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UNFPA RESPONSE IN SOMALIA

Situation Report





FASTFACTS



Total people
in need of
humanitarian
assistance in 2022

7.7M



Internally Displaced
Persons

2.9M



Women of
Reproductive Age
(age 15-49, estimated)

3.5M



Pregnant
Women (estimated)

0.48M



Adolescents and
Youth (Age 10-24)

5.4M

GENERAL OVERVIEW

Some 7.1 million people - 45 per cent of the population - are acutely food insecure. For the first time since 2017, the Integrated Food Security Phase Classification has confirmed pockets of catastrophic food insecurity (Phase 5) affecting more than **213,000** people. In the worst-affected areas, a third of all the livestock have perished, decimating livelihoods. If crop and livestock production fails extensively, commodity prices continue to rise, and humanitarian assistance is not sufficiently scaled up, there is a realistic risk that Somalis in eight areas across the country will face famine by September 2022. An estimated 1.5 million children under age five face acute malnutrition, including **386,400** children who are likely to be severely malnourished. Gender-Based Violence (GBV) is on the rise: 50 per cent of women were reportedly subjected to Intimate Partner Violence (IPV) in the first quarter of 2022, compared with 43 per cent in the same period in 2021.

The drought is threatening those already vulnerable, in particular displaced women and girls. The situation is likely to worsen if resources ensuring availability and access to Sexual and Reproductive Health (SRH) and Gender-Based Violence (GBV) services are not received. As a result of people losing their livelihoods, there is a growing need for cash and voucher assistance across the country. The need similarly correlates with people's inability to secure basic materials, such as menstrual hygiene and sanitary items, and respond to urgent protection needs.

UNFPA Somalia prioritizes the continuity of essential and life-saving SRH and GBV services during humanitarian crises, targeting vulnerable women and girls, Internally Displaced Persons (IDPs), and persons with disabilities. In June 2022, UNFPA and its partners reached **44,136** persons with SRH services and **20,767** persons with prevention and response to GBV,



including Mental Health and Psychosocial Support (MHPSS) for women and girls. In addition, UNFPA reached **1,600** young people through youth-related activities.

The capacity of UNFPA partners is further strengthened to support the delivery of SRH and GBV services, and to respond to increasing needs. Health facilities and mobile clinics are providing services to support maternal and newborn health, birth-spacing options, and Clinical Management of Rape (CMR). MHPSS services are offered to survivors of GBV in safe spaces for women, girls and young people, and in one-stop centers.



COVID-19 UPDATES

The COVID-19 pandemic continues to challenge the already ill-equipped health service delivery in Somalia. As of 3 July 2022, COVID-19 cases in Somalia had reached 26,439 with 1,361 fatalities. The COVID-19 testing capacity across the country remains extremely limited, resulting in the true number of infections likely being underreported. The steady increase in the number of infections reveals that the epidemiological situation in the country is continuously evolving and remains volatile, particularly in areas with high numbers of IDPs and limited access to health services.

