Highlights

- Over 770,000 people have been affected and 230,000 displaced due to ongoing severe floods along the Juba and Shabelle river basins. The floods have critically impacted crops, shelters and critical service infrastructure, including water, health, nutrition and education facilities. The increased risk of water-borne communicable diseases remains a major threat, especially acute watery diarrhoea (AWD)/cholera.

- UNICEF and partners have activated two health centres, two mobile teams and one cholera treatment centre (CTC) in Belet Weyne, while dispatching tents, essential medicines including diarrheal kits to serve a population of 60,000, including 13,600 children under five and 5,400 pregnant and lactating women in the flood-affected areas. Four more mobile health teams are being deployed to support an additional 40,000 people.

- UNICEF and partners are providing emergency WASH services to over 300,000 people in flood affected districts. In Belet Weyne, UNICEF has dispatched 1,200 hygiene kits, is delivering clean water to 5,000 households and providing hygiene promotion activities for 12,000 households.

UNICEF’s Response with Partners

<table>
<thead>
<tr>
<th></th>
<th>UNICEF</th>
<th>Cluster</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Target</td>
<td>Results</td>
</tr>
<tr>
<td>Nutrition: # children 6-59 months with SAM admitted for treatment</td>
<td>173,000</td>
<td>88,678</td>
</tr>
<tr>
<td>Health: # of crisis affected people with adequate access to PHC services provided with emergency life-saving health services in high risk areas</td>
<td>1,400,000</td>
<td>172,103</td>
</tr>
<tr>
<td>WASH: # of emergency affected people with temporary access to adequate and safe water through chlorination, operation and maintenance, water trucking, vouchers and household water treatment</td>
<td>2,000,000</td>
<td>359,727</td>
</tr>
<tr>
<td>Education: # children affected by crisis access formal or non-formal early learning, pre-primary, primary education</td>
<td>120,000</td>
<td>50,791</td>
</tr>
<tr>
<td>Child Protection: # children reached with psychosocial support</td>
<td>50,000</td>
<td>10,818</td>
</tr>
<tr>
<td>Cash Transfers: # of emergency-affected households provided with monthly cash transfers to support access to basic services</td>
<td>50,000</td>
<td>18,979</td>
</tr>
</tbody>
</table>
Situation Overview & Humanitarian Needs
The humanitarian situation in Somalia remains critical due to ongoing impacts of drought, displacement, conflict and now seasonal floods. Increased rainfall since the beginning of April has resulted in a sharp rise in water levels in the Shabelle and Juba rivers, leading to severe flooding in central and southern regions of Somalia. Current flood levels have multiple riverine locations reporting highest water levels in history. Moderate to heavy rains are projected for the coming weeks, but water levels have slowly started to decrease along riverine locations. Close to 770,000 people have been affected and 229,000 displaced because of the floods, with Hiraan, Gedo and Lower Juba regions being the worst affected. The floods have critically impacted crops, shelters and critical service infrastructure, including water, health, nutrition and education facilities. The increased risk of water-borne communicable diseases remains a major threat, including AWD/cholera. Reported priority needs are water, sanitation and hygiene (WASH), shelter and food. Health and nutrition service delivery remains key as the most affected locations already have critical levels of acute malnutrition prior to the floods. Interruption of already limited education services is having a critical impact on learners, so early action to restore services remains a key priority.

Beyond the acute impact of the floods, 5.4 million people are still in need of humanitarian assistance throughout Somalia, including 2.8 million children. Although the food security outlook is projected to improve for southern parts of the country over the coming months as a result of the improved rain outcomes and sustained humanitarian action, malnutrition rates however across Somalia remain among the worst in the world, particularly in areas hosting IDPs. In total about 1.2 million children under five are projected to be malnourished in 2018 and of them, 232,000 are expected to be suffering from life threatening malnutrition.\(^1\) Over 4.4 million people need humanitarian WASH services, with 3.5 out of 5 people without adequate water to meet basic needs. More than 5.7 million people require basic health services, including critical needs in maternal and child health, as one in seven Somali children die before the age of five. Disease outbreaks such as acute watery diarrhoea AWD/cholera and measles continue to represent a major threat to children with over 2,146 cases of AWD/cholera (56 per cent children under 5) and 5,242 cases of suspected measles reported as of April 2018.\(^2\) Over 3 million children, out of 4.9 million in country, are estimated to be out of school. More than 2.1 million people have been displaced, including over 1 million in the last year alone;\(^3\) and displacement flows continue at critical levels. Exclusion and discrimination of socially marginalised groups continue to exacerbate high levels of acute humanitarian needs. More than 76 percent of recorded gender-based violence (GBV) survivors are reported to be from IDP communities. Grave violations against children continue at worrying rates with abductions, recruitment and use, as well as killing/maiming reported as the primary concerns.\(^4\)

