

HIGHLIGHTS

- Access to health services deteriorates
- Emergency funds to ramp up response to drought
- New cases of measles reported
- CHF is now Somalia Humanitarian Fund

FIGURES

of people in humanitarian emergency and crisis 1m

of people in food security stress 3.7m

of acutely malnourished children under age 5 305,000

Source: www.fsnau.org (July-December 2016 projection)

of internally displaced people 1.1m

of Somali refugees in the Horn of Africa and Yemen 1.2m

Source: UNHCR

Humanitarian Appeal

FUNDING

885 million
requested for 2016 (US\$)

11% (\$97 million)

\$157 million
Total humanitarian funding received for Somalia

(reflects reported funding on FTS as of 22 March 2016)

Source: <http://fts.unocha.org>



Lack of adequate funding to health sector threatens provision of essential services Photo Credit: IOM

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Drought in Puntland and Somaliland

Some 385,000 people face acute food insecurity

Severe drought exacerbated by El Niño conditions has hit parts of Puntland and Somaliland, affecting hundreds of thousands of people. The drought compounds an already challenging humanitarian situation in the area and has brought the estimated number of people who face acute food insecurity in Somaliland and Puntland to 385,000 people. A further 1.3 million people risk slipping into acute food insecurity if they do not receive assistance. This brings the total number of people in need of some form of humanitarian assistance and livelihood support to 1.7 million, or nearly 40 per cent of the 4.6 million people living in Puntland and Somaliland.

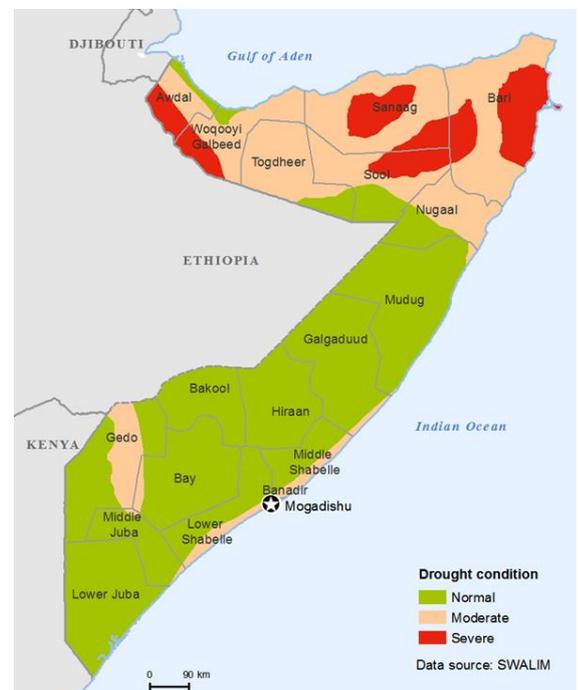
Humanitarian response ongoing

Humanitarian partners continue to scale up response to save lives and livelihoods in drought-hit Puntland and Somaliland.

Some 95 national and international humanitarian organizations are currently operational in the two areas.

Over the past two months, an estimated 182,700 people had been reached with food assistance, 91,440 people with activities aimed at building livelihoods and 40,692 people received livelihood seasonal inputs such as seeds, tools, fishing equipment, irrigation vouchers and livestock distribution and vaccination. Nearly 4,300 acutely malnourished children under age 5 were admitted into the nutrition programme. Over 41,000 people received basic health services while 55,000 people have been provided with temporary and sustainable access to safe water. Protection Cluster reached some 9,200 people with protection activities. The Shelter Cluster assisted approximately 2,800 people with household items. Education partners reached some 9,000 children with education services.

