



# SOMALIA:

## A CALL FOR HUMANITARIAN AID

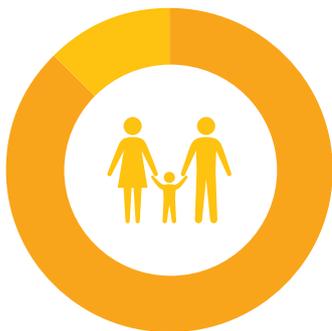
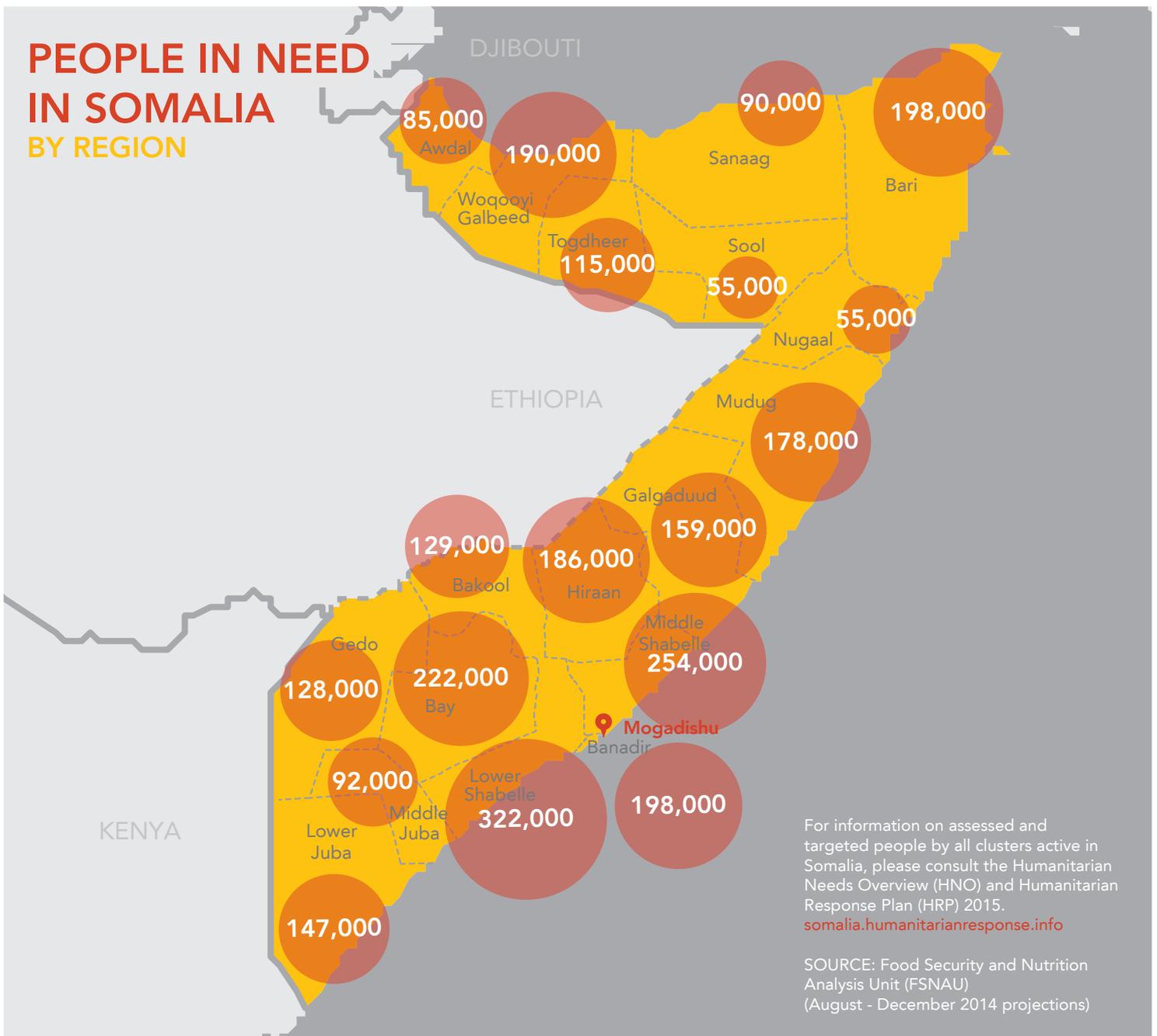
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Responding to the needs of those affected  
by the protracted emergency in Somalia

