

Somalia Humanitarian Situation Report No. 4



Highlights

- As Somalia's severe drought continues to escalate, an estimated 4.2 million people face life-threatening water shortages, with over 159 strategic communal boreholes in urgent need of repairs.
- According to the Food Security and Nutrition Analysis Unit (FSNAU) report, 4.8 million people are experiencing severe food insecurity, while 1.4 million children under the age of five are likely to be faced with acute malnutrition by the end of 2022.
- As of week18, 4,320 cholera cases (50.51 per cent children below two years of age) and 12 deaths (Case fatality rate of 0.27 per cent) have been reported. More than 8,700 suspected measles cases have also been reported, of which 82 per cent of the cases were in children under the age of five years.
- UNICEF is scaling up its WASH interventions in drought-affected areas.
 In 2022, 597,446 people (182,272 girls, 185,613 boys,118,071 women, and 111,490 men) received emergency water supply through water trucking and water point rehabilitation.
- In 2022, 113,735 children and women received lifesaving health care. A total of 113,735 children (62,203 girls and 51,532 boys) were treated for severe acute malnutrition.
- UNICEF assisted 119,686 vulnerable children (46 percent of whom were girls) to access emergency education services while 36,904 people were supported with the provision of mental health and psychosocial support services since January.

Situation in Numbers 4,900,000



children in need of humanitarian assistance Humanitarian Needs Overview October 2021)



7,700,000

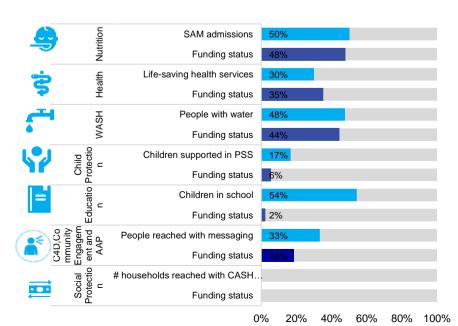
people in need (Humanitarian Needs Overview October 2021)



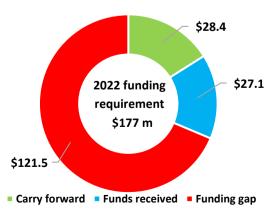
2.900.000

Internally displaced People (OCHA Somalia, January 2022)

UNICEF's Response and Funding Status



UNICEF Appeal 2022 US\$ 177 million



Funding Overview and Partnerships

As of April 2022, UNICEF's Humanitarian Action for Children (HAC) appeal funding gap remains at 69 per cent from the required \$177 million. With the generous funding received from donors, UNICEF and partners provided lifesaving and life-sustaining interventions during the reporting period. However, the 31 per cent HAC funding that has been received so far is less than what was received during the same time period in 2011 (49 per cent) and 2017 (54 per cent) when the country experienced famine.

Building on the humanitarian sector's success in preventing famine in 2016 and 2017, more should be done to respond to exponential increased humanitarian needs, which would need major investment and strengthened humanitarian, development, and peace actor linkages. Thus, as needs continue to rapidly grow, UNICEF Somalia requires additional timely and flexible funding to respond effectively and efficiently to the ongoing crisis and ensure the provision of lifesaving humanitarian assistance to avert the risk of famine in the hot spot locations.

Situation Overview & Humanitarian Needs

Climate change has increased the frequency and intensity of droughts, leaving over 90 per cent of Somalia in severe drought after three consecutive failed rain seasons, with some places experiencing their driest season in 40 years. A fourth failed seasonal rain, which is highly likely to threaten the lives and livelihoods of millions of Somalis.

According to the WASH cluster, an estimated 4.2 million people are facing acute water shortages with over 159 strategic communal boreholes in need of urgent upgrading to restore their functionality.