Meanwhile, the impact of the drought in the north is already being felt in southern and central regions. There are concerns on the rapid deterioration of the water situation in Belet Weyne in Middle Shabelle region due to the rapid reduction of water levels in River



BASELINE

Population (UNFPA 2014)	12.3m
GDP per capita (Somalia Human Development Report 2012)	\$284
% pop living on less than US\$1 per day (UNDP/World Bank 2002)	43%
Life expectancy (UNDP-HDR 2011)	51 years
Under-five mortality (FSNAU 2015)	0.52/10,000 /day
Under-five global acute malnutrition rate (FSNAU 2015)	13%
% population using improved drinking water sources (UNDP 2009)	30%

CLUSTERS

Lead and co-lead organizations

Education	UNICEF SC-Alliance
Food security	FAO/WFP
Health	WHO
Logistics	WFP
Nutrition	UNICEF CAFDARO
Protection	UNHCR DRC
Shelter/NFIs	UNHCR UNHABITAT
Water, sanitation & hygiene	UNICEF OXFAM

Shabelle. The water levels are at their lowest levels in decades, according to SWALIM. Already, WASH cluster partners are raising alerts on the possibility of AWD/cholera outbreaks due to water scarcity.

CERF allocates \$11 million for drought response

The UN Central Emergency Response Fund (CERF) is expected to release US\$11 million to provide urgent humanitarian assistance for 224,000 drought affected people in the northern parts of Somalia. The funds will help partners to ramp up the provision of critical life-saving humanitarian assistance in the drought-affected areas of Puntland and Somaliland. This will include food and nutrition assistance, livestock vaccination, health care services and water and sanitation.

Meanwhile, the Somalia Humanitarian Fund (SHF) has allocated \$6.5 million to scale up response in the drought-affected regions to compliment the CERF allocation. The allocation will bolster the provision of food and nutrition assistance, healthcare services and water and sanitation services. It will also support priority shelter and protection needs identified in needs assessments undertaken in affected areas, while education facilities will be used as entry points to carry out food and water assistance, nutrition and hygiene promotion programmes. This will ensure that children and teachers remain in schools and avoid exposing children to the risks of family separation, child labour and abuse. The depletion of available water resources in affected areas could see the situation worsen in the coming months.

The Humanitarian Country Team will issue a *Call for Aid: El Nino and Drought in Somalia* to step up resource mobilization for drought response.

New cases of measles reported

Measles campaign planned for some of the affected areas

A measles outbreak has been reported in Buhodle in Togdheer region by the Ministry of Health. Some 29 cases of measles were confirmed in rural villages around Buhodle, according to the local authorities. These include 18 cases among children under age 5. Local officials also reported that the cases are spreading in the area.

Unconfirmed reports indicate that most of the affected people had not been vaccinated. A number of nomadic pastoralist families affected by the drought in parts of Puntland and Somaliland have recently moved into these villages, according to authorities.

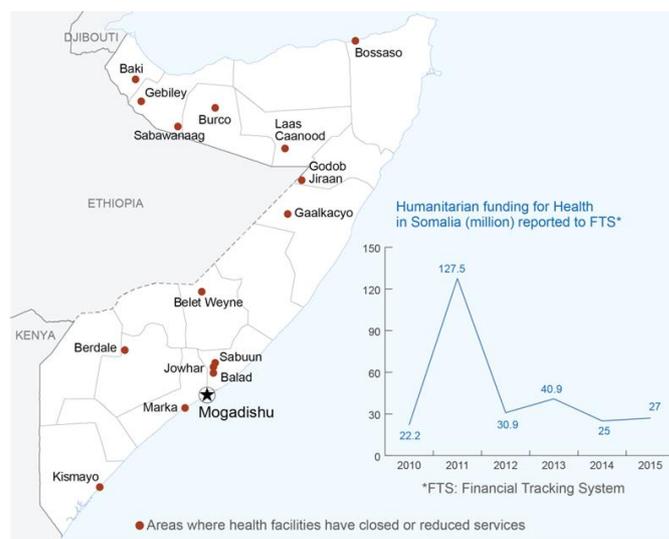
In 2015, some 7,500 suspected cases of measles were detected mostly among children under age 5 in southern and central Somalia. Emergency vaccination against measles remains a priority for 2016.

In November 2015, humanitarian partners in collaboration with the Federal Government launched a measles campaign targeting nearly 4 million children under age 10 in Somalia. Over 3.5 million children were vaccinated against measles since November 2015. This represents an administrative coverage of 90 per cent in accessible districts of Somalia. Plans are underway to begin an immunization campaign in Bakool region following the recent suspected cases of measles in the area.

