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Somalia

Humanitarian Situation Report

SOMALIA SITREP # 6: 01 - 15 MAY 2017

SITUATION IN NUMBERS¹

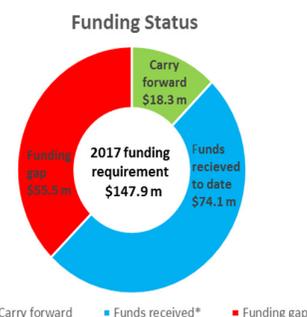
Highlights

- An estimated four million children are in urgent need of humanitarian assistance in Somalia. Despite the large scale humanitarian assistance delivered, the FSNAU-FEWSNET post Jilal assessment indicates an elevated risk of famine (IPC 5) due to a combination of severe food insecurity, high acute malnutrition, and high disease burden. The number of people in need has increased to 6.7 million, including 3.2 million people in crisis.
- More than 7,000 measles cases have been reported across Somalia since the start of the year, exceeding the total 2016 caseload. UNICEF and partners continue to scale up the response with more than 350,000 children immunised against measles in 2017.
- In light of the scale of internal displacements to urban centres, it is critical to scale up access to sanitation and hygiene services. More than 30,000 emergency latrines need to be built to avoid further disease outbreaks, in particular as the rainy season sets in.

6.7 million
People in need of humanitarian assistance

1.4 million
Children under-5 acutely malnourished

UNICEF 2017 Appeal - US\$ 147.9 million



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

UNICEF's Key Response with Partners in 2017

Indicators	Cluster for 2017			UNICEF for 2017		
	Cluster Target	Cumulative results (#)	Target achieved (%)	UNICEF Target	Cumulative results (#)	Target achieved (%)
Health: # of crisis affected women and children provided with emergency lifesaving health services				731,000	556,560	76.1
Nutrition: # of children under-5 with Severe Acute Malnutrition admitted in Therapeutic Feeding Programmes	346,000	87,576	25.3	277,000	76,453	27.6
Education: # of children accessing safe and protected learning opportunities in emergency-affected environments	219,869	113,073	51.4	87,600	60,259	68.8
WASH: # people provided with temporary access to safe water	2,500,000	2,506,600	100.3	1,500,000	1,546,166	103.1
Child Protection: # of separated and unaccompanied children identified and registered	7,000	1,443	20.6	6,885	1,443	21.0
Cash transfers: # of emergency-affected households provided with monthly cash transfers to support access to basic services				60,000	1,182	2.0

¹2017 Revised Somalia Humanitarian Response Plan (HRP), OCHA

Situation Overview and Humanitarian Needs

The humanitarian situation in Somalia continues to deteriorate due to the severe drought, with an estimated four million children in urgent need of assistance. Despite the large scale humanitarian assistance delivered, the FSNAU-FEWSNET post Jilal assessment² indicates an elevated risk of famine (IPC 5), due to a combination of severe food insecurity, high acute malnutrition, and high disease burden. The number of people in need has increased to 6.7 million, including 3.2 million people in crisis and 4.5 million people estimated to be in need of water, sanitation and hygiene (WASH) assistance. The projected number of children who are, or will be, acutely malnourished has increased by 50 per cent since the beginning of the year to 1.4 million, including over 275,000 who have or will suffer life-threatening severe acute malnutrition in 2017.

Severely malnourished children are nine times more likely to die of killer diseases like acute watery diarrhoea (AWD)/cholera and measles. During the 2011 famine that killed an estimated 260,000 people, over half of them young children, the main causes of death among children were diarrhoea and measles. As of week 18, close to 38,000 cases of AWD/cholera have been reported;³ 2.4 times more than the 2016 caseload. Since the start of the year, 683 deaths have been recorded, with a case fatality rate (CFR) of 1.8 per cent. More than 7,000 measles cases have been reported since the start of the year. UNICEF is scaling up its response with emergency health and WASH teams roving across the affected locations to train partners, supporting case management, sanitation and ensuring affected populations access safe water. Life-saving supplies are being pre-positioned with partners and at facility level and coordination is ongoing with the World Health organization (WHO), the Ministry of Health (MoH) and partners to train and deploy integrated emergency response teams. Vaccination campaigns for measles are also ongoing in targeted hotspots.