The Food Security and Nutrition Analysis Unit (FSNAU) reported that the severity of Somalia's food insecurity continues to worsen. An estimated 4.8 million people are experiencing severe food insecurity, while 1.4 million children under the age of five are likely to be acutely malnourished, including nearly 329,500 who are likely to be severely malnourished by the end of 2022. Furthermore, more than 6 million people are projected to face crisis or worse (IPC Phase 3 or higher) outcomes until June, including 1.7 million likely in an emergency (IPC Phase 4) and over 81,000 likely to be in a catastrophe (IPC Phase 5).

According to the Somalia Updated Integrated Food Security Phase Classification (IPC) and Famine Risk Analysis, which was released in April 2022, the situation is expected to worsen in the coming months, posing an immediate threat to the lives and livelihoods of the most vulnerable, including women and children, particularly among internally displaced people.

The nutrition cluster reports a 51 per cent and 15 per cent increase in admissions to treatment for severely and moderately acutely malnourished children across the country since the beginning of 2022.

Severely malnourished children are nine times more likely to die of diseases such as acute watery diarrhoea (AWD)/cholera and measles. During the 2011 Somalia famine, which killed an estimated 260,000 people—more than half of whom were children—the main causes of death were malnutrition, diarrhoea, and measles. As of week, 18, close to 4,328 cumulative cholera cases (50.51 per cent children below two years) with 12 deaths (case fatality rate (CFR) 0.27 per cent) have been reported. More than 8,700 suspected measles cases have been reported since January, of which 82 per cent of the cases were under the age of five. UNICEF is increasing its response to health emergencies with health and WASH interventions training partners, supporting case management, sanitation, and ensuring affected populations access safe water. Lifesaving supplies are being prepositioned with partners and at facility level, and coordination is ongoing with WHO, the Ministry of Health (MoH) and partners. Vaccination campaigns for measles are also ongoing in targeted hot spot areas.

The drought has also displaced 759,000 since December 2021, adding to the 2.9 million already internally displaced (IDPs). This includes 585,000 new IDPs in 2022 alone, of which more than 300,000 were school-aged children. As displaced households lack the financial means to pay for school-related costs, and service provision at IDP sites is limited, Schools in rural areas are particularly affected, and those that remain open are reporting rapid decreases in enrolment. According to the Puntland rapid assessment report released in April, education-related costs were cited as the main driver, contributing to about 55 per cent of the dropouts, followed by displacement (20 per cent) due to the ongoing severe drought. Furthermore, about 25 per cent of the teachers have reportedly left their positions, thus impacting education service provision.

The country is likely to experience a rapid and large-scale deterioration of the food security, nutrition and water crisis situation comparable to 2011 and 2017. Building on the humanitarian sector's success in preventing famine in 2016 and 2017, more should be done to respond to exponential an increase in humanitarian needs. This would need major investment and strengthened linkages of programming on the triple nexus of humanitarian, development and peace.

Summary Analysis of Programme Response

Nutrition

In April 2022, UNICEF provided operational support and nutrition supplies to implementing partners for the timely provision of integrated preventive and curative nutrition services to children and women through fixed and mobile nutrition centres. During the reporting period, a total of 24,676 children under the age of five years (13,433 girls,11,243

boys) suffering from severe acute malnutrition (SAM) were admitted for treatment in 70 per cent of UNICEF supported health and nutrition sites. In the south and central regions, the humanitarian situation remains critical due to the impacts of ongoing drought, displacement, and conflict. A total of 20,771 severely wasted children were admitted for treatment from the South-Central region, representing 84 per cent of the total children treated during the month of April 2022.

Furthermore, 78,140 pregnant women and caretakers of children under two years of age received counselling services on appropriate infant and young child feeding (IYCF).

Health

During the reporting period, UNICEF and partners, expanded the provision of lifesaving emergency healthcare by targeting additional drought affected districts. Through static, outreach, and mobile services in 24 districts, 84,568 (39,946 children, 25,378 women, and 19,244 men) people benefited from outpatient consultation (OPD) services for curative care. Routine immunisation services continued with over 6,934 children under the age of one year receiving Penta 1 doses while another 5,004 received Penta 3 doses. As part of its increased efforts to contain the measles outbreak, 11,195 children under five years were vaccinated against measles. To improve maternal health, 3,450 pregnant women completed their fourth antenatal care visit; 1,581 deliveries were supported by skilled birth attendants; and 2,597 women received their first postnatal care service within 48 hours after the birth. In response to the AWD/Cholera cases, UNICEF supported three cholera treatment centres (CTC) in the Central and Southern Regions with operational support and distributed required medical supplies for timely case management, while providing essential supplies to the partners to sustain two additional two CTCs.