Humanitarian Leadership and Coordination
UNICEF is part of the Humanitarian Country Team, participates in the Humanitarian Heads of Agencies meetings and the Inter-Cluster Working Group which leads 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 continues to lead the WASH and Nutrition Clusters and the Child Protection Area of Responsibility 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 Clusters are active members of the interagency Drought Operation Coordination Centres (DOCC) in Mogadishu, Baidoa, and Garowe. UNICEF is actively engaging in flood response coordination mechanisms including regional response task forces and national coordination forums.

---
\(^1\) The Nutrition Cluster projections of 1.2 million acutely malnourished are based on the projected burden for the upcoming one year, and include current prevalence based on the FSNAU post-Gu assessment, which stands at 301,000 acutely malnourished children.
\(^2\) Over 78,000 of AWD/cholera and 23,000 cases of measles were reported in 2017.
\(^3\) Cumulative displacements monitored by the UNHCR-led Protection and Return Monitoring Network (PRMN) in the period from November 2016 to November 2017 is now over 1.1 million people.
\(^4\) As recorded in the Monitoring and Reporting Mechanism for grave violations.
Humanitarian Strategy

UNICEF’s ongoing humanitarian action focuses on integrated, multi-sectoral response to drought, displacement, conflict and seasonal floods. In line with the 2018 Somalia HRP, as well as the Humanitarian Country Team (HCT) Centrality of Protection Strategy, UNICEF priorities are to provide life-saving services to address critical malnutrition and excess mortality, effectively respond to mounting protection threats as well as support resilience building and early recovery. UNICEF is maintaining critical service provision in highest need areas, procuring life-saving core pipeline supplies, and continually looking to expand partnerships and coverage in hard to access areas. Life-saving program integration prioritises nutrition, WASH and health services, complemented with child protection and education in emergencies. UNICEF maintains key leadership roles in support of humanitarian coordination as well as active participation in other crucial strategic fora. Humanitarian interventions are closely coordinated with relevant ministries, disaster management agencies and clusters. Where possible, UNICEF is responding jointly with the World Food Programme (WFP) through an augmented response package. In line with Grand Bargain commitments, cash-based assistance is being prioritised. UNICEF will also work towards integrated access to social services in the Somalia Resilience and Recovery Framework, which will inform humanitarian integration and contribute towards longer term, shared outcomes and resilience building, in line with the New Way of Working (NWOW) commitments.

Summary Analysis of Programme Response

Nutrition

The need to sustain lifesaving nutrition services to mitigate the increasing risk of acute malnutrition remains critical due to several aggravating factors including flooding that is ravaging riverine areas, AWD/Cholera outbreaks and displacement. Flooding has disrupted nutrition service delivery in several parts of the country and resulted in closure of more than 20 nutrition sites across the worst affected areas impacting more than 6,000 children on lifesaving SAM treatment. In Belet Weyne, one of the most severely impacted areas, nutrition site admissions have decreased sharply from an average of 450 admissions in January and February to 92 in March, with none reported yet in April due to interrupted service delivery and limited population mobility. UNICEF and partners are working to maintain and re-establish critical service delivery, establishing mobile health and nutrition service delivery sites in places like Belet Weyne to meet urgent needs.

Throughout the country, UNICEF and partners have aimed to maintain the scale of service delivery for children with SAM. From January 2018 to date, UNICEF and partners have reached 88,678 SAM children, surpassing the number treated during the same period in 2017 and exceeding half of the 2018 planned caseload (partner reporting for April stands at 75 percent). Furthermore, UNICEF’s nutrition programme has continued to deliver quality programmes with cure (95.6 percent), death (0.5 percent) and default (2.8 percent) rates within the acceptable SPHERE thresholds. Notably, UNICEF continues to focus on IDPs through integrated service delivery packages including health, nutrition and WASH services to respond to the needs of displaced persons. Moving forward, UNICEF will continue to advocate for and mobilise resources to support re-opening of nutrition services and airlifting of lifesaving commodities to areas affected by floods. This will ensure continuum of care for children on treatment and prevent further deterioration of the nutrition situation, particularly in IDPs and other vulnerable groups.