An estimated 80,000 children enrolled in schools (9 per cent) have been forced out of education due to school closures and children migrating with families. Bay, Bakool, Gedo, Sool and Sanaag regions are the most affected, with up to 30 per cent of children enrolled affected. Internal displacement to urban centres is also increasing tensions between host communities and IDPs over limited resources and out-of-school children are at further risk of exploitation and recruitment into armed groups.

The drought is also uprooting people, with 683,000 displaced since November 2016, adding to the 1.1 million existing internally displaced persons (IDPs).⁴ This includes 155,000 newly displaced in Baidoa and 147,000 in Mogadishu since the start of the crisis.

Humanitarian Leadership and Coordination

UNICEF actively participates in the Humanitarian Country Team, Humanitarian Heads of Agencies meetings and the Inter-Cluster Working Group, which lead 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 leads the WASH and Nutrition Clusters and the Child Protection Working Group, 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 Cluster are active members of the interagency Drought Operation Coordination Centres (DOCC) in Mogadishu, Baidoa and Garowe.

Humanitarian Strategy

UNICEF is prioritising an integrated WASH, health and nutrition response in drought-affected areas of Somalia with a focus on providing life-saving services to avert a famine and prevent excess mortality. This will be achieved with a rapid scale-up of the UNICEF response, through the procurement at scale and in a timely manner of life-saving core pipeline supplies, an increase in partnerships and coverage, as well as the expansion of critical services in the most affected areas. Priority regions are Bay, Bakool, Gedo, Lower Shabelle, Galgaduud, Mudug, Sanaag, Sool, Bari and Nugaal in light of the malnutrition rates. This response is complemented with education interventions and monitoring of family separation as families are on the move. To ensure a timely response, UNICEF has pre-positioned essential supplies in affected areas at facility level and with partners.

UNICEF is coordinating and scaling up its interventions with line ministries, disaster management agencies and relevant Clusters to ensure there is no duplication in the response and that critical gaps are covered. Where possible, UNICEF

² FSNAU-FEWSNET alert, 09 May 2017.

³ Situation Report for acute watery diarrhoea/cholera, Epidemiological week 18 (1st-7th May 2017), Somali Federal Government Ministry of Health and WHO

⁴ UNHCR PRMN Somalia Update, 30 April 2017.

is responding jointly with the World Food Programme (WFP) through an augmented response package which includes unconditional food assistance, preventive and curative nutrition programmes, livelihood activities, health services and support to communities to access safe water and improve sanitation and hygiene conditions with the overall objective to halt the deteriorating food security and malnutrition situation in drought affected areas. In line with Grand Bargain commitments, cash-based assistance will be prioritised.

Summary Analysis of Programme Response

HEALTH: Since the start of the year, UNICEF and partners have provided emergency health care to 556,560 people across Somalia. This includes 163,776 children under-5 (29 per cent), 133,574 women of child bearing age (24 per cent) and 122,443 men (22 per cent). In central and southern regions, UNICEF and partners are supporting 49 health centres and 30 mobile/outreach services reaching 333,936 people, including 66,787 children (under-5). In Puntland, UNICEF, the MoH and partners are providing 55,656 people, including 11,131 children (under-5), with access to emergency health services through 36 mobile units and 4 health centres. In Somaliland, 166,968 people, including 33,394 children under-5 are being reached through 56 health facilities and 28 integrated health and nutrition mobile teams.

UNICEF continues to scale up the integrated response to contain the AWD/cholera outbreak. UNICEF is now supporting 69 cholera treatment facilities (CTC/CTU), including 52 in central and southern regions, 14 in Puntland and three in Somaliland. Nearly 38,000 AWD/cholera cases and 683 deaths (CFR 1.8 per cent) have been recorded from 52 districts and 14 regions. Children under-5 account for 35 per cent of the cases and have a higher CFR (2.4 per cent). The first round of the Oral Cholera Vaccination (OCV) campaign is under way in Jowhar and Baidoa, targeting more than 400,000 people. UNICEF has also sensitised 667,598 people using AWD/cholera related information, education and communication materials in health facilities and has pre-positioned life-saving health supplies to support 42,000 people in Mogadishu, Bossaso, Gaalkacyo, Berbera and Hargeysa.

