

SITUATION ANALYSIS OF CHILDREN IN SOMALIA 2016



Executive Summary
Country Context

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Foreword

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The Situation Analysis of Children in Somalia 2016 aims to provide an objective analysis of the available data and information to create an accurate picture of the current situation in the country.

The study shows how the situation of children in Somalia is improving, with more children surviving, being vaccinated, going to school and being registered, and increasing numbers of families with sustainable water supply systems and access to health care.

However, much more still needs to be done. Somali children and their mothers continue to suffer from multiple nutritional deprivations, which deny them the opportunity to thrive and reach their full developmental potential. Over 300,000 children under the age of five are acutely malnourished and the under-five mortality rate is among the highest in the world, with one out of every seven Somali children dying before their fifth birthday and fewer than half of children estimated to have been vaccinated against measles. In addition, the maternal mortality ratio is extraordinarily high, with 1 in every 12 women dying due to pregnancy-related causes.

Somalia is one of the world's least protective environments for children, with over 2,000 grave violations recorded in 2015. Nearly every girl undergoes Female Genital Mutilation (FGM), and only 4 in 10 go to school.

Children under 18 make up over half of the population and need to be at the centre of the humanitarian and development agenda. The Somali Government is committed to the survival, development and protection of children and demonstrated this by ratifying the Convention on the Rights of the Child in 2015. This provides an important framework for policy and legislation on children's rights.

The children of Somalia represent the future of the country. Investment in them is crucial to ensure there is equitable and sustainable development and this study should help guide all stakeholders in determining how this should happen.



Steven Lauwerier
UNICEF Somalia Representative



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Somalia is in the process of emerging from the prolonged period of state collapse that followed the civil war of 1988-91. Since 2012, the post-transitional Federal Government of Somalia (FGS) has been internationally recognized, but its capacity as a governing body and the area it controls remains limited. The conflict and destruction wreaked less havoc in the north of the country, where two governing authorities – Somaliland and Puntland – emerged in the 1990s that have at least attained modest levels of governing capacity.

In this context of widespread violence and weak governmental control, children's and women's rights in Somalia have not been sufficiently protected or promoted over recent decades. On 1 October 2015 Somalia became the 196th of the world's nations to ratify the UN Convention on the Rights of the Child (CRC). This report aims to present a comprehensive analysis of the situation of women and children in Somalia that will aid the country in meeting its commitments under the CRC over the next decade. It pays particular attention to five key thematic areas: Health; Nutrition; Water, Sanitation and Hygiene; Education; and Child Protection.

The report is limited by the lack of core data in many areas. The last comprehensive Multiple Indicator Cluster Survey (MICS) was performed as long ago as 2006, although a limited MICS was carried out in Somaliland and Puntland in 2011. The collection of such data has effectively been constrained by the continuing conflict in parts of the country.

The absence of coherent government and security over almost three decades has also meant that Somalia has not made the progress over that period seen in its neighbours or in other countries that started from a similar baseline in human development terms. This has left the country at one extreme of the global rankings on many different indicators. It has, for example, exceptionally high rates of population growth, fertility rates, child mortality and maternal mortality.

The high fertility rate also contributes to the exceptionally large youth bulge. Three-quarter of the population is under 30 years. Such a youth bulge can constitute a 'demographic dividend' in some countries but in Somalia the unfavourable context renders it more of a potential burden. The lack of employment both in rural and urban areas means that young people are unable to find a role, leaving them prone to frustration, insecurity, recruitment by armed groups of all types and, increasingly, desperately seeking opportunities through migration to other countries.

Somalia, then, is a young country in more ways than one, seeking new pathways to stability and social cohesion – and promoting and protecting the rights of its children and women will play a vital part in providing this sense of direction.

Health

Children and women face more health challenges in Somalia than in almost any other of the world's countries. The under-five mortality rate (U5MR) of 137 per 1,000 live births is presently the third worst in the world after Angola and Chad and one in seven Somali children dies before their fifth birthday. Neonatal deaths (those in the first 28 days of life) occur at a higher rate in Somalia than in any other country apart from Angola and Central African Republic.

The maternal mortality ratio (MMR) in Somalia is also, at 732 per 100,000 live births, among the world's highest, exceeded only by Central African Republic, Chad, Nigeria, Sierra Leone and South Sudan. Moreover, there is a higher lifetime risk of maternal death, at 1 in 22, in Somalia than in any other country apart from Chad and Sierra Leone.

Nevertheless, although both child and maternal death rates have declined more slowly than in neighbouring countries – and far more slowly than was envisaged under the Millennium Development Goals – there has at least been consistent progress and that progress has been swifter since 2000 than in the preceding decade.

There are multiple contributory causes to the unacceptably high levels of neonatal, infant and child mortality, the most significant of which are: neonatal issues, acute respiratory illnesses, diarrhoea, vaccine-preventable diseases and malaria.

The high maternal mortality ratio relates to the fertility rate, which is one of the highest in the world, at an average 6.6 children per woman. This is in turn connected to the common incidence of early marriage, low birth spacing, and lack of access to contraception, as well as to cultural expectations. About 1 in 10 marriages occurs before the girl is 15 years old, and about half before she is 18. The 2006 MICS3 found that only 15 per cent of Somali women aged 15 to 49 used any form of contraception.

Other contributors to the unacceptable level of maternal death are the lack of antenatal care (ANC) – only a quarter of women receive this; the low proportion of births attended by skilled medical personnel (only a third); and the inadequate facilities for emergency maternal care.

One area of health in which there has been a positive development is that deaths from malaria have reduced dramatically over recent years. This is due in part to the long periods of drought in 2009-2010 but also to anti-malarial interventions such as encouraging people to sleep under long-lasting insecticide-treated mosquito nets – the rate of usage of these in the southern and central regions, where malaria is endemic, is currently 29 per cent.

In other areas of health, however, there has been insufficient progress. Rates of acute respiratory infection – suspected pneumonia – are high, and the last countrywide survey indicated that only 13 per cent of children suspected of having pneumonia were taken to an appropriate health provider. The incidence of diarrhoea in children under five remains, at 24 per cent, very high, and has changed very little in recent decades, though it is much less common in Somaliland than in the other regions. Overall rates of immunization coverage remain low in Somalia, with an estimated coverage for measles and DPT3 of well under 50 per cent in 2014.

Improving this health situation depends not only on enhancing the coverage and quality of health services but also on changing people's health-seeking behaviour.

