

This report is produced by OCHA Somalia in collaboration with humanitarian partners. It was issued by OCHA in New York. It covers the period from 19 to 25 October 2011. The next report will be issued on 1 November 2011.

I. HIGHLIGHTS/KEY PRIORITIES

- Heavy rains in parts of Somalia have increased vulnerability to waterborne diseases while impeding access to populations in need.
- Continued insecurity and military activities at the Somali-Kenya border have restricted movement, causing a sharp decline of Somalis entering Kenya to 100 last week, down from 3,400 week before.
- Somalia's CAP has increased to US\$1 billion following changes in shelter and WASH requirements.

II. Situation Overview

Somalia continues to receive heavy rains, increasing the risk of flooding and waterborne diseases like Acute Watery Diarrhea (AWD) and affecting the delivery of humanitarian assistance. The worst affected areas are Bay, Gedo, Lower and Middle Juba and parts of Mogadishu in Banadir region. Forecasts by the Somali Water and Land Information Management Unit indicate that heavy rains will continue in most parts of the country in the coming weeks.

The security situation remains precarious, particularly in Somalia's southern regions, further complicating humanitarian operations. On 18 October, at least five people were killed and 10 others wounded following a suicide explosion in Mogadishu. The explosion came barely three weeks after the deadly blast that claimed the lives of more than 70 people on 4 October. Fierce fighting was also reported between the Transitional Federal Government (TFG) troops supported by African Union Mission to Somalia (AMISOM) forces and Al Shabaab in northern Mogadishu's Hodan district this week. Reports indicate that the few civilians that remained in the district and its outskirts during the recent fighting have now opted to move out of their homes to other safe areas in Mogadishu.

The military build-up is causing anxiety among the civilian population. Some of the drought-affected people who arrived from other parts of the country are now facing multiple displacements in the wake of the military activities. Movement of humanitarian personnel and supplies are also likely to be restricted, subsequently affecting the timely delivery of assistance to populations in need.

According to UNHCR, the number of Somalis crossing into Kenya has decreased, with 100 people entering Kenya in the week of 17 to 23 October, a sharp decline from 3,400 people in the previous week. UNHCR attributes the reduction to military operations and the onset of the heavy rains at the border. Since January, 152,500 Somalis have been registered in the Dadaab camps in Kenya. In contrast, the number of Somali arrivals in the Ethiopian refugee camps has significantly increased, with nearly 5,000 people having crossed in the first half of October. This brings the average daily arrival rate to 414, which is more than twice the



trend in September. It is possible that the security situation along the Kenya-Somalia border may have diverted the movements to Ethiopia.

According to media reports, Al Shabaab this week began forced returns of internally displaced persons (IDPs) to their areas of origin in Lower Shabelle region, starting with Ala-Yasir settlement in K-50. At least 4,600 IDP families comprising about 27,540 people were transported to areas of Bay, Bakool and Lower Shabelle regions to start farming. Similar forced returns took place in Bay region in September.

III. Humanitarian Needs and Response in Southern Somalia



FOOD ASSISTANCE

Needs: Humanitarian partners are targeting 4 million food insecure people throughout the country.

Response: From 1-24 October, humanitarian partners assisted 893,000 people with improved food access including family food distribution, wet feeding, under five food nutrition responses and support for emergency school feeding, as well as voucher and cash aimed at improving household access to food through the market. Throughout September, humanitarian partners assisted about 2,215,634 people in Somalia, including the caseload from previous months. Reports received in September indicate that most beneficiaries of food aid (1,702,000 people, or 77 per cent of total) were in the south. These figures exclude the response by the Organization of the Islamic Conference (OIC) and its members, who have reportedly reached 1.4 million beneficiaries since April, of whom 40 per cent were in Mogadishu.

Gaps & Constraints: Deteriorating road conditions due to current *Deyr* rains are affecting delivery of humanitarian aid in Gedo, Middle Juba and Bay regions. A gap analysis conducted in September based on reported distributions from the Food Assistance Cluster (FAC) members shows a significant gap in food assistance interventions in Middle Shabelle, Lower Juba and southern Galgaduud regions. The FAC is currently seeking ways to scale up interventions and address these gaps.



