HUMANITARIAN NEEDS OVERVIEW

PEOPLE IN NEED

4.9M

NOV 2015

SOMALIA

UN/Tobin Jones
PART I: SUMMARY

- Humanitarian needs & key figures
- Impact of the crisis
- Breakdown of people in need
- Severity of need
PART I:

Total population: 12.3 million

- "Stressed": 3.9 M (32%)
- "Crisis": 935 k (7.6%)
- "Emergency": 79 k (0.6%)

The original 2015 Somalia post-Gu survey assessment results and IPC analysis were reported based on the old (2005 UNDP) population estimate as the breakdown of the new 2014 United Nations Population Fund (UNFPA) population estimate for Somalia was not available at lower (district) level in advance of the assessment. However, this has been revised based on the new population estimate for Somalia (UNFPA 2014) incorporating FSNAU livelihood information embedded in the 2005 UNDP district level population data.

1. The integrated food security phase classification (IPC) is a set of tools and procedures to classify the severity of food insecurity using a widely accepted five-phase scale. At the area level, it divides areas into the following phases: IPC Phase 1—Minimal; Phase 2—Stressed; Phase 3—Crisis; Phase 4—Emergency; and Phase 5—Famine.

2. 2014 UNFPA population estimates.

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.
HUMANITARIAN NEEDS & KEY FIGURES

While the country has made modest gains, high levels of humanitarian needs persist. About 4.9 million people are in need of life-saving and livelihoods support and 1.1 million remain internally displaced.

Cyclical climatic impacts, armed conflict, clan violence, widespread human rights violations, political instability and insecurity, and low levels of basic development indicators persist in the country. This is exacerbated by high malnutrition rates, extensive food insecurity, vulnerable livelihoods, poor health infrastructure, recurrent disease outbreaks, a lack of clean and safe water, poor provision of basic services, including education, and pervasive protection violations. Internally displaced persons are particularly vulnerable, and in urgent need of protection, including durable solutions. The El Niño phenomenon is expected to prompt heavy rains and cause flooding along the Juba and Shabelle rivers, flash floods in central Somalia and Puntland, and exacerbated drought conditions in coastal areas of Somaliland. This could severely compound the already fragile humanitarian situation in Somalia.

1 **Persistent food insecurity**
   According to the Food and Agriculture Organization (FAO) managed Food Security and Nutrition Analysis Unit (FSNAU), the number of people who face acute food security “crisis” or “emergency” has exceeded 1 million. Another 3.9 million people are at risk of slipping into acute food insecurity. In total, 4.9 million people require humanitarian assistance.

2 **Continued high levels of acute malnutrition**
   High levels of acute malnutrition persist. Based on prevalence estimates, about 308,000 children under the age of 5, or one in eight, are estimated to be acutely malnourished. Hereof, 56,000 are severely malnourished and at risk of death if they do not receive urgent medical treatment and therapeutic food. In internally displaced persons settlements, global acute malnutrition (GAM) rates are frequently above the emergency threshold of 15 per cent.

3 **Poor access to basic services**
   Poor basic services continue to undermine the resilience of vulnerable people. About 3.2 million women, girls, boys and men in Somalia need emergency health services, while 2.8 million women and men require improved access to water, sanitation and hygiene (WASH). The impact of this lack of basic services is felt strongly among internally displaced persons who continue to be affected by cyclical disease outbreaks and suffer from high levels of acute malnutrition. Around 1.7 million school-aged children are still out of school.

4 **Civilian protection challenges persist**
   Many of the over 1.1 million protracted internally displaced persons continue to face high risk of forced evictions, discrimination, violation of children's rights and pervasive gender-based violence (GBV). These vulnerable communities need land tenure and property rights, adequate and safe shelter, whether permanent or transitional, as well as household items, protection services, local integration and durable solutions. More than 116,000 internally displaced persons were forcibly evicted in Mogadishu, Baidoa, Bossaso, Gaalkacyo, Hargeysa, and Kismayo during the first half of 2015. The ongoing military operations that started in July 2015 in southern and central Somalia displaced over 42,000 people by late August.
Food insecurity and high levels of malnutrition

According to FSNAU and the Famine Early Warning Systems Network (FEWSNET) post-Gu rains food security and nutrition assessment, approximately 1 million people face acute food security “crisis” or “emergency” through the end of 2015,\(^1\) while the number of those in “stressed” situation was reported at 3.9 million. This means that about 4.9 million people are in need of life-saving and livelihood support.\(^2\) Just over half, or 58 per cent, of the people who are in “crisis” and “emergency” are internally displaced persons. The main reasons for the reported high level of food insecurity in Somalia are: below-average agricultural production, poor rainfall in some pastoral and agro-pastoral areas, trade disruption in the most conflict affected-areas, likely flooding caused by El Niño and continued displacement.

Widespread acute malnutrition continues to persist across Somalia.\(^3\) The malnutrition rates have remained somewhat unchanged from 2007 to 2015. The latest countrywide nutrition survey (2015 Gu) results indicate a median GAM rate of 13.6 per cent and a median severe acute malnutrition (SAM) rate of 2.3 per cent of children under age 5. Out of 13 internally displaced persons surveyed during the 2015 Gu, five of them showed critical levels of GAM, including Baidoa (Bay), Dhobley (Lower Juba), Doolow (Gedo), Garowe (Nugaal) and Gaalkacyo (Mudug). Acute malnutrition in children aged 6-59 months could be attributed to food insecurity, sub-optimal child-feeding practices, low coverage of health services and lack of access to clean water supply.

**Lack of basic services**

About 3.2 million women, girls, boys and men need emergency health services. Lack of access to reproductive healthcare can be life-threatening for women. The system remains weak, poorly resourced and inequitably distributed. The health situation is one of the worst in the world. Funding for health programmes remains very low and there is critical shortage of capacity for a health workforce. The 2014 estimates indicate that there are only about 6,300 doctors, nurses and midwives working in Somalia.\(^4\) The shortfall in funding is already jeopardizing provision of health services and putting health of the affected communities at dire risk. At least seven hospitals, including Belet Weyne, Bossaso, Burao, Gaalkacyo South, Jowhar, Kismayo and Marka, are at risk of closure in the near future if no funding is made available.

