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August-September 2016 – SOMALIA SITREP #08

SITUATION IN NUMBERS¹

Highlights

- The Food Security and Nutrition Analysis Unit (FSNAU) and the Famine Early Warning Systems Network (FEWSNET) Post Gu 2016 analysis indicates that acute malnutrition has worsened and remains high in many parts of the country. The number of children under the age of 5 estimated to be acutely malnourished has increased to 323,250 and the nutrition Cluster estimates the burden of acutely malnourished children to be 850,000, including 150,000 children likely to be severely malnourished and who face an even higher risk of morbidity and death. The number of people facing acute food insecurity has also risen with 5 million across Somalia in need of humanitarian assistance.
- WFP and UNICEF have engaged in a strategic partnership in 2016, building on the synergies between both organizations to implement an augmented response to address the alarming food insecurity and malnutrition levels in Somalia, and now to support the reintegration of Somali returnees from Dadaab. With support from DFID, WFP and UNICEF are providing emergency unconditional cash-based transfer assistance packages for up to 5,000 refugee households (representing about 35,000 people of which 20,000 children).

5 million

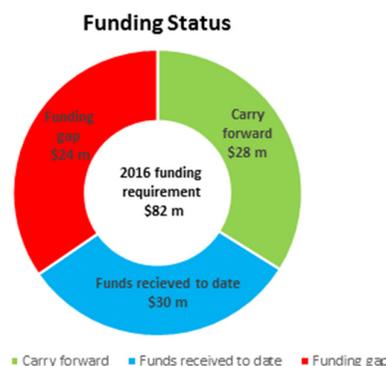
People in need of humanitarian assistance

323,250

Children under-5 acutely malnourished

UNICEF Appeal 2016 - US\$ 82 million*

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



UNICEF's Key Response with Partners in 2016 (as of 31 Aug 2016) Indicators	Cluster for 2016			UNICEF for 2016		
	Cluster Target	Cumulative results (#)	Target achieved (%)	UNICEF Target	Cumulative results (#)	Target achieved (%)
Health: # of children under-1 vaccinated against measles				445,000	723,798	162.7 %
Nutrition: # of children under-5 with Severe Acute Malnutrition admitted in Therapeutic Feeding Programmes	150,000	49,338	32.9%	108,750	46,884	43.1%
Education: # of children and adolescents (girls/boys) have access to education in emergencies	200,000	74,332	37.2%	50,400	26,414	52.4%
WASH: # of people with sustained access to safe water	1,230,000	368,842	30.0%	250,000	241,620	96.6%
Child Protection: # children (girls/boys) formerly associated with armed forces and armed groups and other vulnerable children provided with inclusive reintegration services	3,000	1,944	64.8%	3,000	1,944	64.8%

¹ FSNAU-FEWSNET, Post Gu 2016 Technical Release, September 2016

Situation Overview and Humanitarian Needs

The FSNAU Post Gu 2016 nutrition analysis indicates that acute malnutrition has worsened and remains high in many parts of the country. The number of children under the age of 5 estimated to be acutely malnourished has increased to 323,250 and the nutrition Cluster estimates the burden of acutely malnourished children to be 850,000 including 150,000 children likely to be severely malnourished and who face an even higher risk of morbidity and death. Results also show higher levels of malnutrition among women of child-bearing age (15-49 years old). The FSNAU results also underline the worsening food security situation with 5 million across Somalia in need of humanitarian assistance. Internally displaced populations (IDPs) remain extremely vulnerable and account for 58 per cent of the people in crisis and emergency. Critical malnutrition rates continue to be found in IDP sites as well.

As of end September, over 30,000 Somali refugees have been repatriated from Dadaab², including more than 22,000 in 2016 alone. The main areas of returns are Lower and Middle Juba, followed by Bay and Banadir regions. During the reporting period, the Jubbaland authorities temporarily suspended the voluntary repatriation process indicating the need for expanded basic services and livelihood opportunities.