Nutrition

Undernutrition is thought to be the underlying cause in over a third of under-five child deaths. The nutritional status of Somali children is among the worst in the world and remains a huge public health concern.

Levels of global acute malnutrition (GAM) for children under five are considered critical if they exceed 15 per cent, at which point emergency action should be triggered. The prevalence of GAM in Somalia is often above this critical level. The causes include: the effects of droughts; underlying vulnerabilities caused by years of conflict; the collapse of basic social services; and an erosion of coping mechanisms and resilience over time.

Stunting is more prevalent in the southern and central regions and Puntland than in Somaliland, and more prevalent in populations of IDPs and those with rural livelihoods.

The prevalence of anaemia amongst children aged 6-59 months is also high, and nearly three quarters of children under the age of two have the condition. Rates of Vitamin A deficiency in all parts of Somalia are over the 20 per cent threshold that the WHO considers severe. About half the women in Somalia are anaemic, whether they are pregnant or not.

Most Somali women do not effectively access appropriate nutritional knowledge, mainly due to their poor use of maternal and child health facilities and their lack of access to community health workers. The overwhelming majority of mothers breastfeed their children for at least some period of time but fewer than 1 in 10 infants are exclusively breastfed up to the age of six months. Children below six months of age are often given tea or sugar water in combination with breast milk, formula or non-human animal milks. Only 1 in 10 Somali children are appropriately fed with the WHO/UNICEF recommended combination of breast milk and complementary solid foods at the age of one.

Somalia is chronically food insecure. Poor rains and seasonal floods affect crop and livestock production, which are the main sources of livelihood for most of the rural population. In the past five years, local cereal production has only catered for an average of about 30 per cent of food needs. In recent years, about a quarter of the population has been moderately food insecure, and about 1 in 10 people have been in acute or emergency food insecurity. At the end of 2015, 71 per cent of those in the latter state were internally displaced persons (IDPs).

Dietary diversity is generally poor in Somalia, reflecting the inadequacy of food access and availability. Consumption of micronutrient-rich foods – including fresh fruits, vegetables rich in Vitamin A, fish, eggs and meat products – is generally low across all parts of the country. This is partly due to lack of availability and to cultural preference but, in addition, such a diet is beyond the economic reach of poor households.

Water, Sanitation and Hygiene (WASH)

The availability of water in Somalia varies between abundance in the regions between the Shabelle and Juba Rivers to the acutely arid regions elsewhere in the country, but overall it is a very scarce resource. The extreme shortage of surface water in parts of the country, especially Puntland and central Somalia, means that groundwater is the only reliable water source and this is at depths of up to 400 metres in some areas. Moreover, up to 40 per cent of the water supplies are non-functional at any one time. Due to the depth of the groundwater, rural water supplies often rely on diesel-powered pumping systems, which require regular maintenance from skilled mechanics, who are only found in urban areas.

Water is usually seen as an economic rather than a social good in Somalia. Businesspeople or clan elders tend to control water supplies for profit or personal interest. Even where government has a presence, there is very little regulation of private water suppliers. This means that operators charge extortionate prices in some areas. Because of high prices, households may fetch water from unimproved sources rather than pay for safe drinking water.

The continuing high incidence of diarrhoea in Somalia is despite the rise in use of improved water, at least in urban areas – overall coverage has risen from 29 per cent in 2006 to 55 per cent in 2015. However, only about one in five Somalis use both improved water and improved sanitation, though almost half of urban dwellers do so compared with just 4 per cent of those in rural areas.

Given the common practice of open defecation and the absence of a system for monitoring and controlling bacteriological water quality, the majority of open wells, berkhads and even some shallow boreholes in Somalia are likely to be contaminated.

In a 2015 survey most respondents claimed to wash their hands but the lack of availability of facilities that include soap indicates that, while there is knowledge and awareness, proper hygiene behaviour is actually not possible. There appears to be relatively little behaviour change being initiated by children in the household, which suggests that WASH programmes in school are not prevalent or effective. There is no system for monitoring water quality.

Budget allocations for sanitation and hygiene are very limited and are considered a low priority by the health professionals responsible for drawing up budgets.

Education

Somalia has one of the world's lowest proportions of primary-age children attending primary school – only about a quarter, according to the last full survey of primary net attendance, which was as long ago as 2006. More than half of children are out of school, and less than 10 per cent of children start school at six years old. Children who do attend primary school tend to start at a later age, which means there is a high proportion of secondary-age children in primary school.

Extremely high rates of poverty in communities across Somalia make it difficult for parents to afford school fees. In many areas, parents are required to pay for their children's education, and poverty remains the main reason they give for not sending their children to school. Somaliland declared free primary public education in 2011 but has had great difficulty in retaining teachers at the salaries the government can afford to pay. With parents and communities no longer paying for public primary education, schools have almost no funds to cover their running costs.

Pastoralist communities make up a quarter of the Somali population, and adapting approaches to ensure that all children living in these settings have access to basic education is critical. Currently, less than a quarter of pastoralist children attend formal schools in Somalia, largely due to the high costs and the lack of an education format that suits their nomadic lifestyle. Pilot models for 'informal education' for pastoralist and other children out of formal education show promise but have yet to be taken to scale.

More children of primary age attend traditional Quranic schools than public schools, especially in the southern and central regions. However, the limited scope of traditional Quranic schools (almost exclusively the Quran and Islamic studies) are no substitute for formal education and only 10 per cent of the students who attend these schools are literate.

Girls' participation in education is consistently lower than that for boys. Fewer than 50 per cent of girls attend primary school, and the last countrywide survey from 2006 showed that only 25 per cent of women aged 15 to 24 were literate. The low availability of sanitation facilities (especially separate latrines for girls), a lack of female teachers (less than 20 per cent of primary-school teachers in Somalia are women), safety concerns and social norms that favour boys' education are cited as factors inhibiting parents from enrolling their daughters in school.

Child Protection

Conflict and political instability over recent decades has weakened governmental authority and the justice system is weak. This means mechanisms for child protection are extremely limited. Displacement can result in separation of children from their families, which exposes them to exploitation, violence and abuse – and the children of IDPs and minorities are particularly vulnerable. In addition, societal acceptance of domestic violence and corporal punishment often stands between child victims and justice. The lack of a framework for law and order allows many children to work in exploitative and abusive environments. In respect of protection and security, girls and women are controlled in every aspect of their lives, including their bodies. Older children are seen as a resource instead of being protected and nurtured for effective growth and development.