Around 45 per cent of Somalis do not have access to safe water and 37 per cent of Somalis do not have access to basic sanitation. The acute shortage of water in some districts is further exacerbated by seasonal droughts and floods leaving vulnerable people with limited affordable options. Women and girls, also due to their needs linked to reproductive health, bear the brunt of poor sanitation facilities and the practice of open defecation is common and notably undertaken after dark, which is a severe protection risk and exposes them to physical assaults and GBV. Persistent waterborne disease outbreaks and lack of improvement (or a degradation) of the malnutrition situation is due, in part, to significant underfunding of WASH activities.

About 1.7 million children remained in crisis and out of school in 2015. Inadequate learning facilities, lack of teachers

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2. The 2015 post-Gu assessment results are reported based on the the new population estimate for Somalia (UNFPA 2014) incorporating FSNAU livelihood information embedded in the 2005 UNDP district level population data.

3. FSNAU post-Gu assessment, September 2015

and scarce basic emergency teaching and learning materials have a serious impact on access to education for children, in particular, among displaced communities and in recently recovered areas. The continued lack of financial support has made it difficult to ensure children can access education in southern and central Somalia. A total of 340,000 children are also at risk of water-related diseases due to lack of appropriate WASH services and related education/hygiene promotion activities in schools.

Disease outbreaks

AWD/cholera is reportedly the disease with the highest death rate in Somalia. Between January and September 2015 around 4,000 cases of AWD were reported including 20 deaths, with 85 per cent of the cases being children under age 5. To date a total of 10 regions are affected, with 53 per cent of the reported cases male and 47 per cent female. These figures could be higher as the reporting system is weak. The WASH cluster estimates that about 930,000 people are at risk of AWD.

Two confirmed cholera outbreaks, with 63 reported cases and two deaths, occurred in the first quarter for 2015, in Lower Juba and Middle Shabelle regions, where the response is still ongoing. These regions, among others, are classified as hot spots for cholera. The main cholera referral treatment centres in Mogadishu were closed due to lack of funding and cholera treatment units, which used to be supported by UNICEF at primary level facilities, are no longer active due to a lack of supplies.
Measles outbreaks were confirmed in several regions of Somalia in 2015, including Lower Juba and Middle Shabelle region. Around 5,700 suspected measles cases were reported between January and September, which is a significant decrease in comparison to the approximately 10,000 cases reported in 2014. Yet, the risk of further spread and fatality is high due to the low immunization coverage which stands at 30 per cent countrywide. The coverage is less in some hard-to-reach areas in southern and central regions.

Polio continues to threaten the lives of Somali children, despite a well-coordinated vaccination campaign that started in 2014 and reached over 4 million children across the country. As at mid-August 2015 no new polio cases had been reported in the last one year and Somalia was declared polio-free in October. However, this does not rule out the re-importation of polio and risks of contraction remain. Vaccinations to eradicate polio need to be sustained for Somalia and the risk of importation remains.

Protracted and ongoing internal displacement

Over 1.1 million people remain in protracted internal displacement across the country, the majority of whom are in southern and central regions. Some of these internally displaced persons have been displaced multiple times during the last two decades, including most recently due to forced evictions in many urban areas. Internally displaced persons continue to live in overcrowded settlements and they face threats to their protection, such as physical attacks, arbitrary arrests, GBV, particularly rape, sexual exploitation and abuse, restrictions on their right to freedom of movement, and lack of safe, and adequate access to basic services including education, WASH services, or livelihoods. Economic exploitation is of serious concern, including child labour. In many locations some of the worst abuse is from the settlements’ ‘gatekeepers’ who treat internally displaced persons as commodities for their personal gain. Incidents of GBV are highest in internally displaced persons settlements particularly rape and physical assault, perpetrated by a variety of actors, including armed forces and other uniformed personnel, members of the host community, as well as from within the internally displaced persons community. This environment is also extremely harmful for the protection and well-being of children. Children are also at the risk of forcible recruitment into armed groups.

Internally displaced and other vulnerable people in urban areas such as Mogadishu and Kismayo, where the appreciation of land value is driving land-grabbing, also face forced evictions from both private and government-owned land and buildings. Forced evictions are undertaken at short or no notice, and without viable alternatives in place. Between January and September 2015, some
116,000 internally displaced persons and the urban poor in Mogadishu, Kismayo and other urban centres, including Baidoa, Bossaso, Gaalkacyo, Hargeysa and Luuq have been forcibly evicted and have often been left with no choice but to move to remote areas on the outskirts of the city into internally displaced persons settlements, where they face serious protection risks, including exploitation and abuse, as well as scarce basic services and livelihoods. Multiple land claims, insecure land tenure and weak land management systems have exacerbated the situation. Land owners are often unable to verify land documents due to bureaucracy and high turnover of district officials, subsequently affecting institutional history. Internally displaced persons, due to the power imbalances and discrimination, are usually not in a position to challenge the validity of an eviction, nor of underlying land and property claims. This is one of the key impediments to durable solutions for the displaced. The high numbers in forced evictions is indicative of the constrained protection environment rendering rights-based interventions towards durable solutions, including return, local integration or to settlements elsewhere, difficult.

**Arrivals from Kenya and Yemen**

Nearly 1 million Somali refugees live in settlements in neighbouring countries, mainly in Kenya, Ethiopia, Yemen, Djibouti, Egypt, Eritrea, Tanzania and Uganda. The crisis in Yemen has resulted in Somali returnees and Yemeni refugees arriving to Somalia to seek refuge. The conflict in Yemen continues to cause mixed migration movements, involving refugees, migrants and returnees (mostly the large population of Somali refugees in Yemen). According to UNHCR, as at November 2015, almost 30,000 Somali, Yemeni, Djiboutian and Ethiopian nationals had arrived in Berbera, Somaliland, and Bossaso, Puntland. More than 90 per cent of new arrivals from Yemen are Somalis, along with about 3,100 Yemeni prima facie refugees. UNHCR has predicted that about 20,000 more people are expected to arrive from Yemen through these ports and other ports in southern and central Somalia, such as Mogadishu and possibly Kismayo, by the end of 2015, and that a further 90,000 will arrive throughout 2016. An inter-agency taskforce, established by the Somalia Humanitarian Country Team in April 2015 and co-led by UNHCR and IOM, continues to ensure the provision of initial reception assistance (providing necessary food, health, nutrition and WASH services), transportation to areas of origin, and a three-month food rations and a reinsertion/reinstallation grant. The absorption capacity of host communities and Government institutional capacity needs to be strengthened to ensure sustainability. The influx adds to the larger longstanding situation of internally displaced persons in the country and Somali refugees in neighbouring countries.

