

## HIGHLIGHTS

- Recent assessments point to a below average harvest in early 2014.
- Nutrition situation remains critical for people residing in settlements for displaced.
- The continued insecurity and use of asymmetric warfare tactics has adversely affected the ability to plan and carry out aid work.

## FIGURES

# of people in humanitarian emergency and crisis	870,000
# of people in stress	2.3m
# of acutely malnourished children under age 5	206,000
Source: www.fsnau.org (August-December projection)	
# of internally displaced people	1.1m
# of Somali refugees in the Horn of Africa and Yemen	1m
Source: UNHCR	

## Consolidated Appeal

## FUNDING

**927.5 million**  
requested for 2014 (US\$)

**1.15 billion**  
requested for 2013 (US\$)

**48.4% (558m)**  
(reported as of 31 Dec 2013)

Source: <http://fts.unocha.org>



Boys carrying water next to a site for displaced people in Jowhar.  
Credit: UN Photo/Tobin Jones

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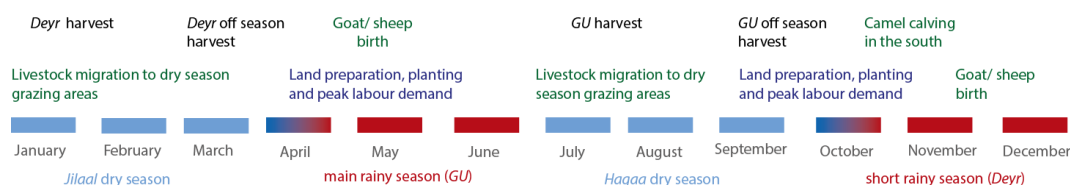
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## Below average harvest expected

### Food security partners advise extended assistance in parts of the country

The Food Security Nutrition Analysis Unit (FSNAU) and partners have recently conducted assessments, which indicate a below average cereal harvest in early 2014. Some households in parts of Juba and Shabelle regions in southern Somalia will have a poor harvest. Overall, the reduced harvest is mainly due to poor *Deyr* rains and river flooding. Storm-affected people in the north-eastern parts of the country who lost large amounts of livestock are also impacted and will require humanitarian assistance through the lean season. Modest gains were made in food security in Somalia in 2013. However, while the number of Somalis in crisis has reduced to 870,000, there are 2.3 million people in “stress” who barely meet their food needs and rely on livelihood support. In addition, about 206,000 children under five suffer from acute malnutrition – this ratio of one in seven children malnourished is among the highest in the world.

Humanitarian partners are working to strengthen preparedness and response for the possible downturn in food security. Through its use of local partners, the Food Security Cluster has assisted about 1.1 million people per month despite the challenging operating environment. When the first food security alerts were issued, the cluster advised its members to extend activities through the lean season, the period between the two major harvests when households’ food stocks run low. Activities have also focused on strengthening resilience and nutrition in collaboration with nutrition partners, particularly for children under five and lactating and pregnant women. Food vouchers for disaster-affected people have been expanded with activities in Banadir and Gedo in addition to Bari and Nugaal regions. Voucher distributions can reduce security concerns around food distributions in volatile areas and stimulate local markets. Persistent armed conflict and acts of terrorism, particularly in southern and central Somalia, continue to limit humanitarian access and the delivery of essential assistance.



Source: Food Security and Nutrition Analysis Unit. For more information go to: [fsnau.org](http://fsnau.org)

### Nutrition situation remains critical among internally displaced people

Recent findings from joint nutrition and food security assessments in November and December in main sites for internally displaced people indicate that global acute malnutrition (GAM) remains at critical levels in seven of 12 assessed settlements. About 7,200 children aged six months to five years from 4,360 households were covered. The situation has deteriorated among displaced people in Qardho in Puntland and Berbera in Somaliland compared to six months ago. The deterioration in Qardho is attributed to an increase in

## BASELINE

Population (UNDP, 2005)	7.5m
GDP per capita (Somalia Human Development Report 2012)	\$284
% pop living on less than US\$1 per day (UNDP/World Bank 2002)	43%
Life expectancy (UNDP-HDR 2011)	51 years
Under-five mortality (FSNAU 2013)	0.53/10,000 /day
Under-five global acute malnutrition rate (FSNAU 2013)	14.4%
% population using improved drinking water sources (UNDP 2009)	30%

