



Carruurteena "our children"

UNICEF Somalia Newsletter

October 2008

Water for life, progress, health and peace

As the world marks the first ever Global Handwashing Day in October, UNICEF, the Somali people and local and international partners are emphasizing the importance of hand-washing with soap in order to improve health and prevent the spread of disease. While designed to reach children in the first instance, central to the initiative is the need to ensure access for all to clean drinking water and hygienic sanitation facilities. When adequately supplied, the provision of such social services also contributes to peace within communities by reducing unhealthy competition that can spark conflict.

Access to clean water and adequate sanitation is a fundamental right to which all men, women and children are entitled. The absence or lack of adequate provision of these crucial services can limit a community's potential for socio-economic development and survival. Nowhere more so than in Somalia, where the risk of water-based diseases is high and internal and external influences (such as the high price of food and water) have already reduced the ability of communities to sustain their livelihoods. In addition

insufficient water sources expose the Somali population to potential conflict over access to limited supplies.

Somalia is an extremely water scarce country. Access to safe and permanent water supplies and sanitation facilities is a significant problem, aggravated by the destruction and looting of the water supply infrastructure during the civil war, the ongoing conflict and cyclical droughts and flooding. Currently, it is estimated that only 29 per cent of Somalis have access to clean drinking water and 37 per cent to sanitary means of excreta disposal. Such low social indicators are underlying causes of malnutrition, which has shown to impact a child's ability to learn and develop. In Central and South Somalia in particular, malnutrition rates have been above emergency threshold levels for years and most recently, children in the northeast and northwest of the country are experiencing a similar deterioration in nutrition levels. Of additional concern is the impact of poor coverage of water and sanitation services coupled with poor hygiene practices. This has resulted in high rates of water-related disease such as diarrhoea

(including cholera) which accounts for about 20% of the country's under five mortality.

UNICEF is working with partners to reverse these startling statistics and ensure that Somali people, particularly children and women, have access to clean water and adequate sanitation.

Christian

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Young boys drawing drinking water from a well in Somalia. © UNICEF Somalia/2007

UNICEF's work in Water, Sanitation and Hygiene in Somalia

Across Somalia, UNICEF's water, sanitation and hygiene work covers emergency response, behaviour change, water sanitation and hygiene service delivery and policy development and implementation. These closely inter-linked projects address the problem of cholera and other waterborne diseases; they focus on building sustainable water supply and distribution systems in both urban and rural areas, while ensuring access for the most vulnerable and poor members of communities. Specific social mobilisation campaigns are carried out for safer storage of household water and for improved hand washing practices, directly

with communities and through hygiene education in schools.

UNICEF provides communities, partners and local and regional authorities with technical support and supplies towards the rehabilitation and establishment of new water sources, water supply systems and alternative water systems (rain water harvesting systems, solar powered systems). Coupled with community capacity development for the management, operation, maintenance or the fostering of public and private sector partnerships, this enables a more sustainable delivery of water supply services.

In the North East and North West Zones particularly, support is also given to efforts by local authorities and communities in strengthening their oversight of water systems and in setting fair policies and standards.

UNICEF continues to support local administrations in formulating policy on all domestic and related water supply sources, enabling administrations to improve the quality of planning, implementation and supervision. Similarly, support is given in the provision of latrines and hand washing facilities.

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Only 29% of Somalis have access to safe drinking water....

Somalia to mark Global Handwashing Day on October 15

As the world commemorates Global Handwashing Day on 15 October, 9 year-old Salmo Said Musse has already become a handwashing advocate in her own community of Biyo Kulule Village in Bossaso, Puntland, Northeast Somalia.

Salmo won a school essay competition with an account of how she came to understand the importance of handwashing with soap and her own efforts to get her friends to do so. On 15 October, Salmo's school, Biyo Kulule Primary, will be among 90 schools participating in a week of activities to mark Global Handwashing Day in all three regions: Somaliland (Northwest Somalia); Puntland; (Northeast Somalia) and Jowhar and Baidoa in Central Southern Somalia. More than 20,000 Somali children are expected to take part in the activities.

