



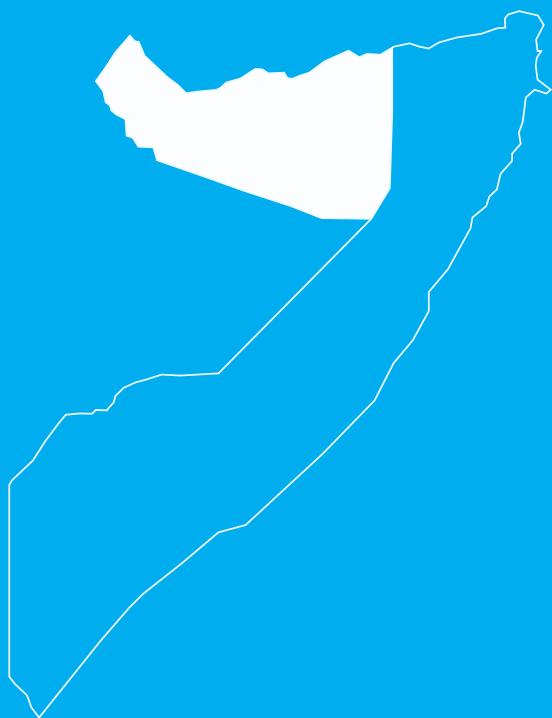
Somaliland

Regional Brief

2022

Somaliland

at a Glance



Population¹
4,294,135



62%
Population aged
6-29 years



52.7%
Poverty rate²



177,000
square kilometres
Land area



**5.5 per woman (6.1 for
rural women and 5.0 for
urban women)**
Total fertility rate



2.93%
population growing at an
annual estimated rate³

Life expectancy



Male
54



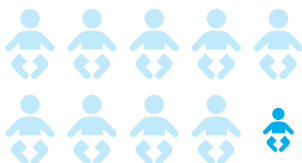
Female
57



13%
Fully immunized children
(12-23 months)



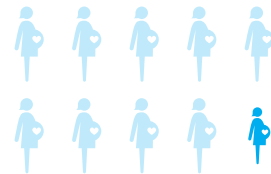
40%
Births by skilled birth
attendants



74 out of every 1,000 live births
Estimated infant
mortality rate



117 out of every 1,000 live births
Estimated under-5
mortality rate



**396 per 100,000
live births**
Maternal mortality ratio

¹ SL MoPD Population Estimation Survey

² Multi-dimensional poverty index

³ SL MoHD/UNFPA 2020

⁴ EMISS 2021-2022



14%
Underweight



13%
Global acute malnutrition rate (wasting)



20.7%
Stunting



49%
Rural water coverage



52%
Access to safe water



28%
Sanitation coverage



30%
WASH service coverage in schools



30%
WASH service coverage in health facilities



23.05
Net education enrollment for girls⁴



30.59%
GER education for girls⁵



24%
School-age children out of school (aged 6-18)⁶



24%
Community literacy rate



42%
Female literacy rate



98.4%
Girls and women aged 15-49 who have undergone FGM⁷



23.2%
Women (aged 20-24) married before reaching 18 years
9%
Married before 15



35%
Households headed by women



19%
Birth registration



13.2%
Children working (5-14 years)

⁵ Ibid.

⁶ PEHS 2014

⁷ DHS 2020



Somaliland and the People

Demographics and Administration

Somaliland borders the Federal Republic of Ethiopia to the south and west, the Republic of Djibouti to the northwest and the Red Sea (Gulf of Aden) to the north, sharing the Red Sea waters with Yemen.

It covers a total land area of 177,000 square kilometres and is divided into six administrative regions—Sahil, Sanaag, Togedheer, Awdal, Sool and Marodighe – and 42 districts. The state has an estimated population of 4,294,135⁸ (51 per cent male, 49 per cent female), with an annual population growth rate estimated at 2.93 per cent⁹.

Security, Politics and Governance

Security:

Overall, the security situation is calm although the peace is threatened by an unresolved border dispute at Tuka-Raq with Puntland state and inter-clan clashes in Sanaag, where clashes between the Somaliland Army and the clan militias are frequent. Over the years, Al Shabab has tried to establish cells in Somaliland but with limited success due to Somaliland's government crackdown that is supported by a highly vigilant and responsive community desiring peace.

Politics and Governance:

Somaliland unilaterally declared an autonomous government, asserting its independence as the Republic of Somaliland in 1991. Since then, Somaliland, in words and action, has pushed to be recognized and treated as a separate entity from the Federal Republic of Somalia.

