

SitRep #: 005

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

The drought situation continues to worsen and famine still remains a possibility. An estimated 6.2 million people, over half of the population, remain in need of food assistance, out of which 2.9 million are in need of urgent support (IPC Phase 3 ‘Crisis’ and 4, ‘Emergency’), while 5.5 million are in need of health services and 4.5 million people are lacking Water, Sanitation and Hygiene (WASH) services. The spread of measles continues to be of serious concern, with 4,499 suspected cases reported since the beginning of the year, out of which 52 percent were reported in children between 1 and 4 years of age.

The Gu rain season normally starts in the month of April, and the first two weeks have seen moderate rainfalls in parts of Somaliland and the southern regions of Somalia, while no significant rains have been reported in Puntland. While the rains have provided some immediate relief and have led to increased water levels of the river Shabelle, with more rains, AWD/cholera is likely to be on the rise as well.

**Displacements:** Drought-related displacement continues to rise throughout the country, with most of the displaced people moving from rural to urban areas or other rural areas where they anticipate to receive aid. As of 7 April this year, 536,000 persons were internally displaced due to drought since November 2016.

**AWD/Cholera:** Currently, 23,566 cases of AWD/cholera have been reported and a total of 538 related deaths have occurred since the beginning of the year. The Case Fatality Rate is still at a worrying 2.3 per cent, far above the 1 per cent emergency threshold across the country, while the Bakol region is reporting an alarming rate of 4.9 per cent.

**Reproductive Health:** The devastating drought continues to threaten the lives of 607,000 pregnant women around the country. 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. 00

**Protection:** Recent reports show that 84 percent of GBV survivors are IDPs. This is shocking and given the amount of displacement that the famine is causing, we need to highlight this linkage.

**Security:** Over the past ten days, at least a dozen attacks have resulted in 28 civilian deaths and 31 injuries. These were all launched in civilian areas including restaurants, markets and minibuses, in direct violation of the international humanitarian law. In 2017, 337 people have been killed or injured by 87 improvised explosive devices incidents – the vast majority of which resulted in civilian deaths and injuries.

## 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

### Protection

- Dignity kits
- Gender-based violence (GBV) integration in site management and increased GBV awareness
- Strengthen coordination of gender-based violence response
- Safe referral pathways

### Nutrition

- Nutrition Screening and provision of iron and folic acid

## 3. Government and UN and other stakeholders' response:

- The Somali authorities, together with donors, UN Agencies and both international and local NGOs continue to contribute towards food, education, shelter, water-sanitation and health aid
- The Organisation of Islamic Cooperation (OIC) held a humanitarian roundtable with humanitarian partners, including NGOs, on 11th April to strengthen partnerships among key stakeholders for increased coordination of response.
- Donors have moved quickly to generously support scaling-up of response and over US\$571 million has been made available or pledged for humanitarian assistance since January.
- UNFPA Chief, Humanitarian and Fragile Contexts Branch, Ugochi Daniels was part of the Emergency directors mission that visited Baidoa and Kismayo to assess impact of drought on populations in South West and Jubbaland states from 8<sup>th</sup> April to 10<sup>th</sup> April.
- Humanitarian response has seen a massive scale-up over the past month, reaching 62 percent more people with food assistance (1.8 million), almost three times more people with sustained access to safe water (259,000) and over twice as many people with temporary supply of safe water (1.1 million).
- Further scale-up is ongoing across all clusters. Priorities include treatment and prevention of AWD/cholera and prevention of measles, improved access to health services, food and safe water, nutritional treatment for malnourished children, protection, shelter and non-food support to newly displaced.

## 4. Key activities implemented by UNFPA and Progress

- In Somaliland UNFPA conducted a reproductive health outreach campaign in Wajaale from 9<sup>th</sup> April to 15<sup>th</sup> April, 2017 reaching about 300 women a day. UNFPA has distributed reproductive health kits to assist

drought-affected populations. These kits included kit 6A and 6B for BEmNOC facilities in Gabiley district and kit 11A and 11B to Burao and Lasanod CEmONC facilities. The overall objective of the outreach events was to provide emergency sexual, reproductive and maternal health services to the population severely affected by the drought.

- The country office has received Emergency Funds worth US\$ 250,000 that will go toward;
  - Four integrated reproductive health outreach campaigns in Bari, Nugal, Sool and Sanag in April, May and June;
  - Provision of emergency obstetric and neonatal care through three maternity homes, two in Bay region and one in Bari region. This also includes referral of complicated cases to Bosasso and Bayhawa hospitals.
  - Deployment of three surge staff to support the country office response to the drought
  - Procurement of emergency RH kits and medicines and supplies for the integrated outreach (to be covered by HFCB).

#### 5. Resource Mobilization and Finance:

- UNFPA has submitted a proposal to OCHA under the CERF Rapid Response for US\$ 400,000 that will focus on provision of emergency obstetric and neonatal care including support to referral of complications during pregnancy or delivery, capacity building of health workers on MISP and provision of safe delivery, and procurement and distribution of emergency reproductive health kits for both BEmNOC and CEmONC facilities.

#### 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 monthly 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.

#### 7. Other Issues:

- Nothing to report this period