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 each, including sub-regional coordinators in over 15 regions. The network facilitates access to information, coordination and interventions in hard-to-reach and inaccessible areas.

Humanitarian and Resilience Strategy

UNICEF aims to prevent mortality and morbidity with the provision of an integrated package of curative and preventive nutrition interventions and primary health care services. Eradication of polio remains a top priority and efforts are made to immunise all children, combined with emergency measles vaccination campaigns to prevent outbreaks. UNICEF is also ensuring that a package of basic life-saving interventions is also provided in newly accessible areas, whilst maintaining neutrality and impartiality.

UNICEF continues to work on strengthening the implementation capacity of Government and partners. Life-saving and resilience initiatives are also promoted by increasing access to safe water; promoting emergency sanitation; extending community-led total sanitation approaches to flood, drought and disease-prone areas; and maintaining immediate response capacity through nine supply hubs across central and southern regions of Somalia. UNICEF supports the disengagement and reintegration of children associated with armed groups, monitors and reports on grave violations, while preventing and responding to gender-based violence (GBV). Furthermore, UNICEF works to improve access, quality and capacity for provision of emergency education. These interventions contribute to the joint UNICEF, FAO and WFP resilience programming which aims to address the interrelated causes of malnutrition through multi-sectoral interventions at community level. The aim is to build community capacity to anticipate and deal with recurrent shocks in their environment with a package which further includes support to schools as an important entry point for nutrition support, behaviour change interventions and quality education.

WFP and UNICEF have engaged in a strategic partnership in 2016, building on the synergies between both organizations to implement an augmented response to address the alarming food insecurity and malnutrition levels in Somalia. This partnership is now being extended to support the reintegration of Somali returnees from Dadaab. WFP and UNICEF are providing emergency unconditional cash-based transfer assistance packages for up to 5,000 refugee households (representing about 35,000 people of which 20,000 children) to help them settle back in their locations of return. The planned assistance is funded by DFID and being implemented using the SCOPE biometric platform, over an initial duration of six months.

² Voluntary Repatriation Analysis, UNHCR, September 2016

Summary Analysis of Programme Response

HEALTH: In August, UNICEF and partners successfully implemented a measles campaign in Puntland and central and southern regions of Somalia. In 2016, 3,650 suspected cases of measles have been reported and this campaign targeted 882,150 children aged 6 months to 10 years. Preliminary reports indicate that 677,556 children in Puntland and central and southern regions of Somalia, have been vaccinated against measles and provided with Vitamin A, with an expected coverage of 95 per cent, including in high risk areas (mainly nomadic and mobile communities). UNICEF also provided technical and logistics support for the campaign and undertook a supervisory role together with WHO and the Ministries of Health (MoH).

As of end September, 13,598³ suspected cases of acute watery diarrhoea (AWD)/cholera have been reported in Somalia, with an overall decrease in the number of cases recorded during the reporting period. UNICEF continued to provide emergency medicine, antibiotics, oral rehydration salts (ORS) and zinc, supporting partners in the treatment of 869 persons. The outbreak is now contained thanks to joint efforts by UNICEF, WHO, MoH and partners. To further enhance preparedness measures and mitigate the risk of another outbreak, in August UNICEF and WHO supported the training of 56 national trainers for cholera case management, surveillance, WASH and risk communication. This intervention is part of the national AWD/cholera preparedness and response plan under development by the MoH with the support of WHO and UNICEF. UNICEF also provided life-saving primary health care to children and women, reaching 102,068 people primarily in newly accessible areas in central and southern Somalia, as well as in flood and drought affected regions. In drought-affected areas of Puntland and Somaliland, UNICEF provided integrated health and nutrition services to 7,595 people and 534 returnees from Yemen were provided with first medical aid, including treatment of illnesses and emergency immunization.