As of 7 May, 7,031 suspected cases of measles (fever and rash) have been reported. Four out of eight samples from Mogadishu were confirmed as measles and no case was positive for rubella. The age range of confirmed measles cases is between 2 months and 14 years. UNICEF, WHO and the MoH have developed a measles outbreak response strategy targeting 748,447 children (aged 6 – 59 months) in hotspots areas. In Somaliland, 252,827 children (100 per cent of the target) were vaccinated and 253,295 children provided with Vitamin A. In Baidoa, 29,228 children (101 per cent of the target) were reached, as well as 15,615 children in Gaalkacyo. Additional campaigns are planned from 21 to 24 May targeting 126,000 children in the Afgooye corridor and 166,000 children in Puntland.

NUTRITION: Since January, UNICEF and partners have treated 76,453 severely malnourished children, with a recovery rate of 92.9 per cent, in line with Sphere standards. This is double the number of admissions in the same period in 2016. UNICEF and partners also screened 285,664 children and 71,411 pregnant and lactating women (PLW) who were provided with the integrated basic nutrition services package (BNSP). As a result, 19,460 children with severe acute malnutrition (SAM) were admitted during the reporting period for treatment in mobile and fixed outpatient therapeutic programmes (OTP), 28 per cent of the quarterly target of 69,250 admissions (April to June).

In line with the pre-famine response plan, UNICEF and nutrition partners have continued to scale up SAM treatment services. UNICEF has increased the number of nutrition facilities supported in 2017 from 538 to 758, with new facilities supported in hard-to-reach areas of southern regions, such as Middle Juba.

UNICEF has pre-positioned nutrition supplies in the Gaalkacyo warehouse to treat 12,250 children, with two-thirds under distribution to partners. An additional 5,100 cartons of ready-to-use therapeutic foods (RUTF) have been pre-positioned in the Doolow warehouse and 6,000 cartons in the Bossaso and Berbera warehouses. Airlifting of nutrition supplies to Diinsoor and Qansax Dheere is underway to ensure continuity of the nutrition response in Bay region.

WASH: Since the start of 2017, UNICEF and partners have provided more than 1.55 million people with temporary access to safe water (against the overall planned target of 1.5 million in 2017). This includes 288,864 people reached in Puntland, 178,770 in Somaliland, and 1,078,532 in central and southern regions. UNICEF is also providing safe water to 103 affected schools, benefitting 11,564 pupils. As part of the water trucking exit strategy, UNICEF is also supporting the rehabilitation of sustainable water sources, reaching an estimated 329,302 people.

In response to the AWD/cholera outbreak, UNICEF has scaled up its interventions in hotspots and potentially high-risk areas. A total of 13 OTPs and 31 cholera treatment facilities (CTCs/CTUs) are receiving WASH support, including water supply through trucking, installation of sanitation facilities, hygiene promotion and hygiene kits distribution. Four hygiene promoters are stationed at each CTU/OTP to conduct hygiene promotion and assist in case tracing, with a

focus on identifying communities affected by AWD for follow-up. UNICEF also distributed hygiene kits in cholera treatment facilities, benefitting 18,408 people. As the rainy season sets in, UNICEF is scaling up sanitation interventions to reduce the transmission of diseases. UNICEF and partners have constructed 1,079 emergency latrines in IDP sites and cholera treatment facilities which will benefit 71,750 people. Through the UNICEF-supported Regional Supply Hub mechanism, over 500,000 people have been provided with hygiene kits since January 2017 to support safe hygiene practices, household water treatment and safe storage to mitigate the spread of the current outbreak.

EDUCATION: Since January 2017, UNICEF and partners have supported 60,259 children (44 per cent girls) to remain in schools, including 10,553 children supported during the reporting period. In addition, 53,258 children (44 per cent girls) received temporary learning materials. Community-based emergency cash grants have also been provided to 24,181 vulnerable children, including 7,800 during the reporting period. These interventions were complemented with the provision of safe drinking water, installation of latrines, hand washing points and water tanks, supporting 19,790 children (45 per cent girls) in affected areas.