NOVEMBER 2014



# PEOPLE IN NEED IN SOMALIA BY REGION



**3.2 MILLION**  
PEOPLE IN NEED  
(AMONG THOSE ASSESSED)

**2.76 MILLION**  
PEOPLE TARGETED  
TO RECEIVE AID



**\$ 862.5 MILLION**  
FUNDS REQUESTED

This report is produced by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) in collaboration with humanitarian partners. It covers the period from January to 31 December 2015 and was issued on 19 November 2014.

The designations employed and the presentation of material in this report do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

## KEY REFERENCES:

2015 Humanitarian Needs Overview (HNO)

and

2015 Humanitarian Response Plan (HRP)

available at:

[somalia.humanitarianresponse.info](http://somalia.humanitarianresponse.info)



**1 MILLION**  
PEOPLE UNABLE TO  
MEET MINIMUM FOOD  
REQUIREMENTS



**2.1 MILLION**  
ACUTELY FOOD  
INSECURE PEOPLE



**218,000**  
ACUTELY  
MALNOURISHED  
CHILDREN &  
PREGNANT WOMEN



**1.1 MILLION**  
INTERNALLY  
DISPLACED PEOPLE  
(IDPs)



**3 MILLION**  
PEOPLE WITHOUT  
ACCESS TO WATER &  
HEALTH SERVICES

# Situation Overview

## CONTEXT AND HUMANITARIAN NEEDS

Approaching 2015, the humanitarian situation in Somalia is alarming. Since February 2014, the number of people in need of life-saving assistance has increased by 20 per cent, to over 1 million Somalis who are unable to meet their minimum food requirements. Such a level has not been reached since the devastating 2011 famine. A further 2.1 million people are on the verge of slipping into acute food insecurity, bringing the number of people in need of humanitarian assistance to 3.2 million. This deterioration is due to a mix of factors, including drought, soaring food prices, conflict, access constraints and — notably — underfunding: funding to humanitarian programmes in Somalia has dropped consistently since 2011.

Coverage and quality of basic social services remains extremely low. Health indicators are among the lowest in the world; for example, immunization coverage for measles is only 30 per cent countrywide. Only one in three Somalis have access to safe water; one in every 10 Somali children dies before seeing their first birthday; one in 18 women dies in childbirth. An estimated 1.1 million people are displaced and live in appalling conditions in overcrowded settlements with limited access to safe water, sanitation and hygiene services, putting them at high risk of water and sanitation-related diseases. They continue to face forced evictions, discrimination and gender-based violence, and lack adequate protection and durable solutions. Amongst the most affected areas are settlements for displaced people in Mogadishu.

Conflict and natural disasters lead to new displacements on a recurring basis. In 2014, military operations against Al Shabaab in southern and central Somalia have led to the displacement of over 80,000 people. The majority of those displaced are women and, given the already-significant gender inequalities, women and girls are placed at further risk of violence when obtaining access to food, water and sanitation due to the widespread impunity of armed groups, insecurity and violence. At the same time, boys and male adolescents remain the main victims of forced recruitment by armed groups.

## RESPONSE IN 2015

Based on needs-assessed (2015 HNO) and identified response priorities (2015 HRP), humanitarian partners in Somalia will be targeting 2.76 million people, or 86 per cent of those in need. Funding requirements in 2015 stand at US\$ 862.5 million, representing a 7 per cent reduction compared with 2014. This reduction is made anticipating the implementation in 2015 of the Somalia "New Deal" Compact, a Government-led development framework seeking to address structural vulnerability. The HRP complements the New Deal's larger, state-building efforts by focussing on the provision of safety-nets for the most vulnerable communities and by strengthening community-level resilience; in other words, their capacity to withstand climatic and man-made shocks.