In April, following the attack on Garissa in north-eastern Kenya, the Government of Kenya (GoK) stated its intention to close the Dadaab refugee camp in Kenya and force refugees to return to Somalia. After sustained advocacy, the GoK agreed to uphold the terms of the November 2013 Tripartite Agreement between Kenya, Somalia and UNHCR which committed all parties to ensure that all returns of Somali refugees from Kenya will be conducted in a voluntary manner consistent with international norms. As part of the pilot return programme that started in 2014, six new return areas were identified (Afgooye, Balcad, Belet Weyne, Jowhar, Mogadishu and Wanla Weyn) in 2015, in addition to the three already existing return areas (Baidoa, Kismayo and Luuq). By the end of August 2015, the number of registered Somali refugees in Kenya had decreased to some 420,700. So far in 2015, according to UNHCR, about 4,300 refugees have voluntarily returned from Kenya to Somalia. The support provided by humanitarian partners is based on the principle of their right to return and does not in any way suggest that the conditions are in place for the promotion of large-scale returns to all parts of Somalia. UNHCR’s non-return advisory to southern and central Somalia remains in place due to the fragile conditions in the country. There is a need to support Somali refugees in Kenya to better prepare themselves for appropriate solutions, including voluntary repatriation and to enhance the absorption capacity of receiving communities in Somalia for sustainable reintegration of returnees and internally displaced persons.
The Somalia Return Consortium has been facilitating voluntary returns of internally displaced persons since 2012. Around 132,000 people were supported throughout the return process, including with the standard minimum package, which is designed to cover basic needs for an initial six months. Internally displaced persons continue to need transport, core relief items, a basic shelter kit, and food and livelihoods assistance up to six months to return to their areas of origin in the country.

**Current and future drivers of humanitarian needs**

**Military operations**

Southern and central Somalia is the most affected by armed conflict. Somaliland and Puntland are relatively stable, although there have been reports of increasing non-state armed actors activities in Puntland and clashes over the disputed region of Sanaag, Sool, and Galgalala mountains. Civilians continue to bear the brunt of the conflict and have been particularly affected by the new military offensives that were launched in mid-July 2015. So far, over 42,000 people have been internally displaced from areas within Bakool, Bay, Galgaduud, Gedo, Hiraan and Lower Shabelle and more are likely to be displaced as the military operations continue. The majority of the displaced people have moved to safer places within the affected regions, while others have moved to areas in Lower Juba and as far as Mogadishu and Dolo Ado Refugee Camp in Ethiopia. Thousands of people were also displaced from Cabudweaq town following prolonged armed confrontation between different forces in early September. Indiscriminate and/or disproportionate use of force in civilian areas continues to be a primary cause of displacement. While some were short-term displacements, some of the displaced people have been able to return to areas of origin once hostilities have ceased, others fled to internally displaced persons settlements and urban areas, and continue to live there.

The threat of death and injuries to civilians remains high. Al Shabaab continues to carry out high profile attacks in locations such as Mogadishu with improvised explosive devices (IEDs), grenades and suicide bombing in which civilians have been killed and injured. Al Shabaab is known to plant IEDs on main roads. As these roads are used for transportation, civilians have therefore suffered as a result of the explosive hazards, which have caused death, physical injury and disabilities. Grave human rights violations, particularly arbitrary arrests, violations of child rights and GBV, have been reported from areas where military activities have been taking place, as well as at illegal checkpoints thereby inhibiting the freedom of movement of civilians in and out of besieged towns recovered in the wake of the 2014/2015 military offensives. In addition to civilians being affected by conflict between Somalia National Armed Forces (SNAF)/African Union Mission in Somalia (AMISOM), Ethiopian National Defence Forces (ENDF), Kenya Defence Forces (KDF) and Al Shabaab, tensions among rival clans and militias over the formation of semi-autonomous regional states and inter-clan fighting over control of land and other resources also remain a concern. Civilians, particularly from minority clans, women and children have faced increased protection risks during such conflicts. While government forces retain hold of key towns in southern and central Somalia, Al Shabaab continues to control much of the rural areas and has increasingly resorted to asymmetric attacks which frequently impact civilians.

**El Niño**

The Greater Horn of Africa Climate Outlook Forum (GHACOF) has confirmed that El Niño conditions have intensified and will affect the region during the 2015 September to December rainy season. The El Niño phenomenon is likely to lead to a wetter than normal Deyr season in parts of the country. Enhanced rains could result in good pasture and crop development in southern and central Somalia, Al Shabaab controls continues to control much of the rural areas and has increasingly resorted to asymmetric attacks which frequently impact civilians.
within the Juba and Shabelle Riverine areas. Flash floods are also expected in Galgaduud and Mudug regions. The areas of highest risk of river flooding are districts along the Shabelle and Juba river valleys areas in Hiraan, Gedo, Lower and Middle Juba and Lower and Middle Shabelle. The exact numbers of people that could be inundated, displaced by the floods or otherwise affected is difficult to predict with total accuracy. However, trends and lessons learned from previous El Niño events indicate that a strong El Niño event could affect up to 900,000 people while a moderate one could see over 500,000 people affected.

In Somaliland, the El Niño is likely to exacerbate drought conditions, also with severe impact on livelihoods. The FSNAU post-Gu results indicate that 129,000 people in the Awdal, Woqooyi Galbeed and pocket areas of Sanaag will be in “crisis” and “emergency” until the end of the year. On 10 August the authorities in Somaliland issued a drought appeal and efforts are currently ongoing with humanitarian partners, including the Organization of Islamic Cooperation, to scale up the response. FSNAU is also working with authorities to fine-tune the assessment of needs and ensure that comprehensive assessment findings inform interventions in the affected areas.

