

UNICEF HUMANITARIAN ACTION

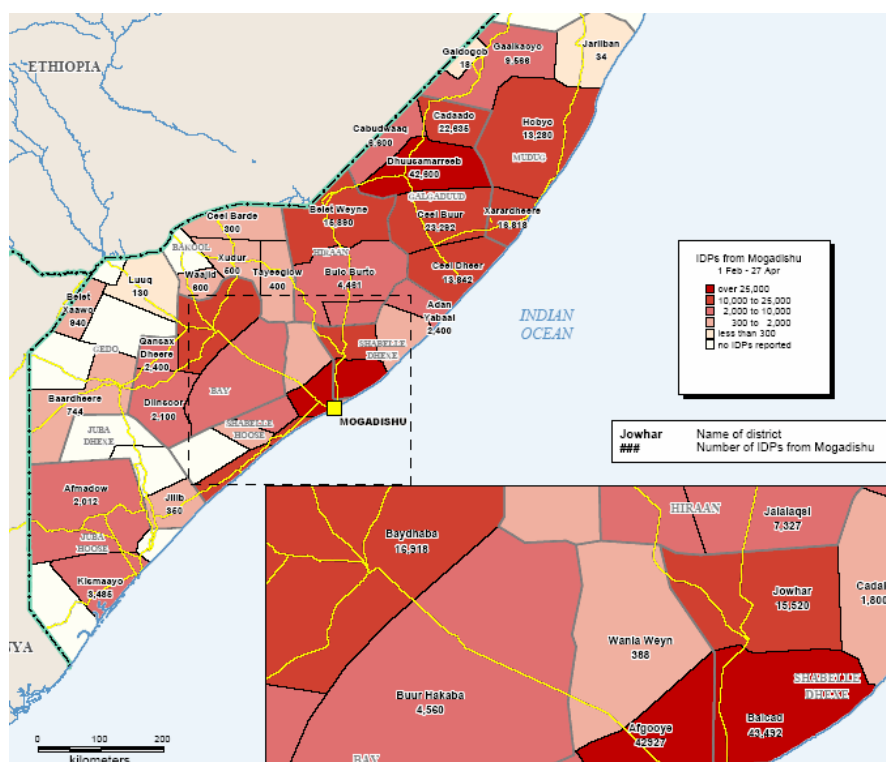
SOMALIA

DONOR UPDATE

2 MAY 2007

UNICEF NEEDS US\$ 13.5 M TO ADDRESS IMMEDIATE NEEDS OF CHILDREN IN THE AREAS OF NUTRITION, HEALTH, EDUCATION AND PROTECTION

- Generous donor funding has enabled rapid response to flooding and diarrhoea outbreaks (UNICEF CAP appeal 40% funded)
- Urgent funding gaps for response to 365,000 people displaced by conflict in Mogadishu.
- Insecurity prevents access to vulnerable children in many parts of Central and Southern Somalia



Map snapshot courtesy of UNHCR: Total number of displaced from Mogadishu by district: 1 February 2007- 20 April 2007

1. ISSUES FOR CHILDREN

On the heels of the prolonged drought in 2005-2006, the children and women of Somalia are bearing the brunt of a debilitating combination of conflict, flooding and disease outbreak during 2007. The worst-affected areas are the regions of the Central and Southern Zone (CSZ) which are home to 70% of Somalia's population. Families recovering from the effects of the drought were plunged into widespread **flooding** in late 2006-early 2007 and are now facing **outbreaks of acute watery diarrhoea**, alongside **malnutrition** rates that were already at critical levels. Although the food and livelihood situation had improved by February 2007, the recent escalation of fighting in and around Mogadishu has resulted in thousands of civilians killed or wounded and **large-scale displacement**; up to 365,000 people have fled the area since the beginning of February as Transitional Federal Government (TFG) and Ethiopian troops battle insurgent elements in the city. The majority of the displaced are women, children under 14 and the elderly, while men appear to be remaining in Mogadishu to protect family assets. Further, the *Gu* rains have now started, with potential for more flooding.

