

# SOMALIA - COMPLEX EMERGENCY

FACT SHEET #2, FISCAL YEAR (FY) 2014

APRIL 25, 2014

## NUMBERS AT A GLANCE

**857,000**

People Experiencing Crisis and Emergency levels of Acute Food Insecurity  
U.N. Food Security and Nutrition Analysis Unit in Somalia (FSNAU) – March 2014

**2.3 million**

People Experiencing Stressed-Level Acute Food Insecurity  
FSNAU – March 2014

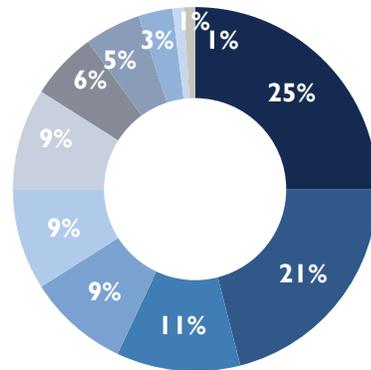
**1.1 million**

Total Internally Displaced Persons (IDPs) in Somalia  
Office of the U.N. High Commissioner for Refugees (UNHCR) – April 2014

**203,000**

Acutely Malnourished Children under Five Years of Age in Somalia  
FSNAU – March 2014

## USAID/OFDA<sup>1</sup> FUNDING BY SECTOR IN FY 2013 & FY 2014



- WASH (25%)
- Health (21%)
- Economic Recovery & Market Systems (11%)
- Agriculture and Food Security (9%)
- Nutrition (9%)
- Humanitarian Coordination & Info Management (9%)
- Logistics Support & Relief Commodities (6%)
- Protection (5%)
- Humanitarian Studies, Analysis, & Application (3%)
- Risk Management, Policy, & Practice (1%)
- Other (1%)

## HIGHLIGHTS

- The ongoing military offensive against al-Shabaab is limiting humanitarian access to conflict-affected populations
- The U.S. Government (USG) has provided more than \$227 million in humanitarian assistance to date in FY 2013 and 2014

## HUMANITARIAN FUNDING TO SOMALIA IN FY 2013 AND TO DATE IN FY 2014

USAID/OFDA	\$ 46,793,339
USAID/FFP <sup>2</sup>	\$159,553,000
State/PRM <sup>3</sup>	\$20,700,000
<b>\$227,046,339</b>	
TOTAL USAID AND STATE ASSISTANCE TO SOMALIA	

## KEY DEVELOPMENTS

- In early March, Somali National Army (SNA) and African Union Mission in Somalia (AMISOM) forces commenced military operations against the armed group al-Shabaab in southern Somalia. The U.N. warns that the offensive could directly affect up to 3 million people across 25 districts.
- FSNAU and the USAID-funded Famine Early Warning System (FEWS NET) report that food security conditions in Somalia may deteriorate in the coming months despite modest improvements in recent years. Approximately 2.3 million people are experiencing Stressed—Integrated Food Security Phase Classification (IPC) 2—levels of acute food insecurity, and an estimated 857,000 people are experiencing Crisis and Emergency—IPC 3 and 4, respectively—levels of acute food insecurity, according to the Food Security and Nutrition Analysis Post-*Deyr* 2013/14 technical report released by FSNAU on March 31.
- In FY 2013 and to date in FY 2014, the USG has obligated more than \$227 million in multi-sector humanitarian assistance to IDPs and conflict-affected populations, including the provision of relief commodities; emergency food assistance; water, sanitation, and hygiene (WASH) assistance; and humanitarian coordination and information management, among other interventions.

<sup>1</sup> USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA)

<sup>2</sup> USAID's Office of Food for Peace (USAID/FFP)

<sup>3</sup> U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM)

