) of Ministry of Gender Equality and Child Welfare (MGECW) called a multi-sectoral meeting in July to seek support in introducing feeding programme for under 5 children through 32 Early Childhood Development (ECD) centres in Kunene Region, the most hardest hit region in terms of food insecurity. PS also emphasised the need to reach out more under-5 children by extending feeding programme beyond ECD centres in Kunene.

The Namibian Red Cross Society also started a soup kitchen in Opuwo District of Kunene region providing a daily meal to approximately 2,000 people who are most affected. Health, nutrition and hygiene promotion sessions were carried out as part of the soup kitchen activity.

UNICEF facilitated a visit of media team of international and national journalists to Kunene and Ohangwena region during last week of July 2013. UNICEF Regional Emergency Specialist on Water, Sanitation and Hygiene spent two weeks in Namibia to strengthen the capacity on coordination and response.

Preliminary contact has been made with UNICEF Angola to strengthen cross-border coordination and resource mobilization efforts.

**UNICEF Programme Strategy**

UNICEF is supporting the Government of the Republic of Namibia (GRN)’s response plans in nutrition and WASH to improve access to clean water, hygiene practices, and community identification and treatment of acute malnutrition.

Priority interventions will include:
- Introduce community-based management of acute malnutrition (CMAM) to ensure detection, treatment, and referrals for severe and moderate cases in 4 most-affected regions.
- Establish a household nutrition assessment data collection system by training volunteers to screen for and report on incidence of acute malnutrition amongst children 6-59 months of age
- Provision of micronutrient powder (MNP) for all children aged 6-59 months to prevent further deterioration of nutritional status and to complement Government’s distribution of food parcels.
- Support access to clean water through household water treatment, promotion of hygiene and sanitation at the community level
- Install water tanks near schools to provide access to Government-trucked clean water
- Build capacity of regional and district government bodies, NGOs, and CSOs in assessment of water and sanitation needs, immediate response, and reporting.
- Close coordination with CO Angola to ensure exchange of cross-border information on trends, population movements and disease surveillance.

The urgency of the response allows scaling up and acceleration of several initiatives already under discussion or in early stages of implementation, including CMAM and Community Led Total Sanitation (CLTS). Working through line ministries and extending engagement with community structures gives stronger support to a sustainable approach and builds resiliency, as Namibia continues to face more limited rain shortfalls on a regular basis.

**UNICEF Action to Date**

UNICEF continues its technical and financial support to the Namibian Red Cross (NRCS), Directorate of Water Supply and Sanitation Coordination (DWSSC), Ministry of Health and Social Services (MoHSS) and DDRM on coordination, planning, implementation and monitoring of improving community and household access to safe water, sanitation, health and hygiene practices as well as prevention, early detection and referral of malnutrition problems among children and women.

**Food Security**

**Needs:**
- Distribution of fortified cereal and protein rich food item/s to all affected areas
- Clear criteria for eligibility for food support in the affected regions is needed urgently

**Response:**
- GRN distributed 52,000 metric tons of Maize meal to all 13 regions
- GRN allocated N$120 million to purchase additional 35,740 metric tons of cereals (fortified) and N$10 million for logistic management on distribution
GRN also procured fresh, dried and canned fish; fresh and canned beef; and canned beans as an attempt to balance the diet adding to Maize meal.

Gaps/constraints:
- Identifying, quantifying and targeting the most affected populations in need of food support continue to be a priority.
- Some of the children with severe malnutrition admitted to hospitals came from informal settlements and urban poor. Food distribution should cover all those affected.
- Logistics remain a major challenge in food distribution due to shortage of transport as well as human resources.
- Post food distribution monitoring and reporting remains a challenge.

Health and Nutrition

Needs:
- Need to strengthen health facility nutrition surveillance for acute malnutrition trends and emerging micronutrient deficiencies
- Commence active case finding for acute malnutrition in the community using health and community volunteer networks where they are available.
- Increase community awareness of and demand for nutrition services.
- Implement national vitamin A supplementation for children 6-59 months.
- Scale up MoHSS’ Nutrition Assessment, Counselling Support (NACS) programme in the 89 facilities that are currently not providing this service.

Response:
- UNICEF Namibia supported the training of trainers workshop from 22nd to 26th July for Namibia Red Cross Society (NRCS) regional managers, field supervisors and volunteers in community infant and young child feeding and nutritional screening.
- A total of 30 participants were trained. They represented 6 out of the 13 regions in Namibia; Caprivi, Kavango, Kunene, Ochangwena, Omusati and Otjozondupa.
- The overall objective of the TOT was to build participants’ capacity to train other staff and volunteers in their respective regions to conduct household screening for acute malnutrition amongst children 6-59 months, pregnant and lactating women and to counsel mothers, women and caregivers of children on infant and young child feeding (IYCF) practices. The training was facilitated by FANTA, I-Tech, UNICEF and MoHSS.
- Training of 350 Red Cross volunteers will take place during August 2013 in six regions to carry out community assessment of nutritional status as well as community-based IYCF (C-IYCF) activities.
- UNICEF with NRCS will develop and implement a training supervision, mentoring and monitoring programme to monitor the implementation of CIYCF counselling skills, nutrition screening and impact on behaviour change in the community with respect to IYCF practices.