Child protection is inadequate from the very start of life: only 3 per cent of children's births are registered in Somalia despite the fundamental importance of such registration to guaranteeing child rights. There is, moreover, no legal or policy framework for birth registration in any of the State entities of Somalia, though UNICEF is supporting the Ministry of Interior in Somaliland to develop a practical system of birth registration and Puntland has expressed interest in a similar approach.

About 1 per cent of Somali children are 'double orphans' but the incidence of children living in households without a biological parent has been rising over recent decades and is higher the older the child is. In Somaliland and Puntland, most children separated from their parents are in kinship care with only a small proportion of these receiving help – and that from relatives. Street children tend to be from IDP families or of Somali ethnicity from Ethiopia, with boys more visible than girls. In the southern and central regions, loss of livelihoods and food insecurity due to conflict or drought result in parents either going away to earn a living elsewhere or sending children away to live with others or for child labour.

About half of Somali children aged between 5 and 14 engage in child labour. The rate is higher for rural than for urban children, and somewhat higher for girls than for boys.

Recruitment or use by armed groups or forces – including Al-Shabaab, the National Army and allied militias, and others – also separates a number of boys and girls from their families. In some areas families feel obliged to send their children to serve in clan militias. Some parents, and even children themselves, consider recruitment as a source of income and a means of

escaping poverty. The armed groups detain, kill, maim, rape and sexually abuse children.

Rape and sexual assault are widespread problems though, because of the strong stigma attached to rape in Somali culture, most incidents go unreported. Prosecutions and convictions for rape and other forms of sexual violence are extremely rare, and there is a climate of impunity. If parents are aware of the rape, customary law is the general means of recourse but girls and women do not have a voice in such forums.

Two other key child protection issues in Somalia are female genital mutilation (FGM) and child marriage.

Some 98 per cent of Somali women aged between 15 and 49 have undergone some form of FGM – the highest rate in the world. Regional authorities are in the process of drawing up legislation on total abandonment of FGM and in Puntland the Ministry of Religious Affairs has issued a fatwa against all forms of FGM.

About 1 in 10 Somali marriages occurs before the girl is 15 years old, and about half before they are 18. Rates of child marriage tend to be high where poverty, birth and death rates are also high; where civil conflict is commonplace; and where there are lower overall levels of development, including schooling, health care and employment. Neither political nor religious leaders see protecting girls from child marriage as a priority.

Social Protection

The need for comprehensive, shock-responsive social protection systems was very apparent during the 2011 famine, which had a devastating impact on Somalia. The famine resulted in the deaths of 258,000 people, half of whom (130,000) were children. Social protection mechanisms have a long history in Somalia, and though generally effective, these mechanisms can come under stress from repeated crises, and may be particularly ineffective in the case of community-wide shocks. They can also lack elements of consistency and predictability that are necessary for households to take informed risks, and may also exclude particularly disadvantaged groups, such as minority clans.

Resilience

Improvements in the situation of Somali women and children as a result of both development and emergency programming have been extremely vulnerable to shocks, including seasonal droughts and floods which routinely affect nutritional and health status of children, limit access to education and have a detrimental effect on progress made in addressing child protection issues. While subsequent cycles of emergency-type

programming have addressed the immediate fall-out of shocks, governments and international partners have to step up efforts to support conflict- and context-sensitive programming achieving sustainable

results for children and breaking the cyclical patterns of conflict and natural disasters that lead to recurrent development reversals.



Country Context

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Contextual factors in Somalia shape both impediments to and opportunities for children's protection, rights and development. This section of the report summarizes the country context in Somalia. Its main findings include the following:

- The current context in Somalia is exceptionally challenging for the protection and advancement of children's well-being. Efforts by Somali civic and political leaders, heads of households and international development agencies to improve the lives of children work on multiple levels in a relatively non-permissive environment.
- Some of the contextual factors that function as constraints are amenable to change, though those changes will take time. Other contextual factors are relatively fixed and must be dealt with as such for the foreseeable future.
- Regional and local variations in context are substantial, offering pockets of new opportunities for improved child well-being in parts of the country.

Geographic and spatial context

Somalia has the longest coastline in Africa. It contains mountains, tropical forests and irrigated farmland, and semi-arid grasslands. But the defining feature of the country is vast expanses of semi-arid or arid, low-lying scrubland, most of which is suitable only for nomadic pastoralism.

Rain falls in two condensed periods of the year – the main gu rains of April-June, and the less reliable deyr rains in October and November. Annual rainfall reaches 600mm in the southern coastal area but the northeastern tip of Puntland receives less than 100mm.¹ Only the inter-riverine areas in the south receive enough to sustain rain-fed farming. Somalia is prone to severe drought and floods: on average, the country suffers from moderate drought every three to

four years, and from severe drought every seven to nine years.²

The single most significant spatial divide in Somalia that affects children's well-being is the urban-rural gap.³ Around 42 per cent of the population is urban, 26 per cent nomadic, 23 per cent rural (mainly agro-pastoral or agricultural) and 9 per cent internally displaced.⁴ Almost all of the IDPs are located in urban settings and half of the Somali people are now in towns or cities. These figures reflect a sea change in the spatial distribution of the population, which was only a few decades ago a mostly rural society.

While the towns and cities feature large slums and deep poverty, they offer better livelihoods and access to basic services than the rural areas, and the persistent urban drift arguably testifies to that. The country's urban economies are less vulnerable to livelihood shocks, and are partially insulated from the crises and geographic constraints in rural areas, thanks to remittances from the large Somali Diaspora, the concentration in cities of foreign aid as well as of government jobs and services, and the availability of imported foodstuffs. The severe drought of 2011, for instance, contributed to the deaths of nearly 260,000 people mostly in rural areas of the south, while people in nearby Mogadishu were less badly affected.

For rural dwellers, Somalia's semi-arid environment is a challenging setting and a major constraint on livelihoods. The rural population is vulnerable to periodic, often severe drought. Even under normal circumstances, annual cycles of rainy and dry seasons produce a 'hungry season' of food shortage prior to the main harvests, exposing some Somali children in rural areas to seasonal undernutrition. Moreover, seasonal pastoral movements create special challenges for access to education and health care. Some evidence suggests that long-term climatic changes, degradation

¹ Jessica Tierney et al, "Past and Future Rainfall in the Horn of Africa," *Science Advances* 1, 9 (9 October 2015), figures and data <http://advances.sciencemag.org/content/1/9/e1500682.full>

² FAO, "Somalia: Geography, Climate, and Population" http://www.fao.org/nr/water/aquastat/countries_regions/som/print1.stm

³ UNDP, *Somalia Human Development Report 2012*, Nairobi, 2012, p. viii. It reports that poverty rates are 61 per cent in urban Somalia, and 94 per cent in rural Somalia.

