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Somalia

Humanitarian Situation Report

SOMALIA SITREP #2: 1 – 15 MARCH 2017

SITUATION IN NUMBERS¹

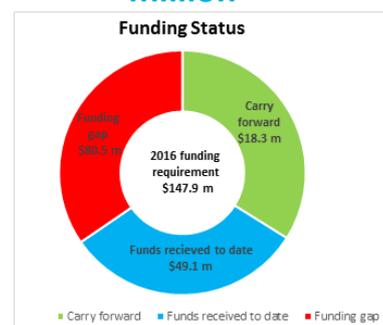
Highlights

- UNICEF has revised its humanitarian strategy for 2017 to focus on immediate life-saving measures needed to avert famine. UNICEF has revised its Humanitarian Action for Children (HAC) requirements for Somalia from US\$66.1 million to US\$147.9 million to meet the increased humanitarian needs of children due to the rapidly deteriorating drought situation which is now affecting most of the country.
- More than 13,000 cases of acute watery diarrhoea (AWD)/cholera have already been reported across 12 regions in southern regions and Puntland since the start of the year. In total, UNICEF is directly supporting 34 cholera treatment centres (CTCs) and units (CTUs) across Somalia and treated 5,000 AWD/cholera cases.
- Since the start of the year, UNICEF and partners have provided 30,663 children with Severe acute malnutrition (SAM) with lifesaving treatment, representing one and half times more admissions compared to the same period in 2016 (19,671 admissions).

6.2 million
People in need of humanitarian assistance

944,000
Children under-5 acutely malnourished

UNICEF Appeal 2017 - US\$ 147.9 million



*Funds available includes funding received for the current appeal year as well as the carry-forward from the previous year.

| Indicators | Cluster for 2017 | | | UNICEF for 2017 | | |
|--|------------------|------------------------|---------------------|-----------------|------------------------|---------------------|
| | Cluster Target | Cumulative results (#) | Target achieved (%) | UNICEF Target | Cumulative results (#) | Target achieved (%) |
| Health: # of crisis affected women and children provided with emergency lifesaving health services | | | | 731,000 | 107,058 | 14.6% |
| Nutrition: # of children under-5 with Severe Acute Malnutrition admitted in Therapeutic Feeding Programmes | 346,000 | 32,640 | 9.4% | 277,000 | 30,663 | 11.1% |
| Education: # children and adolescents with access to education in emergencies | 219,869 | 59,017 | 26.8% | 87,600 | 28,959 | 33.1% |
| WASH: # people provided with temporary access to safe water | 2,500,000 | 478,718 | 19.1% | 1,500,000 | 360,543 | 24.0% |
| Child Protection: # of separated and unaccompanied children identified and registered | 7,000 | 608 | 8.7% | 6,885 | 285 | 4.1% |
| Cash transfers: # of emergency-affected households provided with monthly cash transfers to support access to basic services | | | | 60,000 | 1,182 | 2.0% |

¹FSNAU-FEWSNET, Post Deyr 2017 Technical Release, February 2017. Nutrition figure reflects the burden for the year.

Situation Overview and Humanitarian Needs

The humanitarian situation in Somalia is rapidly deteriorating due to the severe drought which started in the north in 2016 and is now affecting most of the country. Over 6.2 million people are facing acute food insecurity and the number of people in need of water, sanitation and hygiene (WASH) assistance will likely rise to 4.5 million by April 2017. The drought is also uprooting people, with 250,000 displaced since November 2016, adding to the 1.1 million already internally displaced.² In addition, people are also crossing into Ethiopia and Kenya. The situation is especially grave for children. Close to 1 million children under five will be acutely malnourished in 2017, including 185,000 severely malnourished, which may increase to over 270,000 if famine is not averted. Malnourished children will also be particularly vulnerable to measles. Children are also dropping out of school, with 30,000 reported so far, and are at risk of family separation and violence, especially when on the move.