With support from Community Education Committees, child health clubs, religious leaders, parents, local NGOs and local administration officials in Somaliland and Puntland, events for the day will include demonstrations of hand washing with soap and the distribution of soap, badges, cups and posters with the message (in Somali): 'Our Health is in Our Hands.' Many of the participating schools – especially in Central South Somalia - are beneficiaries of UNICEF-supported water, sanitation and hygiene facilities.



Salmo (on left) washes her hands with soap while her friend Na'imo looks on. © UNICEF Somalia/2008

In her essay (below) Salmo explains the importance of handwashing with soap:

"I am Salmo Said Musse and I am 9 years old. I am a 3rd Class student in Biyo Kulule Primary School. I live with my 4 sisters in Biyo kulule village in Bossaso. My best friend's name is Na'imo Said Salad and she is 10 years old. While I was studying in the school I always heard something about diarrhea. I tried to understand the cause of the disease. I used to think when children suffer from diarrhea, that, it is punishment from God. One day, I overheard something from the radio that the diarrhea is as a result of bad hygiene behavior. I asked my teacher what that meant. He explained to me that if you clean yourself you and your family and every one will be safe. But I did not get enough answer.

So the next week or so the school built latrines for our girls separate from boys and connected water to our school. Then the teacher another day said you all have to clean yourselves in the hand washing basin after using the toilet. I still wondered what the teacher means about cleaning. So I asked my best friend, Na'imo. Then Na'imo said I never come out of home without bath and I too ask myself what the teacher means about cleaning.

Then I saw some posters put on the class. I saw, UNICEF mark on below. I didn't know what it means then I remembered - I saw the same mark on the latrines. In the posters it was written in Somali with pictures to wash hands every time you use toilet with soap or ash. Also I saw that it will save you from diarrhea diseases. The next day I called my best friend and asked, "Do you know what the teacher used to mean by saying that if you clean yourself you will save yourself and your family?" She said no! Then I told her that if you wash your hands as it's written on the posters with soap or ash you will not transfer it to your mouth and your brothers and sisters. So, I advised all my classmates to follow the instructions on the posters and use the latrines in our school properly. The instructions I gave were to clean hands with soap or ash before eating food and after using latrines."

As garbage piles, acute diarrhoea breaks out in town

Burao town in Northwest Somalia ('Somaliland') has been relatively dry this year following the failure of the expected 'Gu' rains from April to June. Nonetheless, in the second week of September 2008, moderate rainfall fell in the area leading to the accumulation of pools of stagnant water in some parts of Burao town.

This compounded the already poor sanitary conditions in the town, especially around IDP settlements, which is caused by accumulated garbage and human excreta found scattered in open-air areas.

Stagnant water became even more putrid once in contact with waste and garbage in the hot and damp weather, resulting in a proliferation of disease and vermin. The problem was most acute in residential areas and market places and among contaminated water sources, leading to an increase in the incidence of diarrhoeal diseases. Data from local hospitals gave a total of 151 admitted cases from 11 to 24

September, 70 of which were children under the age of five, with one reported death.

To combat this diarrhoea outbreak, UNICEF initiated chlorination of water and environment clean-up campaigns and instituted measures to ensure safe disposal of human excreta. UNICEF furthermore supported the preparation of appropriate acute watery diarrhoea (AWD) treatment centres and effective case management, surveillance, reporting and confirmation of diagnosis. These interventions lead to the reduction of infection and spread of diseases. Currently the situation is under control, but this does not mean the outbreak is over either.

Yet, Burao and other locations in Somalia can learn from the experience of Boco village situated some 50km south of the Central Somalia town of Belet Weyne.

Two years ago, five children under the age of five years died of AWD and suspected cholera. In response, UNICEF in collaboration with a local organization

organized for the households in the village, above 80 per cent of whom depend on the river for drinking water, to be supplied with ChlorFloc for the sedimentation and treatment of water before it was used for drinking. This was complemented by hygiene promotion targeting women and children and groups like teachers, elders and youth.

Subsequently, UNICEF established a well equipped with a hand pump in the village. This new access to safe drinking water contributed to an immediate reduction in the incidence of water borne diseases.

Said the leader of the women's group in the village: "UNICEF stopped and controlled the spread of the diseases by providing the water treatment supplies and showing us the behaviors causing the diseases. Providing a safe drinking water source ensured better life. The following year [in 2007], there were no cases of acute watery diarrhoea."