⁴ UNFPA, 'Population Estimation Survey 2014 for the 18 Pre-War Regions of Somalia', UNFPA, Nairobi, 2014.

of pasture, and deforestation due to charcoal production, are adding new strains to rural livelihoods. While Somali rural dwellers have impressive coping mechanisms to manage this environment, their resilience is under unprecedented strain.

While some opportunities for major increases in productivity exist along the country's two river valleys, Somalia's semi-arid environment places limits on any major expansion of animal husbandry and agriculture. Opportunities to expand livelihoods in the future will mainly be focused on urban-based sectors such as commerce, services and light manufacturing.

Children in rural Somalia have very limited access to basic services and education, and face higher risks of undernutrition or early death. They often begin contributing to family production as herders of goats and sheep, as farm workers, or with household chores and child care at the age of four or five. Children in urban Somalia have a better chance of accessing basic services and education, but their households have to contend with very high levels of unemployment outside the informal sector.

Somaliland and Puntland: For both Somaliland and Puntland, geography is both an opportunity and a constraint. Most of the north is arid to semi-arid, suitable only for seasonal pastoralism. Puntland is the driest region in the eastern Horn. In Somaliland, the rapidly growing metropolitan area of Hargeisa faces future water shortages. Rural livelihoods and development face real constraints in this setting.

But Puntland and Somaliland's geographic location is favourable in other ways. Both are positioned on the coast as entrepôts for trade between the Gulf states and the interior of the Horn of Africa, and enjoy vibrant commercial sectors. Both are also the site of oil exploration, which could in future years yield new sources of revenue. Somaliland and Puntland are both more urbanized than any other regions outside of the Benadir region (Mogadishu), and northern towns enjoy substantial flows of remittances that help to support the urban economy.

Southern and central Somalia: Southern Somalia possesses some of the greatest geographic assets of the country, notably the Jubba and Shabelle river valleys. It receives higher rainfall, enough to sustain rain-fed agriculture in some areas. In addition, it has a long coastline, is the site of the capital, Mogadishu, and abuts the lucrative market of Kenya. But these relative advantages have not translated into gains for development or for child well-being. On the contrary, southern and central regions contains pockets of some of the highest levels of underdevelopment in the country, as measured by infant mortality,

undernutrition and illiteracy. The heaviest concentration of underdevelopment is in the riverine zones, where marginal farming livelihoods, low social status and political weakness contribute to much higher levels of poverty.

Demographic context

Somalia's total population is estimated at 12.3 million. The country has been described as a "demographic outlier" due to exceptionally high rates of population growth, fertility rates, infant mortality and maternal mortality.⁵ Demographic trends in Somalia exhibit few significant regional variations, so this section only addresses the national demographic context.

Somalia's fertility rate of 6.6 per woman is the third highest in the world, though it has declined slightly from a peak of 7.6 in 1998. This exceptionally high fertility rate has many implications for child well-being. It contributes to the country's very high maternal-mortality ratio (732 per 100,000 live births);⁶ it strains the household capacity to invest in basic education, health care and nutrition for all the children in the family; and it contributes to the country's annual population increase, which, at 2.9 per cent, is among the highest in the world.⁷

The high fertility rate also contributes to the exceptionally large youth bulge. Just under half (45.6 per cent) of the population is less than 15 years old, and three-quarters (75 per cent) of the population is under 30 years.⁴ The general literature on the impact of youth bulges is not conclusive, but evidence does point to several concerns. Youth bulges are associated with, among other things: increased risk of armed conflict; spikes in criminal violence; pressures on educational facilities; increased unemployment; and social frustration that can produce political unrest. On the positive side, youth bulges also provide a large labour pool that can attract labour-intensive investment, boost local demand for a variety of goods and services, and expand a country's human capital.

Whether a youth bulge constitutes a 'demographic dividend' or a dangerous burden for a country depends mainly on the local context. In Somalia, the context is far from favourable. Urban employment nationally ranges between 60 per cent and 80 per cent, so the labour market is already saturated with frustrated job-seekers and the current youth bulge is only adding more. Labour-intensive manufacturing is unlikely to be attracted to Somalia in the short to medium term

5 Madsen, Elizabeth, 'In Somalia, Beyond Immediate Crisis, Demography Reveals Long-Term Challenge', *New Security Beat*, Wilson Center, Washington DC, 21 December 2011, <http://nin.tl/Somaliademography>
6 http://www.who.int/gho/maternal_health/countries/som.pdf
7 <http://data.worldbank.org/indicator/SP.POP.GROW>

due to high security risks and political uncertainty, and the rural sector is unlikely to see major expansion in productivity either. The youth bulge in Somalia is more likely to result in: high levels of frustration over limited access to education, jobs and social mobility; easy recruitment of unemployed young men into armed groups of all types; acceleration of urban drift from the countryside, producing ever-larger urban slums; and, perhaps most significantly, increasing numbers of Somali youth seeking out-migration to the Gulf, Europe and North America in search of work and a new life. Recent surveys suggest that the last scenario is already playing out: a majority of young people surveyed identified out-migration as their preferred option for the future.⁸

The continued expansion of the Somali Diaspora as a long-term demographic trend can be seen as a net positive for the country, in that migrants become valuable sources of remittances, the mainstay of the Somali economy and a major source of household revenue to cover the costs of children's education and health care. But it can also cause concern over the 'brain-drain'. Moreover, avenues for out-migration are dangerous, expensive and increasingly restrictive; they are hence a demographic 'safety valve' over which Somalia has little control.⁹ At the same time youth migration can have a negative effect on those left behind – a UNICEF-commissioned survey conducted by the Rift Valley Institute found the families often came under pressure from traffickers to pay for the migrant's passage once he or she had left and was in transit in Ethiopia, Sudan or another African country. The affected families received threatening calls from the trip organizers demanding payment forcing them to use savings, borrow from relatives or sell off assets to ensure the migrant's safe passage.

High population growth guarantees that the country's rates of urbanization will continue to accelerate, transforming what was once a predominantly rural society into one that is increasingly concentrated in towns and cities. Urbanization has the potential to improve net access to education and health care for children, even as it exacerbates problems of unemployment.