Reduced access to water contributes directly to malnutrition, and brings with it an increased risk of acute watery diarrhoea (AWD)/cholera. More than 13,000 cases of AWD/cholera have already been reported across 12 regions in southern regions and Puntland since the start of the year. This is almost as many cases as reported throughout 2016 (15,600). More than 3,000 cases have been reported over the past week. More than 300 people have died since January and the case fatality rate stands at 2.4 per cent, above the emergency threshold (1 per cent). UNICEF is scaling-up its response with emergency health and WASH teams roving across the affected locations to train partners, support case management, sanitation and ensure affected populations access safe water. Lifesaving supplies are being prepositioned with partners and at facility level, and coordination ongoing with WHO, the Ministry of Health (MoH) and partners to deploy additional teams.

Humanitarian Leadership and Coordination

UNICEF actively participates in the Humanitarian Country Team, Humanitarian Heads of Agencies meetings and the Inter-Cluster Working Group, which lead strategic and cross-sectoral coordination of humanitarian programmes. UNICEF is also an active member of the Civil-Military Working Group and Access Task Force. UNICEF leads the WASH and Nutrition Clusters and the Child Protection Working Group, and co-leads the Education Cluster. The operational capacity of the UNICEF-led Clusters is significant, with a network of over 140 partners, including sub-regional coordinators in over 15 regions. The network facilitates access to information, coordination and interventions in hard-to-reach and inaccessible areas. UNICEF and the WASH, nutrition and education cluster are active members of the interagency Drought Operating Centre.

Humanitarian Strategy

UNICEF is prioritising an integrated WASH, health and nutrition response in drought-affected areas of Somalia with a focus on providing life-saving services to avert a famine. This will be achieved with a rapid scale-up of the UNICEF response, through the procurement at scale and in a timely manner of lifesaving core pipeline supplies, an increase in partnerships and coverage, and the expansion of critical services in the most affected areas.

Priority regions are Bay, Bakool, Gedo, Lower Shabelle, Galgadud, Mudug, Sanaag, Bari and Nugal in light of the malnutrition rates. This response is complemented with education interventions and monitoring of family separation as families are on the move. To ensure a timely response, UNICEF has prepositioned essential supplies in affected areas at facility level and with partners.

UNICEF is coordinating and scaling-up its interventions with line ministries, disaster management agencies and relevant clusters to ensure there is no duplication in the response and that critical gaps are covered. Where possible, UNICEF is responding jointly with WFP through an augmented response package which includes unconditional food assistance, preventive and curative nutrition programmes, livelihood activities, health services, and support to communities to access safe water and improve sanitation and hygiene conditions with the overall objective to halt the deteriorating food security and malnutrition situation in drought affected areas. In line with Grand Bargain commitments, cash-based assistance will be prioritized.

² [Somalia Humanitarian Snapshot as of March 2017](#)

Summary Analysis of Programme Response

HEALTH: The drought response is ongoing in central and southern regions as well as Puntland and Somaliland with a total of 107,058 crisis affected women and children receiving emergency lifesaving health services. Of the affected population, 58,623 (55 per cent) are children under-5 and 48,435 (45 per cent) women of child bearing age. In central and southern regions, the emergency response services are provided through 34 health centres and 9 mobile outreach services reaching 33,757 people, including 14,649 children under-5.

As the number of AWD/cholera cases continues to drastically increase, with more than 13,000 cases reported to date, UNICEF continues to provide timely funding and supplies through the MoH and partners, as well as prepositioning of emergency kits, antibiotics, ORS and Zinc tablets to enable partners to adequately treat more than 26,000 detected cases of AWD/cholera. This has also been expanded to 11 sites in the densely populated district of Baidoa in Southern Somalia, where almost 50 per cent of the overall AWD/cholera caseload in Somalia are being reported. UNICEF Health partners have expanded services to the hard to reach locations such as Bay and Bakool in order to avert the devastating effects of the current AWD/cholera epidemic. In total, UNICEF is directly supporting 34 cholera treatment centres (CTCs) and units (CTUs) across Somalia and has treated 5,000 AWD/cholera cases.

The first Oral Cholera Vaccine campaign, in collaboration with WHO and MoH, was launched on 15 March, targeting 450,000 children above 1 year. The campaign is taking place in Banadir, Kismayo and Belet Weyne.

NUTRITION: Since the start of the year, UNICEF and partners have provided 30,663 children with severe acute malnutrition (SAM) with lifesaving treatment, with a 92.8 recovery rate, and representing one and half times more admissions compared to the same period in 2016 (19,671 admissions). In February alone, 178,943 children and pregnant and lactating women (PLW) were screened by UNICEF partners.