Gaps/constraints:
- Delays in the collection, analysis and dissemination of data and information by the Ministry of Health and Social Services due to limited human resources.
- Nutrition and health surveillance needs to be strengthened.
- Insufficient funds to implement essential nutrition activities.
- Coordination mechanisms at all levels need to be strengthened in order to respond adequately.

Water and Sanitation

Needs:
- Directorate of Water Supply and Sanitation Coordination have identified a need for an additional 7 water tankers to truck water to affected communities and 224 new boreholes to be drilled.
- Mapping of areas to better understand the critical water and sanitation needs.

Response:
- To date the Government has drilled a total of 12 new boreholes to supply water for livestock in 2 regions. There plans are to drill another 29 new boreholes in 12 regions. Rehabilitation of boreholes has also commenced.
- Water is being trucked by Government in Omaheke region with immediate critical needs.
- A WASH response plan has been developed by UNICEF in partnership with NRCS that includes activities to support better access to safe water at household and community level via installation of water tanks, distribution of jerry cans and water purification tablets to households and the promotion of health and hygiene messages.
- A rapid assessment of situation of Water, Sanitation and Hygiene carried out by NRCS with UNICEF support in 4 regions – Kunene, Ohangwena, Ohsikoto and Kavango.
The National Drought Emergency Response Plan includes a detailed WASH section that describes short, medium and long term activities such as water trucking, borehole drilling and rehabilitation, pipeline extension, construction of earthdams, strategies to eliminate open defecation.

**Gaps/constraints:**
- Funding for additional water tankers and to implement the National WASH sector response plan
- Coordination and information sharing remains an overall constraint to all sectors including WASH.
- There is a need to look at the local coping mechanisms on water stress. Identification of areas for new boreholes need to be consulted with local and traditional leaders

**Education**

**Needs:**
- The School Feeding Programme continues however covers less than one-third of schools and there are increasing reports of significant delays in the distribution of maize meal to schools
- NRCS assessment conducted in July indicates that 6 mobile schools in Kunene region and 26 schools in Ohangwena are in critical need of water due to dried up wells.
- Although systematic documentation has not been undertaken, the NRCS assessment indicates that migration of people closure to water sources and in search of grazing impacts negatively on school attendance especially among pastoralist communities
- Mapping of schools affected but not currently covered by the school feeding programme

**Response:**
- UNICEF through Ministry of Education and NRCS will monitor the WASH situation in schools
- WFP is providing ongoing support to the MoE to improve management of the school feeding programme to ensure timely supply of meals to students. A monitoring tool has been developed with support from WFP for tracking supplies delivery and school attendance
- As part of the broader government response to the drought, MoE is planning expansion of the school feeding programme. The expansion plan includes coverage of pre-primary grades and provision of dry rations to secondary school learners in informal settlements.

**Gaps/constraints:**
- No official data on student attendance
- Less than one-third of schools across the country are currently on the school feeding programme
- Lack of reliable information on schools most affected by the drought
- Improved sanitation in schools was a pre-existing challenge (1 in 5 schools lack sanitation facilities, especially in the northern regions)

**Protection**

**Needs:**
- No reported protection issues to date however there are reports of increased cross border migration between Namibia and Angola that could have implications for child protection
- UNICEF monitoring situation with UNFPA as sector lead.

**Supply and Logistics**

UNICEF is seeking funds to provide additional supply items to support the response in the four most-affected regions:

**WASH commodities:** Water tanks, Water purification, Water testing supplies, Jerry Cans, Hygiene kits

**Nutrition commodities:** Ready to use therapeutic foods, fortified blended foods, and micro-nutrient powders (“sprinkles”),

**Human Resources**

Total # of Country Office staff pre-emergency: 35

Within this team, staff members have dedicated significant time to the initial assessment and response, with support from Regional Office. Additional support has been requested for Emergency Coordinator, Nutrition Coordinator, WASH Coordinator and 2 field-based WASH Officers.

The UNICEF Communications Officer, as chair of UN Communications Group, will represent the UN in the government’s Drought Emergency Information Dissemination Task Force.
### Funding

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements</th>
<th>Funds received*</th>
<th>Funding gap</th>
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<tbody>
<tr>
<td>Nutrition</td>
<td>5,884,367</td>
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<tr>
<td>Health</td>
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<tr>
<td>WASH</td>
<td>723,000</td>
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<tr>
<td>Child Protection</td>
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<tr>
<td>Gender Based Violence</td>
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<td>Education</td>
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<tr>
<td>HIV/AIDS</td>
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<tr>
<td>Programme Support</td>
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<tr>
<td>Cluster Coordination</td>
<td>432,000</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>7.4 million</strong></td>
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* ‘Funds received’ does not include pledges

Namibia Red Cross Society has entered into a partnership agreement with UNICEF Namibia Country Office for the value of US $570,000. This was possible due to re-programming of existing grants from the Government of Japan and UNICEF Canada. The objective of this partnership is to build NRCS capacity to plan, implement and monitor emergency WASH and nutrition interventions in Ohangwena, Omusati, Kunene and Kavango.

**Next SitRep:** 26 September 2013

**For further information, please contact**

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