Access
The operating environment continues to be very dangerous and challenging. Partners’ ability to carry out principled humanitarian action continues to be challenged by the evolving and complex nature of the protracted armed conflict in the country. The volatile security situation has deteriorated since the beginning of the year, making the delivery of assistance and protection services to people in need even more dangerous. Attacks and threats against humanitarian personnel are on the increase. In the eight first months of 2015 alone, 85 security incidents involving humanitarians led to the death of 10, injury of 17, abduction of eight and arrest and detention of 34 aid workers. In comparison in 2014, 75 violent incidents led to the death of ten people and abduction and arrest of 22 staff.

Territorial gains through military action by Somali and AMISOM security forces have not translated into safe and predictable road access. Roadblocks and checkpoints in southern and central Somalia manned by armed actors continue to severely hamper delivery of aid and the freedom of movement in safety and security for internally displaced persons and civilians. The three main roads most affected by insecurity remain Belet Weyne-Bulo Burto-Mogadishu, Mogadishu-Marka-Baraawe-Kismayo and Mogadishu-Baidoa-Doolow. From July 2015, the restrictions have been further compounded by ongoing military offensives. As with the 2014 military offensives, Al Shabaab is reportedly staying in the vicinity of recovered areas besieging the towns. Increased Al Shabaab presence on relevant roads between the recovered towns of Diinsoor and Baidoa (Bay region), as well as between Ufurow and Baardheere (Gedo region), is being reported.

Road access limitations increase operational and transportation costs for humanitarian agencies delivering food to affected towns. They also increase commercial food prices as traders transfer the high cost of operating in insecure areas to consumers, making it difficult for vulnerable people to access food and restricting freedom of movement for civilians and returnees. For example in March 2015, humanitarian partners reported an increase in food prices in Ceel Barde, Bakool region, as a result of up to 12 illegal check points on the main supply route connecting Ceel Barde with Belet Weyne in Hiraan region. UN Humanitarian Air Services regular scheduled air services remains the only reliable option for safe air travel for humanitarian personnel throughout the country to facilitate delivery of humanitarian assistance to affected populations in the absence of safe and reliable commercial air services.

Administrative and bureaucratic impediments continue to delay and interrupt delivery of aid. This is mainly observed in Puntland and southern and central regions, where regulatory measures for NGOs and other international organizations are being put in place. The impact on NGO partners is more substantial compared to their UN counterparts. Throughout 2014, the humanitarian community registered 76 incidents, 71 per cent of which were interference incidences related to administrative and bureaucratic impediments, and 29 per cent were direct interferences in operational modalities. During the first eight months of 2015, humanitarian organizations have recorded over 45 incidents including multiple demands for registration by local authorities and non-state armed actors that include payment of registration fees within the range of $500 to $1000 each time, arbitrary taxation, and interferences in operational modalities. Humanitarian organizations continue to advocate with the Federal Government of Somalia to expedite the processes to put in place fixed and enabling regulatory frameworks for NGOs and international organizations.
Needs are high with 4.9 million people in need of urgent life-saving aid. The majority of the people in need, or about 69 per cent of the overall total, are in southern and central Somalia.
PART II: 
NEEDS OVERVIEWS 
BY SECTOR

INFORMATION BY SECTOR

- Education
- Food Security
- Health
- Nutrition
- Protection
- Shelter
- Water, Sanitation & Hygiene

INFORMATION GAPS AND 
PLANNED ASSESSMENTS
OVERVIEW

Somalia has one of the world’s lowest primary school enrolment and the low literacy rates are a consequence of two decades of conflict, eroded resilience and vulnerability induced by a series of natural and manmade shocks. The limited outreach of Ministry of Education (MoE) to support education, inadequate funding and the lack of education opportunities are some of the underlying drivers of vulnerability to children. This has left around 1.7 million children in crisis in need of education. Of the 78 per cent of children estimated to lack access to education in emergencies, substantial numbers are internally displaced. This situation is deteriorating further as a result of the ongoing military operations and forced evictions of internally displaced persons in urban areas, as well as the influx of arrivals of Somali returnees from Yemen. The forecasted El Niño in 2015-6 will also impact on access to education in vulnerable areas.

Southern and central Somalia has had no functioning education information management system in place since its collapse, thereby making it difficult to correctly disaggregate the numbers of children in need of education by gender. Inadequate support for education, mostly in southern and central Somalia will decrease the likelihood of enrolling out-of-school children while also increasing teacher attrition, school closure and drop-out in 2016. Out of 340,000 (20 per cent) of the 1.7 million children in crisis and out of school in Somalia targeted by the Education Cluster in 2015, only 44,000 (13 per cent) of these children have been reached due to inadequate funding. Food insecurity also has an impact on the concentration of children that are enrolled in primary school. In southern and central Somalia, only 22 per cent of children are enrolled in primary school. In terms of access to education, the most disadvantaged are girls as families tend to prioritise boys over girls, which leads to a high gender disparity both at school and employment opportunities. Studies in Somalia have demonstrated a high drop-out rate and most of the children, particularly girls, leave school before they reach grade five. Many families and households lack the means to send their children to schools and depend on child labour to meet their basic needs, including food. As a result, children are not enrolled in schools and those enrolled are frequently absent as they need to generate an income for their families to be able to meet basic needs, including food. WFP, through its school meals programme provides school meals to children to relieve hunger and encourage enrolment in primary schools.

Currently education activities are largely left to the development sector while urgently needed ‘Education in Emergencies’ interventions are overlooked due to inadequate funding. Education is one of the highest priorities for affected people but the lack of education opportunities in Somalia is a significant driver inhibiting Somali refugees from willingly returning to their homeland. In this sense, there is a strong need to closely and strongly link education as a component in both development and humanitarian response.

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5. UNCHR Somalia.
6. UN Secretary-General Report on the Children and Armed Conflict - May 2014.

CHILDERN IN NEED

1.7M of school-age children out of school

340k children targeted

CHILDERN REACHED

13% of children targeted in 2015

SCHOOL ENROLMENT

22% in southern and central Somalia
OVERVIEW
On average, 40 per cent of the total population of Somalia has faced acute food insecurity annually over the last four years, according to FSNAU. Intensive humanitarian response activities and favourable climatic factors have helped reduce the overall number of people experiencing acute food insecurity in the post-famine period. However, most key food security and nutrition indicators in the last four years remained concerning, particularly in southern and central regions of Somalia and have not shown any marked improvement subsequently in Deyr 2014/15 and Gu 2015.

This is as a result of protracted conflict, new and continued displacement and limited access in some areas of southern and central Somalia, coupled with recurring natural disasters that have heavily impacted harvests, markets and disrupted trade.