Health services at risk of closing

Critical health services are at risk of being scaled down due to lack of funding. Some 3.2 million people are in need of access to minimum emergency health services.

Until now, at least ten health facilities have either reduced their services or closed due to lack of funding, while those that remain open struggle to meet the health needs of those who need it, according to humanitarian partners. The funding to the health cluster has not been adequate compared to the needs.



In 2015, the Health Cluster received just 40 per cent of its funding requirements. In 2016, the cluster has since received only two per cent of the US\$72 million requested. Despite the need to scale up the provision and access to health services, inadequate funding has meant that health partners continue to face difficulties in providing life-saving health services at the scale required. Many humanitarian organizations have been forced to withdraw health workers from high-need areas. The inadequate funding has also led to significant gaps in the health sector, according to partners. Over the last four years, funding to the health sector averaged 33 per cent.

Already, partners have suspended secondary health care services at the Belet Weyne Hospital owing to lack of funds. The hospital is the only provider of life-saving in-patient medical, surgical and reproductive health services to an estimated 330,000 people in Hiraan and neighboring regions. Services at Jowhar hospital in Middle Shabelle region and South Gaalkacyo Hospital will soon come to a halt unless funding is secured. The South Gaalkacyo Hospital serves an estimated 120,000 people.

Outbreaks of acute watery diarrhoea (AWD) and measles are frequent. In 2015, some 4,000 cases of AWD/cholera were recorded with nearly 85 per cent of them being children under age 5. AWD/cholera together with pneumonia are reportedly the diseases with the highest death rates in Somalia. The maternal mortality ratio for Somalia is among the highest in the world.

Humanitarian partners plan to reach some 1.8 million people with primary and secondary health care services in 2016, including internally displaced persons (IDPs), host communities, underserved rural and urban areas (including newly-recovered areas) and El Niño and drought-affected people. Adequate and timely funding is critical if these targets are to be met.

Common Humanitarian Fund is now Somalia Humanitarian Fund (SHF)

Beginning 2016, the Common Humanitarian Fund (CHF) for Somalia changed its name to Somalia Humanitarian Fund (SHF). The change reflects OCHA standardization of country-managed pooled funds so each fund can be identified as a humanitarian fund for that specific country. This does not come with any major changes in how the fund for Somalia will operate, with the exception of the fund taking a "Reserve Plus" funding model to enable more flexible and timely response to the most urgent needs - which was a decision taken in-country by the Humanitarian Coordinator and the Advisory Board.

Under this model, timeliness and flexibility will be the focus of the SHF so that funds can be allocated based on available resources and save lives as humanitarian needs emerge or escalate. Inclusiveness and transparency will be maintained with the cluster and

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review committees involved in the identification, vetting and recommendation of projects. The "Reserve Plus" approach is expected to be a lighter and quicker process -partially achieved by managing multi-sector allocation strategies of a more modest size at intervals throughout the year as new contributions are received.

Using the reserve approach also means that approved projects can be processed on a first come, first served basis-meaning that best quality submissions are not held back and can be funded first once completed. This means that partners with high quality projects, that meet criteria and guidelines, will be the first to receive funding.

The SHF is an important country-level financing tool which provides quick, predictable and strategic funding to UN agencies, international and local NGOs working in Somalia.

Funding critical to timely response

A total of US\$157 million has been received for humanitarian response in Somalia since the beginning of 2016. This includes \$97.3 million out of the \$885 million requested in 2016 and another \$59.3 in other funding. Critical clusters like health and food security have both received two per cent of their requirements while the nutrition cluster has received one per cent. The WASH cluster has so far received five per cent.

Across Somalia, nearly all humanitarian agencies face significant resource gaps. To date, the 2016 HRP is only 11 per cent funded. While this makes it the fifth best funded appeal globally, more funding is urgently required if humanitarian partners are to provide assistance at the scale required.

In the absence of adequate funding, humanitarian partners are unable to meet the needs of affected people

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