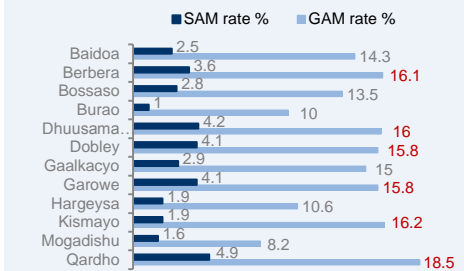
## CLUSTERS

### Lead/Co-lead organization

Education	UNICEF SC-Alliance
Food security	FAO/WFP WOCCA/RAWA
Health	WHO Merlin
Logistics	WFP
Nutrition	UNICEF CAFDARO
Protection	UNHCR DRC
Shelter	UNHCR UNHABITAT
Water, sanitation & hygiene	UNICEF Oxfam GB

morbidity, and stunting and underweight levels were also higher. In Berbera the data does not explain the deterioration, but seasonal factors and poor quality diets could influence the results, according to FSNAU. The nutritional situation improved among displaced people in Baidoa, Bossaso, Dhuusamarreeb, Dhobley, Hargeysa and Mogadishu. The assessments indicate that both the crude death rate and the under-five death rate levels are considered tolerable in 10 of 12 surveyed locations. However, serious levels were seen in Kismayo and Dhobley settlements for displaced in southern Somalia and are indicative of an acute crisis situation. With critical levels of acute malnutrition prevailing, immediate treatment of identified children would help prevent the situation from getting worse, according to FSNAU. The Nutrition Cluster is looking to scale up programmes in vulnerable communities to screen and treat children with malnutrition, subject to funding availability.

### GAM and SAM among internally displaced



Source: FSNAU Nov-Dec 2013 nutrition assessments. The WHO emergency threshold for GAM is 15%. Severe acute malnutrition (SAM) over 5% is considered critical.

## Aid efforts continue in Puntland and Jowhar

### In-depth assessment to determine remaining needs following tropical storm

Findings from the multi-cluster initial rapid assessment (MIRA), which was deployed on 21 November following the storm that hit the Puntland coast on 10 November, were collated and analysed in December. The assessment aimed to gauge remaining immediate needs and inform humanitarian and early recovery planning after the majority of the 5,000-6,000 directly storm-affected households had been reached with critical humanitarian assistance in the 10 days following the storm. A lack of pre-existing demographic data made it difficult to clearly identify causal effects of the storm. However, basic humanitarian needs were identified. While the full MIRA results remain pending and are being discussed with Puntland authorities, reports indicate that the storm damaged and contaminated large clean water sources and that half of the affected people did not have access to sustainable sources of clean water or sanitation. A lack of basic health care services was also found. Preliminary findings indicate a majority of assessed households in the hardest hit areas of Bandarbayla, Dangoroyo and Eyl did not have access to basic medicines and that access to safe delivery or reproductive health for mothers was needed.



Up to 300,000 animals are estimated to have died within hours of the storm. Immediate support was provided for surviving animals including vaccinations against contagious diseases. Credit: FAO

### Support to people affected by floods and violence ongoing

In December and January, emergency response continued to people affected by flooding and inter-communal fighting in Jowhar in Middle Shabelle. Over 80,000 people have been affected and the combined impact of the localized flooding, violence and heavy rains in the area has adversely affected land preparation and sowing due to standing water. In early January, some families displaced by the fighting were resettled in the Sabun area two months after having sought shelter in a makeshift site near Jowhar airport. Humanitarian organizations have been assisting people who have temporarily settled in the Jowhar airport area.

## Health actors respond to outbreak alerts

*To accelerate child health and improve immunization coverage, Child Health Days were held across southern and central Somalia in December.*

### Child Health Days help boost immunization coverage

Over 100 outbreak alerts, mainly for measles, were reported and investigated in December, according to the World Health Organization (WHO). The majority of the measles cases were reported in central Somalia, where immunization coverage is very low. To accelerate child health and improve immunization coverage, Child Health Days were held across southern and central Somalia in December with support from pooled funds. The campaign targeted over 1 million children with pentavalent vaccine and vaccine against measles and polio. Pentavalent is a vaccine against diphtheria, whooping cough tetanus, hepatitis B and *haemophilus influenzae*. About 1.2 million women of childbearing age were targeted with tetanus toxoid vaccination.

An increased number of suspected cholera cases were reported in December. Health partners collected and analysed stool samples, which tested negative for cholera and other diseases like shigella and salmonella. However, about two thirds of the cases tested positive for rotavirus. Rotavirus is one of the major causes of acute watery diarrhoea in Somalia, which highlights the importance of hygiene promotion activities to reduce the burden of the disease. The wild polio cases in Somalia stood at 185 as of mid-January and response activities continue. Incidences of violence have continued in southern Somalia. In December, 252 wounded civilians were treated at four major hospitals supported by WHO in Mogadishu. Another 67 civilians were treated at the main hospital in Kismayo.

Weapon related injuries reported in four major hospitals in Mogadishu 2012-2013



Source: WHO

## Solutions for displaced people needed

### Eviction evictions and threats continue in Mogadishu and Kismayo

Despite continued advocacy efforts, forced evictions remain a serious threat to displaced people and other vulnerable groups. In November and December, about 27,000 people were evicted from different settlements in Mogadishu, according to the UN refugee agency, UNHCR. As previously reported, in January 2013, the Federal Government of Somalia initiated a plan to relocate displaced people from the numerous settlements scattered inside Mogadishu and on the outskirts of the city. However, the plan stalled partly due to lack of security and land-ownership benchmarks, and pre-emptive action by gate-keepers (self-appointed “custodians” of the displaced) moving people out of settlements. Humanitarian partners have engaged with the Government in planning the relocation in the capital to ensure the process was conducted in a voluntary, consultative, systematic and rights-based manner.