Even before the latest round of calamities, Somalia presented amongst the worst infant, **child and maternal mortality** rates in the world. The 2006 Multiple Indicator Cluster Survey (MICS) preliminary results indicate that about one out of every six children in Central and Southern Somalia will die before their fifth birthday, with slightly better rates for the two northern zones. About 35% of children under the age of five across all three zones are moderately or severely underweight, an indicator of both **chronic and acute malnutrition**. The maternal mortality ratio in Somalia is also amongst the highest in the world at an estimated 1,044 maternal deaths per 100,000 live births. Only an estimated 25% of the population has access to basic primary health care and preventable or easily treated diseases remain the main killers of Somali children and women, with malaria, respiratory infections and diarrhoeal diseases responsible for at least half of under-five mortality. The major underlying causes of water-related diseases are the lack of **access to safe water** and poor food and domestic hygiene. Preliminary results of the MICS 2006 show that only 29% of Somalia's population has access to improved drinking water sources and 37% to **sanitation** facilities, with large urban/rural disparities.

Violence against children, child labour, child soldier recruitment, and harmful traditional practices such as early marriage and Female Genital Mutilation (FGM/C) all feature in Somalia's landscape of **child protection violations**. Compounding these issues is the diminished community capacity to protect the rights of women and children as a result of prolonged civil unrest. While **HIV prevalence** remains low in Somalia (<1% among antenatal care attendees in 2003), evidence suggests transmission is on the increase and misconceptions about HIV are common, hindering prevention efforts. Only one Somali child out of every three receives **basic primary education**, with disparities between the three zones and a large gender gap (girls' enrolment recorded at 35%) At the beginning of the current school year, there were 1,867 operational primary schools in Somalia with a total of 393,856 pupils, representing a Gross Enrolment Ratio of 27.9%. However, it is estimated that at least half of the 80,000 school children in the Mogadishu area have been displaced as their families flee daily mortar attacks and increasing human rights violations in the city.

The **current conflict** is being characterized as the worst in Mogadishu in over 15 years. Hospitals are overflowing with casualties and civilians are frequently caught in the cross-fire, particularly internally displaced persons (IDPs) living in settlements close to military or government buildings. Although children are affected on a daily basis by the trauma of shelling in residential areas and by family deaths, UNICEF child protection monitors also report weekly cases of children becoming direct victims of indiscriminate shooting and mortar attacks. The ages of these children range from seven months to 18 years and many of them have been seriously injured and killed. In addition, the high number of IDPs in the city is straining access to basic services and has contributed to a degradation of public sanitation conditions, one of the main vectors in the control of Acute Watery Diarrhoea (AWD)/cholera.

2. UNICEF RESPONSE: ACTIVITIES, ACHIEVEMENTS AND CONSTRAINTS

With the situation changing on a daily basis, UNICEF and partners continue to adjust strategies and response mechanisms to reach children and other vulnerable groups with lifesaving support, basic services and access to their rights within the framework of the Millennium Development Goals and focusing on the Core Commitments to Children in emergencies. UNICEF's humanitarian assistance is being delivered through five key programmes: Health; Nutrition; Water, Sanitation and Hygiene (WASH); Education; and Communication, Protection and Participation. With generous donor funding, in close coordination with numerous international and local partners, and through engagement with local authority structures, community fora, women's and youth groups and other key stakeholders, important achievements have been made during the first quarter of 2007 despite severe security and access constraints. The two northern zones

of Somalia are subject to small scale emergencies (including acute watery diarrhoea outbreaks) and are receiving increasing numbers of IDPs from the Central and Southern Zone. In addition, a recent conflict in the disputed Sool and Sanag regions could escalate. However, the vast majority of displaced and vulnerable households, and the most urgent needs are located in the Central and Southern Zone.

Family Shelter and Relief for flood and conflict-affected households: More than 16,500 flood and conflict-affected families (about 115,000 people) have received family shelter and relief kits and assorted non food items since January. Kits are designed to provide each household with three blankets, two jerry cans, one plastic sheet, a cooking set, an insecticide treated net and five bars of soap. In addition, 22,000 family relief kits are in the pipeline for distribution to newly displaced households. For example, in the past week, 7,300 kits were dispatched to benefit about 45,000 people who have fled to the Merka area.