NUTRITION: In August, UNICEF-supported nutrition centres across Somalia admitted 3,097 severely malnourished children with 92.7 per cent recovery rates, 0.6 per cent death rates and 4.8 per cent defaulter rates achieved. In Doolow, Gedo region, UNICEF continues to enhance its nutrition emergency response efforts together with WFP, through the delivery of an integrated response package of nutrition, health and WASH services. UNICEF is also working with local non-governmental organizations (NGO) in Gedo on expanding the outreach of nutrition interventions at community level. In the IDP sites in Ceel Barde/Xudur, UNICEF scaled up the screening and treatment of severe acute malnutrition (SAM) coupled with nutrition, health and hygiene promotion (NHHP). UNICEF also pre-positioned life-saving nutrition supplies, including 1,200 cartons of Plumpy'nut, 13 cartons of F-100 and 10 cartons of F-75 therapeutic food. Support to children and pregnant and lactating women (PLW) in Qansax Dheere of Bay region also continued, including through the pre-positioning of additional nutrition supplies.

In Puntland, the number of outpatient therapeutic programme (OTP) sites in drought-affected areas increased with a total of 120 OTP sites (6 fixed and 114 mobile) operating through 5 implementing partners. In Somaliland, UNICEF, the MoH and partners continued to support 85 fixed sites and 382 mobile sites during the month of August. Nutrition supplies were also distributed during the reporting period to Stabilization Centres across Puntland and Somaliland. UNICEF and MoH continue to screen children under-5 and PLW arriving from Yemen. In August, there were 43 new arrivals at the reception centre in Berbera; 13 were PLW and 2 were children under-5 with no cases of malnutrition identified. UNICEF and partners also supported the integration of nutrition screening and provision of OTP services across six settlements of newly arrived Ethiopians in Togdheer region.

WASH: In response to the AWD/cholera outbreak in central and southern regions, UNICEF scaled up its WASH humanitarian response in the affected districts of Lower Juba, Banadir, Hiraan and Lower Shabelle regions. UNICEF has distributed hygiene kits to 5,488 affected families since the start of the response. UNICEF and partners also trained 225 community hygiene promoters who are conducting hygiene promotion and education activities in the affected regions. To ensure communities have access to safe drinking water, 80 shallow wells serving 32,000 people are being chlorinated on a daily basis. Rehabilitation works to protect and upgrade 20 shallow wells have been completed benefiting 8,000 people and the rehabilitation of an additional 10 wells is ongoing, expected to benefit another 4,000 people. UNICEF and partners are also constructing 16 gender sensitive sanitation facilities in 6 health facilities.

³ Somalia Epidemiological Bulletin week 38, WHO.

In Somaliland and Puntland, UNICEF has, since the start of the year, completed the rehabilitation of 27 boreholes in drought-affected regions (9 in Somaliland; 18 in Puntland), supporting an estimated 216,000 people in regaining access to safe drinking water. In Somaliland, UNICEF also distributed 4,600 hygiene kits benefiting 27,600 people to support safe hygiene practices, household water treatment and safe storage. The distribution of an additional 1,800 kits is ongoing to benefit a further 10,800 people. In Bossaso, as part of the joint partnership with WFP and using SCOPE, the digital cash and voucher card programme platform where households are biometrically registered, UNICEF distributed hygiene kits, ORS and zinc to 4,625 IDP households to support preparedness efforts for AWD/cholera.

EDUCATION: In September, schools across Somalia opened for the fall term. During the reporting period, UNICEF completed the rehabilitation of 14 permanent classrooms with 4 WASH facilities in Buru Hakaba. These classrooms will accommodate 931 children, including 386 girls. Essential education supplies, including school kits and recreation kits, were also delivered to six schools in Diinsoor district, Bay region, benefiting 1,504 children, including 513 girls. UNICEF and Cluster partners are also working on an emergency response plan to ensure returnees from Dadaab have access to education services.

Drawing lessons from the drought response in northern regions, UNICEF is working on preparedness measures in light of the likely impact of La Niña. UNICEF is working with government counterparts and implementing partners on an emergency education package consisting of the establishment of Temporary Learning Spaces (TLS), training of teachers, payment of teacher incentives and provision of teaching and learning materials. UNICEF will also work with WFP and the Ministries of Education to set up school feeding programmes, and with WASH partners to ensure children have access to safe drinking water.