WASH

During the reporting period, UNICEF and partners provided emergency water services for a total of 116,998 people in 12 drought-affected districts through water trucking, water vouchers, and emergency water source chlorination of five water reservoirs. In addition, a total of 31,100 people were provided access to a sustainable safe water supply through the drilling of three new boreholes in Ceerigaabo, Buuhoodle, and Hargeysa districts and the rehabilitation of 14 boreholes in nine districts. Furthermore, UNICEF has significantly increased its sanitation interventions in drought-affected districts, completing the construction of 255 emergency communal latrines in IDP sites and the rehabilitation of 16 institutional sanitation facilities in health facilities, benefiting a total of 16,800 IDPs and host communities in Baidoa, Garowe, Dhuusamarreeb, and Bossaso districts. UNICEF and its partners have greatly intensified the delivery of key hygiene promotion messages and the distribution of essential hygiene kits and reached 67,950 people within three IDP settlements in Baraawe, Daynile, and Dhuusamarreeb districts and in four health facilities in Bossaso district.

Overall, UNICEF, through its emergency WASH intervention, has reached a total of 27 districts across the country.

Education

UNICEF with partners supported children affected by various shocks including the worsening drought with provision of safe drinking water, trained teachers and strengthened Community Education Committees (CECs). Education services addressed Gender Based Violence, psychosocial care and improvement of WASH facilities and learning facilities as well as improved teacher incentives.

In 2022, 119,686 boys and girls were provided with access to primary education and/or improved educational facilities including improved water, sanitation and hygiene facilities; student learning materials; teaching/classroom materials and individual student incentives (including uniforms; scholarships; etc). Teachers/facilitators of these schools (temporary and permanent) were provided with salaries while 1,230 participated in training.

Child Protection

During April, delivery of child protection services continued despite tensions and speculation about the parliamentary and presidential elections. Child protection partners expanded services to reach drought-affected communities in priority one and two districts. Mental health and psychosocial support activities were scaled up, particularly in Belet Weyne, Banadir and Bulo Burto, and Garowe reaching 8,768 people (5,648 children), representing a 101 per cent increase in people reached when compared to the previous month. Children benefited from play therapy in child-friendly spaces and manifested well-being and improved socialization compared to their first interaction with social workers. Caregivers received parental care and guidance in supporting children affected by the disaster. Integrated services in communities and IDP camps facilitated the identification and support of 1,193 unaccompanied and separated children (541 girls and 652 boys) with family tracing and alternative care arrangements.

There was a significant increase in unaccompanied and separated children (UASC) in drought-affected communities such as Garoowe, Afmadow, Baidoa, Galkayo, Cadaado and Caluula due to parents moving in search of food and livelihoods while leaving children at home or in IDP camps. Gender-based violence (GBV) was a major threat to women and girls, 34% increase in GBV cases has been reported, from 2201 in March to 2,955 (968 girls, 1293 women, 528 boys and 166 men) in April was documented. GBV survivors received shelter, medical care, legal advice, counselling and psychological first aid. The most significant number of the case were in drought-affected districts, namely Banadir, Afmadow, Doloow, Galkayo and Garbahaarey. Rights-based awareness creation sessions reached 5,799 people (52 per cent children) with prevention of GBV, family separation and mine risk awareness messages. Efforts to prevent child

recruitment and other grave violations against children continued in close collaboration and coordination with the Federal Government. At least 890 children (109 girls and 551 boys) continued to benefit from UNICEF supported reintegration programs that offer vocational training, specialized mental health support, shelter and career guidance

Communications for Development (C4D), Community Engagement & Accountability

Risk communication and community engagement interventions to support the ongoing drought responses including demand generation basic social services have continued since January. In April, UNICEF supported both federal and state ministries in implementing social and behaviour change (SBC) activities. These interventions include community-level activities, religious leaders' engagement, the media, and public announcements. Thus, more than 480,000 people were reached. A total of 1,058 radio spots and 321 TV spots were supported via national TV and radio stations, targeting populations affected by droughts in the target districts. 153 religious leaders took part in organised events by making announcements in mosques during Friday prayers.