NUTRITION

Needs: According to the FSNAU, there are currently 450,000 malnourished children under five years in Somalia, 190,000 of whom suffer from severe acute malnutrition (SAM). About 336,000, representing 75 per cent of all malnourished children, are in the south. The cluster is targeting 60 per cent of malnourished children (270,000) based on common practice, which indicates that nutrition programmes can only reach 60 per cent of affected children at best. In addition, the cluster aims to reach 40 per cent of the estimated 140,000 pregnant and lactating women in Somalia in the next year, half of that (29,000) over the next six months.

Response: The Nutrition Cluster is conducting training on Planning for Nutrition in Emergencies for 31 UN and NGO partners from 24 to 28 October in Nairobi. The training covers basic nutrition issues that partners should be addressing in emergencies. The cluster has also been allocated \$5 million from the Common Humanitarian Emergency Response Reserve for the six key regions of Bay, Bakool, Lower and Middle Shabelle and Lower and Middle Juba, and is currently reviewing proposals from partners.

As of 14 October, partners had admitted an estimated 390,866 children for treatment of SAM and moderate acute malnutrition (MAM) through outpatient therapeutic programmes, stabilization centres and targeted supplementary feeding centres throughout the country since January. This includes about 148,478 children since July, of whom 49,940 were treated for SAM and 98,538 for MAM. In addition, the Nutrition Cluster continues to provide blanket supplementary feeding to families with malnourished children younger than five years of age through a programme that began in August. As of 14 October, the cluster had reached 84,507 households, comprising 507,042 people, in Bay, Bakool, Hiraan, Lower and Middle Shabelle and Middle Juba.

Gaps & Constraints: Continued insecurity and limited partner capacity to deliver quality nutrition programmes remain the major challenges.



HEALTH

Needs: Of the estimated 3.7 million people in need, the Health Cluster aims to assist 2.6 million people with access to primary and/or basic secondary health care services. In addition, an emergency measles vaccination campaign (including polio and measles vaccines, de-worming tablets and vitamin A

supplements) is targeting 2.3 million children aged between six months and 15 years in the accessible regions of south and central Somalia since July.

With the onset of rains and floods in parts of Somalia caused by the *Deyr* rains in parts of Somalia, the Health Cluster is concerned about a possible large outbreak of waterborne diseases. Suspected cases of AWD have been reported from Burhakaba and Qansadheere (Bay region), Afmadow (Lower Juba region) and Hiraan IDP camp (south Gaalkacyo). During the first two weeks of October, 2,810 cases of AWD with 66 related deaths were reported in the south and central zone. The highest number of cases was reported in Banadir region, with 1,377 cases. Other than Banadir, cases are concentrated in surrounding regions of Middle Shabelle, Lower Shabelle, Bay and Lower Juba. In the same period, over 906 suspected measles cases and 20 related deaths were reported in south and central Somalia. In addition, 4,951 cases of pneumonia or acute respiratory infections were reported in Banadir, Lower Shabelle, Middle and Lower Juba regions, although the exact number of deaths is unknown.

Response: Following the addition of two new mobile clinics in October, Health Cluster partners are providing primary health care through 26 mobile clinics across Somalia. Each clinic reaches an average of 10,000 people per month. Information on the actual number of people reached is not yet available.

Partners have provided supplies consisting of oral-rehydration salts, intra venous fluids and medicines to Banadir hospital for 500 severe AWD cases. The emergency immunization campaign to combat measles has reached 1,168,072 beneficiaries in accessible parts of south and central Somalia since July, representing 51 per cent of the 2.3 million target.

In order to reduce the spread of malaria, the Health Cluster has undertaken preventive measures such as distributing 79,000 long lasting insecticide-treated nets to about 39,500 households throughout Somalia since July. Distribution of an additional 280,000 nets to over 140,000 households at a rate of two per family is being undertaken in the drought-affected regions of Hiraan, Lower and Middle Shabelle and Lower and Middle Juba in south and central Somalia, targeting people living in the most high risk areas. Concurrently, partners are conducting campaigns to educate families about malaria transmission and prevention. As part of the emergency plan since the declaration of famine, the cluster is equipping health facilities with the capacity to diagnose and treat malaria. Through this, one million rapid diagnostic tests and 560,000 doses of anti-malaria drugs that will benefit the same number of people are being provided to health facilities, community level health posts and additional service delivery points established by partners in a scale-up programme that began in August.

