HIGHLIGHTS

- The humanitarian situation continues to deteriorate and the estimated number of people in need of humanitarian assistance has now increased to 6.7 million people — more than half the population of the country, according to the latest projections by the FAO-managed Food Security and Nutrition Analysis Unit.
- Some 683,000 people have been displaced due to drought in Somalia since November 2016.
- Drought has caused the largest outbreak of cholera Somalia has seen in the last five years with over 38,000 cases and 683 deaths so far in 2017, according to WHO. Nearly 7,694 suspected cases of measles have been reported in 2017.
- The Gu rainfall started two weeks later than normal and has been below average in all areas, except in the northeast where rainfall totals have been near average.
- The revised Humanitarian Response Plan was launched on 10 May. The revised HRP is seeking US$1.5 billion to reach 5.5 million people with life-saving assistance in 2017.
- The London Somalia Conference held on 11 May has called for strong partnerships and additional funding for further scale-up of the humanitarian response in Somalia.

SITUATION OVERVIEW

To respond to the growing needs, humanitarian partners in Somalia have revised the Humanitarian Response Plan for 2017. The revised HRP was presented at the London Somalia conference on 11 May. It seeks US$1.5 billion to reach 5.5 million people with life-saving assistance in 2017. In response to the early alarm that Somalia is at risk of famine at the beginning of the year, donors had as of 11 May, generously provided $634 million since the beginning of the year. The remaining gap is of $875 million.

The humanitarian situation in Somalia has deteriorated further and an elevated risk of famine in 2017 persists in some parts. The number of people in need of humanitarian assistance has increased to 6.7 million people, up from 6.2 million, according to the latest projections by the FAO-managed Food Security and Nutrition Analysis Unit. A total of 3.2 million people are expected to face Crisis and Emergency (IPC Phase 3 and 4) levels of food insecurity through June. The prolonged drought has led to lack of water and the largest outbreak of cholera Somalia has seen in the last five years with nearly 38,000 cases and almost 683 deaths so far in 2017, according to WHO. With the beginning of the rainy season and projected flooding, these numbers are expected to increase to 50,000 cases by the end of June. Cases of measles are also on the rise with over 7,000 cases reported this year, 65 per cent of them affecting children under age 5.

The latest UNHCR-led Protection and Return Monitoring Network report indicates that the number of drought related displaced people has increased to 683,000 people since November 2016. This includes an estimated 131,000 people displaced in April 2017 alone. Of these, more than 55,000 people arrived in Baidoa, reflecting a reduction by 22 per cent compared to March. Overall, over 156,000 people are displaced in Baidoa. Over 39,000 people arrived in...
Mogadishu in April. In Bay and Bakool regions there are reports of a small number of drought-displaced people, mainly men, who have started to return home with the onset of the Gu rainy season. Humanitarian partners and authorities are planning to conduct a return intention survey among the drought-displaced people in Baidoa.

The Gu rainfall started two weeks later than normal and has been below average in all areas, except in the northeast where rainfall totals have been near average. Pasture and water resources have begun to improve with recent rains and it is expected that livestock body conditions and value will slowly increase through June. The cumulative rainfall forecast for the week ending 21 May, shows light to moderate in parts of Somaliland, Puntland and coastal areas of southern Somalia including the Ethiopian highlands. Most of the rains are expected towards the end of the week. Other parts of the country will remain dry during the forecast period. The river levels are also expected to rise. Following the rains in the basins in the last few weeks, the river levels along the two rivers rose significantly and are currently above normal levels at this time of the year. Given the rainfall forecast and the high river levels, there is a high risk of flooding along the middle and lower reaches of Shabelle River. Flooding in Middle Shabelle has been reported in Madheere Village and has caused damage to large amounts of cropped area and some displacement.

Some 37,930 suspected AWD/cholera cases and 683 deaths have been recorded in 52 districts across 14 regions since the beginning of 2017. Cholera alerts have been reported in Galgadud, Gedo, Togdheer, Bakooll and Middle Juba region and other inaccessible areas. The verification of these alerts is a major challenge due to insecurity. Nearly 7,694 suspected measles cases have been reported in 2017.