Overall, according to FSNAU, about 4.9 million people will remain in need of humanitarian assistance through December 2015. People in “crisis” and “emergency” (IPC Phases 3 and 4), or 79,000 and 935,000 people respectively, are unable to meet their minimum food needs and need urgent lifesaving humanitarian assistance and livelihoods support, including vital nutrition and health support, especially for the acutely malnourished between now and December 2015. The 3.9 million people in IPC Phase 2 (stressed) situation remain highly vulnerable to other shocks and need livelihoods support and resilience activities to avoid slipping into “crisis” or “emergency” phases.

The 2015 Gu season (April-June) rains ended early in May which is earlier than normal in most regions. Mostly as a result of early cessation of the rains in the main cropping areas of southern Somalia, average overall cereal production was 25 per cent below the long-term average. In the northwest agro-pastoral livelihood zone, poor rainfall contributed to

NO. OF PEOPLE IN NEED
4.9 M

BY SEX
50% male
50% female

BY AGE
46% children<br>52% adult<br>2% elderly

2015 ACUTE FOOD INSECURITY PROJECTION

Data Source: FAO-FSNAU
FOOD SECURITY

low production prospects, with the 2015 Gu-Karan cereal harvest (October-November) estimated at only 37 per cent of the five-year average for 2010-2014. Additionally, some places recorded significantly below normal rains. These include north western areas in Somaliland that had a prolonged dry spell in April, entire coastal areas, a few pockets in Sanaag region, and parts of Belet Xaawa and Ceel Waag districts in Gedo region bordering Kenya.

Poor and vulnerable urban people in southern Somalia that have been affected by trade disruption, such as in Bulo Burto (Hiraan) and Waajid (Bakool) are also priority needs areas for food security and livelihoods programming. The prevailing insecurity and conflict has affected the agricultural production system in some parts of Somalia. Farmers and agro-pastoralists have been restricted from accessing their farmlands due to multiple factors, including displacement, extortion and sieges of affected towns. Erratic rainfall has also created an environment for localised pest infestation and disease, contributing to very poor cowpea production in Galgaduud and Mudug regions. However, in most pastoral and agro-pastoral livelihood zones, livestock production and reproduction has continued to improve, contributing to improved food security outcomes. Further improvements are expected as a result of better livestock performance in the forthcoming Deyr season.

Additionally, this year’s El Niño is also expected to bring much heavier rain than normal to central and southern Somalia from October to December with high possibilities of flooding. This could have a negative impact on the food security of some riverine populations along the Shabelle river, as well as in areas where flash floods may occur, such as Galgaduud, due to affected crop production, cereal stocks and income-generating activities. The rainfall forecast indicates that the Deyr 2015 season in Somalia is expected to experience above normal rains (45 percent probability) with a tendency of 35 percent probability of normal rains in southern and central regions. This also includes parts of the Ethiopian highlands, which contribute significantly to both Juba and Shabelle river flow inside Somalia. The low lying areas of Galgaduud, Mudug and parts of Nugaal regions may also experience flash floods during the season due to the foreseen heavy rains. With this forecast, the situation may deteriorate further. Most household food supplies could be lost in the floods, which could also destroy crops due for harvesting in December 2015. The affected households could become food insecure for a long time as they will have to wait for the 2016 Gu harvests. Furthermore, the northern parts of Somalia are expected to experience normal rains (40 percent probability of normal rains) with a tendency of 35 percent below normal rains. The El Niño is likely to worsen ongoing drought conditions in Somaliland, impacting on the livelihoods of thousands of people. Coupled with the structural challenges and incomplete recovery from the effects of the 2011 famine, even small-scale natural hazards can have a devastating effect on people’s lives.

Most household food supplies could be lost in the floods, which could also destroy crops due for harvesting in December 2015. The following districts could be severely affected by flooding: Doolow (Gedo); Belet Weyne, Bulo Burto and Jalalaqsi (Hiraan); Balcad and Jowhar (Middle Shabelle); Afgooye, Barawe, Kurtunwaarey, Marka, Qoryooley and Wanla Weyne (Lower Shabelle), Bu’aale, Jilib and Saakow (Middle Juba); Afmadow, Jamaame, Kismayo (Lower Juba). The other areas that could experience low to moderate effects of the flooding include; Mogadishu (Banadir), Bur Hakaba (Bay); Baardheere, Ceel Waag, Garbahaarey and Luuq (Gedo); Rab Dhuure, Tayeeglow and Xudur (Hiraan); Badhaadhe (Lower Juba).

Contrastingly, above average to average Deyr (October-December) rains are expected to lead to substantial improvement in food security conditions across most pastoral livelihood zones in southern and central Somalia.
OVERVIEW

Somalia has an inadequate health infrastructure, weak institutional capacity, inequity in the delivery of health services and insufficient public health sector accountability (Federal Government of Somalia (FGS), Government of Puntland, & Government of Somaliland, 2014). Less than 15 per cent of rural inhabitants have access to any health provider. It is also noteworthy that only 39 per cent of Somalis live in urban areas, which therefore leaves 61 per cent of the entire population potentially underserved (WHO Global Health Observatory, 2013). For example, in Hiraan region, patients in critical conditions, including pregnant mothers facing complications, have to travel 200 kilometres to reach the closest hospital in Jowhar, Middle Shabelle region. Southern and central Somalia is home to over 60 per cent of the population in need of life-saving assistance including measles vaccinations, basic and comprehensive mother and child services including referral.

As a result of the dire health situation, about 3.2 million girls, women, boys and men in Somalia need emergency health services. Also the lack of reproductive health care is particularly grave and leads to the second highest maternal mortality rate in the world. Only a quarter of pregnant women attend antenatal care, and only seven per cent complete the four recommended antenatal visits. Access to comprehensive emergency obstetric care is poor, as shown by a caesarean rate of 0.5 per cent and only 11 per cent coverage of major obstetric emergencies. This is aggravated by the fact that 98 per cent of women have undergone female-genital mutilation, which adds to the risks of maternal death. This is coupled with the fact that the country has one of the highest total fertility rates (6.7) in the world. Women in Somalia have a 1 in 18 lifetime risk of dying due to pregnancy and childbirth-related complications. This places Somali women among the most high-risk groups in the world. 1 in every 10 Somali children dies before their first birthday and under-five mortality ranges from 180 to 225 per 1,000 live births. Diarrhoeal diseases and cholera are among the leading causes of death with over 48,000 cumulative cases reported between January and August 2015, 85 per cent of which were children.


under age 5. While the overall number of suspected AWD/cholera cases has reduced from about 5,500 in 2014 to 4,000 in 2015, and reported measles cases have dropped to 5,700 from 10,000 during the same period, the Health Cluster notes that gross underreporting may not reflect the real situation as most deaths occur at home. Insecurity, poor health seeking practices and population awareness, lack of functioning referral systems, poor distribution of health service access points and underlying malnutrition pose major challenges for control and prevention of disease outbreaks.