FUNDING NEEDS

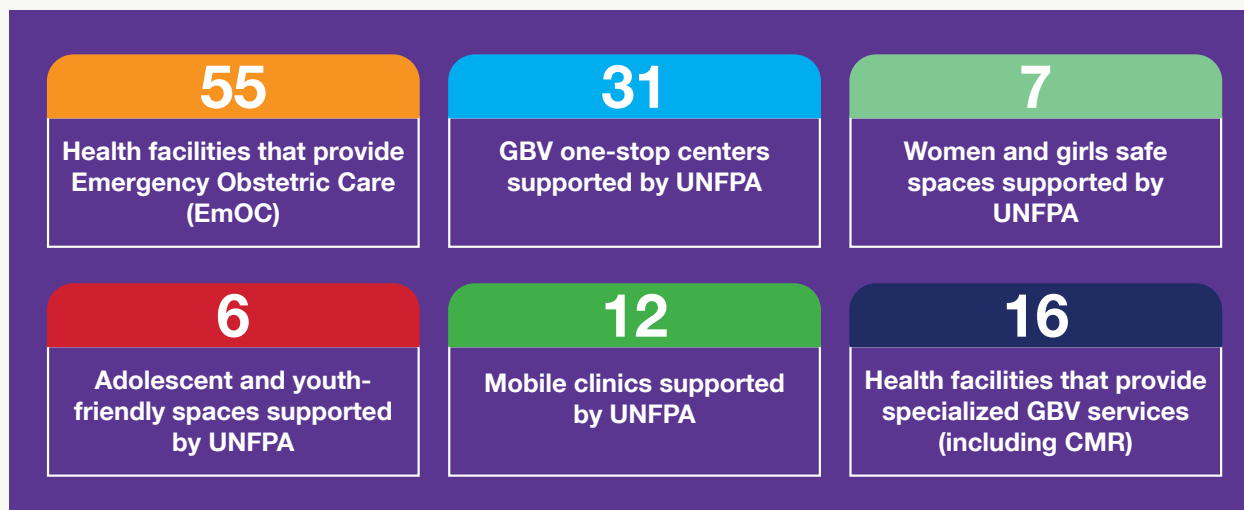
- Somalia faces a humanitarian catastrophe. Hundreds of thousands of people are on the brink of famine and starvation. Humanitarian funding and response have been scaled up, but remain vastly insufficient to avert the worst outcomes.
- The situation of women and girls in Somalia is likely to deteriorate in the coming weeks and months. Due to a lack of funding, UNFPA and humanitarian partners are unable to ensure access to life-saving SRH and GBV services for all those in need. In 2022, UNFPA Somalia requires US\$19.5 million to ensure access to SRH and GBV services for women and girls affected by the drought.
- The 2021 Humanitarian Response Plan (HRP) for Somalia was met with major funding shortfalls compared to previous years. Due to the increasingly severe humanitarian crisis in Somalia, vulnerable women, children and men are at risk of losing access to some, or all, of the lifesaving and protection services they desperately need. UNFPA and its partners are committed to scaling up the response; however, the lack of funds continues to challenge efforts. Urgent and more sustainable mid- to longer-term investment in reducing risk and vulnerability is required.

SUMMARY OF UNFPA RESPONSE

UNFPA Somalia has developed a plan to ensure access to and availability of life-saving SRH and GBV services in the worst affected regions and locations. UNFPA response activities target pregnant women, adolescent girls, boys and men in IDP camps and hard-to-reach areas, and include the provision of quality lifesaving and age-appropriate SRH services through Basic Emergency Obstetric and Newborn Care (BEmONC) and integrated SRH/GBV outreach. UNFPA works closely with the Federal Government of Somalia and the Federal Member States (FMS), other UN agencies, and partners to ensure access to and the continuity of SRH and GBV services. UNFPA is engaged in the various coordination mechanisms, including the UN Country Team (UNCT) and Humanitarian Country Team (HCT), and supports the national COVID-19 preparedness and response plans, ensuring integration of SRH and GBV concerns.



Services Delivered



Data from UNFPA Supported Services Since June 2022

Sexual/Reproductive Health	
# People reached with sexual/reproductive health services	15,523
# People reached with family planning services, information and counselling	601
# Normal / assisted deliveries	2,487
# C-Sections assisted	132
# People reached with ante-natal care consultations	7,102
# People reached with post-natal care consultations	617
# People reached with SRH information and community awareness activities	17,643
# People with disabilities reached through SRH services and information	31
Gender-Based Violence	
# People reached with GBV programming/services	573
# People provided with GBV case management	36
# People reached with GBV information and community awareness activities	20,135
# People with disabilities reached through GBV services and information	23
Youth Services	
# Adolescents and young people reached with youth programming	1600
Capacity Strengthening	
# Personnel trained on SRH, including the Minimum Initial Service Package	30
# Personnel trained on GBV in areas such as clinical management of rape	5
# Personnel trained on COVID-19 prevention and control	10
# Youth facilitators, peers and volunteers trained on SRH and GBV	15