Programme Highlights

Despite constraints, UNICEF continues to work towards improving the lives of Somali children...

Health and Nutrition

- ◆ UNICEF and local NGO Jumbo immunized over 142,000 children between nine months and 15 years in IDP camps in Mogadishu and along the Afgoye-Mogadishu corridor.
- ◆ In mid-October, UNICEF and partners will distribute a third-round of blanket nutritional supplementary feeding (UNIMIX) to over 55,000 under-five children in the Afgoye Corridor (almost 90%) and three Mogadishu IDP camps.
- ◆ UNICEF, with WHO, is preparing for Child Health Days — a campaign to deliver high-impact child survival interventions to 1.5 million under-five children and 1 million women of child-bearing age throughout Somalia which includes immunization, vitamin A, deworming, nutrition screening, oral rehydration services and water purification with the aim of reducing morbidity and mortality.
- ◆ Ready-to-Use Foods (Plumpy'doz) will be provided to 138,600 children every six months, as a preventative measure against acute malnutrition.

Communication and Empowerment

- ◆ The Somaliland Ministry of Justice has launched a new Juvenile Justice Law introducing provisions to protect the rights of children in legal proceedings. The provisions raise the age of criminal responsibility to 15 years; ensure that all district and regional courts establish sections to deal with juvenile cases; and stipulate that child imprisonment must be a measure of last resort. UNDP and UNICEF supported the launch event.

Education

- ◆ UNICEF and local partners provided emergency school tents and foundations for 20 classrooms in the Afgoye Corridor, enabling access to education for 1,000 children.
- ◆ UNICEF trained 370 head teachers from three regions in Central Somalia in management, educational psychology, as well as emergency education, benefiting over 70,000 children. The training was integrated with nutrition and awareness raising sessions on HIV/AIDS.
- ◆ In Somaliland and Puntland, 14 day trainings for non-formal education teachers and centre managers (200 and 260 respectively), in an effort to upgrade their pedagogical and management skills will benefit 18,000 children and youths.

Water, Sanitation and Hygiene

- ◆ UNICEF supported water chlorination and hygiene promotion for 100,000 people in Baidoa, Burhakaba, BeletWeyne, Hiran and Bardera in Central South Somalia.
- ◆ A hygiene promotion and clean-up campaign underway in Jowhar town in partnership with the Jowhar Women's Group aims to reach 20,000 people.
- ◆ UNICEF is supporting the Kismayo local authority with hygiene education and clean up campaigns for 12,000 people. In addition, about 10,000 people will benefit from the rehabilitation of a borewell and hand pump outside the town of Kismayo, through UNICEF funding to Muslim Aid.
- ◆ UNICEF continued to provide safe drinking water to over 100,000 IDPs in Afgoye corridor through water trucking of over 2,000,000 litres per day.

Empowerment project helps Somaliland community address water scarcity



Tulli community members by a recently excavated "berkad" (water reservoir). © UNICEF Somalia/2008

Water is scarce in the village of Tulli in Somaliland where people have to walk many kilometers for more than half a day just to fetch it. Resident and mother of three Fatuma Sulub says, "I used to leave my house at 6 o'clock to get water from a stream which is far from here. I usually use a donkey and would return home at noon. Those who do not have donkeys would be home at four o'clock."

The situation recently improved thanks to a community empowerment programme which has seen the people of Tulli build 'berkads' (water reservoirs) that are only 10 minutes away from their homes.

Tulli community (about 100 kms from Hargeisa) is in Borama district and one of thirty communities in Somalia that are benefiting from a joint project on Community Driven Recovery and Development (CDRD) which is supported by UNICEF, the Danish Refugee Council, UNHABITAT, DFID and the World Bank.

The project places communities at the centre of social service planning and oversight enabling them to set the development agenda and to influence authorities from an informed position. All activities are therefore demand-driven: selected by the communities and implemented with community participation and the active involvement of local and central governance.