Health

UNICEF and partners continue to provide emergency life-saving health services to crisis affected women and children in high risk areas of the country through sustained access to emergency, life-saving primary healthcare services. Since the start of the year, 172,103 beneficiaries, including 61,605 pregnant and lactating women, have received access to critical health services through UNICEF supported facilities. In response to recent floods, UNICEF has activated two health centres, two mobile teams and one cholera treatment centre (CTC) in Belet Weyne, while dispatching tents, essential medicines including diarrheal kits to serve a population of 60,000 people, including 13,600 children under 5 and 5,400 pregnant and lactating women in affected areas. Four more mobile health teams are being deployed to support an additional 40,000 people. 5,242 suspected measles cases have been reported this year, 72 percent being children under 5. UNICEF and partners supported the national measles vaccination campaign in the first quarter of 2018 targeting 4,624,869 children between 6 months and 10 years, achieving a 96 percent coverage rate. From January to April 2018, 2,146 cases of AWD/cholera, including 8 deaths, have been recorded in the country, with 1,185 (55 percent) treated at UNICEF supported facilities.

WASH

UNICEF and partners are providing emergency WASH services to over 300,000 people in flood affected districts. In Belet Weyne, UNICEF has dispatched 1,200 hygiene kits, is delivering clean water to 5,000 households through water trucking

---

5 Priority regions for response are Bay, Bakool, Gedo, Lower Shabelle, Galgaduud, Mudug, Sanaag, Sool, Bari and Nugaal given the high malnutrition rates
and providing hygiene promotion activities for 12,000 households. UNICEF is working to resupply regional supply hubs, managed by the WASH cluster, with 40,000 additional hygiene kits for distribution in flood affected areas.

During the month of April, UNICEF and partners reached 112,905 people with temporary water supply through trucking and vouchers: in central and southern regions, 75,105 people were reached in Baidoa (Bay region), Kaxda and K13-K14 areas (Banadir region), Jowhar (Middle Shabelle) and Dollow (Gedo); in Puntland, 31,800 were reached in Sanaa, Sool, Mudug and Nugaal regions including 1,800 people displaced because of the ongoing conflict in disputed areas between Somalia and Puntland; while in Somaliland, water trucking services benefitted 6,000 people. In April, an additional 131,349 people accessed sustained water supply services through the extension of the Burtinle water supply system (Nugaal region), the rehabilitation of 44 shallow wells in Xudur and Waajid (Bakool) and in Baidoa (Bay) as well as the construction of two mini water systems in Ceel Afwyn (Sanaag). Through the construction of emergency latrines and more sustainable community hygiene facilities, 19,908 people benefitted from adequate sanitation in Nugaal, Baidoa (Bay), Xudur (Bakool) and Somaliland. The construction of institutional latrines in Baidoa, Xudur and in Somaliland permitted 6,939 children to have access to adequate sanitation facilities in schools, learning environment and health facilities; 8,685 women in reproductive age including 2,185 school girls were sensitized on menstrual hygiene management in Baidoa and Xudur while hygiene promotion messages reached 109,313 people based in different IDP settlements.

**Education**

Since the beginning of the year, UNICEF and partners have provided quality education services to a total of 50,791 children (42 per cent girls) across Somalia, including 37,554 children (47 per cent girls) assisted with essential learning materials and 39,472 children (47 per cent girls) assisted with school fees support and emergency feeding in the form of emergency school grants, mostly in the areas with large influxes of IDPs. During the month of April, UNICEF and partners continued service delivery to the same cumulative caseload assisted in March. UNICEF and its partners are working to rollout five new integrated response projects, which incorporate WASH and child protection activities, to serve and additional 36,300 children in 168 schools in Bay, Bakool, Gedo, Galgaduud, Banadir, Hiraan, and Middle Shabelle regions. These new projects are expected to commence by the end May 2018, with a key focus on flood response activities. The end-year national examination for Somali children (to be held from the end of May to June) has been massively disrupted by recent flooding, and UNICEF is working with the Ministry of Education and partners and finding solutions for children to sit for exams. In Belet Weyne, Hiraan region, the overflowing Shebelle River has damaged at least 45 schools accommodating 17,606 learners including 1,300 exam-takers. With the Education Cluster and the inter-agency partners, UNICEF has been leading the Flood Task Force conducting joint field assessments. UNICEF has prepositioned learning materials to be dispatched to over 10,000 children in the worst flood affected areas such as Hiraan, Middle Shabelle, and Banadir regions once flood waters start to subside. UNICEF and partners are aiming to support rapid recovery and re-establishment of services as flood waters recede, to reduce impact on learners.

