



HUMANITARIAN SITUATION IN SOMALIA

Monthly Analysis

May 2006

This report was written in cooperation with the UN Agencies in Somalia

HIGHLIGHTS

Fighting erupted again in Mogadishu on 7 May between the 'Union of the Islamic Courts' and the 'Alliance for the Restoration of Peace and Counter-terrorism' and continued until early June despite various tense lulls. This was the third round of fighting since February 2006 when conflict was triggered by the creation of the Alliance to fight terrorism. The fighting, which hit various neighborhoods in Mogadishu, resulted in the displacement of around 17,000 people to areas around the capital as well as locations as far away as Hargeisa (Somaliland) and Kenya. More than 320 people were killed, some as a result of indiscriminate shelling which also affected access to health facilities. According to ICRC, since the beginning of the year more than 2,000 conflict-related wounded have been admitted to Mogadishu's two main hospitals.

With calm for the moment back in Mogadishu, now predominantly under the control of the Sharia Courts, many of those who had fled have started to return. Still, the situation remains uncertain. The violence exacerbates an already dire humanitarian situation where coping mechanisms are overstretched, and back-up resources remain limited for the most vulnerable segments of the population. Still, events now could provide a window of opportunity to enhance access and delivery aid to highly vulnerable groups. Mogadishu is host to the largest group of IDPs in Somalia – around a quarter of a million people – and yet very limited assistance has reached them over the last 15 years due to restricted access.

Southern Somalia will remain in a state of Humanitarian Emergency until December 2006, while areas of central and northern Somalia will remain in an Acute Food and Livelihood Crisis. According to FAO/FSAU and FEWSNET, the *Gu* rains have helped avert the worse case scenario of a possible famine in some areas of southern Somalia, yet the situation remains dire and requires reinforced and sustained efforts to address vast humanitarian needs. The cereal crop harvest is projected to be below normal this season, which could lead to a third consecutive year of below normal cereal production. Rangeland and livestock body conditions are improving yet there will be minimal immediate cattle calving due to emaciated body conditions, leading to less milk availability for consumption and sale. Food access and supply will remain stressed until December.

The findings of four recently completed nutritional surveys in Gedo, Middle and Lower Juba regions show increased and worrying levels of malnutrition. In Buale/Sakow district, global acute malnutrition was reported at 21.9%; in Bardera town, at 19%; in Afmadow/Hagar district, at 22%; and in Jilib riverine zone, at 16.2%. The results are an outcome of months of household stress characterized by poor diet diversity, consumption of unsafe water and inadequate access to preventive and curative health services.

The UN Special Advisor on Internally Displaced – Dennis McNamara - led a donor mission to Somalia between 22 and 26 May 2006. Traveling to Bossaso, Hargeisa, Baidoa and Merka, the mission visited a mixture of long-term internally displaced persons, displaced by on-going conflict and drought, as well as local authorities, and representatives of the TFG. Mr. McNamara noted that while there have been some positive developments in obtaining clarity on national counterparts on displacement related matters, some obstacles still remain. He also noted no significant improvement in the IDPs living conditions since his last visit in December 2004. On Mogadishu, the Advisor stated that it remains the only capital city in the world where the UN does not have international presence despite protracted needs.

Protection remains a major gap in the operational response and the situation of IDPs remains below any minimum acceptable standards. This is partly due to a certain level of non-cooperation of the local authorities, limited presence of experienced UN and NGO staff on the ground but also lack of required funding. The Special Advisor pointed out the disparity of funds made available to the different sectors within the 2006 Somalia CAP, commenting that while the food sector is very well covered protection and other basic services related sectors could not realistically be expected to meet needs with only 20% of funding appealed for provided.

MOGADISHU

Since February 2006, militia allied to the Alliance for Restoration of Peace and Counter-Terrorism (ARPCT) and the Islamic Courts Union (ICU) have clashed at key strategic points in Mogadishu in an attempt to gain control of the city. On 7 May, fighting erupted in the capital for the third time and continued for seven days, reportedly killing around 150 people and injuring double the number. According to Somali health officials, trauma/surgical facilities were stretched beyond capacity, while shops and schools closed and public transport was disrupted. A large number of families were displaced from areas of fighting in north Mogadishu (Si Si - the epicentre of the fighting) seeking refuge in calmer parts of the city. The most vulnerable, particularly the 250,000 or so IDPs residing in the capital, were stuck without means to leave.