## INSECURITY AND HUMANITARIAN ACCESS

- In early March, SNA and AMISOM forces began a military offensive against al-Shabaab in central and southern Somalia, according to the African Union. SNA–AMISOM military operations have captured at least 10 towns in central Somalia, affecting Bakool, Galgadud, Gedo, Hiran, Lower Shabelle, and Middle Shabelle regions. However, the U.N. Office for the Coordination of Humanitarian Affairs (OCHA) warns that, despite limited SNA-AMISOM military successes, al-Shabaab’s presence and associated insecurity continues to limit humanitarian access to southern and central Somalia.
- Recent violent incidents underscore the continued insecurity across Somalia. Following al-Shabaab’s expulsion from the areas, a suicide bomber attacked a hotel in the town of Bulo Burto, Hiran Region, resulting in the deaths of eight people on March 18. Unidentified gunmen shot and killed two international staff from the U.N. Office on Drugs and Crime at Galkayo Airport in Puntland Region on April 7. The shooting highlights the continuing threat against international relief staff in the region.
- As of April 7, no safe conduits for delivering humanitarian aid into conflict-affected areas exist, according to the U.N. Ongoing fighting and al-Shabaab obstructions along major roads restrict humanitarian access, the supply of commercial and relief commodities, and the flow of information regarding affected populations’ needs. The U.N. reported that al-Shabaab blocked access to Xudur town in Bakool in March, causing food prices in the town to increase by an average of 36 percent by early April. Volatility on the roads and surrounding areas is also hampering access to SNA–AMISOM-controlled towns. In addition to insecurity, the start of the April-to-June *gu* rains will likely render roads impassable, further hindering humanitarian access to newly freed towns.
- Although the security climate in southern Somalia prevents a robust response, some relief agencies have accessed limited areas. In late March, a humanitarian assessment team undertook a survey of needs in Waajid town, Bakool. Initial findings identified food, nutrition, and health needs as most prominent. In response to these needs, relief agencies delivered medical and nutrition supplies to Xudur. Similarly, on March 31, an inter-agency assessment team accessed Belet Weyne town, Hiran, to record needs among IDPs from Bulo Burto and is helping humanitarian actors finalize response plans.

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## DISPLACEMENT

- The SNA–AMISOM offensive against al-Shabaab strongholds in southern Somalia continues to result in population displacement from conflict-affected locations. As of April 7, up to 44,000 civilians had fled the violence—including more than 21,000 people from Hiran Region, 16,000 people from Bay Region, 1,300 people from Bakool Region, and 540 people from Bedo Region, according to the U.N. Populations fled to nearby villages or government-held cities to avoid SNA–AMISOM and al-Shabaab clashes. The U.N. anticipates that the majority of IDPs plan to return to their areas of origin following military operations; in some areas this is occurring—displaced residents of Hiran’s Bulo Burto and Maaxas towns and Wajid have already returned. Many IDPs remain in need of safe drinking water, shelter, food assistance, household items, and health care services.
- The SNA–AMISOM offensive has displaced agro-pastoralist populations during the March-to-May planting season, potentially reducing July-to-August *gu* harvest yields, especially in Bakool, Bay, Middle Shabelle, and Upper Shabelle regions. OCHA also warns that the onset of the *gu* rains could further complicate southern IDPs’ living conditions given the lack of adequate shelter.
- As of March 25, nearly 2,400 Somali refugees from Dadaab refugee camp complex in Kenya have expressed willingness to take part in a UNHCR-led pilot repatriation effort to one of three destinations in Somalia: Bay’s Baidoa town, Gedo’s Luuq town, and Lower Juba’s Kismayo town. On April 4, the U.N. noted that SNA–AMISOM military operations and political unrest in Baidoa could dissuade or delay potential returnees from coming back to Baidoa.
- To date, USAID/OFDA has provided more than \$2.3 million in ongoing FY 2013 and FY 2014 funds for protection programs in Somalia. USAID/OFDA is supporting humanitarian organizations to respond and prevent incidents of gender-based violence (GBV) through survivor assistance services and increased community engagement on GBV

issues. USAID/OFDA protection funding also supports child-friendly spaces—areas created to protect the vital physical and psychological well-being of vulnerable children in Somalia.

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## FOOD SECURITY, NUTRITION, AND LIVELIHOODS