⁸ SL MoPD Population Estimation Survey

⁹ SL MoHD/UNFPA 2020

“**Somaliland has gone ahead and formed a hybrid governance model..**

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Somaliland has gone ahead and formed a hybrid governance model combining traditional and modern institutions

following a series of inter-clan conferences that culminated in the Borama Conference in 1993. Initially, the reconciliation conference established a government with a clan-based power-sharing formula. Subsequently, the Egal and Rayale Administrations pursued a liberal democratic process that moved Somaliland away from a clan/traditional-based governance system.

The first election of members of the House of Representatives took place in 2005, in a one-person-one-vote election under a multiparty system that was limited to three political parties: the Peace, Unity, and Development Party (KULMIYE), the National Party (WADANI), and the Justice and Development (UCID), also known as the Justice and Welfare Party.

On 30 April 2000, the House of Representatives adopted a constitution that replaced the National Charter that had served as the principal guiding document since the Borama Conference. The Executive Branch is headed by a President, elected through a secret ballot by adult suffrage.

The current government (2022) is the fifth in the 29-year history of the Republic and the third elected under the one-person-one-vote democratic system with each government handing over the reins of government to the next peacefully. The last Lower House elections were held on 31st May 2021 while the Upper House of elders has not changed since its formation in 1993. The Governors, who are appointed by the President, head the

regions while mayors who head districts are appointed by the District Councils, and the district counsellors are elected through secret ballot.

Social-economic Landscape

The regional population is made up of the majority Issaq Clan, which is subdivided into major sub-clans: clans of Sool and Eastern Sanaag and Togdher (Buhodle district) and other clans such as Madigan, Gaboye, the Arab, Habar Awal, Garhajis (Habaryunis and Idagale) and Habar Jeclo. These main sub-clans are further subdivided into smaller sub-sub-clans. The Issaqs dominate both the political and economic arenas. However, Gadabursi clan members have held high office; notably, the Somaliland President from 2002 to 2010, Dahir Ryale Kahin, and currently the Vice-president, Abdirahman Abdillahi, are both Gadabursi. To the west, the Awdal region is mainly inhabited by the Gadabursi and Issa clans, and sub-clans of the Dir clan which extend into Djibouti and Ethiopia.

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The economy of Somaliland largely depends on livestock and agriculture. In 2019, Somaliland had a gross

domestic product (GDP) of about US\$ 2 billion, most of which it received in remittances from Somalilanders working abroad, and a GDP per capita of US\$ 950, which is one of the lowest in the world. Livestock is the main export, which is shipped to neighbouring Djibouti and Ethiopia, as well as to Gulf states such as UAE, Saudi Arabia, and Oman. Somaliland generates an estimated US\$ 250 to US\$ 350 million per year of hard currency. However, the COVID-19 pandemic and subsequently

the most severe drought in 40 years has reduced the livestock export trade. Other primary income-generating exports include hides, skins, myrrh and frankincense while the main domestic economic activities are pastoral animal rearing, agro-pastoral, fishing and commerce.

The unemployment rate averages 70 per cent¹⁰ and is considered the main reason for youth migration and rising crime. Prolonged droughts, crop failures, environmental degradation and internal displacements have resulted in 52.7 per cent of the population living in poverty.

The impact of the fifth consecutive drought has been varied in Somaliland. While severe in some places, especially in the eastern region, other areas have been spared to some extent. However, Somaliland has had to cope with an influx of pastoralists, which has put pressure on host communities, increasing the possibility of conflict over grazing and water resources.



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UNICEF in Action

UNICEF has continued to provide both technical and financial support to the Somaliland Government, aimed at boosting access to quality services as well as providing emergency support during humanitarian crises, guided by the UNICEF Core Commitments for Children (CCC).