A tenuous ceasefire secured on 14 May through mediation of prominent leaders did not last long as fighting occurred again on 25 and 26 May, killing around 50 persons and wounding over 40. The fighting spread from northern Mogadishu to the southern and eastern parts of the city. On 28 May militia allied to the ARPCT occupied Keysaney Hospital, one of the two main hospitals in Mogadishu serviced by ICRC, which promptly denounced the act, while medical services were reduced to a minimum and most patients were hastily removed. Another bout of fighting occurred on 31 May, in the north east of Mogadishu (towards Balad), reportedly taking the lives of seven people and injuring more than a dozen. By 4 June, militias loyal to the ICU took control of much of Mogadishu as well as Balad town, 30 Kms north of Mogadishu. As a precautionary measure all UN and some international NGO international staff members were relocated from Jowhar.

Throughout the month's fighting, a number of advocacy initiatives were undertaken at both local and international levels calling for the warring parties to cease the fighting and allow humanitarian access to civilians. In a press release, the Humanitarian Coordinator for Somalia reminded the warring factions that any deliberate attempt to prevent wounded or civilians from receiving assistance and protection could constitute elements of future war crimes. More than 320 people – mostly civilians - were killed, some as a result of indiscriminate shelling. According to ICRC, since the beginning of the year more than 2,000 conflict-related wounded have been admitted to Mogadishu's two main hospitals. As of the end of May, around 17,800 have been displaced to nearby cities, with some movements reported as far as Hargeisa and northeast Kenya. The majority of these integrated with relatives and host communities, making their tracking difficult. In order to reinforce the humanitarian response, a high level joint UN mission (OCHA, UNICEF, WFP, UNDP) traveled to Jowhar on 17 May to further detail a developed inter-agency contingency plan, which focuses on strengthening current programmes and consolidating existing basic social services in Mogadishu.

Over the past days calm has returned to Mogadishu and many of those who fled have started returning. Still, the situation remains uncertain. The violence exacerbates an already dire humanitarian situation where coping mechanisms are overstretched, and back-up resources remain limited for the most vulnerable segments of the population. Most of the pre-conflict activities (while limited compared to needs) remain ongoing, including supplementary and therapeutic feeding, enhancing access to safe water, educational support and provision of health facilities. Concerns remain over the delay that the fighting caused to the polio and measles vaccination campaigns. However, the present calm in Mogadishu could provide a window of opportunity to enhance access and delivery of aid to highly vulnerable groups. The response to needs in Mogadishu should be integrated and put into context within the overall response to the vast needs that remain in the rest of southern Somalia.

In the Juba regions, roadblocks, militia ambushes and inaccessible roads continue to hamper humanitarian access and cause delays on activities. Between 15 and 26 May, three unfortunate security incidents occurred in Jamame district around WFP food aid distribution. In two of the incidents, local militia groups stopped food convoys from leaving Jamame town for final distribution points. In the third incident, in Muganbo village local militia ambushed and looted a group of beneficiaries who had just received relief food. In a fourth incident in Jilib district, on 23 May, three trucks carrying 100 metric tons (MT) of food dispatched from Merka to Buale and Jilib were looted by armed militia in the village of Haranka, approximately 60 kms from Jilib town. Some 33 MT have so far been recovered and more is expected to follow.

Localised flooding due to heavy rains in the Jubas has also impacted on access. Although many roads are now drying up, standing water continues to limit the movement of heavy vehicles on roads.

In Gedo region, similar challenges also persist. Since the onset of the drought in December 2005, international NGOs working in the region have noted increased difficulties to operate with more security incidents occurring over hiring and contracting issues. The NGOs have appealed to the different local authorities in Gedo to create a more favourable environment for NGO operations. In early May, WFP's food distribution in Garbaharey district was postponed following a security incident over staffing issues.

Following the submission and approval of a WFP logistics project to the Central Emergency Response Fund (CERF), as of 22 May 'prepaid' seats and cargo on existing UN flight services are being offered to the aid community at large to access affected areas in Somalia. The service – which will last three months – came in response to the need to bolster the response and access capacity of organizations to meet needs emerging from the drought. Exclusively for humanitarian purposes, the service is being coordinated by OCHA Somalia. On 15 May, ECHO had interrupted its Somalia flight services which were consequently picked up by the EC as of 5 June.

In the northwest, UN humanitarian activities continued throughout the reporting period although access to parts of eastern Sool and Sanaag remains restricted due to the ongoing border dispute between Somaliland and Puntland. In the northeast, tension persisted between the Puntland authorities and the largely Warsangeli community in the Majayahan area (eastern Sanaag) over exploration of mineral resources.