## Strategic Objectives

- 1** Provide timely and quality life-saving assistance to people in humanitarian crisis and emergency.
- 2** Enhance the scale and quality of humanitarian protection services and improve the broader protective environment through preventive measures.
- 3** Strengthen the resilience of vulnerable households and communities through livelihood support, and programmes for critical gaps in basic social services and social protection that complement disaster risk reduction, recovery and development interventions.

# RESPONDING TO NEEDS

## EDUCATION

Of 1.7 million children who do not have access to education in Somalia, the cluster will target **340,000 children**. This will be done through the rehabilitation of existing class rooms, construction of temporary learning spaces, provision of basic equipment, increased access to non-formal education and vocational training, training on life-saving messages, and the provision of emergency incentives for teachers. Programmes implemented will use learning and learning spaces as entry points for life-saving activities and knowledge, and work to ensure the right to education for all children.

## FOOD SECURITY

The Food Security Cluster will target **2.76 million people** in need with multiple responses that factor in livelihood and food security phases of the targeted people, and seasonality. Of the 3.2 million people in need, about 1 million are experiencing acute food insecurity and will be assisted with improved access to food and safety-net responses on a monthly basis. These activities include monthly food distributions, cash and voucher transfers and wet feeding programmes. Cluster partners will assist an additional 1.6 million people who are struggling to meet their minimum food needs through seasonal assistance in the lean months from January to March. These people will not be assisted on a monthly basis as their needs are seasonal. They will benefit instead from seasonal agricultural inputs, restocking, fishing gears, vaccination and treatment of livestock and other livelihood support activities.

## HEALTH

An estimated **1.8 million people** – 56 per cent of the 3.2 million people in need of health services in Somalia – will be reached through provision of primary and secondary health care services, focusing on displaced people, host communities, underserved rural and urban areas including newly recovered areas, and drought-affected people. The focus will be on prevention of and timely response to outbreaks of different communicable diseases. Access to essential life-saving health services at primary health care facilities will be increased, and support to major hospitals that provide life-saving secondary health care services, such as comprehensive emergency obstetric care and emergency surgeries, will be enhanced.

## MULTI-SECTOR

A total of **90,000 people** (75,000 displaced and 15,000 returning Somali refugees) will be assisted with return and reintegration services through the provision of access to basic services and enhanced supportive measures for a protective environment, as well as livelihoods opportunities in the receiving areas.



Displaced people waiting at a food distribution center in Afgoye, Somalia, on 4 August 2013. The U.A.E Red Crescent provided food aid as part of a programme they are conducting during the month of Ramadan. Over 5,000 people were provided food.

© UN Photo / Tobin Jones



## COMPARISON OF KEY INDICATORS BETWEEN THE PRE-FAMINE PERIOD, FAMINE AND RECENT SEASONS

KEY INDICATORS*	GU 2010	DEYR 2010/11	GU 2011 (FAMINE)	DEYR 2013/14	GU 2014
Cereal crop production (ton)	198,200	17,900	48,500	87,800	89,500
Average cereal price (SoSH)	8,490	12,162	18,798	7,719	11,099
Median GAM rates (%)	15.95	25.85	39.5	16.1	17.3
Median SAM rates (%)	2.05	5.2	17.2	2.8	3.7

Abbreviations:  
SoSH: Somalia shilling; GAM: global acute malnutrition; SAM: severe acute malnutrition

\*Figures refer to *Gu* (April-June) and *Deyr* (October-January) rainy seasons and related harvest yields in southern and/or central regions. Source: FSNAU analysis of key food security and nutrition indicators.



