



Somalia

Humanitarian Situation Report

REPORTING PERIOD: September 2018

SITUATION IN NUMBERS

Highlights

- The global acute malnutrition (GAM) prevalence between August and October 2018 is projected to be above 10 percent in all regions of Somalia except for a few districts in the north west. Between January and September 2018, UNICEF and partners have reached 162,750 children suffering from severe acute malnutrition (SAM) with lifesaving therapeutic nutrition treatment; representing 94 percent of its annual target.
- During 2018, 12 polio cVDPV cases, including five cVDPV2 cases, six cVDPV3 cases and one case with cVDPV2 and cVDPV3 co-infection have been reported in central and southern regions. The next polio vaccination response against the type 3 virus is planned to start on 29 October 2018.
- UNICEF has delivered 15 consecutive months of predictable cash assistance to IDP areas in Bay and Bakool reaching 18,979 households, with over US\$ 9 million transferred directly to recipients. As part of its investments in emergency safety nets and social protection, UNICEF will transition to nutrition status-based targeting, where households with children enrolled in SAM therapeutic treatment programs will receive monthly cash assistance to complement treatment outcomes.
- In September, 6,690 children were enrolled in education services, leading to UNICEF and partners achieving the enrolment of 78,044 children (42 per cent girls) across Somalia in 2018.

4.6 million

People in need of humanitarian assistance (FSNAU-FEWSNET Technical Release, September 2018)

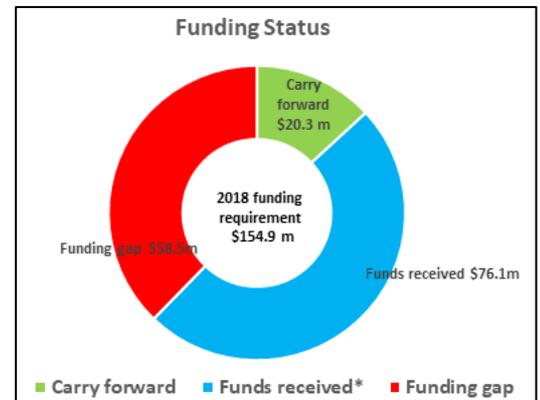
954,000

Children under-5 that are or could be acutely malnourished in the next year (September 2018 – September 2019)

2.6 million

People internally displaced throughout Somalia

UNICEF 2018 Appeal: US\$ 154.9m



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

UNICEF's Response with Partners

	UNICEF			Cluster		
	UNICEF Target	Total Results	Target achieved (%)	Cluster Target	Total Results	Target achieved (%)
Nutrition: # children 6-59 months with SAM admitted for treatment	173,000	162,750	94%	232,000	174,020	75%
Health: # of crisis affected people with adequate access to PHC services provided with emergency life-saving health services in high risk areas	1,400,000	601,559	43%			
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	2,000,000	1,102,608	55%	3,800,000	1,451,455	38%
Education: # children affected by crisis access formal or non-formal early learning, pre-primary, primary education'	120,000	78,044	65%	381,556	174,182	46%
Child Protection: # children reached with psychosocial support	50,000	26,308	53%	150,000	34,667	23%
Cash Transfers: # of emergency-affected households provided with monthly cash transfers to support access to basic services	50,000	18,979	38%			