PROTECTION

Dennis McNamara, the UN Special Advisor on Internally Displaced to the Emergency Relief Coordinator led a donor mission to Somalia between 22 and 26 May, accompanied by UN and media representatives. The mission traveled to Bossaso, Hargeisa, Baidoa and Merka where it visited a mixture of long-term internally displaced, displaced by on-going conflict and drought as well as local authorities, land owners, religious leaders, and representatives of the TFG, including President Yusuf.

In all locations, the authorities were highly critical of the UN's progress. While there have been some positive developments in obtaining greater clarity on national counterparts on displacement related matters, relations with the authorities remain constrained, at times affected by localised vested interests and difficulties in distinguishing between humanitarian, developmental and political responsibilities.



IDP children in a Bossaso IDP site. Source: OCHA

Mr. McNamara noted that the situation of the IDPs in Somalia remains below any minimum acceptable standards, and is amongst the worst in Africa. In any other context, the situation would be considered an 'emergency' yet years of chaos have made everyone 'immune'. The displaced continue to lack access to all essential basic services. Land and property issues represent the main obstacle for search and implementation of durable solutions for the IDPs, while insecurity remains the most significant deterrent to humanitarian access to the most vulnerable populations in the centre and south. In Bossaso, Mr. McNamara called for an end to the tragedy caused by people smuggling across to Yemen.

Protection has remained a major gap in the operational response, mostly due to lack of resources and experienced personnel. The

Special Advisor noted the disparity of funds made available to the different sectors within the 2006 Somalia CAP, commenting that while the food sector was very well covered other protection and basic services related sectors could not realistically be expected to meet needs with under 20% of the funding requested made available. In all regions of Somalia, both the authorities, and the humanitarian community can do more to improve the lives of the displaced, despite that fact that the prime responsibility for IDP lies with the authorities. On Mogadishu, the Advisor noted that it remains the only capital city in the world where the UN does not have international presence despite a quarter of a million IDPs residing there needing urgent assistance.

During the month of May, population movement and displacement tracking continued. Most of the movement recorded was as a result of floods, clan clashes/inter-clan conflict, on-going effects of the drought and clashes in Mogadishu, following which hundreds of families moved both within the city – avoiding the fighting – as well as to surrounding areas such as Afgoye, Balad, Jowhar, Kismayo, Marka, Hawo, Elasha, Brava, Qoryoley, Wenle Weyne, Bulo Burte, Beletwayne and as far as Hergaisa. A total of 35,600 people were reported to have moved within the city, whereas around 17,800 people left Mogadishu. The majority were children, women, elderly and disabled. As calm has returned to the capital, returns are being reported.

Cross border movement was also reported mainly towards Ethiopia and Kenya from Somalia due to inter-clan conflicts and clashes in Mogadishu. The movement towards Kenya was mostly due to the clashes in the capital (2,194 people arrived in the Dadaab refugee camp), whereas movement towards Ethiopia was mainly due to inter-clan conflict (720 people crossed the border into Feer Feer district).

Presently 25 partners participate in the population tracking exercise, including UN agencies and NGOs. The goal remains to expand the network of partners to strengthen information collection and analysis of movement patterns.

While the numbers of Somali and Ethiopian nationals crossing the Gulf of Aden from Puntland decreased during May, the issue remains a grave humanitarian concern. In May, a total of 396 Somalis and 673 Ethiopians arrived in Yemen on ten boats, while in the first four months of the year, a total of 5,405 Somalis and 5,207 Ethiopians reportedly entered the country. The arrival of the monsoon season and resulting high sea has slowed down the crossings, yet these still occur and under more dangerous conditions. What used to take 36 hours is now taking three days and the cost of the journey has also spiked (according to sources from US\$40 to US\$100).

In a tragic incident, on the night of 7 May, a smuggler boat capsized killing 48 people (47 male Ethiopians and one female Somali). Even though the boat is said to have capsized, reports from survivors say the smugglers forced the passengers to disembark while still in deep waters to avoid detection by the Yemeni coast guards. On 22 May, IOM started its Assisted Voluntary Return Project of Ethiopians, which will last until the end of June. As of 31 May, 105 Ethiopians had departed by plane back to Ethiopia, and 313 were pending departure after having their nationality verified. So far, the majority of the caseload has been single young males although the end of the month saw an alarming increase in the number of single mothers with children registering to return. IOM expects to repatriate 900 Ethiopians by completion of the project when it is anticipated that the Puntland Authorities will start registering asylum seekers and by which time UNHCR will be able to handle referrals on refugee status determination.

