

SitRep #: 009

Country:	<i>SOMALIA</i>
Crisis:	Long standing conflict /drought
Covering period:	10th May to 17th May 2017
Crisis Location:	Countrywide
Date issued:	17 th May 2017
Beneficiaries reached:	About 500,000 in different locations – estimates
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1. Situation overview including Security Issues

The humanitarian situation in Somalia continues to deteriorate, as an elevated risk of famine persists in some parts of the country and there is a rapid spread of infectious diseases. Over 6.7 million people are estimated to be in need of protection and humanitarian assistance, more than half of the population of Somalia. The rainy season so far has resulted in rainfall close to normal, but as it comes in the wake of severe drought major disease outbreaks are spreading, with over 36,000 cases of Acute Watery diarrhea (AWD), cholera and about 7,000 suspected cases of measles reported since the beginning of the year. Of the 6.7 million people in need, it is estimated that more than 1.5 million are women of childbearing age and nearly **130,000 pregnant women** may require urgent care.

Rainfall Update: Moderate to heavy rainfall has been recorded in parts of the country, as well as in the Ethiopian highlands. Flooding has been reported in the middle areas of the Shabelle River due to existing open riverbanks and weak river embankments.

Somaliland: The Gu rainy season started during the last week of March in some areas of Somaliland including southern parts of Awdal, Woqooyi Galbeed and Togdheer regions. Despite the good short lived rains, the amounts so far received are below average and not adequate to support the current water stress in the area. The forecast for the coming two weeks calls for continued rains in the area especially in Woqooyi Galbeed and Togdheer regions.

Puntland: The Gu rains were delayed and only started during the last week of April. The rains were short lived, distributed in three days only. The amounts so far received in Puntland are below average and not adequate to support the current water stress. The forecast for the coming two weeks in the region indicates a reduction in the rains.

South Central: The first three days of May also saw continued rains in a few pockets of the region. The rains are beneficial for late crop planting; pasture regrowth, ground water recharge and other uses. These rains are however not adequate to end the ongoing crisis of water stress in the region and more rains are needed. The rainfall forecast for the coming weeks indicates an increase in the rains in the inland areas and the parts bordering Ethiopia including Bakool, Gedo and Hiraan.

Displacements: Drought-related displacement still continues throughout the country with most of the displaced people moving from rural to urban areas or other rural areas where they anticipate receiving aid. Up to **680,000 persons** have been internally displaced due to drought as of 10th May 2017, since November 2016. An estimated

292,000 people were displaced in March, and over 130,000 people in April, mainly arriving in Mogadishu and Baidoa in South West State. An estimated 147,000 and 156,000 people had arrived in Mogadishu and Baidoa, respectively as of 30 April.

Measles cases: A total of 7,031 cases have been reported as of 7 May. This is an increase of 685 cases compared to the previous week. Of the reported cases, 65 percent are children under age of five with 1775 reported in Banadir and 1319 reported in Togdheer. This presents the largest number of cases this year.

AWD/Cholera: A slight decrease in the number of new Acute Watery Diarrhea and cholera cases and deaths was recorded – 3,475 cases and 43 deaths were reported in week 17 compared to 3,356 cases and 60 deaths in week 16. Of these, 897 cases were reported from Buhodle district, Togdheer Togdher region that represents 26 per cent of the total cases. Overall, some 36,066 cases of AWD/Cholera cases and 697 related deaths have been recorded since the beginning of 2017.

Reproductive Health: The drought situation continues to pose a threat to women during pregnancy or delivery. More than 130,000 of them may require critical and urgent assistance. Somalia already has one of the highest maternal mortality ratios in the world; one out of every 22 women is likely to die due to pregnancy or childbirth-related causes during her life course.

Protection: Protection needs remain critical for the most vulnerable groups especially women, children, and persons with disabilities, the elderly and minority communities. The increase in drought and conflict-related displacements, as well as stress migration induced by forced evictions, is raising protection needs. Grave violations against women and girls are on the rise, particularly in areas with high concentration of newly displaced persons such as Baidoa and Mogadishu.

Security: Humanitarian organization and civilians continue to experience challenging access constraints, including safety and security concerns as well as road access challenges, particularly along major access roads in southern and central Somalia. With operations being scaled up significantly throughout the country, the number of violent incidents against humanitarian personnel and assets also increased last month. Rowdy crowds and looting during aid distributions have been on the increase.