"Water has been a big problem for our community," says Ali Roble, the Chairperson of the Community Development Committee (CDC). "We wanted a permanent solution to this problem which would involve a water piping system from a stream that is 30 kms from here. We, however, realized that this was going to be very expensive and would take time to fund-raise for while our need for water was very pressing. As a result, we opted for 'berkads' since we have a lot of water running off during the rainy season. We organized ourselves and excavated 7 reservoirs. We received funding through the project to cement and roof two out of the seven. We have cemented one which is now full of water and serves 180 households. We will finish the other one within the next month."

The community-driven solution has not only made water easily accessible to residents, it has also enabled children - and particularly girls - to go to school. Fatuma Sulub admits that of her two daughters she would only send one to school, "[I] kept the other one at home so that she could help out with household chores as I went to look for water. Now that we have a 'berkad' in the village, I have time to carry out other household chores myself and decided to send my daughter to school. This is the second week that she is in school."

Relations among community-members have improved as a result of the project. "The approach was different from what we were used to in the past. Agencies would come for one day, talk to the elders, leave and come back with a project," says Ali Roble. "This project however engaged us in a very extensive dialogue. The facilitators stayed with us for more than a month. It helped us understand each other and our problems better. We were greatly divided before this project due to district boundaries, as we had one group that wanted to be part of Borama district and another group wanting to be part of Dilla district," says Ali. "The project helped us realize that the only way we can move forward in our community in terms of development, is if we work together. This encouraged us to look for a solution on the issue of district boundaries and the Mayor of Borama worked with us to sort out this problem. As a result we now have a very good relationship with the Mayor of Borama."

The project has created an opportunity for women to become more involved in community matters. Maimuna Adan Gelle, a member of the Community Development Committee says, "As women, we realized that it is to our interest to participate in the development of the community since we equally have a role to play and that it is only through our participation that our interests can be included in the community priorities"

CDC treasurer, Khadra Ismail Egal notes that "Women are very important members of the CDC. We have two representatives out of the 9 committee members. Out of the two, one is the treasurer and the other is the custodian of the cheque book. No payments can be done by the CDC without the consent of the cheque book custodian." The articles of association of the Community Development Committee also stipulate that a quorum of any CDC meeting must include the two female members. Without them, no meeting can be held nor any decisions taken.

Community resource person, Mohamed Abdi Isse says that the most important thing about the CDRD project is that it has helped the communities realize that they can take action for themselves to improve their living conditions. Next on their agenda is a school feeding project; "Due to the drought, we [want to] ensure that our children stay in school," says Mohamed. "[So] we have constructed the kitchen and will be approaching agencies to support us with the kitchen utensils and food until the next harvest."

UNICEF assistance helps improve lives of IDPs in Jowhar

Jowhar town (90km. north of Mogadishu) has seen a massive influx of internally displaced people (IDPs) following an upsurge in conflict in the capital in late 2007 between government troops and anti-government forces. The sudden arrival of such a large number of people put a severe strain on sanitation services and access to safe drinking water and soon resulted in an outbreak of acute watery diarrhea (AWD). Coupled with this was an increase in the prevalence of malnutrition. All in all, between 5,000 and 10,000 families were affected and their ability to cope with their disadvantaged circumstances was severely restricted by their lack of resources.

In response, UNICEF funded the installation of a mini water supply system in the Sheikh Omar IDP camp in northeastern Jowhar and the construction of latrines for the Sheikh Omar and Kalagoye IDP camps, with partner support.

Following the interventions, there was a marked reduction in AWD outbreaks in the IDP camps. The increase in availability of clean drinking water for the IDP families also saved time for women who had to care for their children as well as allowed for better opportunities to engage in small-scale income generating activities with resultant improvement in living standards. UNICEF and partners also addressed the problem of malnutrition within the same context through the provision of supplementary food for malnourished children.

Children who had previously been fetching water from the crocodile infested Shabelle River situated three km from the IDP camps also earned a reprieve following the installation of the water supply system.



A Somali child washes her face. © UNICEF Somalia/2007

Not only did it save them from being attacked by crocodiles, but children were able to return to school and had more time to engage in recreational activities.

Sheikh Omar, the religious leader who gave the IDPs the permission to settle on part of his ancestral land, praised UNICEF for the role played in improving the living standards of children and women. "We needed so much to help our people from Mogadishu, but we had no resources. Thanks to UNICEF, children and women are drinking safe water and instilling human dignity by constructing latrines for the IDPs in the camp," said Sheikh Omar.