Imminent evictions were also reported from Kismayo where authorities had given people occupying public buildings and land two months to vacate the sites (20 November – 20 January). However, within a month some 450 people had been evicted according to UNHCR although reports suggest that the evicted families received financial assistance as a means of redress from authorities. Kismayo authorities have expressed an interest to work with humanitarian organizations to find solutions for the about 20,000 displaced people in Kismayo, according to UNHCR.

## Volatile operating environment persists

### Fluctuating insecurity key constraint to aid delivery

The security situation remained volatile and unpredictable in parts of the country, including in the capital. The beginning of the year was marked by an attack at the

*In November and December, about 27,000 people were evicted from different settlements in Mogadishu.*

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Web story Jowhar:

<http://bit.ly/1hSsl6a>

Jazeera hotel in Mogadishu causing numerous casualties. The continued insecurity and use of asymmetric warfare tactics has adversely affected the ability to plan and carry out aid work. Aid workers have also increasingly been targeted through arrests and detentions by other armed groups. In late December and early January aid workers were detained in Bakool, Bay, Lower and Middle Juba regions, allegedly by armed groups. The release of the people is negotiated at local level and some aid workers were freed early January. In parts of southern Somalia, humanitarian access has been further impacted by bureaucratic impediments imposed by regional administrations, including instructions to seek approval for recruitment of staff or renting of premises or paying a registration fee for providing humanitarian assistance.

## Funding boost needed to consolidate gains

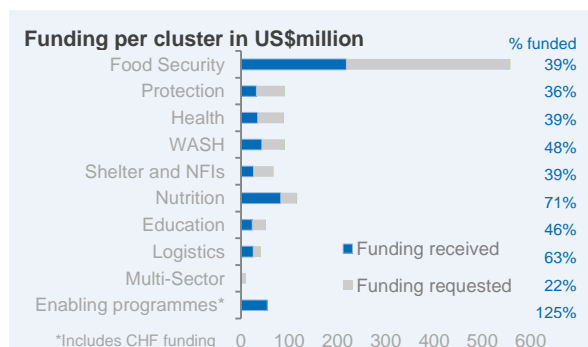
### Even modest shocks can knock people back into repeat crises

In 2013, the first year of Somalia's 2013-2015 Consolidated Appeal \$558.23 million (48 per cent) of the \$1.15 billion revised request was received with funding per cluster ranging between 22 and 71 per cent. Sustained funding and continued commitments from donors is required in 2014 to ensure implementation of life-saving activities and to shore up resilience programmes for the 870,000 people in crisis and emergency and 2.3 million

people who teeter on the margins of food insecurity. While 2013 saw some improvements in the humanitarian situation, gains are fragile, and even modest shocks can knock vulnerable people back into emergency and lead to recurrent humanitarian crises. With only half of financial requirements covered in 2013, humanitarian partners have had to prioritize life-saving activities, limiting investment in basic services, safety nets and resilience programmes and thereby jeopardizing the objectives of the multi-year humanitarian appeal. Only with timely, adequate and sustained funding will humanitarians be able to effectively build on the gains made through investment in resilience to mitigate and avoid crises, and support the transition from aid dependency to sustainability.

In 2013, the pooled Common Humanitarian Fund (CHF) allocated \$36.57 million to partners through the standard allocation (\$28.84 million) and emergency reserve (\$7.73 million) supporting 55 partners to implement 95 projects in 15 regions in Somalia. The standard allocation focused on life-saving assistance and support to resilience activities in 22 priority districts in Somalia. The majority of the funding available under the emergency reserve window was allocated in the second half of the year supporting life-saving and livelihood activities. This included \$2.65 million to health and nutrition projects to support 11 health facilities previously run by the aid group Médecins Sans Frontières, targeting an estimated 335,000 people and \$1.2 million to boost the response to floods in Jowhar and parts of Balcad districts in Middle Shabelle. About \$545,000 will support the establishment of seven temporary health posts and referral services to over 80,000 people displaced by floods and conflict, and \$632,000 will support access to safe water and sanitation facilities. An additional \$1.2 million was allocated in late December through the emergency reserve to support life-saving health services to children and women of child-bearing age through Child Health Days in Banadir, Galgaduud, and Gedo regions, targeting about 1 million people.

In 2012, the CHF funded 172 projects worth \$90 million, \$81 million through standard allocations and \$9 million through the emergency reserve. For more information, go to: <http://fts.unocha.org>



*Sustained funding is required in 2014 to ensure continued implementation of life-saving activities and to shore up resilience programmes.*

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