2. Humanitarian needs

Reproductive health needs:

- Scale up of existing services, including strengthening referral of complicated cases to provide emergency obstetric and neonatal care to drought affected populations
- Integrated reproductive health outreach campaigns targeting the drought affected populations that do not have access to basic health services
- Hygiene/dignity kits in light of the acute watery diarrhea and cholera cases confirmed
- Clean delivery kits
- Emergency reproductive health kits
- Coordination of reproductive health partners
- Capacity building of health workers
- Awareness on reproductive health, hygiene gender based violence, birth spacing
- Most facilities need refurbishing or revamping, as they do not have the capacity of managing the increased number of internally displaced people.

Protection

- Dignity kits
- Gender-based violence (GBV) integration in site management and increased GBV awareness

- Strengthen coordination of GBV response
- Safe referral pathways

Nutrition

- Nutrition screening and provision of iron and folic acid

3. Government and UN and other stakeholders' response:

- Humanitarian partners in collaboration with federal and local authorities continue to massively scale up response and are reaching millions of people with life-saving food, water, nutritional and health services as well as shelter, non-food items, protection services and livelihood support throughout the country
- The centrality of protection and gender mainstreaming remains a crucial dimension of the revised Humanitarian Response Plan, with the view of ensuring that protection and gender equality principles are incorporated into all the humanitarian service delivery and assistance through an integrated approach. More will be done to ensure the specific gender dimensions of impacts of drought are recognized in service delivery. The already noticed increased GBV incidences, linked to escalation in displacement, require urgent attention
- The Drought Operation Coordination Centers in Mogadishu, Baidoa and Garowe continue to provide support to humanitarian partners to respond to the drought

4. Key activities implemented by UNFPA and Progress

- UNFPA has finalized the drought response operations plan for nine months, from April to December 2017, with support from headquarter and the ASRO Region office. Funding received from EFR and CERF rapid response is already being used to implement some of the activities in the plan
- UNFPA has started receiving reproductive health kits ordered through the Emergency Fund Request. These kits include kit 6A and 6B for BEmNOC and kit 11A and 11B for CEmONC facilities. These kits will go towards supporting an average of 30,000 women per location for a period of three to six months
- UNFPA is planning to support CEmNOC services in Boroma, Awdal region of Somaliland. This will be done through Somaliland Nursing and Midwifery Association in Boroma Hospital. The services will include provision of medical and psychosocial support to GBV survivors. These services are targeted to reach at least 5,000 women with emergency obstetric and neonatal care
- UNFPA has signed annual work plans and is in the processes of disbursing funds to implementing partners to provide emergency obstetric and neonatal care through the existing maternity homes and four integrated reproductive health campaigns in Baidoa and Galkayo. The scale up of medical and psychosocial support services to GBV survivors will be done through integrating these services in the maternity homes. This will be done through the CERF rapid response funding

5. Resource Mobilization and Finance:

- The 2017 Somalia Humanitarian Response Plan (HRP) sought \$864 million to reach 3.9 million people with life-saving protection and livelihoods support. Following deterioration in the humanitarian situation from November onwards and the risk of famine announced in January, the Humanitarian Country Team (HCT) shifted from drought response to famine prevention.
- UNFPA has an HRP for both protection and health costed at US\$ 24,578,324 and so far received US\$ 847,195, which leaves a funding gap of US\$ 23,731,124

6. Communication and Advocacy

- The country office is part of the Humanitarian Communications Working Group and continues to include reproductive health and GBV in the key messages on famine prevention in Somalia
- The country office also contributes to the weekly OCHA SitRep
- Success stories on the country office drought response are continuously shared on the Somalia Country Office website including social media through Twitter and Facebook

- Funding from the EFR and CERF rapid response will be used for the following activities;
 - Production of branded materials for staff and IPs to increase UNFPA visibility in the drought response
 - Professional photographs of UNFPA’s response to the drought
 - Publications on UNFPA’s drought response including in the quarterly newsletter for the country office

7. Other Issues:

- UNFPA needs support in responding to drought in the following areas:
 - Operations: Support is needed in operations particularly in the area of logistics
 - Gender Based Violence: Three GBV specialists are needed to strengthen coordination of GBV Response
 - Sexual Reproductive Health (SRH): An SRH in emergencies specialist
 - Data in emergencies: Programme Specialist