Institutional and governmental context

Somalia is emerging from a prolonged period of state collapse. In January 1991, following three years of civil war, the government of President Siyad Barre fell. Rival clan militias then fought among themselves, plunging the country into chaos. Several efforts were made, beginning in 2000, to stand up a central government in Mogadishu, but those transitional governments

never became functional. Since 2012, the post-transitional Federal Government of Somalia (FGS) has been internationally recognized, but its capacity as a governing body and the area it controls remain limited.

However recent efforts for preparation of a National Development Plan 2017-2020 (NDP) remain promising. Focused attention to the social sectors combined with the desire for alignment of the NDP with the Sustainable Development Goals, through a focused and realistic monitoring and evaluation framework, are opening new political space for longer-term sustainable development programming.

An electoral process is expected to take place in August 2016. The process of establishing a federal framework for governing Somalia is also well underway although much work remains to be done to achieve a common vision of how this will work

The north of the country was largely spared the violence and destruction of the war. There, two governing authorities emerged in the 1990s that, in partnership with clan elders and other non-state actors, enjoy at least modest levels of governing capacity. In the northwest, the unrecognized secessionist state of Somaliland has existed since 1991, and, despite daunting challenges and weak government institutionalization, has kept the peace, provided security across most of its claimed territory, and has adopted a political system that has seen multiple transfers of power.¹⁰ The semi-autonomous Puntland authority in the northeast was formed in 1998; its levels of governance and security are also modest but have nonetheless provided a relatively safe environment for service delivery and private-sector activities.

Across Somalia, government capacity falls along a spectrum ranging from modest to non-existent, depending on the location and the issue-area. Throughout the country, civil service expertise in ministries is weak, ministerial turnover high, absenteeism due to very low or irregularly paid salaries endemic, and corruption a major impediment.¹¹ In short, governance is very poorly institutionalized.

Corruption has been a particularly grave impediment to delivery of basic services, and to essential government regulation of for-profit and non-profit service providers. It is fuelled in part by the fact that control of government coffers – and the foreign aid and taxes that flow into those coffers – remain a principal route to private enrichment in Somalia, where accountability remains very poor.

8 UNDP, *Somalia Human Development Report 2012*, Nairobi, 2012.

9 Taxin, Amy, 'Somalis Seeking Asylum Take Back-Door Route to US', *Washington Post*, 4 January 2010, <http://n.in.tl/Somalibackdoor>

10 Bradbury, Mark, *Becoming Somaliland*, James Currey Press, London, 2008; Renders, Marleen, *Consider Somaliland: State Building with Traditional Leaders and Institutions*, Brill, Leiden, 2012.

11 Somalia is ranked the second most corrupt country in the world, according to the latest Transparency International ratings. See www.transparency.org/cpi2015

Weak government capacity across most of Somalia is linked to variable but generally high and chronic levels of insecurity (see **Conflict context**, below). In response, Somali households and communities rely on a range of non-state actors and institutions to secure for themselves protection and services that local and national governments are not always in a position to provide. These include: customary law mediated by clan elders; the protection and safety net provided by one's lineage; hybrid governance arrangements involving coalition of municipal authorities, elders, clergy, women's groups and business leaders; local committees assigned to oversee basic services; neighbourhood watch groups; and private security forces.

Many of the most effective forms of government across all of Somalia are located at the municipal and district level.¹²

Somaliland: Formal government capacity is higher in Somaliland than elsewhere in the country, although it varies significantly by ministry and by minister. Somaliland's government has been most effective not so much as a direct provider of core services impacting women and children, but as an enabler of a secure and lawful environment in which other providers have thrived. Ministries overseeing social services have generally been effective and have benefited from partnerships with the UN, aid agencies and local NGOs. Free primary-school education is provided by the Somaliland government. Government effectiveness falls off in more rural and remote areas, especially in disputed territory in parts of the east.

Puntland: Puntland's government has enjoyed more modest success. It has provided generally good security and an environment conducive to private-sector activity and unimpeded access to basic services for the population, though insecurity has periodically flared up in parts of the state. This has the potential to reduce provision of important service delivery to women and children.

Government ministries tasked with social services have worked in tandem with local NGOs, the UN and aid agencies to facilitate modest levels of access to education and basic health care. A number of districts in Puntland now deliver core social services. Lack of regular salaries payments to civil servants and security forces have led to disruption of government operations. As with Somaliland, government capacity and performance tends to fall off away from major urban centres.

Southern and central Somalia: Governance is highly variable across South Central Somalia, but generally much weaker than in the north. Large areas of southern Somalia remain completely beyond the reach of both the Federal Government of Somalia (FGS) and the many nascent federal states claiming jurisdiction over sections of the country. Al-Shabaab operates in an expansive area of the countryside, but engages in minimal governance now that it has lost control of major towns. Even in areas where the FGS is present, its ability to provide basic security and social services is very limited. In some areas the presence of government security forces is associated with declining local security due to poor discipline and control of forces that often act as autonomous clan militia. Much of the population continues to rely on traditional authorities for basic governance and on their clan for protection. Social services are primarily in the hands of local NGOs and local committees, with support from external partners.

The population living in the capital Mogadishu enjoys variable access to governance, security and basic services, with dramatic differences by district and neighbourhood. A combination of government forces, clan paramilitaries, private security and troops of the African Union Mission in Somalia (AMISOM) creates reasonably strong security in some areas, while others are plagued by threats of violence. Government capacity to provide basic regulation is very weak, as evidenced by endemic and serious disputes over high-value urban land.¹³ Most social services are delivered by either the private sector or by NGOs, some fee-based and others free.

Conflict context

Notwithstanding Somalia's conflict-ridden reputation, large parts of the country, especially in the north, are relatively peaceful and secure. The worst instances of armed conflict are concentrated in parts of the South where Al-Shabaab, government forces and African Union peacekeeping forces continue to clash. But many of the incidents of insecurity and violence are unrelated to Al-Shabaab, and are instead linked to communal clashes, political rivalries, revenge killings and struggles over resources. Importantly, both insecurity and state failure create conditions that serve the interests of some constituencies and leaders, some of whom actively seek to perpetuate conditions of chronic disorder and armed violence.