Situation Overview and Humanitarian Needs

Despite improvements in food security, major humanitarian needs in Somalia persist, particularly among IDP populations, due to residual impacts of drought, ongoing displacement, conflict and marginalization. As per the FSNAU-FEWSNET 2018 Post Gu findings¹, 4.6 million people are still in need of urgent assistance, including an estimated 2.5 million children. Malnutrition rates across Somalia remain among the worst in the world. In total, more than 954,000 children under-5 are projected to be acutely malnourished in the coming year, including, 173,000 expected to be suffering from severe acute malnutrition.² The displaced population in Banadir region remains in critical conditions with malnutrition, diseases and death rates all remaining at emergency levels as reported by the FSNAU Post Gu findings; large scale displacement continues, particularly in Lower Shabelle. Over 4.4 million people need humanitarian WASH services, with 3.5 out of 5 people without adequate safe 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 eight Somali children die before the age of five. Disease outbreaks such as AWD/cholera and measles continue to represent a major threat to children with 7,699 suspected measles cases (73 per cent being children under-5) and 6,109 suspected cases of AWD/cholera with 41 deaths reported in 2018. Over 3 million children, out of 4.9 million in the country, are estimated to be out of school. More than 2.6 million people have been displaced, including over 1 million in the last year alone³ 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 per cent of recorded gender-based violence (GBV) survivors are reported to be from IDP communities⁴. Mass recruitment of children remains a major protection concern. According to the Country Taskforce on monitoring and reporting on grave violations against children, a total of 693 children (682 boys, 11 girls) were recruited between August and September 2018, with September accounting for half of the recruitment caseload. Currently, 1,052 children formerly associated with armed forces and groups (851 boys, 201 girls), including additional 9 boys in September are under the care of UNICEF-supported reintegration programs.⁵ Fighting between Somaliland and Puntland Forces has paused over the past months, but the situation remains volatile due to the lack a political settlement.

Humanitarian Leadership and Coordination

UNICEF is an active member of the Humanitarian Country Team (HCT), and participates in 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 HCT 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 Disaster Operation Coordination Centre in Mogadishu (DOCC).

Humanitarian Strategy

UNICEF's ongoing humanitarian action focuses on integrated, multi-sectoral response to residual drought impact, displacement, conflict, disease outbreaks and seasonal floods. In line with the 2018 Somalia Humanitarian Response Plan (HRP), as well as the HCT Centrality of Protection Strategy, UNICEF's 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.⁶ Life-saving programme 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 including integrated treatment of acute malnutrition and joint humanitarian cash interventions. In line with Grand Bargain commitments, cash-based assistance is being prioritised where appropriate. 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.

¹ FSNAU-FEWSNET 2018 Post Gu Technical Release, 01 September 2018.

² The Nutrition Cluster projections of 954,000 acutely malnourished are based on the projected burden for the coming twelve months and include current prevalence based on the FSNAU 2018 post-Gu assessment, which stands at 295,000 acutely malnourished children.

³ Cumulative displacements monitored by the [UNHCR-led Protection and Return Monitoring Network \(PRMN\)](#) as of June 2018.

⁴ 2018 Humanitarian Needs Overview.

⁵ As recorded in the Monitoring and Reporting Mechanism for grave violations.

⁶ Priority regions for response are Bay, Bakool, Gedo, Lower Shabelle, Galgaduud, Mudug, Sanaag, Sool, Bari and Nugaal given the high malnutrition rates.

Summary Analysis of Programme Response

Nutrition

The FSNAU has projected the global acute malnutrition (GAM) prevalence between August and October 2018 to be above 10 percent in all regions of Somalia except for a few districts in the north west. Thus, the delivery of lifesaving nutrition services to the neediest children will remain a priority for UNICEF and partners. Consequently, between January and September, UNICEF and partners have reached 162,750 children suffering from life threatening severe acute malnutrition (SAM) with lifesaving services. This number reached represents 94 percent of the annual target with treatment outcomes consistent with Sphere standards; 95.5 percent cure rate, 0.4 percent death rate and 2.9 percent default rate.

Although 94 percent of the annual target has been reached, the trend in admissions of children with SAM has continued to decline through the third quarter consistent with the reduction in GAM prevalence from 17.4 to 14 percent in the post Gu period of 2017 to in 2018 respectively. However, despite the marginal improvements in the overall nutrition situation, pockets of above emergency GAM prevalence continue to persist in IDP camps notably; Mogadishu, Baidoa, Doloow, Qardho, Bosasso, Garowe, Galkayo reported above emergency GAM rates.

A further review of the integrated treatment and care of acute malnutrition continues to show gaps in the management of moderate acute malnutrition. Therefore, in consultation with WFP, the district of Mahas in Hiran region of central south Somalia has been added to list of hard-to-reach areas for the implementation of the Expanded Admission Criteria (EAC) where the treatment for MAM is not available. Since August 2018, UNICEF has reached over 1,800 children affected by MAM with treatment under the EAC in Elwak, Ceeldheer, Ceelbur, Baidoa, Tayeeglow, Burhakaba and Badhadhe.