CHILD PROTECTION: Between 1-15 May, 3,060 beneficiaries in host and IDP communities received comprehensive child protection services. This includes 187 gender-based violence (GBV) survivors (61 girls; 12 boys; 114 women) who accessed medical assistance and psychosocial support, as well as 340 separated and unaccompanied children (238 boys; 102 girls) who were identified and registered and accessed protection services across Somalia. Through the community-based child protection mechanism, protection partners also reached 2,533 people (446 boys; 439 girls; 563 men; 1,085 women) with messages aimed at preventing family separation and GBV, including where to get services for those affected. In Beerta Muuri IDP camp in Baidoa, UNICEF supported the construction of a working space which is now used for children’s activities and also a space to listen and consult with families and communities.

In the first half of May, UNICEF and partners admitted 223 children, including 38 girls, in reintegration programmes. There are now 972 boys and 241 girls in the UNICEF-supported reintegration programmes for children associated with armed conflict in Afgooye, Baidoa, Belet Weyne, Garowe, Kismayo and Mogadishu.

During the reporting period, UNICEF and the Global Child Protection Area of Responsibility trained 48 humanitarian workers from child protection agencies on child protection coordination, information management systems and other child protection standards in Hargeysa and Baidoa.

CASH-BASED ASSISTANCE: WFP and UNICEF engaged in a strategic partnership in 2016 to implement an augmented response to address the alarming food insecurity and malnutrition levels in Somalia. Under this partnership, returnee households from Dadaab refugee camp in Kenya received an emergency unconditional cash-based transfer assistance package to help them settle back in their locations of return. This response is being expanded for the pre-famine response to support drought-affected areas with monthly cash transfers for six months. Preparations are under way to provide affected households in Bay and Bakool with cash transfers provided through the SCOPE biometric platform, combined with WFP assistance. Cash assistance will be implemented using a Cash Plus model, where cash recipients are also linked to essential services. It is expected to jointly reach 25,000 households.

C4D: During the reporting period, UNICEF trained vaccination teams in social mobilization in preparation for the measles campaign in Banadir and the Afgooye corridor scheduled for 21-25 May. UNICEF is also revising training modules for the AWD/cholera response to add a stronger component on behaviour change and safe practices.

SUPPLY AND LOGISTICS: In consultation with WFP, UNICEF has positioned a temperature-controlled reefer/storage unit at the Mogadishu International Airport (MIA). This unit will enable temporary storage of regular and temperature sensitive supplies within MIA for quicker access to and from airplanes for urgent emergency supplies. To enhance pre-positioning and enable quick access to emergency supplies for partners around Bay/Bakool, a mobile storage unit has been commissioned by WFP at Baidoa airport. UNICEF has signed a Memorandum of Understanding with WFP for storage and handling of supplies in this unit and shipment to Baidoa is expected to commence in the next few days.

FUNDING: UNICEF is appealing for US\$ 147,918,410 to scale up life-saving assistance for women and children and avert a famine in Somalia. As at 15 May 2017, UNICEF has a funding gap of 38 per cent against the revised appeal. The funding overview detailed in the table below includes US\$ 18,289,814 carry-forward available from 2016, due to multi-year funding planned for 2016/2017 implementation and generous contributions received in late December 2016.

UNICEF wishes to express its sincere gratitude to all public and private donors for the contributions received, including the most recent unearmarked contributions from UNICEF Germany and UNICEF Belgium, as well as from the Central Emergency Response Fund (CERF) in support of health, nutrition and WASH interventions. Continued and timely donor support is critical to scale up the response and avert a famine. Adequate, predictable and flexible resources will allow UNICEF and its partners to respond effectively where needs are greatest and reach the most disadvantaged children.