Essential nutrition supplies, including ready-to-use therapeutic food (RUTF), continue to be delivered to implementing partners across the country, including in February in Galgaduud, Bakool, Mudug and parts of Hiraan regions to support 7,160 severely malnourished children. Nutrition supplies for treatment of 3,500 children with SAM were also prepositioned in Somaliland, and UNICEF has procured 83,000 cartons of RUTF to ensure the continuity of services. UNICEF will also be delivering RUTF from Ethiopia by road straight to the neighbouring hubs of Gaalkacyo and Doloow, thus enabling UNICEF to reduce both the cost and delivery lead time for supplies urgently required to reach an estimated 8,000 severely malnourished children.

As part of the preparedness for infant and young child feeding in emergencies (IYCF-E), a joint statement from government and partners was released, calling for strong actions to protect infant feeding, especially breastfeeding, during emergencies in response to the in-kind donation of relief food from the Ethiopian government to Somaliland, which included unsolicited milk powder.

WASH: UNICEF and partners, since January 2017, provided 360,543 people with temporary access to safe water in drought-affected areas. In Puntland, UNICEF is providing 11,317 households (67,902 people) with access to safe water through vouchers and water trucking. Part of this response is implemented jointly with WFP through the SCOPE platform and combined with food vouchers. In Somaliland, a total of 7,016 households (42,096 people) are being supported with water vouchers, as well as water trucking to 40 schools (benefiting 4,963 pupils) to ensure children remain in school and have access to life-saving services. A total of five high yielding strategic boreholes have also been rehabilitated benefiting over 20,000 people. In central and southern regions, 9,564 households (57,385 people) affected by drought are benefitting from water vouchers alongside hygiene promotion. UNICEF continues to scale-up the provision of safe water to other drought affected districts including Kismayo and Badhadhe in Lower Juba region; Elwak and BeletHawa in Gedo region; Barawe in Lower Shabelle and Jowhar in Middle Shabelle regions. This temporary access to safe water is complemented by the repair of 20 strategic boreholes.

In response to increased cases of AWD/cholera, UNICEF has scaled-up its interventions in the main hotspot and high-risk areas. In Banadir region, UNICEF and partners are responding through daily chlorination of over 168 unprotected shallows to ensure 67,200 people have access to safe water. Similar activities are ongoing in Baidoa targeting 173 Shallow wells and benefitting 69,200 people. In Middle and Lower Shabelle, UNICEF and partners have been taking part in the response to AWD interventions through the distribution of hygiene kits, chlorination of shallow wells, and the construction of emergency latrines at cholera treatment units both in Hawadley and Mahaday. Case tracing is ongoing, as well as the disinfection of homes of affected persons with chlorine solution reaching over 1,500 people.

At the nutrition facilities in Kabasa and Qansahley IDP camps and transit sites in Doolow, UNICEF and partners constructed emergency latrines as well as installing hand washing facilities benefitting 1,106 people, extended the pipeline and installed tap stands. In Garowe, UNICEF has distributed hygiene items (jerry cans, aqua tabs and soap) through the MoH to 300 households in the most affected sub-camps. Through the UNICEF supported Regional Supply Hub Mechanism (RSH), over 59,506 people, especially in AWD hotspots, have been provided with hygiene kits since January 2017. This will support safe hygiene practices, household water treatment and safe storage and mitigate the spread of the current outbreak.

EDUCATION: In response to the drought, UNICEF and partners are providing safe drinking water in schools, constructing and rehabilitating temporary classrooms and gender-sensitive latrines, and distributing emergency education supplies. Since January 2017, UNICEF and partners have supported 28,959 school-age children (43 per cent girls) with education in emergency in the drought-affected areas. In addition, 22 schools received water vouchers for the provision of safe drinking water to children and community members through Community Education Committees (CECs).

As of March, around 19.5 per cent of primary school children in Puntland had already dropped out from schools due to drought (20 per cent boys and 18.9 per cent girls). Bari district showed particularly high dropped out rates (30.1 per cent for both boys and girls), followed by Sanaag, Sool, Nugaal and Mudug. In Somaliland, the dropout rates remain lower than 5 per cent in all districts though the situation may worsen in coming weeks as more children are displaced due to the movement of their families.