Humanitarian Leadership, Coordination and Strategy

UNICEF's humanitarian strategy aims to respond to the needs identified in the Humanitarian Needs Overview 2022, famine prevention plan cluster priorities, and is guided by the Core Commitments to Children in Humanitarian Action. UNICEF leads the Nutrition Cluster with support from WFP. The WASH cluster is co-led by UNICEF and the Polish Humanitarian Action. Save the Children co-leads the Child Protection Area of Responsibility and the Education Cluster with UNICEF, providing dedicated full-time support to coordination and information management. UNICEF prepositioned WASH emergency supplies in nine prepositioning hubs for the rapid response. In addition, UNICEF implements its programmes in some of the hardest-to-reach areas, reassuring its robust field presence in three offices and expanding its partnerships.

Building on lessons from previous years, UNICEF will pursue balanced approach between providing an immediate life-saving response, investing in systems strengthening and building the resilience of services and communities. UNICEF will expand the programme monitoring to engage communities in the design, reach and quality. Furthermore, UNICEF programmes are informed by solid risk analysis and humanitarian access monitoring. UNICEF prioritizes gender, disability, equity, mainstreaming Prevention of sexual exploitation and abuse and accountability for affected populations in its programmes.

Human Interest Stories and External Media

April started with an alert of famine like conditions in Somalia with absent rain, skyrocketing food prices and funding shortfalls - a joint FAO-OCHA-UNICEF-WFP statement was released on the emergency. Angela Kearney, UNICEF Somalia Representative, visited Dollow with the DSRSG of Somalia and other UN partners to assess needs and create awareness.

Further, <u>drought response</u> and funding needs are being promoted through the greater <u>UN family</u> on a combined social media campaign on <u>Twitter</u>, <u>Facebook</u> and <u>Instagram</u>. ECHO funding to UNICEF ensures <u>essential health workers</u> can reach women and children affected by drought to improve their nutrition and health while USAID BHA support enables UNICEF to <u>improve access</u> to <u>water</u>, <u>sanitation and hygiene</u>.

<u>World Immunization Week</u> started with a joint <u>press release</u> along with <u>social media posts</u>. Drought conditions are increasing measles and other vaccine preventable diseases. Around 80 per cent of all measles cases confirmed in 2021 were children under age five. In more health news, women's <u>lives have been saved</u> and maternal deaths averted thanks to a UNICEF <u>supported</u> clinic in Dollow. In April, UNICEF Somalia was mentioned in stories by <u>UNSOM</u>, <u>Council on Foreign Relations</u> and <u>National Abu Dhabi</u>. With the dire drought condition in Somalia, it's <u>important</u> to remember that <u>children</u> need opportunities and <u>spaces to be a child</u>.

Next SitRep: 20 June 2022

UNICEF Somalia Crisis: https://www.unicef.org/somalia/

UNICEF Somalia Humanitarian Action for Children Appeal: http://www.unicef.org/appeals/somalia.html