Within the southern and central regions, levels of insecurity vary greatly by location. Even within the capital, Mogadishu, the number and severity of

¹² Menkhaus, Ken, 'If Mayors Ruled Somalia', Nordic Africa Institute Policy Note 2, February 2014, <http://nai.diva-portal.org/smash/get/diva2:714676/FULLTEXT01.pdf>

¹³ Barakat, Sultan, et al, *Beyond Fragility: A Conflict and Education Analysis of the Somali Context*, Post-War Reconstruction and Development Unit, for UNICEF, University of York, 2014, pp. 50-52.

incidents of armed violence vary significantly from one neighbourhood to the next. But armed conflict, in the form of sustained communal violence, political clashes, terrorist attacks and counter-insurgency operations, continues to plague portions of the country, especially the area between the two main rivers, the Jubba and the Shabelle. In some of the hardest-hit areas, movement of agricultural goods and livestock from countryside to towns has been rendered very dangerous, and livelihoods imperilled.

In much of Somalia, conditions of war are not common, but chronic, low-level insecurity is, in the form of criminal violence, militia predation, kidnapping and threat of sexual assault. This has very serious implications for child protection and well-being, affecting everything from the willingness of households to allow girls to attend school to risk-averse farming and business practices that result in lower incomes.

Armed insecurity has both direct and indirect costs to child well-being. It raises risks of direct physical harm; it increases the odds of child recruitment into criminal gangs or armed groups; it drives away business investment and hence employment opportunities; it creates major impediments to access to basic services; and it robs children of the basic freedom to move freely and play in the neighbourhoods where they live. The high and unpredictable levels of insecurity have also rendered large parts of the country inaccessible to local and international development agencies and social service providers, which inevitably has an adverse impact upon the fulfilment of children's basic rights.

For some local actors, chronic insecurity has been good for business and has generated viable livelihoods. Clan militia have been a source of informal employment for young men; private security firms profit from the commoditization of security; and powerful individuals in and out of government derive their power and wealth from control of militias that thrive in an environment of high insecurity. The political economy that has developed around violence means that some have a vested interest in perpetuating conditions of insecurity; this is part of the 'conflict trap' (a cycle of conflict, underdevelopment and failed governance identified by the World Bank in its *World Development Report 2011*) that Somalis are struggling to escape.

Economic context

Somalia is one of the poorest countries in the world, with very low levels of development across the spectrum of indicators used to measure human development.¹⁴ The status and well-being of women and children are inevitably affected by this wider development crisis.

14 UNDP, *Somalia Human Development Report 2012*, Nairobi, 2012, p. xiii.

Remittances from the large Somali Diaspora are the main source of hard currency flowing into the country, dwarfing revenues from livestock exports or foreign aid.¹⁵ Households that receive remittances are generally in a much better position to provide adequate nutrition, shelter, education and health care for their children. Though evidence suggests that remittances tend to be redistributed inside Somalia, the system is patchy – children in households that have a relative overseas enjoy significantly better access to food and services than do children in households without a family member abroad.¹⁶ Household economic strategies focus heavily on finding ways to support a family member to travel overseas to work.

The heavy dependence on remittances shapes demand for education. Somali families prefer their children to be taught in either English or Arabic, not Somali, out of a conviction that education is primarily meant to prepare a child to travel overseas for work. In a survey, two thirds of young people expressed their intention to migrate out of the country, despite the mounting costs and dangers attached to doing so.¹⁷

Unemployment levels in urban Somalia are exceptionally high – as much as 54 per cent nationally.¹⁸ The informal sector is the main source of income after remittances, and is especially important for women and children. Much of the informal sector consists of street-vending.

The country's main export continues to be livestock (on the hoof), a sector that provides a sustainable but precarious livelihood for pastoralists. Initiatives to expand chilled meat factories able to export butchered meat by air could increase profits from livestock production in Somalia, but otherwise the livestock sector does not have prospects for dramatic expansion.

Urban and agricultural land is a highly prized commodity, and real estate development is one of the main sources of local investment. Women have unequal access to inherited land, and title disputes, which are endemic, tend to favour individuals from more powerful clans and families.

Somaliland: Somaliland's economy is the most paradoxical of any part of the eastern Horn. On the one hand, the long peace prevailing there, combined with robust flows of remittances, higher urbanization rates, and strong commercial activity through the

15 Estimates of total remittances vary, but tend to fall between \$1.0 billion and \$1.5 billion per year. See UNDP, *Cash and Compassion: The Somali Diaspora's Role in Relief, Development and Peacebuilding*, Nairobi, December 2011.

16 Hammond, Laura, Zoltan Tiba and Nimo Ali, *Family Ties: Remittances and Support in Somaliland and Puntland*, School of Oriental and African Studies, London, February 2013.

17 UNDP, "Somalia Human Development Report 2012" (Nairobi: UNDP, 2012), pp. 65-66.

18 UNDP, "Somalia Human Development Report 2012," p. 63.

seaport of Berbera have attracted considerable private-sector investments in real estate, the service sector and retail in the main urban centres. On the other hand, urban unemployment in Somaliland – at 70 per cent – is higher than in any other region of Somalia.¹⁹ The remittance economy has produced distortions in the labour market, in that residents are unwilling to take on low-paying jobs as long as they can secure comparable amounts in remittances. The result is that Somaliland simultaneously has extremely high unemployment rates and yet hosts thousands of migrant labourers from the Ethiopian highlands who are willing to work in menial jobs for \$1-\$2 per day.²⁰

Puntland: Puntland's economy is also very dependent on commercial trade through its seaport, Bosaso, and on remittances from the diaspora. It has the added burden of a large cadre of youth who seek work in the security sector, and who, when unpaid, gravitate towards criminal activity.

Southern and central Somalia: Economic prospects are poorest in South Central Somalia, despite lower overall unemployment and better natural resources. southern and central regions suffer from an incidence of poverty of 89 per cent, compared with 75 per cent in Puntland and 72 per cent in Somaliland.²¹ The most severe concentrations of poverty are in the agricultural, inter-riverine areas, and are linked to a combination of marginal livelihoods, chronic conflict and displacement, as well as to the social marginalization of low-status farming communities. Even though the southern and central regions are currently poorest, they are seen as having the country's greatest economic potential. The seaport cities of Mogadishu and Kismayo could dramatically expand commercial traffic, and the irrigable river valleys have untapped potential for cash cropping.

Identity context

The vast majority of Somalia's inhabitants share a common culture with a strong sense of affiliation to lineage or clan. Somali agnatic kinship is fluid; mobilization of specific clan or sub-clan identity can depend on the situation at hand.