CHILD PROTECTION: In August, the Country Task Force on Monitoring and Reporting (CTFMR) documented 213 grave violations against children in central and southern regions of Somalia, affecting 154 boys and 38 girls. The majority of these violations were recruitment and use of children (86), followed by abduction (51). The CTFMR also continues to advocate with the Puntland authorities for the handover of the 64 boys detained since April for their participation in hostilities between Al-Shabaab and Puntland security forces. There are currently 153 boys and 25 girls enrolled in the UNICEF-supported reintegration programmes in Baidoa and Mogadishu, including 15 boys who joined the programme in Baidoa during the reporting period.

In August, UNICEF and partners identified 84 (42 boys; 42 girls) unaccompanied and separated children who were supported with reunification, interim care services, medical assistance and material support. UNICEF partners also assisted 394 GBV survivors including 124 girls, 5 boys and 265 women. An additional 3,485 community members (1,727 women and girls; 1,758 men) participated in community outreach and awareness raising events to prevent GBV and enhance knowledge of referral services.

CASH TRANSFERS AND SOCIAL PROTECTION: WFP and UNICEF have engaged in a strategic partnership in 2016, building on the synergies between both organizations to implement an augmented response to address the alarming food insecurity and malnutrition levels in Somalia. This partnership is now being extended to support the reintegration of Somali returnees from Dadaab. WFP and UNICEF are providing emergency unconditional cash-based transfer assistance packages for up to 5,000 refugee households (representing about 35,000 people of which 20,000 children) to help them settle back in their locations of return. The planned assistance is funded by DFID and being implemented using the SCOPE biometric platform, over an initial duration of six months.

Communication for Development (C4D): In August, UNICEF supported the development of a health guide based on “child rights in Islam”, endorsed by Somaliland Sheikhs and led by Minister of Religious affairs. In light of the three recent polio cases reported in Nigeria, a joint MoH, UNICEF and WHO implementation and monitoring plan, including on-site visits at airport, started for the “Haji vaccination against polio” to ensure those travelling for Hajj are well protected. This will also minimise the possibility of re-importation of polio to Somalia. Following the recommendation made by the Islamic Advisory Group (IAG), a National Islamic Advisory Group with a secretariat including MoH, WHO and UNICEF was formed in Somalia, as well as work plans elaborated to maximise the support of religious leaders for polio advocacy.

Supply and Logistics: Accessibility in Gedo, Bay, Hiraaan and Galmudug regions continues to be reviewed on a case by case basis for multimodal transportation. Accessibility constraints impact lead times for most deliveries in central and southern regions, including proof of deliveries. Accessibility of transshipments from Somaliland/Puntland to Gaalkacyo are likely to further be constrained by a requirement to switch trucks between north and south Gaalkacyo implemented from 1 September 2016.

Funding: In 2016, UNICEF is appealing for US\$ 82,268,287 to meet the humanitarian needs of women and children in Somalia in line with the country's inter-agency 2016 Humanitarian Response Plan. As of 20 September, UNICEF has a funding gap of 29 per cent. The funding overview detailed in the table below includes US\$ 27,937,942 carry-forward available from 2015, due to generous multi-year funding of donors planned for 2016/2017 implementation.

UNICEF wishes to express its sincere gratitude to all public and private donors for the contributions received, including the most recent support from OFDA in support of health and WASH interventions for the AWD/cholera response. Continued donor support is critical to maintaining and scaling up the response. Adequate, predictable and flexible resources will allow UNICEF and its partners to respond effectively where needs are greatest and reach the most disadvantaged children.