## NUTRITION

Nutritional services will be provided to **660,000** (51 per cent) of the 1.3 million **children and pregnant and lactating women in need**. The focus will be on provision of basic life-saving activities and community resilience-building activities, mainly targeting displaced communities where malnutrition rates are above emergency levels, vulnerable rural people in hotspot areas, and preventive nutrition programmes in the northern regions where the nutrition situation remains stable. The food security and nutrition clusters will continue to coordinate their activities through the joint identification of geographical hotspots, most vulnerable groups and integrated food and nutrition services.



## PROTECTION

An estimated **550,000 people** – including displaced people, host communities and other affected vulnerable people – will be assisted with protection services. Key activities include the provision of medical, psychosocial and legal support to gender-based violence (GBV) survivors, reunification of separated and unaccompanied minors with their families, reintegration of children formerly associated with armed groups into the community, and improving the protective environment through prevention and response measures according to the specific needs of boys, girls, men and women. Activities will focus on the southern and central regions, which host 80 per cent of displaced people in the country, and where GBV, separated and unaccompanied children, children formerly associated with armed forces and groups, and violation of basic rights are pervasive. Where possible, partners will also focus on the newly accessible areas and settlements that absorbed the newly displaced people following natural disasters, threat of drought, clan conflict, military offensive and evictions.



## SHELTER/NON-FOOD ITEMS (NFI)s

A total of **467,000 newly and protractedly displaced people** will receive emergency assistance packages and transitional or permanent shelters. Durable solutions including voluntary return, local integration and resettlement will be provided to returning people and refugees. Although most of the potential areas of return in southern and central Somalia are not suitable for mass refugee returns, formerly displaced people and refugees continue to return to newly recovered towns where the security situation is relatively stable and some level of humanitarian services are available. In cooperation with the Protection Cluster, the cluster will continue to advocate with the authorities for more secure forms of tenure and durable solutions for displaced people in Puntland and Somaliland, and in Baidoa, Doolow and Kismayo in southern and central Somalia.



## WATER, SANITATION & HYGIENE

WASH Cluster partners plan to assist **1.65 million** (59 per cent) of the 2.8 million people who lack access to WASH services in Somalia. WASH activities will focus on displaced people and people at risk of acute watery diarrhoea (AWD)/cholera, acutely malnourished children, drought-affected people and children attending schools. Health and WASH clusters will continue to implement joint strategies to prevent and mitigate the impact of disease outbreaks, particularly seasonal AWD/cholera. Areas of joint programming have been identified through updated vulnerability maps.





Women, walking with what possessions they can carry, arrive in a steady trickle at a site for displaced people near the town of Jowhar, Somalia. Heavy rains in Somalia, coupled with recent disputes between clans, resulted in over 4,000 people seeking shelter.

© UN Photo / Tobin Jones



# Aim of humanitarian action in 2015

- Reduce malnutrition levels below global emergency thresholds of 15 per cent.
- Reduce acute watery diarrhoea (AWD)/cholera, measles and polio cases.
- Reduce the number of people unable to meet minimum food requirements from the current 13.7 per cent to less than 10 per cent of the total population.
- Reduce the number of people in "stressed" food security situations and prevent further deterioration.
- Increase the number of people with access to safe drinking water from the current 30 per cent to 40 per cent.
- Increase the coverage of protection services with the overall target of up to 550,000 people (up from about 100,000 last year).
- Support durable solutions for an estimated 90,000 displaced people and returning refugees with return and reintegration packages.

## Funding requested

The 2015 Somalia HRP includes 224 projects and seeks US\$ 862.5 million to address the humanitarian needs of 2.76 million people. In recognition of complementary programmes implemented by development partners that are expected to scale up in 2015, Education, Health, Nutrition, Protection, Shelter/NFIs, and WASH clusters have reduced their funding requests from the previous year. However, three clusters have increased the funds they need. Food Security Cluster's request increased by about 7 per cent in response to the increase in the number of food insecure people, while the Multi-Cluster funding needs increased due to the inclusion of the UNHCR refugee budget in the HRP. Meanwhile, the enabling programmes have increased due to the inclusion of the United Nations Humanitarian Air Service (UNHAS) budget, which used to be under the logistics cluster.