**Child Protection**

Year to date, 10,818 children have been reached with protection services including access to psychosocial support. During the month of April, 78 Monitoring and Reporting Mechanism on Grave Violations (MRM) case workers received training on responding to sexual and gender-based violence (SGBV) incidents facilitated through a mission from UNICEF’s global GBV team. The overall goal of the mission was to strengthen GBV integration and support implementation of recommendations from a safety-audit exercise conducted in late 2017. Additionally, from 26 to 28 April 2018, the Federal Government of Somalia led the process of drafting a national strategy aiming at preventing child recruitment and facilitating the release and reintegration of children associated with armed forces and armed groups (CAAFAG) in Somalia. 40 participants took part in the workshop, which will inform the finalisation of the National Strategy by June 2018. In April, a total of 4,480 people benefited from UNICEF-supported protection services. They include, 1,972 children (958 girls) who accessed psychosocial support services (PSS), 220 children (50 girls) who were enrolled into reintegration programmes, 356 unaccompanied or separated children (156 girls) who got access to family tracing services, 905 children (476 girls) who benefitted from community-and-school-based mine risk awareness, and 795 people (714 girls and women) who benefitted from GBV services. In April, the MRM team verified 205 cases of grave violations affecting 153 children (29 girls) mostly through abduction (85), recruitment and use (57) and killing/maiming (48).

**Cash-Based Programming**

UNICEF continues a joint intervention with WFP, delivering cash assistance through the SCOPE5 platform, targeting beneficiary households, with UNICEF providing monthly cash transfers for non-food needs, alongside the WFP food assistance. Since July, 2017, UNICEF has reached 18,979 households with monthly cash assistance. The number reached includes 2,993 households in Waajid (6,627 people), 2,887 households in Xudur (6,918 people) and 13,099 households in

---

5 SCOPE is a beneficiary and entitlement information management platform developed by WFP, which also incorporates biometric identification of beneficiaries, allowing for improved targeting, tracking and accountability.
In parallel to the cash assistance, UNICEF is reaching targeted households with a comprehensive package of positive behavioural messages including health, nutrition and hygiene promotion as well as promoting access to basic services. As part of the flood response action, UNICEF is exploring joint response interventions with WFP in some of the worst impacted areas, such as Belet Weyne, where updated targeting is looking to reach some of the most vulnerable households and support them towards early recovery from flood impact. In addition, UNICEF is actively reviewing its cash assistance response strategy to identify and expand early action linkages to emergency safety-nets and gender programming initiatives.

Funding
In line with the 2018 Humanitarian Response Plan, UNICEF appeals for US$ 154,932,574 to sustain provision of life-saving services including critical nutrition, health, WASH, child protection and education in emergency interventions, as well as cash-based assistance for women and children in Somalia. As at 5 May 2018, UNICEF has a funding gap of 71 per cent. UNICEF wishes to express its sincere gratitude to all public and private donors for the contributions received. Continued predictable, flexible and timely donor support is critical to sustaining vital response activities and preventing further deterioration of the situation.

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements*</th>
<th>Funds available**</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>US$</td>
<td>Funds Received</td>
<td>Carry-Over</td>
</tr>
<tr>
<td>Health</td>
<td>34,279,200</td>
<td>5,356,177</td>
<td>3,823,630</td>
</tr>
<tr>
<td>Nutrition</td>
<td>32,200,000</td>
<td>6,957,943</td>
<td>9,026,406</td>
</tr>
<tr>
<td>Education</td>
<td>19,000,000</td>
<td>4,017,035</td>
<td>1,215,650</td>
</tr>
<tr>
<td>WASH</td>
<td>43,006,883</td>
<td>4,900,235</td>
<td>5,739,480</td>
</tr>
<tr>
<td>Child Protection</td>
<td>11,446,491</td>
<td>3,085,214</td>
<td>511,740</td>
</tr>
<tr>
<td>Cash-based response</td>
<td>15,000,000</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td>154,932,574</td>
<td>24,316,603</td>
<td>20,316,906</td>
</tr>
</tbody>
</table>

* 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.

Next SitRep: 15 June 2018
UNICEF Somalia Crisis Facebook: [www.facebook.com/unicesomalia](http://www.facebook.com/unicesomalia)

Who to contact for further information:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Steven Lauwerier</td>
<td>Representative</td>
<td><a href="mailto:slauwerier@unicef.org">slauwerier@unicef.org</a></td>
</tr>
<tr>
<td>Jesper Moller</td>
<td>Deputy Representative</td>
<td><a href="mailto:jmoller@unicef.org">jmoller@unicef.org</a></td>
</tr>
<tr>
<td>Alejandro Guzman</td>
<td>Emergency Manager O/C</td>
<td><a href="mailto:aguzman@unicef.org">aguzman@unicef.org</a></td>
</tr>
</tbody>
</table>
UNICEF SOMALIA SITUATION REPORT, No. 4
Annex A: SUMMARY OF PROGRAMME RESULTS