Clannism, and exploitation of clan identity by political leaders, is often seen as a divisive factor in the country. Clannism divides Somalis horizontally, or across communal lines, and the ability of stronger clans to control land, power and access to resources has been a recurring driver of conflict.²² But clannism

also exacerbates vertical stratification in Somali society, by reinforcing inequality of access to protection and resources.

Within each of the four large clan-families – the Dir, Darood, Hawiye and Digil-Mirifle – clans and sub-clans vary considerably in their power, prestige and numbers. Low-status lineages within these major clans, sometimes associated with undesirable occupations, have less access to resources and collective aid, and hence are more likely to suffer in times of scarcity.²³

In addition, Somali society includes a sizeable group of 'minorities' – Somali citizens whose ethnic identity falls outside the Somali clan system, and who are thus considered 'Somali' politically but not ethnically. These groups include the coastal population of the Benadiri, Bajuni and Barawans, whose heritage is more closely linked to the Swahili coast, and the Somali Bantu people, who have historically lived as farmers in riverine areas of southern Somalia. Collectively, the minority groups make up the '.5' in the controversial '4.5 formula' that allocates seats in government proportionately along clan lines. These minority groups, especially the Somali Bantu, have historically faced serious levels of discrimination and abuse in Somalia, enjoy the least protection from armed violence, and are often a difficult group to access with basic social services and humanitarian aid, as aid targeting them can easily be diverted by stronger groups.²⁴

Members of powerful clans and sub-clans are, all things being equal, better able to access protection, shelter and services for their children, thanks to their richer store of 'social capital'.²⁵ Households associated with weak or low-status groups have fewer means of claiming jobs, land and aid, and face a higher risk of losing assets to predatory groups such as criminal gangs, clan paramilitaries and uncontrolled security forces. Households from clans considered 'guests' (including IDPs) in a dominant clan's area also enjoy fewer rights to access resources.²⁶ This was powerfully exposed during the 2011 famine. Children from low-status social groups are at very high risk.²⁷

23 Helander, Bernhard; 'The Hubeer in the Land of Plenty: Land, Labor, and Vulnerability Among a Southern Somali Clan', in *The Struggle for Land in Southern Somalia: The War Behind the War*, edited by Catherine Besteman and Lee Cassanelli, Westview, Boulder, 1996. The Digil-Mirifle clan-family itself has historically been disadvantaged as a mainly agricultural and agropastoral people, though their relative status has improved somewhat in national politics in recent years.

24 UNDP, *Somalia Human Development Report 2012*, UNDP, Nairobi, 2012, pp. 22-23.

25 Mercy Corps, 'What Really Matters for Resilience?' October 2013, p. 4, <http://nin.tl/MercyCorpsSomalia>

26 Human Rights Watch, *Hostages of the Gatekeepers: Abuses Against Internally Displaced in Mogadishu, Somalia*, HRW, New York, 2013.

27 Majid, Nisar, and Steven McDowell, 'Hidden Dimensions of the Somali Famine', *Global Food Security*, vol 1, 2012, p. 37.

19 UNDP, "Somalia Human Development Report 2012" p. 63.

20 Ken Menkhaus, "Somaliland Political Economy Analysis," World Bank, 2013.

21 UNDP, "Somalia Human Development Report 2012" p. 31.

22 UNDP, *Somalia Human Development Report 2012*, UNDP, Nairobi, 2012, p. 37.

Pastoralists

Until recent decades pastoralists constituted the majority of the Somali people. The percentage of Somalis earning a livelihood as pastoralists has steadily declined since the 1960s and today constitutes only about a quarter of the population. They have amongst the lowest access to health and education services and their livelihoods are under stress due to climate and human-made degradation of the land.

Pastoralists have endured dramatic changes in their environment over the past few decades, most of which have made the livelihood harder and less viable. In consequence, many destitute pastoralists have formed part of the rural to urban migration. The chronic insecurity has interrupted access to markets as well as seasonal migrations critical to the survival of herds. Another constraint has been enclosures – the fencing and privatization of valuable rangeland by powerful livestock owners, which began before the civil war but has been expanded. Enclosures prevent the poorest pastoralists from accessing dry-season pasture and limit the mobility of pastoral herds. Water sources have also become privatized – *berkads*, or small dams of seasonal streams and rivers, have been constructed by wealthier community members who charge for access to the water or prevent others from using it altogether.²⁸

Some pastoralists are opting for a shift to agro-pastoralism rather than completely abandoning nomadic pastoralism. Families establish fixed dwellings in settlements, allowing family members greater access to schooling or health care, while adult males take the herds on more limited circuits in search of grazing land and water. This shift does not lead, however, to improvements in household income and food security; in fact, agro-pastoralists are among the poorest sectors of Somali society.

Internally Displaced Persons (IDPs) and Minorities

There are 1.1 million IDPs in Somalia, the majority of whom are in the southern and central regions. Mogadishu has the largest concentration of IDPs, at nearly 370,000.²⁹ According to the latest UN population figures for Somalia (UNPESS), IDPs comprise 9 per cent of the Somali population.

IDPs mainly belong to minorities or minority clans, suffer discrimination, and have fewer informal social protection mechanisms. Most of the IDPs who arrived in Mogadishu as a result of the 2011 famine are from the Digle and Mirifle clans or the Bantu minority³⁰

from the Bay, Bakool and Shabelle regions, and they were fleeing not just drought but also discrimination by majority clans.³¹ Although there are social support ties within these IDP communities, they are less internationalized than the majority clans, and benefit little from remittances.³²

Studies suggest that children of IDPs and minorities are the most vulnerable to violations of child rights. Nearly two thirds of IDP households in Mogadishu are headed by females.³³ IDP female-headed households take in a disproportionate number of unaccompanied children, despite the attendant risk of neglected childcare when the head of household is out of the home working. IDP households depend primarily on irregular and unprotected casual work, humanitarian assistance, petty trading and charitable gifts (*zakat*).³⁴ IDPs are effectively hostages of predatory 'gatekeepers' on whom they depend for the right to settle and for commercially provided services such as water, and to whom they must pay a tax on any humanitarian assistance received.³⁵

Social and cultural context

Some aspects of Somali society and culture have undergone profound and complex transformations since the civil war and collapse of the state in 1991, while other dimensions remain relatively unchanged. This admixture of continuity and change in the socio-cultural context is challenging for both Somalis and foreigners alike.