Gaps & Constraints: Non-state armed groups continue to obstruct the immunization programme by not permitting mass public immunization campaigns in some parts of south and central Somalia.



WATER SANITATION HYGIENE

Needs: Out of the estimated 3.3 million people in need of access to safe water and sanitation, the cluster aims to reach 3.3 million people with sustained access to safe water and 1.3 million with emergency sanitation by the end of 2011. In addition, since the *Deyr* rains began in the first week of October, the cluster is promoting hygiene amongst the 4.6 million people living in areas at high and medium risk of AWD/cholera as good hygiene practice is a key step in mitigating the spread of AWD/cholera. Targeted areas are in Bakool, Banadir, Bay, Gedo, Hiraan, Middle Juba, Lower Juba and Middle Shabelle.

Response: As of 21 October, the cluster had supported 1,195,917 people with sustainable access to water since January, representing 36 per cent of the target, including 99,000 since the beginning of October. More than half of the beneficiaries reached to date (680,035) were in south Somalia. Concurrently, the cluster is reaching 1,835,283 beneficiaries with temporary provision of safe water (e.g. water trucking), of whom nearly 90 per cent (1,590,071) are in the south. Temporary water interventions are provided in areas where sustained water interventions have not yet been completed. In addition, since January, partners have provided 517,071 people with emergency sanitation (i.e. latrines), representing 40 per cent of the target.

As part of efforts to prevent AWD/cholera outbreaks, 1,282,776 people have benefited from hygiene promotion and hygiene packages since January. Of these, nearly 60,000 individuals received hygiene promotion training in Mogadishu in the week ending 21 October.

Gaps & Constraints: According to reports from partners, significant gaps for sustained water interventions remain in Bay, Lower Shabelle and Middle Shabelle. The capacity of WASH partners with access to the south remains limited.



AGRICULTURE & LIVELIHOODS

Needs: The Agriculture and Livelihoods Cluster aims to assist 2.6 million people by the end of 2011 through multiple interventions last from three to 12 months including: 1) restoring the crop production capacity of farmers through the distribution of appropriate agricultural inputs (cereal seeds and fertilizers). This includes restoring reproductive assets like irrigation canals, feeder roads, animal watering infrastructure; 2) safeguarding the livelihoods and remaining assets of vulnerable, small-scale herders through improved fodder production and distribution and pasture/rangeland management; 3) emergency disease surveillance, treatment and vaccination; 4) slaughter destocking for nutrition support and post drought restocking; and 5) restoring reproductive assets like irrigation canals, feeder roads, animal watering infrastructure.

Response: From January to end August, about 882,000 people benefited from agricultural and livelihoods interventions. The cluster is currently consolidating the number of people reached in September and October. However, based on reports received from partners, the cluster estimates that in October some 628,902 people are benefiting from ongoing or completed livelihoods interventions, with 92,940 beneficiaries receiving agricultural inputs, 463,842 benefiting from cash for work, 18,000 from unconditional cash relief, 49,620 from food vouchers, and 4,500 from income generating activities.

Gaps & Constraints: Financial constraints continue to impede the cluster's ability to implement its scale-up response plan.



EDUCATION

Needs: The cluster aims to assist 435,847 students (the number of children enrolled in south central Somalia before the crisis) and 7,355 teachers. In addition, of the estimated 1.8 million children who are out of school because of internal displacement and insecurity, the Education and Protection Clusters aim to reach 40,000 children through Child Friendly Spaces (CFS), each targeting 20,000 children.

Response: Education partners continue to report that they are reaching 217,333 students with various interventions such as classroom construction and rehabilitation, although it is estimated that 380,000 students are being reached as not all partners have reported. Activities undertaken last week include the construction of 49 new classrooms with WASH facilities in Banadir and Middle Shabelle, benefiting 2,989 students, including 1,339 girls, as well as the rehabilitation of 13 classrooms in Lower and Middle Shabelle, benefiting 2,029 students, including 859 girls.