Most of the new arrivals received in Yemen cited drought in the Horn of Africa, poor economic conditions, lack of job opportunities, insecurity and family reunification as main reasons for their travel. Many Ethiopians do not report for fear of being arrested or deported hence it is difficult to get a broader view of their reasons for traveling to Yemen. The Somali arrivals were mainly from Benadir, Bay, Lower and Middle Juba, Lower Shabelle in southern Somalia as well as Bari and Sool regions in the north. Most of the Ethiopians came from Addis Ababa and Harar Dire Dawa councils; and Shoa, Arsi, Bale, Ogaden, Samen Shao and Tigray regions.

Progress is being made in establishing a Protection Monitoring Network (PMN) for Somalia. The basis for effective protection action is accurate and timely information on human rights abuses, and the PMN's overall aim is to better inform protection responses at all levels and provide a stronger basis for advocacy. The Network will build upon and support existing local capacities for protection monitoring and reporting, in particular those of local NGOs. In May, a pilot project involving ten child protection partners identified and trained by UNICEF and Oxfam/Novib to monitor human rights violations in Somalia was completed, and review workshops convened with the ten partners in Garowe and Merka. On 18 May a one-day roundtable was held in Nairobi with aid partners and other stakeholders to take stock of progress, in particular the results from the pilot phase; clarify the objectives and overall approach of the Network, and map out next steps. Priority activities will now include refinement of the monitoring tool and modalities for information collection and analysis before broadening the Network to include additional partners.

Poor access to the vast majority of displaced in Somalia has contributed to a lack of common understanding on their situation. Key information required to ensure that informed and targeted interventions provide protection and assistance is severely lacking. While many surveys have been conducted, primarily in Somaliland and Puntland, they vary in quality and generally lack information on the protection situation of IDPs, their intentions and coping mechanisms. In an attempt to profile IDPs in Somalia, a desk review is presently being undertaken until August 2006 to gather and analyse relevant IDP surveys produced during the last three years. Information gaps will thereafter be identified, enabling the preparation and further implementation of IDP profiling exercises in selected locations in Somalia.

More than 2,500 internally displaced and returnees were left homeless at '*Boqolka Bush*' settlement when a fire gutted the site in Puntland's port town of Bossaso late on 9 May. *Boqolka Bush* is the largest IDP settlement in Puntland and virtually all the huts were destroyed by the fire. This was just one of several fire incidents in IDP settlements of Bossaso in the recent months. Unattended cooking fires and arson are among the causes that ignite destructive fires each year. The combination of high temperatures, strong seasonal winds (particularly between May to August) and very congested settlements often mean that fires quickly get out of control and destroy huge numbers of the '*buuls*' made out of wooden sticks, cardboard and plastic.



Inhabitants of 'Boqolka Bush' IDP settlement rebuilding their *buuls*.
Source: Joana Cameira, UN-HABITAT.

Under guidance of UN-HABITAT, a Fire Plan has been developed, focusing on preventive measures and better preparedness to respond to fires. Next to strengthening the Municipal fire fighting capacity, the plan focuses on developing roles and responsibilities of the IDPs, the landowners and aid organizations. The destruction left by a fire can be seen as an opportunity to develop a new lay-out for the settlement, marking clear plot alignments with proper firebreaks, and space for basic services, especially latrines, which are totally lacking today. Reaching the Minimum Humanitarian Standards is the ultimate goal. This said, in *Boqolka Bush* implementing the agreed plan is facing some challenges. Interference by landowners, lack of community organization amongst the IDPs, and somewhat weak coordination between aid partners and the authorities is impacting on the timeliness of reconstructing damaged shelter. Experience has shown that once the first structures go up, people start to understand better the intentions of the plan.

HEALTH

As of 31 May, a total of 210 wild polio virus cases have been confirmed since the first case emerged in July 2005. The distribution of cases has now spread to 12 regions as follows: Banadir (165), Lower Shabelle (26), Middle Shabelle (4), Bay (3), Mudug (3), Sool (2), Middle Juba (2), Gedo (1), Lower Juba (1), Bari (1), Hiran (1) and Galgadud (1). The next National Immunization Day (NID) for Somalia is scheduled from 11 to 13 June. Somalia's NID will be synchronized with the Somali border region of Ethiopia, North East Kenya and Djibouti as part of a regional strategy for prevention and control of polio.