KEY HIGHLIGHTS OF UNFPA ACTIVITIES

SRH interventions, including protection of health workforce

- Through CERF resources, UNFPA has scaled up SRH and GBV response services for people affected by the drought in Jubaland and South-West states.
- UNFPA continues to strengthen the access to and continuity of quality life-saving essentials, SRH information and services for women, adolescents and youth during the COVID-19 pandemic.
- UNFPA has concluded a two-day preparation session for on-the-job training for LMIS data quality assurance in Puntland and Somaliland respectively. This is to ensure that every product is accounted for and consumed properly.
- UNFPA and its partners have completed a 12-days training on Family Planning (FP) for 17 participants from three different regions in Somaliland: Saxil, Sool and Awdal.
- UNFPA and its partners have conducted a 7-days outreach campaign in Xingalol community in the Sanaag region. The community has been greatly affected by the ongoing drought and the population will receive much-needed SRH services as part of the campaign.
- As part of our response to the ongoing drought in Somalia, UNFPA has held a 5-days MISP training for 30 health and GBV service providers in Puntland. UNFPA supports the implementation of MISP to ensure that all those affected by the drought have access to lifesaving SRH and GBV services.
- In collaboration with national partners, a fistula awareness campaign was kicked off in Togdheer, Sool, Sanag and Awdal regions. This is to ensure that all women with Obstetric Fistula (OF) are aware of available services and how to seek help, and for health providers to be able to recognize OF and support patient referrals when needed.



Gender-Based Violence (GBV)

- UNFPA remains committed to ensure the access to and continuity of lifesaving GBV prevention and response services, such as the provision of clinical care, Psychosocial Support (PS), legal aid and material support to survivors of GBV, especially for women, adolescents and youth.
- UNFPA continues to strengthen the capacity of GBV one-stop centers across the country, integrating care for survivors of GBV with Reproductive Health (RH) services.
- UNFPA and its partners have conducted a 5-days training for chairs and co-chairs of Gender-Based Violence Working Groups (GBVWGs) in Somaliland.
- In collaboration with SEDHURO, UNFPA mobilized and sensitized people in 36 IDP settlements to declare abandonment of Female Genital Mutilation (FGM) in their respective communities. This resulted in six communities declaring the abandonment of FGM.



Adolescents and Youth Activities

- UNFPA in partnership with Folke Bernadotte Academy (FBA) organized a forum on youth, elections and democratization in Dhusamareb, Galmudug state. The purpose of the initiative is to contribute to a greater understanding and improved ways of working to increase youth political participation among relevant stakeholders working on youth, elections and democratization in Somalia. A total of 120 youth from across Galmudug attended the forum.
- UNFPA in collaboration with the Ministry of Youth and Sports Jubaland, conducted training on soft life skills for 100 young people in Jubaland. The training aims to empower youth to obtain the necessary skills to improve outcomes for young people.

- UNFPA through its national partner conducted HIV awareness sessions for 120 young people in the IDP communities in Mogadishu by providing counseling sessions, mentoring and peer leadership aimed to increase awareness, knowledge and attitudes about HIV.



COORDINATION LEADERSHIP

UNFPA continues to co-lead the national and sub-national GBV sub-cluster and the Reproductive Health Working Group (RH-WG). UNFPA is leading the efforts to ensure that the supply of RH commodities is maintained and that midwives and other health personnel have the Personal Protection Equipment (PPE) needed to stay safe amidst the COVID-19 response and the drought in Somalia.

Through the GBV AoR, UNFPA strongly advocates for funds and resources to respond to the severe drought in Somalia. UNFPA is working with other UN agencies, NGOs, Clusters and the Federal Government to ensure that GBV response and risk mitigation activities are prioritized.



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