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Annex A

Summary of Programme Results

		UNICEF and Ips			Cluster/AoR Response		
Sector	Overall needs	2022 target	Total results*	Change since the last report ▲ ▼	2022 target	Total results*	Change since the last report
Nutrition							
# of boys and girls aged 6-59 months with severe acute malnutrition admitted for therapeutic care	295,515	236,222 (120,473 G 115,749B)	113,735 (62,203 G 51,532 B)	24,676 ▼	295,515 (150,713 G 144,802 B)	113,735 (62,203 G 51,532 B)	24,676 ▼
# of primary caregivers of children aged 0-23 months who received counselling on infant and young child feeding Health	1,413,000	1,142,002	367,613 (367,613W OM)	78,140 ▲	1,274,873	367,613 (367,613W 0M))	78,140▲
# of people provided with access to essential life-saving health services	4,700,000	931,316 (230,410 G 210,847 B 284,819 W 205,240 M)	279,419 (73,923G 67,509B 80,514W 57,473M)	84,568 ▲			
# of children under-5 year vaccinated against Measles		186,264 (96,857 G 89,407B)	544,476** (273,501G 270,975B)	11,195▼			
# of pregnant women receiving delivery services by skilled birth attendants		30,733	6,404	1,581▼			
# of healthcare facility staff and community health workers trained in infection prevention and control (IPC)^		797 (438 W 359M)	221 (113W 108M)	27▲			
WASH		1,252,028	597,446		2,804,551	707,304	
# of people reached with emergency water services in targeted settlements and communities	1,841,208	(375,608G 388,127B 262,927W 225,366M)	(182,272G 185,613B 118,071W 111,490M)	116,998▼	(841,365 G 981,593 B 504,819 W 476,774 M)	(212,191G 247,557B 127,315W 120,241M)	168,347▼
# of people reached with sanitation services in vulnerable settlements and communities	1,206,309	168,888 (50,666G 52,355B 35,467W 30,400M)	17,880 (5,375G 6,204B 3,251W 3,050M)	16,880 ▲	1,920,000 (576,000G 672,000B 345,600 W 326,400 M)	148,462 (44,462G 51,877B 26,677W 25,198M)	26,726▼
# of people reached with hygiene promotion activities and hygiene kits distribution in vulnerable settlements and communities	3174497	1,196,513 (358,953G 370,918B 251,268W 215,374M)	200,244 (55,618G 56,093B 47,047W 41,486M)	67,951 ▲	3,174,496 (952,349 G 1,111,074B 571,409W 539,664 M)	650,926 (195,277G 227,824 B 117,166W 110,659M)	190,744▲
# of people reached with sustainable access to safe water in targeted settlements and communities	1,777,718	178,683 (53,605G 55,391B 37,523W 32,164M)	240,972 (55,327G 52,674B 72,710W 60,261 M)	31,100▲	1,505,280 (451,584 G 526,848 B 270,950 W 255,898 M)	514,044 (154,211G 179,915B 92,527W 87,391M)	102,690▼
# of people reached through institutional WASH Infection Prevention and Control (IPC) activities	220,000	176,000 (52,800G 54,560B 36,960W 31680M)	10,130 (3,017G 3,510B 1,855W 1,748 M	9,950▲			
Child Protection							
# of children and caregivers accessing community based mental health and psychosocial support services	793,864	230,000 (101,200G 101,200B 15,100W	36,904 (10,875G	8,768▲	521,343 (224,778 G 233,953B	57,590 (16,260G 18,550B	12,441 ▲