No confirmed outbreaks of measles were reported during May. Due to the current security situation in Sool region, measles campaigns have been delayed while free access for humanitarian interventions is being negotiated. After discussions with both the Somaliland and Puntland authorities, vaccines and supplies have been sent to Las Anod (Sool) and the measles campaign should start in mid-June. The measles mass catch-up campaign in Mogadishu North, scheduled for the second week of May, was delayed until the security situation permits implementation. Meanwhile, the campaign has been completed in the five drought regions with 229,000 Vitamin A supplements distributed to date. Most measles campaigns are held after the polio campaigns as they use the same supplies and cold chain.

A malaria outbreak was confirmed in Awbarkhadle, Hargeisa district of Somaliland. Out of 68 suspected cases, 33 tested positive and two deaths occurred. Prevention and control measures were taken and the outbreak has been stopped. However, countrywide the presentation of malaria cases continues at normal seasonal levels.

In Djibouti, WHO officially confirmed one case of Avian flu in a two year old girl from a small rural village in Arta district, nine Kms from the Somali border. Rumors that a baby who had contracted avian influenza from Somalia and developed symptoms after crossing the border in Djibouti are not true. Investigations by WHO and the Ministry of Health and Labour in Somaliland have confirmed that the baby is alive and well. The first human case of Avian flu in Djibouti highlights the need for preparedness and response activities within Somalia. In this regard, the WHO led Avian Influenza Working Group established last month continues to meet regularly and 100 Personal Protective kits have been provided by USAID's Regional Economic Development Services Office to WHO to support response alerts within Somalia. The UN's Working Group on Avian Influenza has begun an initial preparedness and response planning, in conjunction with the SACB Avian Influenza Task Force, for joint activities in support of Somali animal and human health authorities in case there is an alert of suspected avian cases.

NUTRITION

Recent nutrition assessments indicate deterioration of the nutrition situation in the emergency affected regions. Since January 2006, eight out of nine nutrition assessment recorded global acute malnutrition rates malnutrition rates exceeding the emergency threshold (critical levels) of 15%. Four of the nutrition assessment recorded global acute malnutrition (GAM) rates (W/H<-2 z score or oedema) of over 20%. Some of the recent (March - May 2006) nutrition assessments include Gedo Region (GAM rate of 23.8%), Bardera town (GAM rate of 19.0%), Buale/Sakow (GAM rate of 21.9%), Afmadow/Hagar (GAM rate of 22.0%) and Jilib riverine (GAM rate of 16.2%). The severe acute

malnutrition rates (W/H<-3 z score or oedema) in the five nutrition assessment ranged between 3.7% and 6.6% (for details, visit the www.fsausomali.org).

Latest reports from aid agencies in southern Somalia highlight that against an estimated 58,000 malnourished children under five years of age, the present coverage of supplementary and therapeutic programmes remains unacceptably low, reaching less than 15% of the total. An estimated 58,000 children aged 5 years and below are malnourished in the five emergency affected regions of Bay, Bakool, Gedo and Middle and Lower Juba, among which about 10,000 are severely malnourished. Most of these children urgently need supplementation among other nutritional care while the severely malnourished need intensive therapeutic care. The combination of unstable local administrations, insecurity, lack of adequate agencies with capacity to manage malnutrition and insufficient funding continue to hinder progress in the establishment of emergency nutrition intervention programmes, thus limited overall coverage. More vigorous and comprehensive actions are urgently needed to avert excessive child mortality. Reports from the field record a continuing increase in admissions of malnourished children into Therapeutic Feeding Centers (TFC) with many cases arriving at the TFC when seriously ill, thus in need of highly skilled staffs to manage such cases.

Since mobilizing response to the drought crisis in January, the number of supplementary feeding programmes (SFPs) has been gradually expanding from ten to 17 by the end of May 2006. Outside Bakool and parts of Bay regions, undertaking SFP response has been hindered by the absence of aid agency with capacity, itself a consequence of insecurity. In Gedo region, the Gedo Health Consortium concentrates on management of severe malnutrition as advocacy and efforts to improve general food distribution (included blended food), health services, food security and livelihood rehabilitation and water and sanitation continues. Seeking to offset this operational limitation, WFP has sought to augment its general food distributions with blanket supplementary ration of blended food. However, the impact of this response has not been significant as WFP has been able to meet only 40% of planned distributions due to insufficient food stocks, insecurity and poor road conditions. It is essential that the next round of general food distributions, scheduled in mid-June, can reach a greater proportion of needy populations.