2017 Funding Requirements				
Appeal Sector	Requirements*	Funds available**	Funding gap	
			US\$	%
Health	22,000,000	20,255,927	1,744,073	8%
Nutrition	40,200,090	27,016,279	13,183,811	33%
Education	16,595,192	7,838,550	8,756,642	53%
WASH	30,000,718	24,254,049	5,746,669	19%
Child Protection	14,115,430	5,961,490	8,153,940	62%
Cash-based response	25,006,980	7,101,969	17,905,011	72%
Total	147,918,410	92,428,264	55,490,146	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.

UNICEF Somalia Crisis: www.unicef.org/Somalia

UNICEF Somalia Facebook: www.facebook.com/unicefsomalia

UNICEF Somalia Appeal: <http://www.unicef.org/appeals/somalia.html>

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Annex A: SUMMARY OF PROGRAMME RESULTS (up to 15 May 2017)

	Cluster Response		UNICEF and IPs	
	Revised 2017 Target	Results	Revised 2017 Target	Results
HEALTH				
# of crisis affected women and children provided with emergency lifesaving health services			731,000	556,560
# of pregnant and lactating mothers reached through Antenatal and Postnatal consultations			85,000	96,234
# of children immunised against measles			340,000	356,282
# of emergency affected pregnant mothers who have received delivery services by Skilled Birth Attendants			22,950	15,875
# of AWD/cholera cases treated at facility and treatment centres			27,500	35,369
NUTRITION				
# of children under-5 with SAM admitted in Therapeutic Feeding Programmes	346,000	87,576	277,000 ⁵	76,453
% of children with SAM under treatment recovered	>93.1%	93.0%	>75%	92.9%
% nutrition centres stocked out of essential nutrition supplies	<10%	0.2%	<2%	0.2%
EDUCATION				
# of children accessing safe and protected learning opportunities in emergency-affected environments	219,869	114,946 (42% F)	87,600	60,259 (44% F)
Average difference in attendance recorded in schools reached	< 30%	N/A	< 30 %	N/A
# of children accessing safe drinking water in schools	186,211*	62,498 (43% F)	63,000	19,790 (45%F)
# of children benefitting from temporary learning material including recreational material	211,806	93,629 (44% F)	87,500	53,258 (44% F)
# of children reached with schools cash grants	49,000	24,181***	49,000	24,181***
WATER, SANITATION and 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	2,500,000	2,506,600	1,500,000	1,546,166
# of people with sustained access to safe water through newly built and/or rehabilitated water points	1,500,000**	607,802	500,000	329,302
# of emergency affected people with access to adequate and appropriate emergency sanitation and hygiene facilities	600,000	268,150	270,000	71,750
# of people with means to practice good hygiene and household water treatment	1,500,000	536,520	1,500,000	536,520
CHILD PROTECTION				
# of separated and unaccompanied children identified, registered and provided with services	7,000	1,443 (550 F)	6,885	1,443 (550 F)
# of children formerly associated with armed forces and armed groups and other vulnerable children provided with inclusive reintegration services	2,463	1,213 (241 F)	2,463	1,213 (241 F)
UNICEF-targeted children and women who experienced or are at risk of sexual violence and received at least one kind of multi-sectoral support service in humanitarian situations.			3,803 (1,963 F)	1,624 (1,442 F)
# of people reached through protection messages	31,870	12,316 (7,181 F)	31,870	12,316 (7,181 F)
CASH TRANSFERS				
# of emergency-affected households provided with monthly cash transfers to support access to basic services			60,000****	1,182

* This target has been revised to align with the final cluster and partner pre-famine plan.

** This target represents a 10% increase (from 30% to 40%) of people in Somalia having sustained access to safe water (based on a population of 12.3 million people).

***This figure has been corrected and adjusted downwards.

****The cash-based interventions will reach around 420,000 people (approximately 254,000 children) in the 60,000 households targeted.

⁵ UNICEF's current pre famine response plan is based on three response scenarios; 1) current (138,500 SAM cases); 2) 50 per cent increase from current situation (208,000 SAM cases); and 3) famine (worst case scenario projected at 277,000 SAM cases). While the Humanitarian Response Plan (HRP) has been revised based on scenario 3, UNICEF's current response is based on scenario 2 but will monitor and report on the overall target (i.e. 277,000).