		UNICEF and Ips			Cluster/AoR Response		
Sector	Overall needs	2022 target	Total results*	Change since the last report ▲ ▼	2022 target	Total results*	Change since the last report
		12,500M)	11,664B 9,239 W 5,126M)		30,680 W 31,932M)	9,877W 12,903M)	
# of registered unaccompanied and separated children supported with reunification services, family-based care or appropriate alternatives	35,851	15,000 (7,200G 7,800B)	3,852 (1,880G 1,972B)	1,193▼	35,851 (17,208G 18,643 B)	9,175 (4,272G 4,903B)	3,586▲
# of women, girls and boys accessing GBV risk mitigation prevention and response interventions	2,289,689	115,384 (26,028G 14,286B 46,666W 28,404M)	9,027 (3,070G 1,490B 3,803W 664M)	2,955▲			
# of girls and boys released from armed groups and forces, reintegrated with their families/communities, and provided with adequate care and services	12,804	4,170 (490G 3,680B)	890 (157G 733B)	-	5000 (1000 G 4000 B)	1,290 (744G 546B)	200▼
# of individuals targeted with rights- based public outreach and awareness raising activities	1,394,992	260,000 (88,400G 91,000B 36,400W 44,200M)	38,890 (8,683G 7,773B 12,602W 9,832M)	5,799▲	950,684 (294,712G 313,726 B 171,123 W 171,123 M)	189,076 (64,661G 49,978B 49,008W 25,429M)	34,510▲
# people with access to safe channels to report sexual exploitation and abuse		624,554 (223,318G 217,966B 98166W 85,104M)	12,020 (3,397G 4,079B 2,794W 1,750M)	1,494▲	624,554 (223,318G 217,966B 98166W 85,104M)	12,020 (3,397G 4,079B 2,794W 1,750M)	1,494▲
Education							
# of children accessing formal and non- formal primary education	3,000,000	220,000 (110,000G 110,000B)	119,686 (55,005G 64,681B)	14,110▲	833,477 (375,064 G 458,413 B)	249,318 (117,809G 131,509B)	81,170 ▲
# of children accessing appropriate water, sanitation and hygiene facilities, hygiene services, key preventive messages on COVID-19 in learning facilities and safe spaces	3,000,000	160,000 (80,000G 80,000B)	119,686 (55,005G 64,681B)	14,110▲	833,477 (375,064 G 458,413 B)	128,695 (60,006G 68,689B)	54,007 ▲
# of teachers trained in basic pedagogy and psychosocial support		1,200 (480W 720M)	1,367 (473W 895)	-	9,490 (2,373 W 7,117 M)	1,367 (473W 895M)	-
Communication for Development							
# people reached through messaging on the individual, family, and community-level prevention practices and access to services		11,752,897 (5,923,460W 5,829,437M	3,925,574 (2,002,042 1,021,042M)	480,000 ▲			
# of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms		783,527	11,524 (8,706W 2,818M)	-			
Social Protection							
# of households with IPC 3 and above members who are registered unto the Unified Social Registry		24,216	-				
# of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms		24,216	-				

COVID-19 data can be accessed via the following link: https://rebrand.ly/who-covid-somalia-dashboard

^{**} UNICEF has exceeded its measles vaccination target due to the localized measles vaccination campaign conducted to reach 421,322 children under in response to the ongoing measles outbreak.

Annex B

Funding Status*

Funding Status*

Funding Requirements (as defined in the 2022 Humanitarian Appeal)								
Appeal Sector	Requirements*	Funds ava	ailable**	Funding gap				
		Funds Received Current Year	Carry-Over	US\$	%			
Health	\$29,558,054.00	\$7,296,930.31	\$8,649,390.41	\$13,611,733.28	46%			
Nutrition	\$40,627,208.00	\$6,278,894.83	\$13,240,513.39	\$21,107,799.78	52%			
Education	\$23,448,960.00	\$-	\$546,499.59	\$22,902,460.41	98%			
WASH	\$38,051,654.00	\$11,841,000.66	\$5,069,505.12	\$21,141,148.22	56%			
Child Protection	\$31,295,754.00	\$1,250,000.00	\$476,416.20	\$29,569,337.80	94%			
C4D, Community Engagement and AAP	\$3,479,677.00	\$230,000.00	\$419,439.49	\$2,830,237.51	81%			
Social protection	\$7,248,382.00	\$-	\$-	\$7,248,382.00	100%			
Cluster coordination	\$3,301,820.00	\$200,000.00	\$-	\$3,101,820.00	94%			
Total	\$177,011,509.00	\$27,096,825.80	\$28,401,764.21	\$121,512,918.99	69%			

^{*} As defined in Humanitarian Appeal of 2022 for a period of 12 months

UNICEF humanitarian programmes also benefit from resilience funding generously contributed by multiple different donors. Such resources help UNICEF contribute towards both humanitarian efforts and interventions at the nexus between humanitarian and development action

^{**&#}x27;Funds available' includes funding received against current appeal as well as carry-forward from the previous year.