In the coming months, UNICEF will continue to focus on delivering an integrated response, ensuring prioritization of the neediest populations including IDPs and other marginalised population groups in hotspot and hard-to-reach areas.

Health

UNICEF continues to provide emergency health services to people in Somalia affected by humanitarian situations. 601,559 people, including 196,517 pregnant and lactating women have been provided with critical life-saving health services during 2018. In September, essential medicines for an estimated 235,000 beneficiaries were released in vulnerable areas in northern regions of Somalia, with three new partnerships activated to respond to the emergency health needs of an estimated 350,000 in Sool, Sanaag, Togdheer and Awdal regions. Additional essential supplies including diarrheal disease kits for possible, end-year cyclical outbreak have been prepositioned in strategic regional hubs to respond to emergency health needs on timely basis. Disease outbreaks such as AWD/cholera and measles continue to represent a major threat to children with 7,699 suspected measles cases (73 per cent being children under-5) and 6,109 suspected cases of AWD/cholera with 41 deaths reported in 2018.

During 2018, 12 polio cVDPV cases, including five cVDPV2 cases, six cVDPV3 cases and one case with cVDPV2 and cVDPV3 co-infection have been reported in central and southern regions of Somalia, according to the UNICEF and WHO tracking report. The latest was a cVDPV type 3 from Middle Shabelle, Runingod District, Masajid village (a nomadic settlement), in a 5-month old boy, with no history of vaccination with oral polio vaccine (OPV); the source district has been inaccessible for the last 10 years due to security and children unvaccinated in the area. The next polio response against the type 3 virus is planned to start on 29 October 2018. A strong coordination with humanitarian partners is critical to ensure all opportunities are leveraged to deliver the polio vaccine during the campaign at food and nonfood items distributions points and between polio rounds during the registration of new arrivals or animal focused activities.

WASH

With the AWD/cholera situation stabilizing across the country, UNICEF emergency WASH interventions continued in parallel to recovery efforts. 152,600 people were reached with emergency water supply through water voucher, water trucking or chlorination of shallow water sources in Banadir, Belet Weyne, Bulo Burde, Jalalaqsi and Baidoa IDP camps. At the Baidoa IDP camps, the water supply situation is still precarious and through UNICEF work with the Ministry of Energy and Water Resources, 30,000 people continued to receive emergency water supply and a total of 593 water sources were chlorinated to ensure safe water access. In Somaliland, 3,600 people accessed safe water through water trucking in Lughaya town of Awdal region. In Puntland, through collaboration with PSAWEN, 4,000 people at the Jillab IDP settlement accessed sustained water supply upon the completion construction of the new water supply system; the water system includes a newly drilled and equipped borehole, water storage tank, pipeline extension and water collection kiosks. In Somaliland, the

rehabilitation of Garbodadar, Gargara and Damasha mini water systems ensured sustained water access for 22,284 people in the area.

Along with the emergency water supply, hygiene promotion through house-to-house visits were conducted across the country reaching 137,000 people in central and southern regions, in 15 villages affected by cyclone Sagar in Awdal, Somaliland, as well as in Garowe IDP camps. A total of 5,257 hygiene kits were also distributed to benefit 31,542 people in central and southern regions.

Education

In September, 6,690 additional children were enrolled in education services, leading to UNICEF and partners achieving the enrolment of 78,044 children (42 per cent girls) across Somalia so far in 2018. In central and southern regions, 150 teachers (35 women) received trainings on improved education service delivery, as well as monthly incentives to retain them in teaching roles. Additionally, 350 community education committee (CEC) members (122 female) in Banadir region were trained on social mobilization, advocacy and school management. Moreover, in north west region, the UNICEF-supported partner, AYODA, conducted trainings for 350 CEC members in 50 new schools in Awdal region. In Awdal region, CEC members were trained on cash grant utilization, resource mobilization and school improvement planning. CEC members are now finalizing the identification of priority needs of their schools, enabling localization of the response. Additionally, UNICEF prepositioned 50 school-in-box and 50 recreational kits for schools in Awdal region.

Child Protection

The month of September has marked the beginning of a sustainable capacity building initiative: six Somali public and private universities have started enrolling students for certificate, diploma and degree courses on social work. This government led process with UNICEF support will enable humanitarian workers and civil servants to acquire skills to deliver social services to vulnerable groups. During the reporting period, the second phase of the DFID funded children on the move programme has started with a focus on access to multi-sectoral services to unaccompanied and separated children in Puntland and Somaliland.