 **\$862.5 MILLION**  
FUNDING REQUESTED

### TOTAL POPULATION

12.3 MILLION

### PEOPLE IN NEED

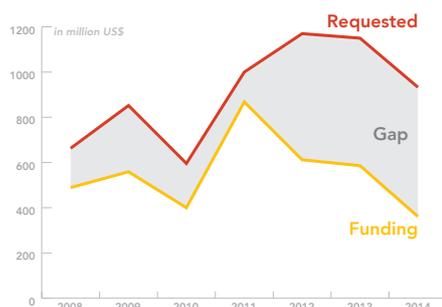
3.2 MILLION

### PEOPLE TARGETED IN THIS PLAN

2.76 MILLION

 **2.76 MILLION**  
PEOPLE TO RECEIVE AID

### FUNDING TREND (2008-2014)

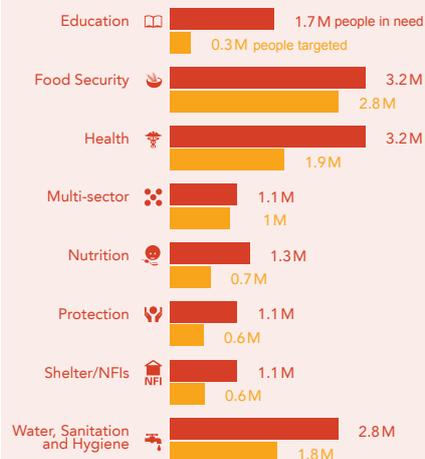


**1.1 MILLION**  
INTERNALLY DISPLACED  
PEOPLE

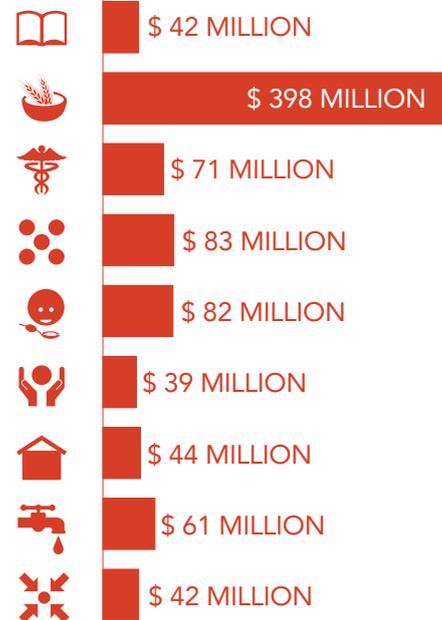


**3 MILLION**  
PEOPLE WITHOUT ACCESS  
TO HEALTH CARE AND  
DRINKING WATER

### PEOPLE IN NEED AND TARGETED PER CLUSTER



### FUNDING REQUESTED BY CLUSTER



**137**  
NUMBER OF  
PARTNERS/AID  
ORGANIZATIONS



# Guide to Giving

## to humanitarian response priorities in Somalia

### CONTRIBUTING TO THE HUMANITARIAN RESPONSE PLAN (HRP) 2015

To consult the 2015 Humanitarian Needs Overview and contribute directly to the 2015 HRP for Somalia, please visit: [somalia.humanitarianresponse.info](http://somalia.humanitarianresponse.info). This website includes information on organizations participating in the 2015 HRP as well as people to contact concerning donations.