2016 Funding Requirements (as defined in Humanitarian Appeal of 2016 for a period of 12 months)				
Appeal Sector	Requirements*	Funds available**	Funding gap	
			US\$	%
Health	24,782,068	7,493,839	17,288,229	70%
Nutrition	13,158,990	19,043,739	-5,884,749	-45%
Education	6,006,565	8,730,641	-2,724,076	-45%
WASH	12,118,224	10,433,150	1,685,074	14%
Child Protection	13,715,372	9,488,455	4,226,917	31%
Cash-based response	12,487,068	2,861,861	9,625,207	77%
Total	82,268,287	58,051,686	24,216,601	29%

* The requirement for Cluster coordination costs has 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.

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Annex A SUMMARY OF PROGRAMME RESULTS (as of 31 Aug 2016)

	Cluster Response		UNICEF and IPs	
	2016 Target	Cumulative Results	2016 Target ⁴	Cumulative Results
HEALTH				
# children under-1 vaccinated against measles			445,000	723,798
# of children under-5 vaccinated against polio			2,374,950	2,425,662
# of children under-5 and women provided with emergency life-saving health services in high risk areas			450,000	309,533
NUTRITION				
# of children under-5 with Severe Acute Malnutrition admitted in Therapeutic Feeding Programmes	150,000	49,338	108,750	46,884
% of children with SAM under treatment recovered	91%	93.3%	75%	93.5%
% nutrition centers stocked out of essential nutrition supplies	<10%	0.5%	<10%	0.5%
EDUCATION				
# of children and adolescents (girls/boys) have access to education in emergencies	200,000 (94,495 F)	74,332 ⁵ (31,743 F)	50,400 (50% F)	26,414 (43% F)
# of children (girls/boys) benefiting from teaching and learning supplies, including recreational materials	200,000 (94,495 F)	88,715 (36,924F)	50,400 (50% F)	22,155 (45% F)
# of teachers (women/men) receiving training (including life-saving messages, psycho-social support and pedagogical support skills) and monthly incentives – <i>training</i>	7,000 (2,100 F)	1,433 (642F)	500 (20% F)	450 (27% F)
# of teachers (women/men) receiving training (including lifesaving messages, psycho-social support and pedagogical support skills) and monthly incentives – <i>incentives</i>	3,000 (900 F)	1,877 (788F)	500 (20% F)	750 (26% F)
# of CEC members trained to participate in school management	3,000 (900 F)	2,224 (876F)	1,750 (30% F)	469 (37% F)
WATER, SANITATION and HYGIENE				
# of people with sustained access to safe water	1,230,000	368,842	250,000	241,620
# of affected people accessing safe water through temporary means	1,265,000	975,918	642,000	520,339
# of affected people with new access to sanitation facilities	600,000	143,970	200,000	43,500
# of villages self-declared Open Defecation Free (ODF)	250	37	150	37
# of people with means to practice good hygiene and household water treatment through water filters, purifiers, jerry cans, aqua tabs, etc.	600,000	437,466	510,000	437,466
CHILD PROTECTION				
# of children affected by grave child rights violations ⁶	3,000	1,944 (403 F)	3,000	1,944 (403 F)
# of children (girls/boys) formerly associated with armed forces and armed groups and other vulnerable children provided with inclusive reintegration services	2,000	670 (102 F)	2,000	670 (102 F)
# of separated and unaccompanied children identified and registered	6,500	1,650 (688 F)	3,000	950 (418 F)
#of GBV Survivors (boys/men, girls/women) accessing a package of GBV services (medical, legal, Psychosocial and materials)	8,000	3,791 (3,490 F)	7,248	3,591 (3,333 F)
# of child rights violations that are resolved or referred by CBCP	6,750	6,357 (3,820F)	6,750	6,357 (3,820F)
CASH TRANSFERS AND SOCIAL PROTECTION				
# of households able to meet basic food and non-food needs with improved access to services in situations of crisis			16,000	0 ⁷

⁴2016 Nutrition SAM target and Child Protection UASC targets have been slightly revised as per situation on the ground in early 2016.

⁵ Education results remain unchanged as schools are closed from June to August.

⁶This is from the flagship programme - Children Affected by Armed Conflict (CAAC).

⁷The programmes closed at the end of February 2016.