At the time of writing, no polio cases had been reported for over a year. A third outbreak assessment mission will take place on 11 October 2015 and most likely Somalia, and the whole of Africa, will be declared polio free.

With regards to malaria, about 65 per cent of settlements in southern and central Somalia, 84 per cent in Puntland, and 32 per cent in Somaliland have moderate to very high malaria epidemic risk, contributing to higher morbidity and mortality levels. In the first quarter of 2015, there were over 8,000 cases of confirmed malaria. Tuberculosis is also highly prevalent with an incidence of 300 cases per 100,000 people.

Forced evictions of internally displaced persons in various areas such as Afgooye, Bossaso and Mogadishu may exacerbate the disconcerting health situation. An inter-agency rapid assessment report on the Dharkenley evictions revealed that the forced eviction resulted in the loss of access to health facilities for about 60 per cent of people who responded to the assessment. The lack of access to safe drinking water, lack of sanitation facilities and inadequate access to hygiene interventions, increases the risk of waterborne diseases especially cholera and rotavirus, which has been described to account for up to 60 per cent of AWD cases in Mogadishu.

The forecasted El Niño phenomenon, which is projected to cause high rainfall across East Africa, may increase the occurrence of already high incidences of malaria, AWD/cholera, measles and other diseases, as people are forced to resort to unsafe and unclean water sources.

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OVERVIEW

Somalia is one of the top ten countries with highest prevalence of malnutrition in the world and is the third highest in the eastern and southern Africa region with 13.6 per cent global acute malnutrition (GAM) rate among children under age 5 with 2.3 per cent of these severely malnourished.

The latest countrywide nutrition survey (2015 post-Gu) results indicate a median global acute malnutrition (GAM) rate of 13.6 per cent and a median severe acute malnutrition (SAM) rate of 2.3 per cent of children under age 5. Nearly 308,000 children under age 5 are acutely malnourished, of whom almost 56,000 are severely malnourished and face a high risk of disease and death.

Southern and central Somalia contributes to 65 per cent of acute malnutrition total burden in Somalia. Global acute malnutrition rates were found to be above the emergency threshold of 15 per cent mainly in internally displaced persons settlements in Doolow, Garowe and Gaalkacyo that have been sustained at critical levels over the past two years. In addition, out of the 13 internally displaced persons settlements surveyed during the 2015 Gu rains, five showed critical (above 15 per cent) levels of GAM, including Baidoa in Bay region, Dhibley in Lower Juba region, Dolloow in Gedo region, Gaalkacyo in Mudug region, and Garowe in Nugaal region. Similarly, critical levels of GAM were recorded in two out of six urban areas surveyed during 2015 Gu (18.4 per cent in Bari and 15.7 per cent in Nugaal), while serious (10-14.9 per cent) prevalence of GAM was noted in the Mogadishu urban livelihood zone. The highest prevalence of malnutrition was recorded in the Dolloow settlement for internally displaced persons and in the rural livelihood zone in northern Gedo region, where the levels had reached 26.4 per cent GAM and 5 per cent SAM, and 20.3 per cent GAM and 4.2 per cent SAM respectively. A higher prevalence of GAM and SAM was observed among boys (6-23 months and 24-59 months) compared to girls in all livelihood zones (agro-pastoral, internally displaced persons, pastoral, and riverine) with the exception of urban livelihood zones where girls between 6-23 months have a higher rate of GAM and a similar rate of SAM compared to boys of the same age. Internally displaced persons in Dhibley currently face a nutrition emergency as the prevalence of GAM has nearly doubled (from 11 per cent in Deyr 2014/15 to 20.7 per cent in Gu 2015) and is accompanied by ‘Critical’ (>1/10,000/day) levels of crude death rates (CDR). The nutrition situation of internally displaced persons in Doolow has further deteriorated since December 2014 with an increase in ‘Critical’ levels of GAM (from 21.6 percent to 26.4 percent) along with an increase in both CDR and death rates for children under age 5.


2015 NUTRITION SITUATION PROJECTION
OVERVIEW

Somalia’s 1.1 million internally displaced women, girls, boys and men largely live in unplanned and informal settlements in urban areas across Somalia. The majority, 893,000 internally displaced persons live in southern and central parts of Somalia, with Mogadishu hosting 369,000 internally displaced persons in over 400 settlements. Internal displacement results in loss of social protection networks, but also loss of other elements important to their safety and security, such as land tenure rights. Economic exploitation and abuse of internally displaced persons is therefore widespread. The harmful environment in most internally displaced persons settlements due to the ungoverned nature of the settlements, overcrowding, infiltration, or limited access to protective shelter and safe and nearby water and sanitation installations add to the elevated protection risk exposure.

Over 116,000 internally displaced persons and urban poor have been forcibly evicted from their settlements in urban areas in Baidoa, Bossaso, Garowe, Gaalkacyo, Hargeysa, Kismayo and Mogadishu so far in 2015, and many more remain at risk of forced evictions. In the absence of improved land tenure or the issuance of individual title deeds, forced evictions cause rights violations, such as destruction of property, separation of children and increased risks of gender-based violence (GBV). Forced evictions also have the potential to destroy humanitarian gains demonstrating the need to address the protection concern with more rigour. As every forced eviction results in a new displacement, it is one of the key obstacles to local integration and other solution processes of internally displaced persons.