### DONATING THROUGH THE COMMON HUMANITARIAN FUND (CHF) IN SOMALIA

The Somalia CHF is a multi-donor pooled fund designed to provide timely and flexible funding for NGOs and UN agencies to respond to critical humanitarian response priorities as defined in the HRP. For further information please visit:

[www.unocha.org/somalia/financing/common-humanitarian-fund](http://www.unocha.org/somalia/financing/common-humanitarian-fund)

### DONATING THROUGH THE CENTRAL EMERGENCY RESPONSE FUND (CERF)

CERF provides immediate funding for life-saving humanitarian action at the onset of emergencies, in rapidly deteriorating situations and in protracted crises that fail to attract sufficient resources. CERF receives contributions from various donors — mainly governments, but also private companies, foundations, charities and individuals — into a single fund. This is set aside for immediate use during crises anywhere in the world. More information about CERF and how to donate can be found here: [www.unocha.org/cerf/our-donors/how-donate](http://www.unocha.org/cerf/our-donors/how-donate)

### IN-KIND RELIEF AID

The United Nations urges donors to make cash rather than in-kind donations for maximum speed and flexibility, and to ensure that the most needed type of aid is delivered. If you can only make in-kind contributions in response to disasters and emergencies, please contact: [logik@un.org](mailto:logik@un.org).

### REGISTERING AND RECOGNIZING YOUR CONTRIBUTIONS

OCHA manages the Financial Tracking Service (FTS), which records all reported humanitarian contributions to emergencies (cash, in-kind, multilateral and bilateral). Its aim is to give credit and visibility to donors for their generosity and to show the total amount funding and resource gaps in humanitarian appeals. Please report your contributions to FTS, either by email to [fts@un.org](mailto:fts@un.org) or through the on-line contribution report form at [fts.unocha.org](http://fts.unocha.org).

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# WHAT IF?

## ... WE FAIL TO RESPOND

If humanitarians are not able to raise funds and deliver aid for the Somalia crisis...

- 1** The **number of people in acute food insecurity will further increase** from the current 3.2 million people. The gains of the last two years, which have been somewhat eroded in 2014, will be completely reversed. This could result in people on the margins of food insecurity slipping further into destitution. Already, vital food aid pipelines are depleted, health services are closed and agriculture and livelihood programmes scaled down due to funding constraint.
- 2** The number of **acutely malnourished children**, currently 218,000, **will increase further**. Of these, the **44,000 severely malnourished will face risks of dying** if they do not receive medical treatment and therapeutic food.
- 3** The lack of adequate WASH and health services will lead to **disease outbreaks, particularly acute watery diarrhoea (AWD)/cholera and measles**. If WASH needs are not met, a deterioration of the malnutrition situation is likely, notably in sites where displaced reside and above-emergency levels of acute malnutrition have been observed in 2014. **About 1,265,000 people in drought-prone areas will have no access to drinking water**, while more people would continue to be trapped in an environment of open defecation due to a reduction in awareness-raising initiatives. Timeliness and quality of emergency response would be greatly affected, as WASH supply hub systems may collapse due to a lack of replenishments.
- 4** The **measles caseload will increase above the 9,000 suspected cases**, while **AWD/cholera cases** — which were reduced to around 4,000 cases in 2014 — **could reach 20,000**, as witnessed in 2012.
- 5** **Millions of Somalis**, particularly 1.1 million who are displaced, **will continue to face violence, displacement, abuse and exploitation**. Rights violations include killings, forced evictions, arbitrary displacement, gender-based violence, forced recruitment of children, family separations, child labour or trafficking. Many will continue to suffer due to denial of access to aid. Access to basic services, adequate shelter and durable solutions will remain distant, undermining the quest for peace and stability in Somalia.
- 6** A total of **340,000 children** who could be supported with access to schools if funds are received **will miss school and a large number of children will be left vulnerable to harmful labour, recruitment, trafficking and abuse, and an inclination towards extremism**. These children are part of 1.7 million children who do not have access to schools in Somalia. If the trend of last year continues, 700 teachers could leave their profession and 150 learning centres could be closed due to lack of funding. In addition, one of the serious effects of lack of education in Somalia is that **about 1,300 children could be recruited as child soldiers**.



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