Furthermore, reports indicate that 5,264 teachers have received training and payment of incentives since September, although the number of beneficiaries is expected to increase as more partners report.

Meanwhile, 138 Education Cluster-supported CFSs are operational in Bay, Bakool, Banadir and Lower Shabelle, providing 7,413 out-of-school children, including 3,579 girls, with non-formal education and essential services. All CFSs are providing food support: 42 CFSs in Bay and Bakool are distributing monthly food vouchers to 2,080 children, while 96 CFSs in Banadir and the Afgooye Corridor are providing meals on-site to 5,333 children. The decision to provide on-site meals or food vouchers is reached jointly by the community and implementing NGOs based on variables such as the availability of food on the market.

In addition, 112 Community Education Committee (CEC) members from Mogadishu and the Afgooye Corridor were trained on school management, while 36 CFS facilitators and CEC members in Bay benefited from a three-day training this week on psychosocial issues.

On 15 October, the Education and WASH clusters collaborated on a joint event in Mogadishu to mark Global Hand Washing Day and support school-based hygiene promotion, a key risk-reduction strategy in light of the ongoing rains and rising incidents of water-borne diseases. Some 750 internally displaced families and 400 students from IDP schools participated in the event.



EMERGENCY SHELTER & NFI

Needs: The cluster's priority for October and November is to ensure provision of shelter and non-food items so that IDPs can cope with the October rains. This should reduce the hazard of hypothermia as malnourished children living in inadequate shelter are at serious risk now that the rains have begun. Appropriate shelter can also safeguard against other common diseases. Due to risk of hypothermia, distribution of blankets is the most pressing need at the moment. The cluster aims to provide 1,318,656 internally displaced persons with Emergency Assistance Packages (EAPs). The target for transitional shelter is still only 60,000, which was revised during the mid-year review from 42,000. The cluster is currently reviewing this target based on recent displacements due to the food crisis.

Response: Since January, the cluster has reached 626,622 people with EAPs and 45,162 people with transitional shelter, representing 47 per cent and 75 per cent of the respective targets. Most EAP beneficiaries (403,706, or 64 per cent) have received assistance since July, with 129,240 beneficiaries in Banadir (Mogadishu), 226,620 in the rest of the south, 46,806 in Puntland and 900 in Somaliland.

Most beneficiaries of transitional shelter (27,330 people) were assisted between January and June. Since July, 17,832 people have benefited from enhanced shelter, with 4,680 beneficiaries in Banadir (Mogadishu), 3,900 in the rest of the south, 9,252 in Puntland, and none in Somaliland.

Gaps & Constraints: Cluster members continue to face difficulties in accessing affected populations in Mogadishu. In addition, lack of funding for transitional shelter remains a major gap and shelter provided so far is only a fraction of the required response if all IDPs are to access adequate shelter.



PROTECTION

Needs: Displacement due to the famine coupled with increased violence and insecurity have amplified vulnerability and protection violations. The Protection Cluster target is currently under revision. Targeted beneficiaries include IDPs, survivors of human rights violations and vulnerable communities such as minority identity groups.

Response: From January to date, cluster partners report that 13,317 survivors of protection violations have been reached with psychosocial, legal, and medical support. In addition, some 4,000 households comprising about 24,000 individuals have benefited from protection through livelihood support and community protection initiatives. Further to this, 6,142 people have benefited from various protection services including community-based psychosocial support and basic education skills. Recent interventions of the Protection Cluster include a Training of Trainers for teachers on mainstreaming of psycho-social support activities in the school curriculum in Bossaso and Garowe, and a Migrant and Human Rights Workshop targeting judiciary and government officials from ministries responding to migrants was conducted in Bossaso. In addition, more than 100 participants were trained on the prevention of child recruitment and the release and reintegration of children associated with armed forces and groups in Galgaduud and Banadir.

To date, 28,259 children have benefited from 280 Child Friendly Spaces (CFS) and psychosocial support throughout south Somalia's regions of Bay, Bakool, Banadir, Lower Shabelle, Lower Juba and Gedo.