First, though historically understood to be a fairly egalitarian society, gaps in wealth and power have dramatically increased both before and since the collapse of the state in 1991.³⁶ This has major implications for child well-being. Relatively privileged households – including any household receiving regular remittances from relatives abroad – are much better able to provide for the basic nutritional, health, protection and educational needs of their children.

Second, in the context of protracted state failure, clan and ethnic identity have grown even more important as determinants of rights and access to protection and resources. Members of powerful communal groups are better able to access protection, shelter and services for their children, thanks to their richer store of 'social capital'.³⁷

28 USAID, 'Environmental and Natural Resource Management Assessment', : USAID, Nairobi, April 2014, p. 16.

29 UNHCR Population Movement Trends System.

30 Majid & McDowell, op. cit.; Human Rights Watch, 'Hostages of the Gatekeepers: Mogadishu IDPs', 2013.

31 Majid & McDowell, op. cit.

32 Ibid. Only about 5 per cent of IDP households benefit from remittances.

33 FSNAU, Mogadishu & IDP assessment, 2012. The head of household is defined as the one who makes family decisions.

34 Ibid.

35 Human Rights Watch, op. cit.

36 UNDP, Somalia Human Development Report 2012, Nairobi, 2012), pp. 28-30. This study finds that Somalia ranks among the worst in the world in inequality-adjusted Human Development Index.

37 Mercy Corps, 'What Really Matters for Resilience?' October 2013, p 4, <http://nin.tl/MercyCorpsSomalia>

Another major contextual change is the impact of globalization. Somali society has been 'diasporized' over the past 25 years; an estimated 1.5 million Somalis now live outside the country. They are not only a lifeline for the economy, remitting over US\$1 billion annually, but are also leaders in politics, business and civil society. They are also vectors of new ideas and norms – from the West, the Gulf states and elsewhere – about children's rights, women's rights and family life. The fact that the Diaspora is infusing different values and norms back into Somalia has intensified struggles over cultural and social norms affecting women and children.

The Somali household has gone through considerable strain over the past 25 years of warfare and state failure. Traditional male roles have come under pressure and many men – especially those from marginalized or less powerful groups – are unable to fulfil their traditional role as economic provider. This has contributed to family breakdown, to economic stress on families and to problematic behaviour among some men. Qat consumption – mainly by adult males – is an embedded cultural practice in Somalia, but also a major drain on household revenues, and in many households diverts scarce resources from education, health care and nutrition for children.

Many households are now female-headed, due to a combination of factors – including but not limited to high levels of divorce, polygamy, male death rates and the practice of 'parking' families in one area while the male head of household works. The increased prevalence of female-headed households has a mixed impact on resilience and child well-being. On the one hand, it places considerable strain on the female head of household, and increases the likelihood that female children will be held out of school to help with household duties. There are also concerns that the absence of fathers could increase the risk of behavioural problems among young men. On the other hand, studies have found that greater empowerment of women is a critical factor in household resilience.³⁸

The situation of girls and women in Somalia is largely constrained by social norms on gender that leave them in a subservient position. Somalia is one of only five states in the world not to have signed the Convention Against All Forms of Discrimination Against Women (CEDAW). Girls, especially those from poorer households, face a high risk of child marriage and motherhood.

Female genital mutilation (FGM) remains a near universal cultural practice in Somalia, despite efforts to end the practice by some health professionals, civic groups, clergy and aid agencies.³⁹ For the entire

population of young girls, FGM constitutes a major health risk.

Other cultural practices relating to the treatment of infants and children, including the practice of limiting outside contact with newborns during the first 40 days after birth, and preferential treatment of young boys over young girls, constitute additional impediments to child well-being.

Social Protection/Resilience

The need for comprehensive, shock-responsive social protection systems was very apparent during the 2011 famine, which had a devastating impact in Somalia. The famine resulted in the deaths of 258,000 people, half of whom (130,000) were children.⁴⁰

Social protection efforts help to prevent shocks and stresses at the household or individual level, provide protection during periods of exposure, promote opportunities to overcome vulnerability to shocks and stresses, and transform the societal or household relationships that lead to or exacerbate risk.

Social protection mechanisms have a long history in Somalia, with extensive family and clan-based support providing an important safety net for households. Remittances from the Diaspora were estimated at US\$1.3 billion in 2014⁴¹, and are used for both basic needs (such as household food security, education and medical expenses) and for productive investments. Kinship groups support each other with the practice of wealthier families taking in children from more disadvantaged families, known as *kafala*. There are also informal community solidarity or charity mechanisms. Though generally effective, these mechanisms can come under stress from repeated crises, and may be particularly ineffective in the case of community-wide shocks. They can also lack elements of consistency and predictability that are necessary for households to take informed risks, and may also exclude particularly disadvantaged groups, such as minority clans.

Risks and shocks affecting Somali households are not limited to large-scale disasters. Common shocks at community level include predictable seasonal shocks (lean seasons) and conflict-related trade blockages that impact food prices. Shocks are more common at the household level, and can include things such as the death or disability of a breadwinner, displacement or loss of employment.

40 Detailed analysis of the 2011 famine can be found at <http://www.fsnaa.org/in-focus/technical-release-study-suggests-258000-somalis-died-due-severe-food-insecurity-and-famine>

41 USAID, 'Environmental and Natural Resource Management Assessment', USAID, Nairobi, April 2014, p. 16.

38 *Ibid.*

39 UNICEF, 'Eradication of Female Genital Mutilation in Somalia' http://www.unicef.org/somalia/SOM_FGM_Advocacy_Paper.pdf

Even community-level shocks and stresses have differentiated impacts at the household level, influenced by the strength and diversity of a household's coping mechanisms and their social positioning and networks. The vulnerability of populations in Somalia is influenced by both risk exposure and the capacity to anticipate, cope and overcome these shocks and stresses as well as to change the context (or the 'enabling environment') in such a way that vulnerability to risks decreases. This capacity is what is referred to as "resilience" and building it is termed "programming for resilience". This type of programming aims to maintain a steady improvement of well-being indicators throughout shocks and stresses.

While the concept was initiated after the 2011 famine, programming for resilience is an emerging field in Somalia. Most external development agencies have engaged with it, largely from a concern to avoid the possibility of another such large-scale disaster. Consequently, a lot of programming has focused on improving livelihoods, productive assets and capacities. However, the 2013 study conducted by UNICEF, FAO and WFP shows that the factor of access to basic services in health, nutrition, hygiene, education, and social and child protection is a central determinant of resilience at household and community level.

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