Humanitarian Response

With the resources received thus far, there has been a massive scale-up of the response and millions of people at risk of starvation and disease are being reached with life-saving assistance and protection. Further funding is still required to reach millions of people in urgent need of assistance. During the reporting period, WHO delivered around 5 tons of medicines and medical supplies to South West state. On 10 May, UNHCR in collaboration with the Shelter cluster completed the distribution of plastic sheets to nearly 44,000 IDPs in Baidoa. On 13 May, UNICEF in partnership with the Ministry of Health began a five-day measles vaccination campaign targeting 110,000 children under age 5 in north Gaalkacyo and Galdogob districts in Mudug region. The campaign is in response to a spike in suspected cases of measles in the IDP settlements and drought-affected villages. To date, 88 per cent of the 230,000 seed voucher beneficiaries have redeemed their vouchers, collecting a total of 870 tons of sorghum, maize, cowpea and vegetable seeds to plant during the current Gu rains. Food Security partners have reached 2,693,000 beneficiaries—primarily in “emergency” and “crisis” IPC phase—through cash and in-kind interventions to improve access to food. FSNAU has updated the partners Post-Jilaal assessment outcome and its implication on food security. To contain the AWD/cholera outbreak, WASH partners have reached 1.1 m people through hygiene promotion activities since January. This includes 540,000 people who have received hygiene kits. A total of 411,883 people aged 1 year and above have received the second dose of oral cholera vaccine in Banadir, Belet Weyne and Kismayo. Some 452,593 people received the first dose in same locations.

Funding

Reported funding

Donors have continued to support the scale-up of famine prevention activities in Somalia. About US$669 million has been made available as of 15 May 2017. Of this funding, an estimated $313 million or 46 per cent has already been disbursed to humanitarian partners, while $318 million is committed and US$38 million pledged.

The revised Humanitarian Response Plan (HRP) has so far received $491 million or 33 per cent of the requested $1.5 billion. An additional $179 million ($38 million in pledges) has been contributed to activities outside the appeal.
Pooled funds have further boosted the implementation of famine prevention activities by allocating an additional $15 million under the CERF rapid response. This will help to bridge the gap between limited resources available and donor contributions and pledges expected beyond April 2017 and further support famine prevention activities in Northern and Central Somalia.

About $6.5 million SHF allocation is being programmed to support the implementation of integrated response activities in Baidoa, Bay region and Mogadishu, Banadir region. The allocation will address immediate critical famine prevention response gaps and enable rapid response to potential floods in the two regions. Compared to the revised HRP requirements, the resources received and committed so far are not sufficient to sustain the necessary response and avert loss of lives. Contributions and commitments in the second half of 2017 need to be further scaled up.

**Food Security Needs**

Revised projections from FSNAU and FEWS NET – released on 9 May, based on a post-Jilaal assessment and SMART surveys conducted in April – estimate that 3.2 million people will be in Crisis and Emergency (IPC Phases 3 and 4) through June. The population expected to be in Phase 4 – 733,000 people – has increased by 59 per cent compared with projections made in February. Rural areas are home to 68 per cent of those in IPC Phases 3 and 4, and 92 per cent of those in IPC Phase 4. Famine remains a risk, and continued large-scale assistance is critical to address the growing needs.

In rural areas, key needs include emergency livestock support to keep animals alive and productive, cash-based interventions to meet families’ immediate food needs, and ensuring the availability of inputs to produce food. Delivery on these priorities is essential to prevent further deterioration of the food security situation, help stem further displacement out of rural areas, and potentially act as a trigger for the early return of those already displaced.

**Response**

- Nearly 2.7 million people were reached through activities geared towards improving access to food and safety nets.
- To date, 88 per cent of the 230,000 seed voucher beneficiaries have redeemed their vouchers, collecting a total of 870 tons of sorghum, maize, cowpea and vegetable seeds to plant during the current Gu rains. They are also receiving cash vouchers for three months (the duration of a planting season) to enable them to access food until their crops are harvested in June.
- In Somaliland, more than 1,300 hectares of land has been prepared for planting, benefiting farmers who have received seeds from food security partners.
- Since January, food security partners have provided nearly 440,000 people in rural areas with cash transfers amounting to $8.5 million. More than half ($4.6 million) was disbursed in April.

Real-time information sharing about available resources is essential for ensuring overall efficiency of humanitarian response in Somalia. Donors and recipient agencies are strongly encouraged to inform OCHA’s Financial Tracking Service (FTS – http://fts.unocha.org) of cash and in-kind contributions. Reporting can be done through the online reporting form or by e-mailing the reporting template to fts@un.org.