- FEWS NET and FSNAU report that food insecurity conditions in Somalia may deteriorate in the coming months despite modest improvement in recent years. The FEWS NET and FSNAU 2013/14 Post-*Deyr* Seasonal Food Security and Nutrition Analysis for Somalia found that as of January 2014, approximately 603,000 people across Somalia were experiencing IPC 3—Crisis—and IPC 4—Emergency—levels of food insecurity. By June, FEWS NET and FSNAU anticipate that the number of people experiencing IPC levels 3 and 4 levels of food insecurity will rise to 857,000 people—a 42 percent increase—primarily due to a January-to-February *Deyr* cereal harvest approximately 20 percent lower than the long-term and five-year average. IDPs will account for 74 percent—approximately 634,000 people—of those anticipated to experience Crisis and Emergency levels of food insecurity.
- More than 2 million people, or nearly a quarter of Somalia’s population, are experiencing IPC 2—Stressed—levels of food insecurity. Although not requiring urgent life-saving food assistance, factors such as conflict, decreased agricultural production, or market fluctuations could push Stressed populations into Crisis levels of food insecurity.
- FEWS NET and FSNAU report that approximately 203,000 children below the age of five years exhibit signs of global acute malnutrition (GAM)—a slight improvement from the 206,100 children experiencing GAM in August 2013. The assessment also found at least 51,000 children between the ages of six months and five years are experiencing severe acute malnutrition (SAM)—a 25 percent increase from the approximately 41,000 children experiencing SAM in April 2013. Critical levels of SAM appear more prevalent among IDP children in southern Somalia, where humanitarian assistance is most constrained.
- To date in FY 2013 and FY 2014, USAID/FFP has provided nearly \$160 million for emergency food assistance programs in Somalia. In recent months, USAID/FFP committed approximately \$37 million, including 17,210 metric tons (MT) of food, to implementing partners in Somalia. This recent assistance includes 16,800 MT of in-kind food commodities for relief, nutrition, and livelihoods activities, as well as 410 MT of emergency nutrition products to treat children experiencing SAM. Additionally, USAID/FFP is supporting other diverse interventions, including cash transfers and food vouchers, agricultural, livestock and vocational training, and school meals.

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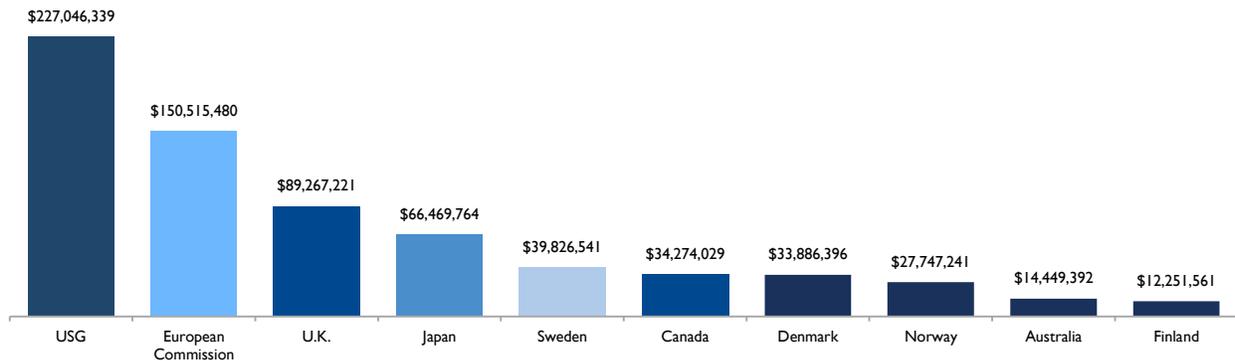
## HEALTH AND WASH

- Unspecified health organizations plan to continue vaccination and monitoring efforts responding to wild poliovirus Type 1 (WPV1) in Somalia throughout 2014, according to OCHA. The U.S. Centers for Disease Control and Prevention-supported Global Polio Eradication Initiative reported 194 cases of WPV1 in Somalia during 2013—the highest reported 2013 caseload in any endemic country. Starting in December 2013, health actors responded with an emergency vaccination campaign in Bari Region, which targeted 120,000 children under the age of five years, followed by an ongoing national campaign to vaccinate 2 million children. According to the U.N. World Health Organization (WHO), WPV1 transmission rates are in decline following several recent emergency vaccination campaigns, with no new cases reported from the outbreak’s epicenter—Banadir Region—since June 2013.
- The U.N. estimates that humanitarian actors have been unable to access more than 550,000 children in al-Shabaab-controlled areas since 2009. As SNA–AMISOM forces regain control of territory from al-Shabaab-held areas, health actors plan to prioritize disease vaccines for children. However, no such activities had occurred as of early April.
- In response to the health needs of IDPs and conflict-affected populations, USAID/OFDA is providing more than \$10.2 million in FY 2013 and FY 2014 funds for partners to provide life-saving health care interventions. Through USAID/OFDA programs, pregnant and lactating women and children have access to vital health care services. USAID/OFDA funds also help train community health workers in quickly and accurately identifying common symptoms of communicable diseases—including acute respiratory illness and pneumonia—to prevent serious health implications associated with delayed disease identification.