Population Movement Tracking (PMT)¹ observations for October indicate a steady decline in displacements since the peak of 63,000 people reported in July. The month of October has so far recorded 22,000² displacements, while 34,000 were recorded in September and 42,000 in August. Fifty four per cent of the displacements reported in October were due to insecurity. Lower Shabelle region had the highest number of insecurity-related displacements, recording 1,300 cases between 14 and 21 October, followed by drought which accounted for 43 per cent of the reported cases from Afgooye to Waaberi districts in Lower Shabelle and Banadir regions respectively.

Gaps & Constraints: Key constraints include the shortage of funding and limited access to areas in south and central Somalia where significant numbers of IDPs face protection risks, particularly for more sensitive activities such as those of addressing gender based violence and recruitment of child soldiers.



LOGISTICS

The Logistics Cluster now has a regular shipping service through the time-chartered vessel MV Caroline Scan, which has a capacity of 5,500 metric tons. This vessel will now be operating on a regular schedule twice a month, as opposed to the previous ad hoc arrangement, and makes its maiden voyage on 26 October. Currently, the ship is fully booked and is in the process of loading cargo. Organisations are encouraged to send in cargo movement requests for the next voyage. Meanwhile, the WFP-chartered vessel MV Sunrise this week transported 1,100 m³ of humanitarian aid from Mombasa to Mogadishu, including WASH and shelter relief items for four organizations. Discharge of the cargo is currently underway at the Port.

¹ PMT is an Inter-Agency Standing Committee (IASC) Protection Cluster initiative produced by UNHCR Somalia.

² These figures are estimates. They are intended to show population movement trends, not cumulative IDP population data. Figures are

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Emergency Telecommunications:

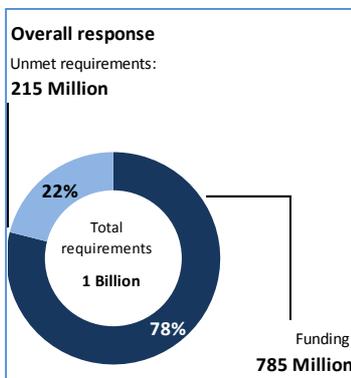
Following the assessments of inter-agency communications centres in Mogadishu, Bossaso, Hargeysa, Garowe and Gaalkacyo during the first two weeks of October, reports have been developed on gaps and how the infrastructure can be upgraded to provide better security communications services to the humanitarian community. The TETRA base radio installed by the UN Support Office for AMISOM (UNSOA) is now fully operational, enabling interconnectivity between the radio network used by UN humanitarian agencies and that used by UNSOA.

IV. Coordination

On 18 October, the Resident and Humanitarian Coordinator for Somalia, Mark Bowden, met with the head of OIC in Mogadishu to discuss how best to work towards a joint distribution plan for Mogadishu, improved organisation of the response in IDP settlements and security of both beneficiaries and distributions.

Progress on the 2012 Consolidated Appeal Process (CAP) is on track. For more information see: <http://ochaonline.un.org/somalia/CAP2012>

VI. Funding



As of 25 October, Somalia's CAP is \$1 billion up from \$983 million reported in September, following an increase in funding requirements for shelter and WASH.

The CAP is currently 78 per cent funded. Real-time data on CAP funding levels is available at: <http://fts.unocha.org/pageloader.aspx?page=emergencyDetails&appealID=927>.

All humanitarian partners, including donors and recipient agencies, are encouraged to inform OCHA's Financial Tracking Service (FTS - <http://fts.unocha.org>) of cash and in-kind contributions by e-mailing: fts@un.org.

VII. Humanitarian Giving

To make a donation through the United Nations, please consider one of the following options:

1. Support the appeals in the countries of the Horn of Africa
2. Give to the Central Emergency Response Fund (CERF)
3. Give to the Pooled Funds in Somalia, Kenya and Ethiopia
4. Give to OCHA's response to the Horn of Africa Crisis

For details on how to make a donation, please consult the "OCHA Guide to Humanitarian Giving" on the OCHA website: <http://www.unocha.org/crisis/horn-africa-crisis>

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