To date, 378,741 children (43.8 per cent girls) are enrolled in schools in drought-affected areas, and 30 per cent of these children are in immediate risk of dropping out. In addition, an estimated 50,400 school children will be displaced if the drought situation deteriorates to the 2011 famine level.

CHILD PROTECTION: UNICEF and partners reached 660 gender-based violence (GBV) survivors since the start of the year, including 267 survivors in February (126 girls, 113 women, 21 Boys and 7 men) with psychosocial support, clinical assistance, and security and legal aid services. UNICEF and partners also documented 285 child headed households and unaccompanied and separated children in Banadir, Gedo, Hiraan, Hargeisa, Awdal, Berbera, Mudug, Garowe, Bossaso. These children were provided with reunification support, interim care services, access to basic services and psychosocial support. An additional 392 (161 boys and 231 girls) child protection cases of child abuse and neglect were resolved or referred through UNICEF's community based child protection structures.

Training of 57 service providers providing children protection and GBV services to drought affected children in Central and Southern Regions was undertaken as well as the deployment of 40 final year students from Hargeisa University to drought affected areas in Somaliland to support case management interventions. Child protection desks have been set up at border locations in Togwajaale and Loyawdo in Somaliland to support children during cross border movements to Ethiopia and Djibouti, as well as Berbera (Somaliland) and Bossaso (Puntland) to provide child protection services to returnees, refugees and IDPs including psychosocial support. In addition, UNICEF continues to monitor and advocate with Puntland authorities for the release of children detained for association with Al Shabaab. Currently, there are 642 boys and 141 girls in the UNICEF supported reintegration programmes for children associated with armed conflict in Mogadishu, Afgooye, Belet Weyne and Baidoa.

CASH-BASED ASSISTANCE: WFP and UNICEF engaged in a strategic partnership in 2016 to implement an augmented response to address the alarming food insecurity and malnutrition levels in Somalia. WFP and UNICEF are providing returnee households from Dadaab with an emergency unconditional cash-based transfer assistance package to help them settle back in their locations of return. To date, 1,182 households have been enrolled to receive cash transfers. This response is being expanded for the pre-famine response to support 420,000 people in drought-affected areas with monthly cash transfers for six months. These transfers will be combined with WFP assistance and provided through the SCOPE biometric platform. Cash assistance will be implemented using a Cash Plus model, where cash recipients are also linked to essential services. This will support, in particular, the purchase of water.

SUPPLY AND LOGISTICS: As of February, two warehouses in Doolow and Kismayo under WFP are fully functional and handling prepositioned nutrition supplies. Options are being explored to use the Djibouti UNICEF Hub to handle supplies consigned to partners in the Gedo, Bakool, Hiraan, parts of Bay and Galmudug regions, with a proposal

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underway to strategically have offshore buffer supplies received and handled by the Djibouti Hub then transported by road through Ethiopia (Jijiga) to Doolow and Gaalkacyo.

FUNDING: The humanitarian situation in Somalia is rapidly deteriorating and as such the Humanitarian Response Plan is being revised and funding requirements increased to scale-up life-saving assistance and avert a famine. The funding picture outlined below is against the revised requirements. As of 13 March 2017, UNICEF has a funding gap of 54 per cent against the revised appeal. The funding overview detailed in the table below includes US\$ 18,289,814 carry-forward available from 2016, due to multi-year funding planned for 2016/2017 implementation and generous contributions received in late December 2016.

UNICEF wishes to express its sincere gratitude to all public and private donors for the contributions received, including the most recent generous contributions from OFDA and DFID in support of the famine prevention response. Continued and timely donor support is critical to scaling up the response and averting a famine. Adequate, predictable and flexible resources will allow UNICEF and its partners to respond effectively where needs are greatest and reach the most disadvantaged children.

| 2017 Funding Requirements | | | | |
|---------------------------|--------------------|-------------------|-------------------|------------|
| Appeal Sector | Requirements* | Funds available** | Funding gap | |
| | | | US\$ | % |
| Health | 22,000,000 | 12,341,913 | 9,658,087 | 44% |
| Nutrition | 40,200,090 | 23,767,281 | 16,432,809 | 41% |
| Education | 16,595,192 | 4,461,221 | 12,133,971 | 73% |
| WASH | 30,000,718 | 15,768,271 | 14,232,447 | 47% |
| Child Protection | 14,115,430 | 3,959,850 | 10,155,580 | 72% |
| Cash-based response | 25,006,980 | 7,101,969 | 17,905,011 | 72% |
| Total | 147,918,410 | 67,400,505 | 80,517,905 | 54% |

*Cluster coordination requirements have been included in sub-costs for the nutrition, WASH, child protection and education sectors.