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The second round of a livestock treatment campaign has reached 500,000 animals so far. Round one – which concluded in April – exceeded its target of 8 million animals, treating 8.4 million animals which benefited over 1.2 million people. The campaign is expected to reach 21 million animals belonging to 3 million people.

In April, 10.8 million litres of water were trucked to 90 sites in Puntland – enough for 180,000 animals per day. In Bay and Bakool regions, 660,000 litres have been trucked to 17 sites – enough for 34,000 animals per day. The arrival of rains in Bay and Bakool in early May has made water trucking sites inaccessible due to muddy roads, the intervention is therefore currently on hold. In Puntland, water trucking has been temporarily suspended in districts that have received heavy rains, but will continue in 20 other locations where water is still needed.

Gaps and Constraints
- Additional funding is required in light of the new findings of worsening food insecurity and malnutrition status in some of the hotspot areas where need is likely to increase.
- Limited access is affecting FSC response in some of the affected areas, particularly in Middle Juba.

WASH

Needs
The drought has had a devastating effect on most of the pre-existing water sources, with many areas experiencing acute water shortages. Water scarcity is forcing people to procure from private water vendors at a high cost, increasing pressure on the limited existing water supply infrastructure. Many people are relying on unprotected and unsafe surface water sources, exposing them to water borne diseases such as AWD/cholera. Gu rains that started in late April/early May have increased river water levels, and thereby eased the water shortage in some areas. However, water scarcity is likely to persist in many areas until the Gu rains are fully established. An estimated 4.5 million people are in need of WASH services countrywide.

Response
- Wash cluster partners have massively scaled up response in the last few months including supporting an estimated 1,050,000 people in April with temporary access to water, this represents a 1,200 per cent increase in delivery since the start of the year.
- To contain the AWD/cholera outbreak, 1,1 m people have been reached through hygiene promotion activities since the beginning of the year. This includes 540,000 people who have received hygiene kits. Wash cluster partners were trained in the Cholera Treatment Centres in Mogadishu and Baidoa. Similar training will be conducted in Baidoa, Somaliland and Puntland in the coming weeks.

Gaps and constraints
- Wash needs in Bay and Bakool continue to outpace humanitarian response due to the limited presence of Wash partners in most parts of the two regions.
- Based on current levels of funding, it will not be possible to respond simultaneously to the drought at rural level, the already existing and new IDPs in urban areas and the AWD/cholera outbreaks. Dramatic increases in water trucking costs means that additional funding will be needed, particularly in view of the forecast of lower than normal Gu rains. Most of the ongoing projects are only short-term emergency interventions, focusing on meeting immediate needs e.g. water trucking, hygiene kit distribution and emergency latrine construction that do not cover appropriate and costly exit strategies like borehole rehabilitation.
- More funding is also needed for cholera treatment centre support, provision of WASH services in schools, Outpatient Therapeutic Programme (OTP) centres, Health Posts and to support the new IERT approach.

Health

Needs
Health needs have been dramatically exacerbated by severe drought conditions including water scarcity, food insecurity and malnutrition, as well as the on-going cholera outbreak which has now spread to 14 out of 18 regions across the country. As of 7 May, nearly 38,000 AWD/Cholera cases and 683 deaths (CFR 1.8%) have been recorded.
Cases of suspected measles continue to rise across Somalia. A total of 7,694 cases have been reported nationwide, far exceeding the 5,657 total cases recorded for all last year. The need for non-essential life-saving health services have increased and more affected areas are in dire need of urgent assistance.

Response

- On 10 May, WHO delivered 5 tons of medicines and medical supplies in Baidoa for distribution to health facilities in South west state. In the first quarter of 2017, WHO delivered around 50 tons of emergency life-saving medical supplies in regions affected by drought and diseases outbreaks.
- Health partners have dispatched drugs and health teams from Kismayo to treat the reported cases of AWD/cholera in Gobweyne village in Kismayo district where some 24 suspected cholera cases including two deaths were reported.
- 10 Rapid Response Teams have been deployed to Baidoa to support the ongoing AWD/cholera outbreak response efforts.
- 5 Cholera Treatment Centre (CTCs) and 8 Cholera Treatment Units (CTUs) were opened in Abdudwak, Dhusamareeb (Galgadud), Waaqij, Elberde (Bakool), Balcad (Middle Shabelle, Buuhoodle, Buroa (Togdher), Dolow (Gedo), and Waniwae (Lower Shabelle) to respond to the increase in AWD/Cholera cases. As of 30 April, 69 AWD/ cholera treatment facilities (27CTCs and 42CTUs) have been operationalized, mainly in South West, Hir-Shabelle, Jubaland, Galmudug, Puntland, Somaliland and Banadir. Trainings of 30 Integrated Health Response Teams were completed in Baidoa, Gedo and Mogadishu.