Acute Watery Diarrhoea (AWD)/ Cholera Prevention and Treatment

The outbreak of AWD/cholera in multiple regions of Central and Southern Somalia (currently Mogadishu, Afgooye, Baidoa, Burhakaba, Wajid and Bardere) continues to be the major threat to vulnerable groups. By mid-April, 16,597 cases of AWD had been reported with 593 deaths. UNICEF is supporting chlorination of water sources, social mobilization to raise awareness on hygiene sanitation issues and provision of supplies to health facilities and mobile health clinics. In close partnerships with WHO and numerous international and local NGOs, case fatality rates are dropping, indicating good case management and effective curative interventions. Measures to prevent the further spread of the outbreak remain the priority as wide-scale displacement from the Mogadishu area contributes to the spread of the outbreak. In the past two weeks, UNICEF has airlifted over two million sachets of Oral Rehydration Salts into Central and Southern Somalia. Soap, intravenous rehydration kits, water purification tablets and chlorine (approximately 150 drums) have also been supplied to partners. To minimize the risk of transmission, especially among internally displaced populations, UNICEF has provided bladders of chlorinated water for use in and around Mogadishu. UNICEF is also working with partners to help communities construct latrines, conduct health and hygiene education at IDP sites, and develop and broadcast hygiene promotion radio announcements.

Malaria Prevention and Treatment: UNICEF's role as the Principal Recipient for the Global Fund for Malaria in Somalia has dramatically supported flood response. Since January, 103,000 long lasting insecticide-treated nets (benefiting over 50,000 families) have been provided to partners in Central and Southern Somalia who are targeting children under five and pregnant women in their distributions. An additional 45,000 nets are being sent to Mogadishu to benefit about 22,500 households. This supplements massive distribution of nets in Nov-Dec 2006 immediately following the floods. In addition, 90 Maternal and Child Health Clinics have been supplied with highly effective anti-malaria treatment (Artemisinin-based combination therapy or ACT) and rapid diagnostic tests. Although malaria is endemic in Somalia, so far in 2007 no large outbreaks have been reported, although for security reasons, monitoring and verifying the situation remains difficult.

Primary Health Care and Immunization: Over 100,000 children have been vaccinated against measles in several districts of Central and Southern Somalia that had poor coverage or were inaccessible during the nationwide measles campaign in 2006 (due to the deteriorating security situation late in the year). This brings the total number of children vaccinated in the zone to 1.9 million. Additional rounds of vaccination are on standby to target 202,048 remaining children as soon as security permits. To fight the 2005 polio outbreak in partnership with WHO, immunization campaigns covered all of Somalia during 2006, reaching approximately 1.7 million children under five during eight rounds of National Immunization Days (NIDs) and one sub-national round (SNIDs). Since January, eight cases of wild polio virus have been reported in Somalia, five in the Togodher region in the north and three very recent cases in Central and Southern Zone. In February-March 2007, campaigns reached 1.6 million children with 93% coverage. UNICEF continues to supply vaccine and cold chain services to 50 partners in Central and Southern Somalia to support routine immunization activities and supplies 100 Maternal and Child Health facilities with essential medicines and equipment to provide basic health care services.

Nutrition: More than 8,500 malnourished children received life saving support at 114 UNICEF-supported supplemental, therapeutic and community-based feeding programmes throughout Central and Southern Somalia (note: figures for Jan-Feb 2007 only). An additional 16,200 children under five receive blanket supplemental feeding each month in Gedo region. As cluster lead for nutrition response, UNICEF has been able to support many new and existing partners with training and supplies to increase the coverage of treatment services for malnourished children. The number of selective feeding sites in Central and Southern Somalia increased from 14 to 75 during 2006 and thus far in 2007, an additional 39 sites have become

operational. Most of the new sites are in Gedo, Lower Juba and Middle Juba, areas which have had major gaps in service coverage in the past. Monthly admissions have increased in 2007, but this is due more to the improved access to treatment than to a documented increase in the levels of malnutrition in recent months. However, even the typical malnutrition levels in Central and Southern Somalia remain well above the emergency threshold in many locations. To address the underlying causes of poor nutrition, over 80 nutrition education and food demonstrations sessions are conducted at health and feeding facilities throughout the Central and Southern zone each month. Planned training and micronutrient supplementation activities have been severely constrained by the security situation.

Education: The “Back to School” campaign in flood-affected areas successfully brought more than 35,000 children back to the classroom in early 2007. Following major social mobilisation, distribution of school furniture and essential learning materials to selected schools, and training for Community Education Committees, all flood-affected schools in the Middle and Lower Shabelle, Lower and Middle Juba and Hiran regions were re-opened in January. Schools are also being used at a key avenue for hygiene awareness in the fight against the spread of AWD/cholera. As an estimated 40,000 school children have been displaced from the Mogadishu area, UNICEF is working with partners, IDP community leaders and education authorities to register the children in their new locations, set up emergency classroom tents and mobilise displaced teachers to resume basic education activities until the end of the school year in May. Generous in-kind donations of school tents will start arriving in the coming weeks. UNICEF plans to work with communities to erect over 380 school tents in various locations across Central and Southern Somalia to benefit approximately 50,000 children.