¹⁰ SL NDP2



Health

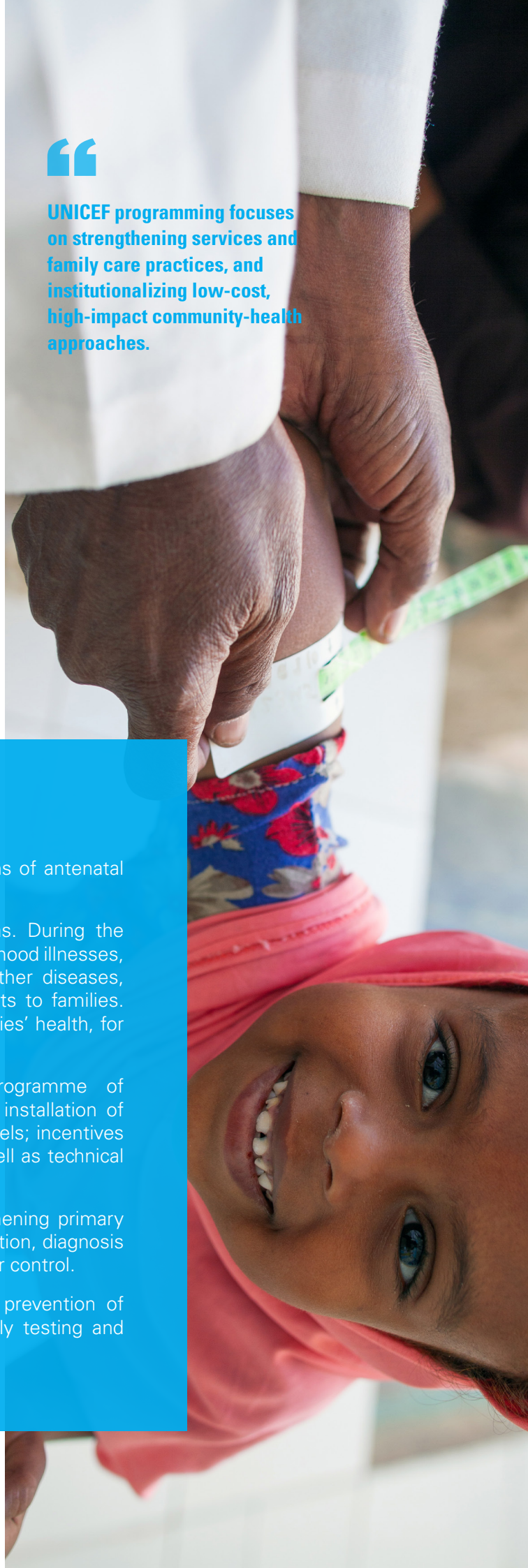
UNICEF supports facility- and community-based interventions, particularly in deprived rural areas with displaced populations, to improve maternal, neonatal, child and adolescent health (MNCAH) outcomes, while maintaining a flexible emergency response. UNICEF programming focuses on strengthening services and family care practices, and institutionalizing low-cost, high-impact community-health approaches.



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Examples of activities:

- Rehabilitating maternities and supporting the provisions of antenatal and postnatal services and essential medicines.
- Supporting mobile clinics to reach remote rural areas. During the clinics, health workers diagnose and treat common childhood illnesses, vaccinate children against measles, meningitis and other diseases, provide nutrition counselling and distribute hygiene kits to families. They also teach caregivers how to look after their families' health, for example, good breastfeeding practices and hygiene.
- Strengthening the delivery of the Expanded Programme of Immunization (EPI) for increased uptake through the installation of solar-powered fridges at regional- and health-facility levels; incentives to the staff at central, regional and district levels as well as technical and financial support for weekly outreach services.
- Preventing and treating malaria. This involves strengthening primary healthcare systems to ensure access to malaria prevention, diagnosis and treatment as well as malaria surveillance and vector control.
- Preventing and treating HIV/AIDS. This includes the prevention of mother-to-child transmission (PMTCT) of HIV and early testing and treatment for children.





Recurrent severe drought, conflict and mass displacement have led to widespread undernutrition.



Nutrition

Recurrent severe drought, conflict and mass displacement have led to widespread undernutrition. Micronutrient and vitamin deficiencies, including iron, zinc and Vitamin A, are serious public health problems, leaving young children susceptible to infectious diseases and at risk of severe acute malnutrition (SAM) which manifests as having a dangerously low weight and severe muscle wasting.

Severely undernourished children who survive will suffer irreversible physical and cognitive damage if they do not receive treatment before the age of 2 years.¹¹ UNICEF supports efforts to prevent and treat undernutrition.

Examples of activities:

