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About Human Appeal

Human Appeal UK is a British international humanitarian and development organization that currently works over 25 countries around the globe. HA Foresees to become a global agent for change to create a just, caring and sustainable world by delivering immediate relief aid to disaster affected areas and providing humanitarian responses and development initiatives based on efficiency, effectiveness and turnaround time.

HA officially established its Country Office in Mogadishu early in last year (2017) after a number of years working in Somalia through local partners.
Summary

The current drought in Somalia has resulted in the deterioration of the humanitarian situation in many parts of Somalia and a notable increase in household vulnerability. The impact of the drought has been further compounded by an intensification of conflict in the country especially in the latter part of the year, resulting in exacerbated displacement trends. This assessment was carried out by REACH and Human Appeal with REACH leading on technical design and reporting and Human Appeal supporting with data collection, to monitor the situation in targeted Districts in response to ongoing drought conditions in Somalia. Also Human Appeal has fully funded the exercise including per diem of enumerators, vehicle hired, security and etc.
In order to provide a broad needs overview, the assessment entailed a survey of multi-cluster needs at the household level, focusing on Food Security, Water, Sanitation and Hygiene (WASH), Health and Nutrition needs. This situation overview presents main findings from the assessment, based on primary data collected between 9-26 December 2017 through 1,101 household surveys from all the three districts (Bulo-Burte of Hiran, Burdhubo/Garbaharey of Gedo and Diinsoor of Bay). Findings should be considered indicative rather than generalisable to the overall population.
Methodology

Data collection for the assessment used a harmonised multi-cluster needs assessment tool developed by REACH and Somalia clusters including Food Security, WASH and Health.

Households were randomly sampled using a Probability Proportional to Size (PPS) sampling model at 95% confidence level and 7% margin of error.

For security, we addressed only the accessible areas. The enumerators, contracted by Human Appeal, used the Open Data Kit (ODK) data collection tool and KoBo.
1. Buulo-Burte, Hiiraan
Key Findings

• Nearly all (96%) assessed households reported inadequate access to food suggesting high levels of food insecurity in the area.

• Lack of enough land for cultivation was the most commonly reported reason for inadequate access to food, indicated by 55% of those households without adequate access to food.

• More than three-quarters (79%) of assessed households reported losing access to one or more income sources in the year prior to this assessment, suggesting declining economic resilience of households.

• 62% of those households that indicated a change in their primary food source in the three months prior to this assessment reported that the amount of food that they were able to access had reduced.
Key Findings.. Cont..

• Sixty-eight percent (68%) of assessed households reported that their weekly expenditure on food had increased in the month prior to this assessment. It is therefore highly likely that vulnerable households are experiencing increased inability to afford food items.

• Despite just 17% of assessed households indicating not having access to an adequate amount of water for household use (drinking, washing and cooking), the reported average number of litres of water per person per day was below minimum SPHERE standards, at 14 litres.

• 53% of assessed households indicated relying on rivers as their primary source of water, raising concerns about poor water quality, and the health and nutrition risks it poses.
Key Findings.. Cont..

• In a likely indication of poor sanitation practices, 48% and 42% of those households that reported not having access to a latrine indicated practicing open defecation in the open by the home and in the open away from home respectively.

• More than half (63%) of children under the age of five years in assessed households were categorised as having severe malnutrition.
Food Security

Figure 1: Proportion of assessed households categorised as having poor, borderline and acceptable FSC.

29% Poor
24% Borderline
47% Acceptable

11 Poor < 28; Borderline ≥ 28 ≤ 42; Acceptable > 42
Figure 2: Reported defecation practices for the 8% of assessed households without access to a latrine

- In the open by the home
- In the open away from the home
- Community defecation area

42%
48%
10%
Health

Figure 3: Proportion of assessed households reporting that a member had experienced a health issue in the month prior to this assessment, disaggregated by age.

- **Malaria**: 89% adults, 90% children
- **Stomach pain**: 47% adults, 47% children
- **Malnutrition**: 7% adults, 40% children
- **AWD**: 11% adults, 25% children
Nutrition

• Only 8% of assessed households reported having accessed nutrition services in the month prior to this assessment suggesting substantial gaps in provision of nutrition services.
• More than half (63%) of children under the age of five years in assessed households were categorised as having severe malnutrition. Fifteen percent (15%) were categorised as having moderate malnutrition and 18% as being at risk of malnutrition. Given the ongoing drought and prediction of below average Gu rains15, it is highly likely that the rates of malnutrition will continue to rise without adequate intervention, resulting in a higher proportion of children experiencing severe malnutrition.
Displacement

Population Movement and Return:

• 47% of assessed households in Bulo Burto are reportedly IDP households.

• 42% of assessed IDP households reported having been displaced from elsewhere in Hiraan Region. Of these, 80% reported having been displaced from elsewhere in Bulo Burto, indicating that movement is relatively localised.

• In a likely reflection of drought conditions and conflict dynamics in South Central Somalia, 23% and 18% of IDP households reported having been displaced from Bakool and Bay Regions respectively.
Displacement.. Cont..