Today, UNICEF continues to support the IDPs in Jowhar. Most recently, a clean-up campaign and hygiene promotion in Jowhar town with the collaboration of the Jowhar Women's Group was completed targeting 20,000 people.

UNICEF's work in Water, Sanitation and Hygiene in Somalia

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UNICEF water and sanitation teams devise cost-effective ways of promoting behaviour change, improved personal hygiene and environmental sanitation at the household and community level and in schools, which is undertaken along with latrine construction in all zones in Somalia. Together with the building of sanitation facilities in schools, teachers are trained in hygiene education. The school sanitation and hygiene programme is one of the main components of the environmental sanitation and hygiene programme. At the household level, UNICEF promotes proper storage and handling of drinking water and proper hand washing practices. In IDP camps and several urban and semi-urban centres, sanitation tools are distributed to assist communities in cleaning up their environment. Municipal household solid waste collection and disposal is one of the components of urban water supply systems.

Training in chlorination of water sources and stored water at community level, as part of cholera prevention and control, takes place during the annual cholera 'season' (December-June) and chlorine is pre-positioned in all areas to help in combating outbreaks.

UNICEF works closely with local communities, water authorities and water boards, local self-help groups, the private sector, community-based organisations and NGOs, under the overall umbrella of the Somali Support Secretariat's, Water, Sanitation & Hygiene (WASH) Sector Committee, comprised of UN agencies, NGOs and donor groups.

UNICEF provides safe drinking water to over 100,000 IDPs in Afgoye corridor....

With thanks to our donor partners

UNICEF's main donor partners in Water, Hygiene and Sanitation contributed to both Humanitarian Response (through the 2008 Consolidated Appeal Process—CAP) and Recovery & Development (Regular Country Programme – United Nations Transition Plan 2008 to 2009).

Areas of Intervention	Donor Partners
<u>WASH Service Delivery</u> - Rehabilitation and construction of water sources; management (PPP) and Operation and Maintenance training; emergency provision of safe drinking water to IDPs and vulnerable (including AWD prevention); chlorination, aquatabs and other WASH supplies; promoting household water treatment and safe storage; cluster coordination for emergency response	For emergency areas – OFDA; un-earmarked CAP contributions from Finland, Norway, Netherlands, Denmark For longer-term water supply systems – EC, USAID, Denmark and Swiss Committee for UNICEF
<u>Behaviour Change</u> - Sanitation and hygiene promotion, promotion of hand washing with soap; integrated WASH with Health, Nutrition and Education (through schools and health facilities, etc)	All above
<u>Capacity building</u> to government and partners, support development of water policies, training.	EC, USAID, Denmark, Swiss Committee for UNICEF

2008 CAP: Donor support by Sector

Donor	Sector
USAID/OFDA	WASH, Health, Nutrition, CHEP
Norway	Education, WASH, Health, Nutrition
Denmark	WASH, Health, Education, CHEP
Japan	Health
Central Emergency Response Fund (UN)	Nutrition
SIDA	CHEP, Education
DFID	Education, Nutrition
Netherlands	Health, WASH
Italy	Education
UNICEF special allocation of Regular Resources*	Health
Ireland	Education, CHEP
Finland	WASH
Humanitarian Response Fund	Education
French Committee for UNICEF	Nutrition
US Fund for UNICEF	CHEP
UNHCR	CHEP
Denmark Committee for UNICEF	Nutrition

CHEP-Communication, HIV, Empowerment and Protection; DFID– UK Department for International Development; EC-European Commission; OFDA-US Foreign Disaster Assistance; PPP-Public-Private Partnerships; SIDA-Swedish International Development agency; USAID-United States Agency for International Development.
* Special allocation in response to Food Price Crisis

While generous donor support has enabled UNICEF to respond to urgent humanitarian needs, critical funding gaps remain in our emergency response. UNICEF's unmet requirements against the 2008 Consolidated Appeal of USD 65,837,985 is USD 24,316,472. UNICEF requires a further USD 5,100.692 to carry out emergency water, sanitation and hygiene response in 2008.

For more information on our programming or to learn how you can help, please contact us at:

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