In terms of access to child protection services, a total of 9,258 people benefited from UNICEF-supported programmes. This includes 2,870 children (1,240 boys and 1,630 girls) who accessed psychosocial support; 426 (250 boys, 176 girls) separated and 148 (92 boys, 56 girls) unaccompanied children who were identified and documented; 3,415 children (1,594 boys and 1,821 girls) who benefitted from community-and-school-based mine risk awareness; and 1,021 people (331 girls, 137 boys and 553 women) who accessed to GBV services. Mass recruitment of children remains a major protection concern, and Al-Shabaab continues to put pressure on children and their parents for forced recruitment. According to the Country Taskforce on monitoring and reporting on grave violations against children, a total of 693 children (682 boys, 11 girls) were recruited between August and September 2018, with September accounting for half of the recruitment caseload. During the reporting period, Galmudug State authorities handed over 78 children including 15 boys to UNICEF partners in Dhussamareb, that were separated from their families who fled from Al-Shabaab recruitment and 63 children who were formerly associated with AS. This brings to 1,052 children formerly associated with armed forces and groups (851 boys and 201 girls) benefiting from UNICEF-supported reintegration programs, between January and September.

Overall, the CPWG has reached 235,865 people with prevention and response services, including 137,416 children (71,489 boys and 65,927 girls).

Cash-Based Programming

UNICEF, through its joint intervention with WFP, has delivered, since July 2017, 15 consecutive months of predictable cash assistance to beneficiaries in Bay and Bakool through the WFP SCOPE⁷ platform; reaching 18,979 households, including 2,993 households in Waajid (6,627 people), 2,887 households in Xudur (6,918 people) and 13,099 households in Baidoa district (62,791 people). Over US\$ 9 million were transferred directly to beneficiary households in the target areas. The intervention aimed to reach IDPs in those areas as part of the pre-famine response. In addition to the monthly unconditional cash assistance, UNICEF was also reached the targeted households with a comprehensive package of positive behavioural messages including health, nutrition and hygiene promotion, while aiming to enhance access to basic services. Programme monitoring showed that cash transfers did encourage increased uptake of services, as 62.9 percent of households used part of their cash allowance towards medicine/health and 62.8 percent of them for education. Over 63

⁷ 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.

percent of households also used part of their cash for repayment of debts; this is an important usage for increasing household resilience, avoiding adoption of negative coping mechanisms.

Now, although the overall livelihood and food security situation has generally improved in target areas, acute malnutrition rates remain critical among IDP populations in those same areas. Hence, as part of its transition to emergency safety net programming, UNICEF will transition to targeting households through admissions in severe acute malnutrition treatment programs, as a proxy identifier of extreme vulnerability. Households with children enrolled in the therapeutic treatment programs will be enrolled to receive monthly cash assistance with the aim complementing therapeutic programs by promoting improved dietary diversity, positive feeding and hygiene practices, reduce incentives to share therapeutic commodities at household level and address extreme poverty – all recognized as root causes of acute malnutrition. UNICEF will build this transition on evidence based from regional programs showing significant enhancement of nutritional outcomes when combined with complementary cash. The current IDP-based targeting assistance is expected to end in December 2018, with transition to nutrition-based targeting in the first months of 2019.

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. To date and thanks to generous contributions from USAID/OFDA, DFID, Japan, ECHO and other donors, UNICEF Somalia has a remaining funding gap of 38 per cent. Adequate and timely funding support is key to not only maintain life-saving interventions, but to also respond effectively to new emergency and humanitarian situations. UNICEF wishes to express its sincere gratitude to all the public and private donors for their continued generosity and contributions. Continued predictable, flexible and timely donor support is critical to sustaining vital response activities and preventing further deterioration of the situation.