Communication, Protection and Participation (CPP): More than 100 cases of children separated from their families have been identified for follow up since December 2006 in Central and Southern Somalia through support to NGO partners conducting rapid assessments. Ten child protection monitors are working in the Central and Southern zone; protection violations are being regularly monitored. This information is being utilized for local and international advocacy, to inform programmatic responses and as a basis for referral of individual victims to support services. Psychosocial care and support services have reached hundreds of children. Four new child-friendly spaces have been constructed in 2007 and health workers and teachers are being trained on psychosocial care and support. High level advocacy against the recruitment of use of child soldiers has been ongoing and UNICEF is playing an active role in the creation of a UN taskforce on disarmament, demobilization and reintegration. Over 1,000 girls and 3,000 women have been reached with HIV/AIDS awareness and prevention information and access to testing services – the intervention targets women working in tea shops, female *khat* vendors, female IDPs, adolescent girls and female headed households. UNICEF also reached 60 leaders among vulnerable populations, particularly IDP communities, with awareness and prevention sessions.

Challenges

The distribution of supplies and monitoring of interventions within Central and Southern Somalia has been a challenge due to the resurgence of banditry and roadblocks and general insecurity during 2007. In addition, the closure of airstrips, ports and land routes has been unpredictable at best and prohibitive in many cases, creating major delays and dramatically increasing the cost of transporting supplies into Somalia. UNICEF’s two main supply warehouses in the capital have been inaccessible due to fighting in the immediate area. Administrative procedures for delivery of supplies requested by local authorities further compromise our response. Insecurity prevents staff access to vulnerable populations, as national staff members face serious danger in many locations and international staff members are unable to obtain security clearance for large portions of the Central and Southern Zone. The response has therefore depended in large part on UNICEF’s ability to mobilize new partnerships with local NGOs in order to reach vulnerable populations in inaccessible locations. Positively, the many new partnerships formed during the 2006 drought response have directly benefited the flood and conflict response in 2007. Because these partners also face a difficult security environment, follow up monitoring and evaluation has thus far been very limited. Innovative methods are being used, such as training youth groups to assist with the monitoring of water quality at existing wells as part of the effort to halt the spread of AWD/cholera.

3. APPEAL REQUIREMENTS AND RECEIPTS

Against the 2007 inter agency Consolidated Appeals Process (CAP), UNICEF currently still needs US\$ 20.4 million to be able to respond to the humanitarian needs of children and women throughout Somalia. The 2007 Somalia CAP included an initial appeal figure of US\$ 24,311,641 for UNICEF interventions. This has been increased by US\$ 2,523,951 in the recently released Revised 2007 CAP for Somalia – now totalling

US\$ 26,835,592. Also, in an inter-agency Somalia CAP Flash Appeal and a UNICEF Horn of Africa Flood Immediate Needs document issued in Dec 2006, UNICEF requested a total of US\$ 8,500,000 for urgent flood response needs across sectors. Of this amount, US\$ 2,000,000 for non food items was immediately funded by the CERF grant mechanism in Dec. 2006 and has been removed from the 2007 appeal figures below. Receipts against the remaining US \$6,500,000 of the appeals arrived (and were used for flood response) in early 2007. This brings UNICEF's total appeal for emergency response in 2007 to US\$ 33.3 million.

Table 1: Funds Received against Appeal

Appeal Sector	Requirements by Sector	Funds Received *(US\$)	Unmet requirements (US\$)	% Unfunded
Water, Sanitation and Hygiene (WASH)	5,084,000	3,168,500	1,915,500	38%
Health	9,054,107	3,034,750	6,019,357	66%
Nutrition	7,042,000	1,786,469	5,255,531	75%
Education	4,094,085	1,866,434	2,227,651	54%
Communication, Protection and Participation (CPP)	2,873,350	1,613,450	1,259,900	44%
Shelter and Non food items (NFIs)	1,967,500	1,059,422	908,078	46%
Early Recovery & Infrastructure (multisectoral)	1,735,750	0	1,735,750	100%
Coordination & Operation Support Services	1,484,800	390,395	1,094,405	74%
Total**	33,335,592	12,919,420	20,416,172	61%

*Note: including a total of \$6,500,000 in the Somalia Flash Appeal and Horn of Africa Immediate Needs document for flood response issued in Dec 2006.