Population Movement and Return:

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• 42% of assessed IDP households reported having been displaced from elsewhere in Hiraan Region. Of these, 80% reported having been displaced from elsewhere in Bulo Burto, indicating that movement is relatively localised.

• In a likely reflection of drought conditions and conflict dynamics in South Central Somalia, 23% and 18% of IDP households reported having been displaced from Bakool and Bay Regions respectively.
Displacement.. Cont..

**Push and pull factors:**

- 61% reported that drought is the primary cause for displacement.
- Relatedly, the availability of food distributions was a key pull factor, reported by 28% of assessed IDP households.
- Conflict in the community and in the surrounding area were the second and third push factors by IDP households, at 20% and 11% respectively. Relatedly, 28% cited lack of conflict as the primary pull factor to their current location.
- Lack of livelihood opportunities was the most commonly reported secondary reason for displacement, indicated by 22% of IDP households. This suggests that displacement is also triggered by longer-term underlying socio-economic factors, alongside more immediate push factors such as drought and conflict.
Displacement.. Cont..

Intentions:

• Nearly all assessed IDP households (97%) indicated that they intended to remain in their settlement. Two percent (2%) reported that they intended to move elsewhere within Bulo Burto and 1% reported that they intended to return to their previous settlement.
Displacement.. Cont..

Intentions:

• Nearly all assessed IDP households (97%) indicated that they intended to remain in their settlement. Two percent (2%) reported that they intended to move elsewhere within Bulu Burto and 1% reported that they intended to return to their previous settlement.
2. Diinsoor, Bay
Key Findings

• Nearly all (99%) assessed households reported inadequate access to food suggesting high levels of food insecurity in the area.

• In a further indication of households’ food insecurity, notable proportions of assessed households were categorised as having borderline and poor Food Consumption Scores (FCS)1, at 45% and 31% respectively.

• The average number of days that households’ cereal stock would last at the time of this assessment was reportedly one day, indicating limited ability of households to support themselves in the event of market shocks.
Key Findings.. Cont..

• All assessed households reported that their weekly food expenditure had increased in the month prior to this assessment. It is therefore likely that vulnerable households are experiencing increased inability to afford food items.

• Nearly all (96%) assessed households reported losing access to one or more sources of income in the year prior to this assessment, suggesting declining economic resilience of households.

• Fifty-three percent (53%) of assessed households reported not having access to an adequate amount of water for household use (drinking, washing and cooking). Internally Displaced Persons (IDP) households were slightly more vulnerable with 61% reporting not having access to an adequate amount of water for domestic purposes, compared to 41% of non-displaced households reporting this.

• The overwhelming majority (99%) of households indicated relying on unprotected wells as their primary source of water, raising concerns about poor water quality, and the associated health risks it can cause.
Key Findings.. Cont..

• Forty-two percent (42%) of assessed households reported not having access to a latrine. Of these, 91% reported practicing open defecation away from home and 8% in the open by the home, indicating poor sanitation practices.

• No assessed households in Diinsoor reported having access to soap. A lack of resources to purchase soap was the most commonly reported barrier to access, indicated by all assessed households.

• The vast majority (89%) of assessed households reported not having access to a nearby healthcare facility, indicating substantial gaps in the provision of healthcare services.
Displacement

Population Movement and Returns:

• More than half (64%) of assessed households in Diinsoor reported that they are IDPs, reflecting the high number of IDPs in Bay Region. The region currently hosts one of the highest caseloads of drought-displaced people in Somalia.

• The highest proportion (94%) of IDP households reported having been displaced from elsewhere in Bay Region. Of these, 85% reported having been displaced from elsewhere in Diinsoor, indicating that movement is relatively localised.
**Displacement.. Cont..**

**Push and Pull Factors**

- In a reflection of the high rates of displacements originating from Bay since the onset of the drought6, drought was the most commonly reported push factor, cited as the primary cause for displacement by 85% of all assessed IDP households. Lack of water was the most commonly reported secondary push factor, cited by 26% of assessed IDP households. This further confirms drought as the leading cause for household displacement.

- Relatedly, 22% and 14% of assessed IDP households cited availability of water and food distributions respectively as key pull factors to Diinsoor.

- Nearly a quarter (22%) of assessed IDP households reported a lack of livelihood opportunities as a secondary push factor for displacement, indicating that displacement is also being triggered by longer-term underlying socio-economic factors, alongside more immediate push factors such as drought.

- The absence of conflict in the area was the most commonly reported reason for choosing to settle in Diinsoor, with 27% of IDP households citing this as their primary pull factor.
Displacement.. Cont..

Intentions:

• All assessed IDP households indicated that they intended to remain in Diinsoor in the future.
Food Security & Livelihoods

- Acceptable: 31%
- Borderline: 45%
- Poor: 24%

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2/27/2018
WASH

Figure 2: Reported defecation practices for the 42% of assessed households without access to a latrine

- In the open away from the home
- In the open by the home
- Community defecation area
Health

Figure 3: Proportion of assessed households reporting that a member had experienced a health issue in the month prior to this assessment, disaggregated by age.