The current and expanding armed conflict severely exacerbates already evident protection risks and creates new ones, such as GBV and child rights violations. The ongoing military operations in southern and central Somalia displaced over 42,000 people by late August. Internally displaced persons and other civilians are restricted to move freely and in safety, hindered by illegal checkpoints surrounding many of the newly recovered towns during military offensives in 2014 and 2015. Reportedly, killings, torture and ill treatment, rape, forced recruitment, illegal taxation, extortion take place at these checkpoints. In addition, explosive hazard threats further expose civilians to risks to their lives and physical integrity. This restriction to the freedom of movement in safety remains therefore a priority protection concern and cause of deterioration of humanitarian conditions in these areas, such as malnutrition. In the long-term if it remains unaddressed it could inhibit the economic recovery of these areas and therefore durable solutions.

Out of the 26,000 Somali arrivals from Yemen, a portion has joined internally displaced persons settlements in several locations. Initial and non-comprehensive surveys in internally displaced persons settlements in Bossaso, Gaalkacyo and Mogadishu identified over 2,300 arrivals from Yemen. They are exposed to similar protection risks as internally displaced persons.

Displaced children are particularly vulnerable and violations of child rights are a major concern in situations of new displacement. Family separations, GBV against children, forced recruitment and abductions are among the main violations against children. In 2014, a total of 1,759 grave child rights violations were recorded. With 1,738 recorded violations between January and August 2015, there is a notable and concerning increase in the most serious child rights violations in 2015, including abductions (643) and forced recruitment (547). Family separations are steeply on the rise - from January to July 2015, a total of 4,520 children were identified and documented, which is a significant increase from the 681 children in the same timeframe in 2014. A further increase in child rights violations is projected due to the ongoing military offensive and the continuing forced evictions.
GBV remains rampant and pervasive, especially against women and girls, and is exorbitantly high in internally displaced persons settlements — 75 per cent of all GBV-survivors are internally displaced persons. Overall, GBV incidents increased in the first half of 2015 compared to 2014. From January to July 2015, about 2,300 children were exposed to different forms of GBV, notably abduction, rape, sexual assault and forced marriage. Between January and August 2015, UNHCR’s Protection and Return Monitoring Network (PRMN) reported over 2,100 rights violations, including killings, physical assault, or arbitrary arrest and detention. Children and youth are particularly at risk of arbitrary arrest and detention. Over 1,500 of those violations were committed in southern and central regions of Somalia, over 260 in Puntland and almost 370 violations were recorded in Somaliland. In 2014, over 360 civilians were injured and 158 were killed in explosive hazard incidents in southern and central regions in comparison to 233 and 123 respectively since the beginning of 2015. With 332 active threats and additional risks of improvised explosive devices (IEDs), explosive hazards continue to impede the freedom of movement in safety, along with illegal checkpoints, notably around areas recovered in the wake of military operations in 2014 and 2015, as well as on main supply routes. Further aggravation to the protection situation of internally displaced persons is expected due to the additional impact of this year’s El Niño.

Overall, the protective environment needs to be significantly strengthened in order to contribute to conditions more conducive to free and voluntary return, local integration or settlement elsewhere in Somalia. Placing protection as the centre of humanitarian action as requested by the principals of all humanitarian agencies will be an important step towards this. The persistence or recurrent nature of most causes of internal displacement, including armed conflict, generalized violence and insecurity, or widespread human rights violations and abuse is alarming. While the authorities have the primary responsibility to assist, protect and support durable solutions for internally displaced persons, the limited and varied technical capacity of authorities limits solution prospects.
OVERVIEW

The shelter needs of the 1.1 million protracted internally displaced persons vary from region to region but remain alarming nonetheless. Data collected through an infrastructure mapping exercise for 694 settlements in 14 different urban centres (Afmadow, Baidoa, Bossaso, Burao, Dhooley, Gaalkacyo North and South, Hargeysa, Jowhar, Kismayo, Luuq, Marka, and Mogadishu) underlines this alarming situation. 47 per cent of these settlements were categorized as unplanned (only 7 per cent of all internally displaced persons in Mogadishu live in planned settlements), 68 per cent did not have any formal land tenure agreement and 17 per cent openly reported to be paying rent. In addition, 79 per cent of shelters were categorized as buuls or tents (some 43 per cent of which only had one layer) and 56 per cent of shelters had a door of which 74 per cent were lockable from the inside. Furthermore, most non-food items (blankets, mats, and plastic sheeting) were provided to internally displaced persons more than two years ago. As a result, settlements are often considerably over-congested, lack basic services such as education, health and WASH, and suffer from disease outbreaks, flooding and fires. Protection risks and violations are prevalent in all settlements.

Nevertheless, there have been slight improvements in transitional shelter solutions and now 45 per cent of internally displaced persons in Puntland and Somaliland live in planned settlements with improved transitional or permanent shelter solutions. The Shelter Cluster has been working closely with the Protection Cluster, especially in southern and central Somalia, to strengthen the security of the shelters: doors and locks have been included in shelter kit packages, as well as land tenure.

Since the beginning of 2015, the Protection Cluster reported about 166,000 people displaced by forced evictions and armed conflict throughout the country. As a result, according to the Shelter Cluster, trends show that displaced people either form new settlements or join already existing settlements or join family members in their host community settings. Therefore, internally displaced persons can be categorized in two groups depending on their duration of displacement: protracted and short-term/localized displacements.
SHELTER

As well as the above-mentioned factors contributing to further internal displacement within Somalia, a mixture of clan-related conflict and flooding in southern and central Somalia in 2015 have added to the overriding shelter needs for internally displaced persons. The likely impacts of the 2015/16 El Niño could worsen the overall humanitarian situation. Due to topography and precipitation patterns, areas around the Juba and Shabelle river valleys will suffer from increased seasonal flooding, and it is anticipated that this will increase urban migration in search of humanitarian assistance.

According to cumulative statistics from UNHCR, almost 30,000 people have arrived in Somalia as a result of the crisis in Yemen. About 26,000 of these people are Somali nationals and more than 19,000 have arrived through Bossaso port. The majority of Somali returnees from Yemen have moved with support of IOM and UNHCR to their places of origin in southern and central Somalia. Other people have joined internally displaced persons settlements and with host communities in Garowe and Qardho.