**'Funds available' includes funding received against current appeal as well as carry-forward from the previous year.

UNICEF Somalia Crisis: www.unicef.org/Somalia

UNICEF Somalia Facebook: www.facebook.com/unicefsomalia

UNICEF Somalia Appeal: <http://www.unicef.org/appeals/somalia.html>

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Annex A: SUMMARY OF PROGRAMME RESULTS (up to 15 March 2017)

| | Cluster Response | | UNICEF and IPs | |
|---|---------------------|--------------------|---------------------|-------------------|
| | Revised 2017 Target | Results | Revised 2017 Target | Results |
| HEALTH | | | | |
| # of crisis affected women and children provided with emergency lifesaving health services | | | 731,000 | 107,058 |
| # of pregnant and lactating mothers reached through Antenatal and Postnatal consultations | | | 85,000 | 32,095 |
| # of children immunized against measles | | | 340,000 | 6,235 |
| # of AWD/Cholera cases treated at facility and treatment centres | | | 27,500 | 5,000 |
| NUTRITION | | | | |
| # of children under-5 with SAM admitted for treatment | 346,000 | 32,640 | 277,000 | 30,663 |
| % of children with SAM who received treatment and recovered | >92% | 92.9 | >75% | 92.8 |
| % of nutrition centres stocked out of essential nutrition supplies | <10% | 0.4 | >2% | 0.4 |
| EDUCATION | | | | |
| # of children accessing safe and protected learning opportunities in emergency-affected environments | 219,869 | 59,017 (32% F) | 87,500 | 28,959 (33% F) |
| Average difference in attendance recorded in schools reached | Less than 30 % | N/A | Less than 30 % | N/A |
| # of children accessing safe drinking water in schools | 195,396 | 16,084 (28% F) | 63,000 | 2,342 (41% F) |
| # of children benefitting from temporary learning material including recreational material | 211,806 | 36,900 (33 % F) | 87,500 | 6,842 (42% F) |
| # of schools receiving cash grants | 49,000 | 0 | 49,000 | 0 |
| WATER, SANITATION and HYGIENE | | | | |
| # of emergency affected people with temporary access to adequate and safe water through chlorination, operation and maintenance, water trucking, vouchers and household water treatment | 2,500,000 | 478,718 | 1,500,000 | 360,543 |
| # of people with sustained access to safe water through newly built and/or rehabilitated water points | 1,500,000 | 89,901 | 500,000 | 37,510 |
| # of emergency affected people with access to adequate and appropriate emergency sanitation and hygiene facilities | 600,000 | 35,936 | 270,000 | 1,106 |
| # of people with means to practice good hygiene and household water treatment through water filters, purifiers, jerry cans, aqua tabs, etc. | 1,500,000 | 252,054 | 1,500,000 | 252,054 |
| CHILD PROTECTION | | | | |
| # of separated and unaccompanied children identified, registered and provided with services | 7,000 | 608 (261 F) | 6,885 | 285 (128 F) |
| # of children formerly associated with armed forces and armed groups and other vulnerable children provided with inclusive reintegration services | 2,463 | 783 (141 F) | 2,463 | 783 (141 F) |
| # of GBV survivors accessing a package of GBV services (medical, legal, psychosocial support and materials) | | | 3,803 * | 660 (622F) |
| CASH TRANSFERS | | | | |
| # of emergency-affected households provided with monthly cash transfers to support access to basic services | | | 60,000** | 1,182 |

*The GBV intervention aims to reach approximately 2,051 children (97% girls) and 1,746 women.

** The cash-based interventions will reach around 420,000 people (approximately 254,000 children) in the 60,000 household targeted.