- Malaria: Adults 85%, Children 91%
- Stomach pain: Adults 73%, Children 58%
- AWD: Adults 60%, Children 39%
- Malnutrition: Adults 59%, Children 33%
Nutrition

• Only 8% of assessed households reported having accessed nutrition services in the month prior to this assessment indicating substantial gaps in provision of nutrition services.

• A considerable proportion of children under the age of five years in assessed households were categorised as having severe malnutrition, moderate malnutrition and at risk of malnutrition, at 25%, 46% and 28% respectively. Given the ongoing drought and prediction of below average Gu rains15, it is highly likely that the rates of malnutrition will rise without adequate intervention, resulting in a higher proportion of children experiencing moderate and severe malnutrition.
3. Buurdhuubo/Garbaharey, Gedo
Key Findings

• Nearly all (94%) assessed households reported inadequate access to food, suggesting high levels of food insecurity in the area.

• In a further indication of high levels of food insecurity in the area, 90% of assessed households were categorised as having a poor Food Consumption Score (FCS).

• Forty-six percent (46%) of assessed households reported that their weekly expenditure on food had increased in the month prior to this assessment. It is therefore highly likely that vulnerable households are experiencing increased inability to afford food items.

• The average number of days that households’ cereal stock would last at the time of this assessment, was reportedly two days indicating limited ability of households to support themselves in the event of market shocks.

• The majority (84%) of assessed households reported losing access to one or more income sources in the year prior to this assessment, suggesting declining economic resilience of households.

• In an indication of high water shortages in the area, 78% of assessed households reported not having access to an adequate amount of water for household use (drinking, washing and cooking).
Key Findings.. Cont..

• Further, the reported average number of litres of water per person per day was far below minimum SPHERE standards2, at 6 litres.

• A lack of enough containers to store and carry water was the most commonly highlighted reason for lack of access to an adequate amount of water, indicated by 74% of those households that reported not having access to an adequate amount of water for household use.

• The overwhelming majority (89%) of households indicated relying on rivers as their primary source of water, raising concerns about poor water quality, and the health and nutrition risks it poses.

• Eighty-five (85%) of assessed households reported not having access to a latrine, suggesting high rates of open defecation in the area.

• The majority (81%) of children under the age of five years in assessed households were categorised as having severe malnutrition.
Displacement

Population Movement and Returns:

• In an indication of an increased influx of Internally Displaced Persons (IDPs) in the area, 43% of assessed households in Garbahaarey reported that they are IDP households.

• The highest proportion (90%) of assessed IDP households reported having been displaced from elsewhere in Gedo Region, indicating that movement is relatively localised. The other 10% indicated having been displaced from Bay Region, likely mirroring the high drought-induced migrations from Bay Region since the onset of the drought in early 2015.
Displacement.. Cont..

Push and Pull Factors:

• In a likely reflection of increased drought-related distress migration across Somalia, drought was the most commonly reported push factor, indicated as the primary cause for displacement by 73% of assessed IDP households.

• Lack of food, drought and a lack of water were the most commonly reported secondary push factors for displacement, indicated by 52%, 12% and 10% respectively of IDP households, further confirming drought as the leading reason for household displacement.

• Relatedly, 29% and 20% of assessed IDP households cited availability of food distributions and water respectively as key pull factors to Garbahaarey.

• A considerable proportion (28%) of IDP households also highlighted the absence of conflict as a primary pull factor to Garbahaarey, indicating that the presence or absence of conflict is an important factor in households’ choice of where to relocate to.
Displacement.. Cont..

Intentions:

Nearly all assessed IDP households (97%) indicated that they intended to remain in their location at the time of this assessment. Two percent (2%) indicated that they intended to move elsewhere in the city, possibly to search for income generating opportunities. Only 1% indicated that they intended to return to their previous location.
Food Security & Livelihoods

Figure 1: Proportion of assessed households categorised as having poor, borderline and acceptable FCS³

Poor < 28; Borderline ≥ 28 ≤ 42; Acceptable > 42.
WASH

Figure 2: Reported defecation practices for the 85% of assessed households without access to a latrine

- In the open away from the home
- In the open by the home
- Community defecation area

- 60%
- 39%
- 1%
Health

Figure 3: Proportion of assessed households reporting that a member had experienced a health issue in the month prior to this assessment, disaggregated by age

- Malaria: 82% adults, 79% children
- Malnutrition: 25% adults, 68% children
- Stomach pain: 41% adults, 54% children
- AWD: 44% adults, 50% children

Adults vs. Children
Nutrition

• Only 7% of assessed households reported having accessed nutrition services in the month prior to this assessment, indicating substantial gaps in the provision of nutrition services.

• The overwhelming majority (81%) of children under the age of five years in assessed households were categorised as having severe malnutrition. Fifteen percent (15%) and 4% were categorised as having moderate malnutrition and at risk of malnutrition respectively. Given the ongoing drought and prediction of below average Gu rains16, it is highly likely that the rates of malnutrition will continue to rise without adequate intervention, resulting in an even higher proportion of children experiencing severe malnutrition.
Thank you!