<table>
<thead>
<tr>
<th>WATER, SANITATION &amp; HYGIENE</th>
<th>UNICEF and IPs</th>
<th>Cluster Response</th>
</tr>
</thead>
<tbody>
<tr>
<td># of emergency affected people with temporary access to adequate and safe water through chlorination, operation and maintenance, water trucking, vouchers and household water treatment</td>
<td>2,000,000</td>
<td>359,727</td>
</tr>
</tbody>
</table>
| # of people with sustained access to safe water through newly built and/or rehabilitated water points | 702,000 | 213,441 | 131,349 ▲ | 1,200,000 | 383,470 | 12,924 ▼ 

| # people access appropriate sanitation facilities | 750,000 | 67,408 | 19,908 ▲ | 840,000 | 101,488 | 45,716 ▲ |
| # of girls/women access menstrual hygiene management services | 312,500 | 11,885 | 8,695 ▲ | 18,500 | 27,175 | 6,939 ▲ |
| # children access WASH facilities in health facilities and learning environments | 18,500 | 27,175 | 6,939 ▲ |

<table>
<thead>
<tr>
<th>EDUCATION</th>
<th>UNICEF and IPs</th>
<th>Cluster Response</th>
</tr>
</thead>
<tbody>
<tr>
<td># children affected by crisis access formal or non-formal early learning, pre-primary, primary education</td>
<td>120,000</td>
<td>50,791</td>
</tr>
<tr>
<td># children receive individual education/early learning materials</td>
<td>100,000</td>
<td>37,554</td>
</tr>
<tr>
<td># temporary learning spaces newly established/rehabilitated with gender sensitive WASH facilities</td>
<td>-</td>
<td>0</td>
</tr>
<tr>
<td># children from the most vulnerable and at risk households receive support for schooling through emergency school cash grants</td>
<td>35,000</td>
<td>39,472</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HEALTH</th>
<th>UNICEF and IPs</th>
<th>Cluster Response</th>
</tr>
</thead>
<tbody>
<tr>
<td># children (6 months-10 years) vaccinated against measles</td>
<td>4,400,000</td>
<td>4,424,261</td>
</tr>
<tr>
<td># of crisis affected people with adequate access to PHC services provided with emergency life-saving health services in high risk areas</td>
<td>1,400,000</td>
<td>172,103</td>
</tr>
<tr>
<td># children (0-59 months) with acute watery diarrhoea treated</td>
<td>44,000</td>
<td>6,261</td>
</tr>
<tr>
<td># of pregnant and lactating mothers reached through antenatal and postnatal consultations</td>
<td>126,000</td>
<td>61,605</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NUTRITION</th>
<th>UNICEF and IPs</th>
<th>Cluster Response</th>
</tr>
</thead>
<tbody>
<tr>
<td># children 6-59 months with SAM admitted for treatment</td>
<td>173,000</td>
<td>88,678</td>
</tr>
<tr>
<td># caregivers of children reached with IYCF counselling</td>
<td>350,000</td>
<td>93,374</td>
</tr>
<tr>
<td>% Children under-5 with SAM admitted in therapeutic feeding programme discharged cured</td>
<td>&gt;75%</td>
<td>95.6%</td>
</tr>
<tr>
<td># Boys and Girls screened for acute malnutrition</td>
<td>1,200,000</td>
<td>-</td>
</tr>
<tr>
<td># Number of OTP sites stocked out of RUTF</td>
<td>&lt;2%</td>
<td>0.3%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CHILD PROTECTION</th>
<th>UNICEF and IPs</th>
<th>Cluster Response</th>
</tr>
</thead>
<tbody>
<tr>
<td># children reached with psychosocial support</td>
<td>50,000</td>
<td>10,818</td>
</tr>
<tr>
<td># children separated from armed forces/groups reached with reintegration support</td>
<td>1,000</td>
<td>452</td>
</tr>
<tr>
<td># of registered unaccompanied/separated children supported with reunification services</td>
<td>3,000</td>
<td>1,736</td>
</tr>
<tr>
<td># children in areas affected by landmines/other explosive weapons reached with prevention interventions</td>
<td>180,000</td>
<td>3,540</td>
</tr>
<tr>
<td># of women and children reached with GBV prevention and response interventions</td>
<td>4,000</td>
<td>2,558</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CASH TRANSFERS</th>
<th>UNICEF and IPs</th>
<th>Cluster Response</th>
</tr>
</thead>
<tbody>
<tr>
<td># of emergency-affected households provided with monthly cash transfers to support access to basic services</td>
<td>50,000</td>
<td>18,979</td>
</tr>
</tbody>
</table>