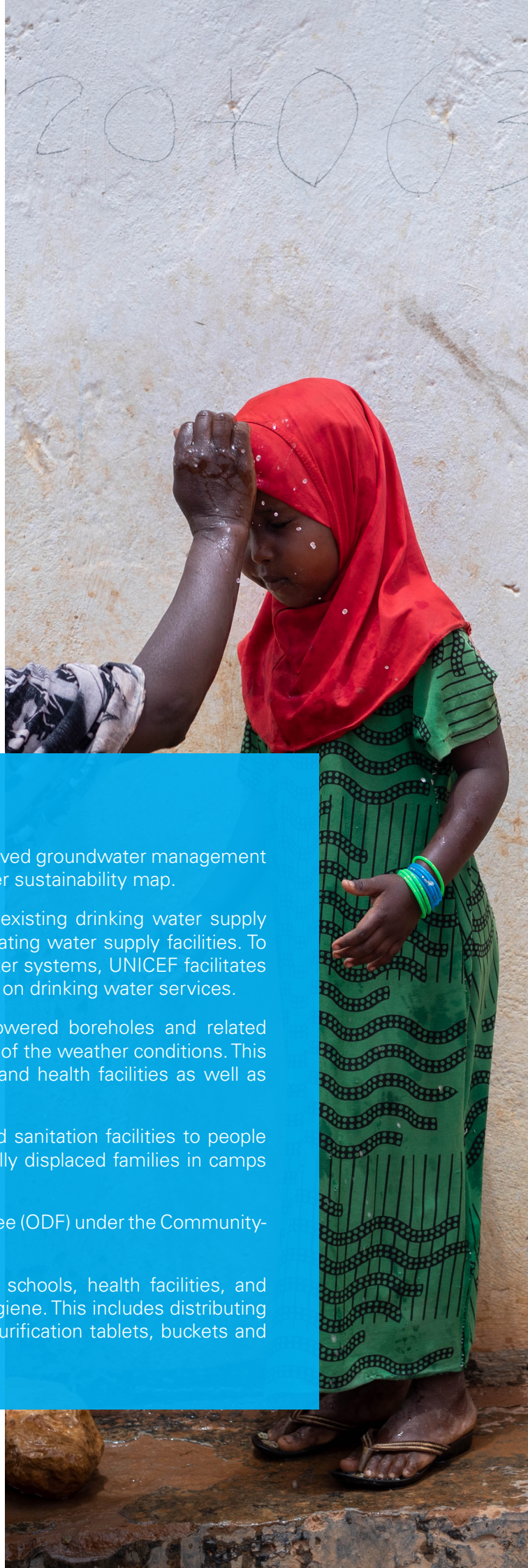
- Promoting appropriate maternal, infant and young child nutrition. This involves the promotion of breastfeeding within the first hour, exclusive breastfeeding for six months and ensuring an age-appropriate balanced diet for children. The focus is on the first 1,000 days – from the start of a woman's pregnancy to a child's second birthday.
- Screening, using the mid-upper arm circumference, and treatment of severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) cases. UNICEF is the sole provider and distributor of the Ready to Use Therapeutic Food (RUTF) which is used in the treatment of severely malnourished cases at outpatient therapeutic programme sites and stabilization centres across Somaliland.
- Providing micronutrient supplements (iron, zinc and Vitamin A) to pregnant women and children under the age of 5.
- Developing comprehensive communications packages. This involves working with social mobilisers who are present in every community, and the media, including social media.

11 UNICEF, WHO, and International Bank for Reconstruction and Development/The World Bank, Levels and trends in child malnutrition: Key Findings of the 2020 Edition of the Joint Child Malnutrition Estimates, 2020.



Water, Sanitation and Hygiene

Despite the increased coverage of water supplies, perennial drought has depleted even further Somaliland's scarce water resources. To find water, drilling has to go deeper, in most cases up to 400 metres.



Examples of activities:

- Building the capacity of government authorities in improved groundwater management as well as supporting the development of a groundwater sustainability map.
- Assisting with the operation and maintenance of the existing drinking water supply systems, which includes upgrading as well as rehabilitating water supply facilities. To improve the operation and maintenance of drinking water systems, UNICEF facilitates the establishment of a Public-Private Partnership (PPP) on drinking water services.
- Drilling and constructing climate-resilient and solar-powered boreholes and related infrastructure that provide sustainable water regardless of the weather conditions. This provides piped water to a cluster of villages, schools and health facilities as well as water for livestock.
- Trucking water and providing essential hygiene kits and sanitation facilities to people in drought-affected areas and the thousands of internally displaced families in camps during the peak of the droughts.
- Supporting communities to become Open Defecation Free (ODF) under the Community-Led Total Sanitation Initiative.
- Improving access to sanitation by building latrines in schools, health facilities, and sites for the internally displaced and promoting safe hygiene. This includes distributing hygiene kits that contain soap, menstrual kits, water purification tablets, buckets and jerrycans.



Education



Poverty, social norms, lack of sanitation facilities and humanitarian crises have prevented many children from attending school in Somaliland.



Millions of school-age children are out of school. Poverty, social norms, lack of sanitation facilities and humanitarian crises have prevented many children from attending school in Somaliland. Moreover, learning in schools is often poor due to the low quality of education. UNICEF aims for all children to have equitable access to pre- and primary school including those affected by emergencies.