This multi-faceted emergency is hampering the ability and desire of internally displaced persons and returning refugees from Kenya and Yemen to return and re-integrate into their areas of origin. Instead, most people mix into existing settlements or squat with host families. The lack of access to housing, land and property rights, as well as insecurity of tenure, are major obstacles to more sustainable solutions to displacement. As a result, increasing forced evictions are likely to further rise as the security situation stabilizes, urbanization continues, land values rise, and foreign and domestic investment increases. There remains an urgent need for improved transitional and permanent shelters that offer more protection, privacy and dignity over longer periods of time; this in turn requires improved security of tenure that Shelter and Protection clusters are striving to enhance.
Overall, the WASH Cluster estimates that 45 per cent of the population of Somalia does not have access to safe water supply and 37 per cent does not have access to basic sanitation. Inaccessibility due to insecurity and the limited number of local service providers contributes to the high cost of providing services. Surveys and field reports indicate that about 18 per cent of strategic water points are non-functional. Acute watery diarrhoea (AWD)/cholera is endemic and claims thousands of lives (especially children under age 5) annually, particularly in densely populated areas in southern and central Somalia and in internally displaced persons settlements.

Conditions in internally displaced persons settlements are sub-standard and at high risk of AWD/cholera and other waterborne diseases due to inadequate access to basic WASH services. Open defecation stands at 44 per cent for rural areas and 29 per cent overall (urban, rural, internally displaced persons and nomadic pastoralists). The potential for contamination of water and food with human excreta is, therefore, extremely high. The practice of open defecation and on-site human waste disposal combined with overflowing pit latrines and faecal contamination of drinking water in the high-risk districts also continues to contribute disease outbreaks. Women and girls pay the heaviest price for poor sanitation. Poor access to safe drinking water and lack of adequate sanitation facilities coupled with poor hygienic practices are major threats for the survival and development of children in Somalia. Diarrhoeal diseases account for the majority of deaths among children along with respiratory infections.

The acute shortage of water in some districts is further exacerbated by seasonal droughts and floods leaving the vulnerable households with limited affordable options. The regions with chronic/serious water shortage include Bakool.
Bari, Bay, Hiraan, Galgaduud, Mudug, Nugaal, Sanaag, Sool, Lower and Middle Shabelle, and Woqooyi Galbeed, regions. The northern regions have recorded significantly below normal rains this year and are currently experiencing drought, these include north western areas in Somaliland.

The recently issued seasonal climate outlook (forecast) for the Greater Horn of Africa related to the Deyr 2015 rainy season indicates that northern parts of Somalia are expected to experience below normal rains (at 35 per cent probability), exacerbating drought conditions. On the other hand, the projected El Niño is expected to drastically affect the commonly flood-prone areas, especially along the Juba and Shabelle rivers. The areas expected to experience high and medium risk of flooding are Afgooye, Afmadow, Badhaadhe, Balcad, Baraaowe, Belet Xaawo, Belet Weyne, Bu’ale, Bulu Burto, Ceel Waaq, Doolow, Garbahaarey, Jilib, Jamaame, Jilib, Jowhar, Kismayo, Kurtunwaarey, Luuq, Qoryoole, Saakow, Tayeeglow and Wanla Weyn. As southern and central Somalia accounts for almost 73 per cent of villages with the greatest risk of epidemic in Somalia (especially for AWD/cholera, malaria and measles), has high population density, high levels of malnutrition, as well as insufficient WASH services, the possibility of increased cases of waterborne diseases is extremely likely. Internally displaced persons settlements are also extremely vulnerable to disease outbreaks as a result of flooding due to similar issues. The contamination of public water supplies is a major threat to public health; diseases such as cholera, typhoid fever, diarrhoeal diseases, hepatitis and gastroenteritis may increase as a result. Current preparedness activities are ongoing and repairs to affected WASH services/infrastructure is expected to last several months after the event.

The Wash Cluster has updated its vulnerability map (2015) generated using multi-criteria analysis and the best available datasets containing data on improved water and sanitation access, AWD/cholera outbreaks, risks of flooding and drought, numbers of internally displaced persons and malnutrition rates.
PART II: INFORMATION GAPS & ASSESSMENT PLANNING

OVERVIEW

The main source of information for humanitarian situation analysis remains FSNAU’s periodic food security and nutrition assessments. FSNAU’s assessments are comprehensive, countrywide and provide a good understanding of the existing needs as well the dynamics and trends of these needs. However, a factor to consider is that the latest estimates of people in acute food insecurity were extrapolated, ex-post, on the basis of the 2014 UNFPA estimates. In order to achieve this, FSNAU livelihood information embedded in the 2005 UNDP district level population data was incorporated into the new 2014 UNFPA district level population data.

Additionally, the absence of regular gender-sensitive sector-specific needs assessments for sectors other than food security and nutrition is a significant information gap that needs to be addressed. All clusters, except for food security, mainly rely on area-specific and ad hoc needs assessments, which adversely affect the availability of data disaggregated by gender, age and geographical location for most regions and districts. The lack of reliable gender- and age-disaggregated data for most regions and sectors, which adversely impacts on the appropriateness of targeting responses to the differentiated needs and specific vulnerabilities of women, girls, boys and men.

4W reporting remains limited due to non- or delayed reporting by partners undermining the coordination purpose. Other information gaps are related to access and safety of protection partners gathering data. The absence of an overall protection baseline is a key information constraint and renders trend analysis difficult. Also, given that no systematic explosive hazard survey was ever conducted, the full extent of explosive hazard prevalence is not known.

Southern and central Somalia has had no functioning education management system in place since its collapse. Nevertheless, a number of cluster assessments, (SIRNA,16 cluster, multi-cluster assessments) have identified significant educational gaps and needs. FAO has also conducted a seed system security assessment (SSSA). The outcomes of the report will help all Food Security Cluster partners to take informed decisions in the future related to the seed system in Somalia. This study/report expected to address the longstanding challenge in agricultural inputs support targeting and effectiveness. The UNHCR-led Protection Cluster coordinates collaborative profiling exercises initially in internally displaced persons settlements in Hargeysa and Mogadishu, which are expected to provide a better breakdown of figures of inhabitants of internally displaced persons settlements. However, the primary purpose of this profiling is to inform durable solution strategies and interventions.

Funding constraints remain the main impediment to the lifesaving protection response and the required expansion of protection services. Capacity of authorities to assume their primary role and responsibility to protect its people remains limited at federal, regional and district level. Furthermore, the lack of adequate legislations, policies and structures aggravates the protection of Somalis.