** The total includes a maximum recovery rate of 7%. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.

Table 2: Funds received by Donor

Donor	Funds Received (US\$)	Sector
Ireland	395,256*	Education
	1,718,988	Nutrition, CPP, Education, WASH
USAID/OFDA	250,000	WASH
	1,500,000	Health, WASH
Global Thematic Humanitarian Response - Multidonor	2,792,987	Health, Nutrition, Education, CPP
Netherlands	1,543,000	Health, Nutrition, CPP
Norway	898,931	Health, WASH
	192,932	WASH
UNOCHA – Humanitarian Response Fund	750,000	Shelter/NFIs
United Kingdom Committee for UNICEF	112,000	Education
Spanish Committee for UNICEF	657,895	Health, WASH, CPP
Spain	653,478	Health, WASH
CIDA	345,000	WES
	216,584	Health
French Committee for UNICEF	315,448	Health, CPP, Education
Italy	576,922	Shelter/NFIs, Coord. & Common Services
Total**	12,919,420	

* This contribution was given against the 2006 CAP appeal, but arrived in Feb/March 2007

** The total includes a maximum recovery rate of 7%. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.

4. CURRENT PRIORITIES

Donor funding for UNICEF's humanitarian response in 2007 has been both timely and generous. However, critical gaps remain and becoming more urgent with the increasing displacement. Given the volatile security situation on the ground, the prediction of additional flooding in the coming months, and the complex supply distribution environment, additional funding is urgently in the following areas:

- Thanks to generous donor funding for **nutrition** in the second half of 2006, UNICEF was able to procure and pre-position supplies to maintain feeding programmes into the first months of 2007. However, urgent funding is now required to procure and transport feeding supplies and equipment as the sector scales up life saving support for up to 60,000 malnourished children during 2007.
- To protect children from vaccine-preventable diseases in the coming six months, UNICEF urgently requires funding to procure and transport vaccine for the six main routine immunization antigens; the **Expanded Programme on Immunization** targets 300,000 newborns and 300,000 pregnant women. Funding is also needed to procure and transport **polio** vaccine and conduct social mobilization for two rounds of NIDs and two rounds of SNIDs targeting 1.7 million children.
- At least 40,000 school children have already been displaced by the fighting in the Mogadishu area. Funding is required to **establish temporary schools** (including concrete foundations for donated classroom tents, furniture, access to safe water and sanitation facilities, etc), train teachers and provide teaching and learning materials.
- In response to the AWD/cholera outbreak and massive displacement, additional funds are needed to ensure access to **safe water** for 100,000 people who have recently fled Mogadishu.
- As security deteriorates and thousands of families are on the move, UNICEF will work with partners to expand **child protection** monitoring, family tracing and psychosocial care and support services, as well as **HIV/AIDS** awareness and prevention.

Table 3: Urgent priority requirements – as of May 2007

Project	Beneficiaries/coverage	Amount Required (US\$)
1. Nutrition: treatment of malnourished children, micronutrient supplementation, training and supervision	60,000 malnourished children 240,000 children and 114,000 women with micronutrient deficiencies	4,200,000
2. Immunization: polio campaigns and routine immunization services	300,000 newborns 1.7 million children under five 300,000 pregnant women	5,300,000
3. WASH: access to safe water for newly displaced	100,000 people displaced from Mogadishu	1,100,000
4. Education: access to basic education for displaced children	50,000 school children	2,000,000
5. Child Protection and HIV/AIDS awareness and prevention	Children and women throughout Central & Southern Somalia	900,000
Total Priority Needs		13,500,000

Details of the Somalia emergency programme can be obtained from:

<p>Christian Balslev-Olesen UNICEF Representative Somalia Tel: + 254 20 762 3952 Fax: + 254 20 762 3965 Email: cbalslev@unicef.org</p>	<p>Esther Vigneau UNICEF EMOPS Geneva Tel: + 41 22 909 5612 Fax: + 41 22 909 5902 E-mail: evigneau@unicef.org</p>	<p>Gary Stahl UNICEF PFO New York Tel: + 1-212 326 7009 Fax: + 1-212 326 7165 Email : gstahl@unicef.org</p>
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