## OTHER HUMANITARIAN ASSISTANCE

- Since December 2013, the International Organization for Migration (IOM) has documented nearly 30,000 people returning involuntarily to Somalia’s capital city of Mogadishu from the Kingdom of Saudi Arabia (KSA), with more than 9,000 people involuntarily returning in February and March. Since November 2103, KSA authorities began enforcing more stringent immigration laws, deporting thousands of undocumented migrant laborers, including Somalis. In coordination with other humanitarian agencies, IOM is providing returnees with health care services, food provisions, access to safe drinking water, and onward transportation from Mogadishu to areas of origin.

### 2013 AND 2014 TOTAL HUMANITARIAN FUNDING\* PER DONOR



\* Funding figures are as of April 25, 2014. All international figures are according to OCHA's Financial Tracking Service and based on international commitments during the current calendar year, while USG figures are according to the USG and reflect the most recent USG commitments from FY 2013 and 2014, which began October 1, 2012 and October 1, 2013, respectively.

## CONTEXT

- Since 1991, Somalia has experienced a persistent complex emergency due to chronic food insecurity, widespread violence, and recurrent droughts and floods. The 2011 drought—widely regarded as the country’s worst in 60 years—severely reduced food security among pastoralists and populations in marginal farming areas, resulting in famine in areas of Bay, Bakool, and Lower and Middle Shabelle regions, as well as among IDPs in Mogadishu and the nearby Afgooye corridor.
- Despite improvements in 2013, malnutrition rates in Somalia remain among the highest in the world, and ongoing insecurity in the country—particularly in areas that lack established local authorities and where al-Shabaab is present—contributes to the complex emergency. Sustained life-saving humanitarian assistance, coupled with interventions aimed at protecting livelihoods and building resilience, is critical to help vulnerable households meet basic needs, reduce malnutrition, and protect livelihoods.
- Due to ongoing and anticipated humanitarian needs, on November 22, 2013, U.S. Ambassador James P. McNulty, Special Representative for Somalia in Nairobi, Kenya, renewed the disaster declaration for the complex emergency in Somalia for FY 2014.

**USAID AND STATE HUMANITARIAN ASSISTANCE TO SOMALIA PROVIDED IN FY 2013 and 2014<sup>1</sup>**

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
<b>USAID/OFDA<sup>2</sup></b>			
Implementing Partners	Agriculture and Food Security; Economic Recovery and Market Systems; Health; Humanitarian Coordination and Information Management; Risk Management Policy and Practice; Nutrition; Protection; WASH	Countrywide	\$ 46,722,176
	Program Support		\$71,163
<b>TOTAL USAID/OFDA ASSISTANCE</b>			<b>\$46,793,339</b>

<b>USAID/FFP<sup>3</sup></b>			
World Food Program	34,370 MT of Title II-Funded Emergency Food Assistance for Relief, Nutrition, Safety Net, and Livelihoods Activities	Countrywide	\$126,161,900
Implementing Partners	Cash- and Market-Based Programs; 410 MT of Title II-Funded Emergency Nutrition Products	Countrywide	\$33,391,100
<b>TOTAL USAID/FFP ASSISTANCE</b>			<b>\$159,553,000</b>

<b>STATE/PRM</b>			
Implementing Partner	Multi-sector Protection and Assistance	Countrywide	\$20,700,000
<b>TOTAL STATE/PRM ASSISTANCE</b>			<b>\$20,700,000</b>
<b>TOTAL USAID AND STATE HUMANITARIAN ASSISTANCE TO SOMALIA IN FY 2014</b>			<b>\$227,046,339</b>

<sup>1</sup> Year of funding indicates the date of commitment or obligation, not appropriation, of funds.

<sup>2</sup> USAID/OFDA funding represents anticipated or actual amounts as of April 18, 2014.

<sup>3</sup> Estimated value of food assistance.

## **PUBLIC DONATION INFORMATION**

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for disaster responses around the world can be found at [www.interaction.org](http://www.interaction.org).
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietary, and environmentally appropriate assistance.
- More information can be found at:
  - The Center for International Disaster Information: [www.cidi.org](http://www.cidi.org) or +1.202.821.1999.
  - Information on relief activities of the humanitarian community can be found at [www.reliefweb.int](http://www.reliefweb.int).

USAID/OFDA bulletins appear on the USAID website at <http://www.usaid.gov/what-we-do/working-crises-and-conflict/responding-times-crisis/where-we-work>