Gaps and Constraints

- The health cluster funding shortfall continues to hamper delivery of life-saving health services to most vulnerable people including children and IDPs.
- Inaccessibility to some areas because of insecurity is affecting delivery of basic health services to affected communities.
- Additional support with life-saving medical supplies to health facilities, especially in drought and measles and AWD/Cholera-affected areas is urgently required.

Protection

Needs

There continues to be need for the protection of vulnerable groups. Gender based violence (GBV), child protection concerns and other human rights violations are driving protection needs in Somalia. To date, at least 2 million people are in need of protection support services and assistance.

Response

- Child Protection partners reached 10,400 IDPs with various child protection prevention and response services including Identification Documentation Tracing and Reunification (IDTR), legal aid services, medical support for survivors, psychosocial services, interim care services, reintegration services and referrals to other sectors.
- GBV sub-cluster partners reached 8,185 beneficiaries with GBV prevention, response and capacity building activities. GBV response services include life-saving medical assistance including post rape treatment, temporary protection accommodation for GBV survivors, legal, psychosocial, material and livelihood assistance.
- Housing, Land and Property sub-cluster reached 342 people through prevention of forced evictions, community dispute settlement, advocacy, and counselling responses.
- Explosive Hazard sub-cluster partners have reached 14,500 individuals including women and children.
- As at 10 May, 683,000 drought-induced internally displaced persons were tracked through the Protection and Return Monitoring Network led by UNHCR.

Gaps and Constraints

- Insecurity is limiting protection partners’ ability to carry out effective protection monitoring. Inaccessibility to some conflict-affected areas controlled by non-state armed actors/armed groups remains a challenge.
- The presence of Landmines and Explosive Remnants of War continued to threaten the lives and livelihoods of civilians, and to compromise the ability of humanitarian actors to safely carry out their duties. Constraints related to access (unable to provide protection services, clear roads, etc.)
• Limited IDTR and GBV services for families, children and survivors of rape and sexual violence among others. in priority locations including Awdal, Sool, Sanag, Bari, Nugal, Galkayo, Gedo, Hiraan, Banadir, Lower Juba.
• Increased advocacy with the authorities and host communities is needed ensure that the new arrivals are guaranteed stay in the duration of their displacement.

Shelter Needs
• Some 683,000 drought displaced people are in need of Shelter/NFI assistance. Most of the displacement is to Baidoa and Mogadishu. The displaced families often leave their homes in search of water and pasture and to escape severe drought conditions. Consequently, shelter and household items are not given due consideration. The displaced families also have limited resources and may not afford the transportation of shelter and household items which is needed at their destinations.
• Safe and secure settlements are needed to provide affected communities with protected and healthy living spaces and environments, while ensuring sufficient privacy and dignity to the groups, families, and individuals within them. Shelter, or the lack of it, has very far reaching implications in extreme weather, especially considering the onset of rains, shelter is life-saving. Protection from many diseases depends on the kind of shelter an individual has. Beyond survival, shelter is necessary to provide security and ensure personal safety and protection. Shelter and NFIs promote economic well-being and provide an environment for securing livelihoods. Moreover, shelter plays an essential role in reducing vulnerability and building communities’ resilience.
• There are an estimated 1.1 million protracted internally displaced people countrywide

Response
• Between January and April 2017, more than 103,000 persons were assisted with emergency non-food assistance including plastic sheeting, blankets, jerry cans, sleeping mats and kitchen sets.
• Between January and April 2017, 6,000 persons were assisted with Emergency Shelter Kits comprising of plastic sheets, supporting poles and a rope for tying down the structure.

Gaps and Constraints
• Limited funding has affected the delivery of humanitarian assistance by shelter cluster partners.
• Increased advocacy is required to highlight the need to provide shelter and NFIs to drought displaced individuals.
• Logistical challenges including flight costs, road inaccessibility, insecurity, check points for the transportation of NFI/Shelter supplies are affecting the effective delivery of humanitarian assistance.
• Lack of prepositioned stocks due to long standing low funding for shelter activities hampers timely response to displaced populations.

Latest Publications
• Somalia Food Security Alert: http://bit.ly/2rmJFZg