Examples of activities:

- Rehabilitating classrooms with improved sanitation and hygiene facilities, and providing new furniture and teaching and learning materials.
- Supporting the introduction of afternoon shifts for classes under the Education Cannot Wait Initiative. This UNICEF support contributed to the increased girl enrolment in UNICEF-supported schools in 2020 from 44 per cent to 53 per cent in 69 selected rural schools.
- Supporting the integration of children with disabilities into mainstream education. For example, UNICEF supports a programme called 'UNDaunted' which provides teaching and learning materials and teacher training in special needs to 65 schools.
- Providing vocational skills as well as literacy and numeracy classes for young people who missed out on education.



Child Protection

The Government has made significant strides in establishing effective child protection systems including enacting the Juvenile Justice Law, the Child Rights Act, the Alternative Care Policy, the Child Protecting Policy and the Youth Policy. The Government is also drafting the FGM Bill, and Birth and Death Registration legislation.

Another major advance is the development of the Government's social work certificate, diploma and degree programmes. The Government is also facilitating the working relationships between the line ministries and improving the capacity of the staff.

UNICEF supports the relevant government line ministries as well as an extensive network of civil society organizations (CSOs). Together they are developing a regulatory framework as well as providing services, setting minimum standards and oversight, building human and financial resources, and increasing community participation.



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Examples of activities:

- Advocating and providing technical support to develop/review a robust legal and regulatory framework, as well as specific policies related to child protection.
- Providing continuum services (spanning prevention and response) to enable vulnerable communities to access child protection services, including mental health and psychosocial support (MHPSS), birth registration, family tracing and reunification and diversion for children in contact with the law. Survivors of gender-based violence including child survivors of rape receive referrals and legal aid services through one-stop centres and safe houses. These are operated and supported by UNICEF in Borama, Hargeisa and Burao.
- Providing young people with survival and entrepreneurial skills through boot camp and business skills training. For example, in 2021, 486 young people (239 males and 247 females) graduated from boot camp and business skills training, supported by UNICEF, and most have started businesses and are earning incomes.
- Supporting CSO and NGO partners who work directly with communities to apply evidence-based innovative social norms change programmes including Communities Care, which is an intervention that addresses gender-based violence (GBV). Communities Care challenges power relations between men and women, and it facilitates the development of community-based action plans that aim to improve the protection and status of women and girls in their families and communities, and to prevent all forms of GBV, including FGM and child marriage.



Social Policy

UNICEF supports the implementation of the social protection and Humanitarian Cash transfer (HCT) projects as well as the Joint Programme on Local Governance (JPLG) in partnership with the Somaliland ministries in the districts.

Examples of activities:

- Assisting with the formulation of a Social Protection Policy, developing a social protection curriculum, which will be incorporated into the existing university social work programme, and capacity building. This also includes the training of government partners working in social protection.
- Supporting a new nutrition-sensitive Humanitarian Cash Transfer (HCT) pilot project in response to the complex humanitarian crisis. The main objective of the HCT pilot is to provide life-saving support in the form of HCT linked with nutrition-related services for the most vulnerable households and children affected by the drought. It should also reduce the risks of vulnerable families resorting to negative coping strategies. The project targets 2,000 households with children under the age of 5 in the district of Ceel Afwein. Each family receives US\$ 70 per month for three months from December to February 2023.
- Strengthening of the decentralization process and supporting the delivery of services in education and health in eight districts, through the services delivery model (SDM) supported under the Joint Programme of Local Government (JPLG). The Somaliland Government has increased funding to 85 per cent which has enabled UNICEF to reduce funding to 15 per cent. Under JPLG, districts are constructing and equipping schools as well as undertaking community and children consultation meetings in the target district councils to inform the development of the District Development Frameworks (DDFs). The DDFs provide a coherent framework for district development in line with national plans and are used to gauge priority areas of intervention.
- Supporting the civic education activities in schools and communities on citizens' rights and responsibilities.
- Assisting with the Community Score Card, which offers communities the opportunity to give feedback on social service quality.

Key Partners

To support both development and humanitarian interventions, UNICEF works with the Government and with relevant line ministries and partners as well as national and international NGOs and other civil society organizations.

The key Government departments and ministries that UNICEF works with are the Office of the Vice President —the Champion Office on Joint Programme of Local Governance (JPLG) and the Ministry of Planning and National Development (MoPND). For Child Protection activities, UNICEF works with the Ministry of Justice (MoJ) and the Ministry of Employment, Social Affairs and Family (MESAF), and the Ministry of Interior (MoI); for Education, UNICEF works with the Ministry of Education and Science (MoES), for Health, the Ministry of Health Development (MoHD), and for WASH, the Ministry of Water and Rural Development (MoWRD).

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