

Fast Facts



4.5 M
people in need of
humanitarian
assistance

Among Whom:



1.1 M
are women of
reproductive age



135,000
pregnant women
targeted by UNFPA
interventions



340,000
women and girls at
risk of gender-based
violence targeted by
GBV sub cluster led
by UNFPA



1. Situation Overview:

The Somalia humanitarian situation has continued to worsen in 2019 as a result of severe climatic conditions combined with other persistent drivers such as armed conflict. This has resulted in protracted and new displacements. Two consecutive poor rainy seasons; the 2018 Deyr between October and December 2018 and Gu between April and June have caused dry conditions leading to widespread crop failure and a decline in livestock production, pushing up the number of food-insecure people even further. The Food Security and Nutrition Analysis Unit (FSNAU) estimates that 5.4 million Somalis face acute food insecurity through September 2019. The number of those affected in Crisis and Emergency (IPC3 and 4), has increased by 40 percent from 1.5 to 2.2 million. By the end of June, 2019 a total of 72,000 drought induced displacements had been reported, placing enormous pressure on already limited services such as health and protection both in urban areas and in settlements for internally displaced persons (IDP). In addition, an estimated 2.6 million people remain internally displaced, either in rural areas or in informal settlements surrounding urban areas.

Reproductive health: The devastating drought continues to threaten the lives of 135,000 pregnant women around the country. Somalia already has one of the highest maternal mortality rates 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/SGBV: There continues to be a need for the protection of vulnerable groups. Women and children who are affected by displacement are at particular risk of exposure to gender-based violence (GBV), including rape. Recurrent drought, protracted conflict and armed attacks have resulted in insecurity, major protection challenges, food insecurity and extremely weakened basic socio-economic services.

2. Humanitarian needs

Sexual & Reproductive Health Needs:

- ❑ 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
- ❑ Enhance the capacity of health professional and humanitarian staff on the implementation of minimum initial service package (MISP) during emergencies
- ❑ Prepositioning of emergency reproductive health (ERH) kits

Gender Based Violence

- ❑ Availability and accessibility of quality and confidential services for the GBV survivors in the regions most affected by drought and conflict including clinical management of rape (CMR), Psycho Social Support (PSS) and safe referral pathways
- ❑ Making available hygiene/dignity kits for gender based violence survivors and pregnant women
- ❑ Mobilizing and training health and social workers to deliver PSS and CMR services for GBV survivors

3. UNFPA Drought Response

- ❑ In the months of May and June, UNFPA supported the training of 18 field coordinators in Garowe using the recently reviewed GBV coordination guidelines. UNFPA also facilitated a follow-up training for CCCM clusters on mainstreaming gender concerns into the cluster programming and implementation. The agency also participated in the facilitation of a gender and GBV workshop for 11 cluster leads in the Somalia humanitarian response towards a gender/GBV responsive HRP

- In response to accelerating community support for the enactment and implementation of the SOB and FGM bills, 20 religious leaders and 45 FGM champions were trained and mobilized in Puntland and Somaliland. They succeeded in disseminating positive messages for the bills and the abandonment of FGM to a total of 2,462 people who included 1,040 women, 352 men, 688 girls and 382 boys. In addition, a total of 1,432 persons (620 women, 172 male, 222 boys and 418 girls) gained information on the negative impact and need to abandon FGM through inter-generational dialogues
- Sixty-five people living with disability participated in the activities of community mobilization against FGM and GBV. They gained information on the advantages of legislation SOB and FGM and the need to abandon FGM practice
- UNFPA Somalia supported the distribution of 1,300 dignity kits to vulnerable women and girls in Puntland and Somaliland. The programme also trained and mobilized 60 health and PSS workers to conduct referrals and treat and manage rape and other GBV cases. Up to 256 survivors of GBV received CMR services and referral support (94 women, 160 girls and two boys among whom were one male and nine female persons living with disabilities) while 1,213 persons benefitted from PSS services (438 women, 185 male, 405 girls and 150 boys)
- During the reporting period from May to June 2019, GBV sub cluster partners cumulatively reached 26,786 beneficiaries (15,228 Women, 4,466 Men, 4,778 Girls and 4,466 Boys) with GBV prevention, response and capacity building services. This number represents an increase in number of beneficiaries reached from January to June 2019
- UNFPA and its implementing partners reached 11,500 beneficiaries through two integrated reproductive health campaigns. The campaigns offered ante/post-natal care, reproductive health information, counselling, including birth spacing counselling and support, distribution of dignity kits and referrals in target locations in Sool & Sanaag
- UNFPA is also working with partners in other affected regions of the country to support SRH and GBV services and advocacy

4. Government and UN and other stakeholders' response:

- The Somali authorities, together with donors, UN Agencies and both international and local NGOs continue to contribute aid towards food, education, shelter, water-sanitation, protection and health
- The Somalia humanitarian community under the leadership of the Humanitarian Coordinator and UNOCHA launched the 2019 Drought Impact Response Plan (DIRP). The plan is seeking USD686 Million to respond to the worsening drought conditions in the country

5. Resource Mobilization

- UNFPA received the Central Emergency Response Fund (CERF) rapid response in Somaliland and Puntland for the 2019 drought response efforts
- UNFPA is also working with bilateral donors in securing more funds for other regions in the country affected by the drought and conflict

6. Coordination

UNFPA is leading the national and sub-national GBV sub-cluster under the protection cluster and reproductive health working group under the health cluster. UNFPA actively participates in the disaster operation center (DOC), inter-cluster coordination group (ICCG), humanitarian country team (HCT) and other coordination forums led by the government.

UNFPA is also active in the resilience coordination forums including the Recovery and Resilience Framework (RRF) and the resilience Pillar Working Group (PWG). The agency is committed to the promotion of resilient households, communities and institutions with sustained access to health & other services for women, girls and youth.

Thirty-Six GBV sub cluster working groups have been established and working in Baidoa, Belet Weyne, Berbera, Borama, Bosaso, Burao, Dhobley, Dhusamareeb, Dolow, Erigavo, Galkayo, Garowe, Hargeisa, Kismayo and Mogadishu. The working groups continued to hold coordination meetings with clear follow-up actions implemented thereby enhancing GBV service delivery. The key results for coordination include harmonized messages, standardized tools, GBV protocols and the GBV service mapping and Standard Operating Procedures. The referral pathway facilitates referral of survivors for timely GBV service provision based on the needs of the survivors.