Funding Requirements (as defined in the 2018 Humanitarian Appeal)

Appeal Sector	Requirements*	Funds available**		Funding gap	
		Funds Received Current Year	Carry-Over	US\$	%
Health	34,279,200	15,773,676	3,823,630	14,681,894	43%
Nutrition	32,200,000	24,568,636	9,026,406	0.00	0%
Education	19,000,000	5,622,587	1,215,650	12,161,763	64%
WASH	43,006,883	17,285,896	5,739,480	19,981,507	46%
Child Protection	11,446,491	8,358,275	511,740	2,576,476	23%
Cash-based response	15,000,000	4,507,728	-	10,492,272	70%
Total	154,932,574	76,116,798	20,316,906	58,498,870	38%

* 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: 20 November 2018

UNICEF Somalia Crisis: <http://www.unicef.org/Somalia>

UNICEF Somalia Crisis Facebook: www.facebook.com/unicefsomalia

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 Response		
	2018 Target	Total Results	Change since last report ▲ ▼	2018 Target	Total Results	Change since last report ▲ ▼
WATER, SANITATION & HYGIENE						
# of emergency affected people with temporary access to adequate and safe water through chlorination, operation and maintenance, water trucking, vouchers and household water treatment	2,000,000	1,102,608	No change	3,800,000	1,451,455	261,812 ▲
# of people with sustained access to safe water through newly built and/or rehabilitated water points	702,000	402,825	26,284 ▲	1,200,000	657,035	16,218 ▲
# people access appropriate sanitation facilities	750,000	148,498	No change	1,000,000	180,169	11,400 ▲
# of girls/women access menstrual hygiene management services	312,500	35,310	No change			
# children access WASH facilities in health facilities and learning environments	18,500	46,227	No change			
EDUCATION						
# children affected by crisis access formal or non-formal early learning, pre-primary, primary education	120,000	78,044 (42%F)	6,690 ▲	381,556	174,182 (45%F)	5,767 ▲
# children receive individual education/early learning materials	100,000	59,252 (47%F)	3,509 ▲	278,025	155,053 (44% F)	8,040 ▲
# temporary learning spaces newly established/rehabilitated with gender sensitive WASH facilities	100	25	No change	683	184	25 ▲
# children from the most vulnerable and at risk households receive support for schooling through emergency school cash grants	35,000	55,743 (47%F)	No change	35,000	55,743 (47% F)	20,743 ▲
HEALTH						
# children (6 months-10 years) vaccinated against measles	4,400,000	4,424,261	No change			
# of crisis affected people with adequate access to PHC services provided with emergency life-saving health services in high risk areas	1,400,000	475,966	125,593 ▲			
# children (0-59 months) with acute watery diarrhoea treated	44,000	20,151	3,334 ▲			
# of pregnant and lactating mothers reached through antenatal and postnatal consultations	126,000	196,517	31,609 ▲			
NUTRITION						
# children 6-59 months with SAM admitted for treatment	173,000	162,750	14,006 ▲	232,000	174,020	3,865 ▲
# caregivers of children reached with IYCF counselling	350,000	166,276	No change ⁸	463,472	212,836	15,089 ▲
% Children under-5 with SAM admitted in therapeutic feeding programme discharged cured	>75%	95.5%	0.1% ▼	>75%	95.6%	0.1% ▲
# Boys and Girls screened for acute malnutrition	1,200,000	317,767	No change	1,200,000	396,081	45,103 ▲
# Number of OTP sites stocked out of RUTF	<2%	1%	0.8% ▲	<2%	0%	0.1% ▼
CHILD PROTECTION						
# children reached with psychosocial support	50,000	26,308	2,870 ▲	150,000	52,551	17,884 ▲
# children separated from armed forces/groups reached with reintegration support	1,000	1,052	9 ▲			
# of registered unaccompanied/separated children supported with reunification services	3,000	4,375	574 ▲	8,000	5,838	608 ▲
# children in areas affected by landmines/other explosive weapons reached with prevention interventions	180,000	17,340	3,409 ▲	85,250	5,216	336 ▲
# of women and children reached with GBV prevention and response interventions	4,500	6,640	279 ▲			
CASH TRANSFERS						
# of emergency-affected households provided with monthly cash transfers to support access to basic services	50,000	18,979	No change			

⁸ Data for IYCF counselling and nutrition screening was not collected during the month of September due to technical issues with the digitized Nutrition Cluster reporting system. Updated figures will be provided as soon as reporting mechanism resolved.