HIV/AIDS

A quarterly review meeting of the Global Fund for AIDS, TB and Malaria (GFATM) was held in Nairobi from 8-10 May 2006. The meeting was attended by sub-recipients of the GFATM, Somali AIDS secretariats officials and representatives of Government Ministries. The meeting reviewed progress in the implementation of GFATM activities during year one that ends in June 2006 and the selection process for year two grant recipients. An important outcome of the meeting was a plan to ensure that at least one or two Voluntary Counseling and Testing (VCT) centres and antiretroviral treatment (ART) are established in each of Somalia's three zones early in the second year of GFATM by the end of 2006. To this end, a 10-day ART training for 20 health workers was conducted in Puntland in the course of May 2006 in preparation for the launch of an ART programme there. Experiences from the ART programme in Hargeisa, Somaliland launched in mid 2005 have shown that access to treatment can provide an impetus to seek HIV counseling and testing services and promote an openness to discuss HIV and AIDS among the population.

Executive Directors of Puntland, Somaliland and South Central AIDS Commissions together with the Deputy Minister of Health of the TFG were among participants attending the 2006 High Level meeting on AIDS that took place in New York between 31 May and 2 June. Held at the United Nations headquarters, the meeting committed representatives of States and Governments to pursue all necessary efforts to scale up nationally driven, sustainable and comprehensive responses to achieve broad multi-sectoral coverage for prevention, treatment, care and support, with full and active participation of people living with HIV, vulnerable groups, most affected communities, civil society and the private sector, towards the goal of universal access to comprehensive prevention programmes, treatment, care and support by 2010. In Somalia, consultations on universal access to HIV/AIDS treatment care and support for Somalis were concluded in February 2006 ahead of this high level meeting. Through this process, gaps in VCT, ART and sexually transmitted infections services were identified which will guide the formulation of a workplan for accelerating universal access to HIV and AIDS services for Somalis.

Effective monitoring and evaluation (M&E) is an important element of an HIV/AIDS response. The process facilitates routine assessment of on-going activities and overall, long-term achievements that are attributable to interventions. Information generated from the M&E process provides a basis for decision making and feedback on how effectively the resources for HIV/AIDS response are being utilized. Between 23 and 26 May, in Puntland, UNAIDS supported the training of 30 partners from the Puntland AIDS Commission (PAC), the Ministry of Health, UN agencies, international and local NGOs on the use of the Country Response Information System (CRIS) to monitor and evaluate HIV and AIDS interventions in Puntland. Four resource people have been identified and trained to further train local organizations involved in HIV/AIDS with the ultimate aim of ensuring full compliance with CRIS throughout Puntland. Parallel to this training, UNAIDS facilitated and supported the formation and first meeting of the Puntland Monitoring and Evaluation Technical Working Group made up of thirty people responsible for M&E in their organizations on 23 May. The goal of this reference group is to ensure regular generation of data and strategic information on HIV and AIDS within Puntland.

Seventeen Somali delegates drawn from the three zones of Somalia attended an HIV/AIDS exposure visit in Uganda from 29 May to 2 June under the support of UNDP. The exposure visit covered best practice HIV and AIDS responses by the private sector, Government and the civil society of Uganda. Asked about their key learning points from Uganda, most of the participants noted the importance of a multi-sectoral approach to the epidemic, sound coordination at the national level and community involvement in awareness creation, stigma reduction, care and support services.

LIVELIHOODS and FOOD SECURITY

Despite the generally good start to the 2006 *Gu* rains, and while the season is not yet complete, FAO/FSAU and FEWSNET predict that southern Somalia will remain in a state of Humanitarian Emergency until December 2006, while areas of central and northern Somalia will remain in an Acute Food and Livelihood Crisis (FAO/FSAU press release, 2 June 2006). As mentioned last month, the rains have helped avert the worse case scenario of a possible famine in some areas of southern Somalia, yet the situation remains dire and requires reinforced and sustained efforts to address vast humanitarian needs.

According to FAO/FSAU and FEWSNET, despite very good initial rains, large areas of Gedo, Bakool, and Hiran regions will have a below normal season, as will areas of Bay, Lower Shabelle, Middle and Lower Juba, Galgadud, Togdhere, Sool, Sanaag and Bari. The cereal crop harvest is projected to be below normal this season, which could lead to a third consecutive year of below normal cereal production. Rangeland and livestock body conditions are improving yet there will be minimal immediate cattle calving due to emaciated body conditions, leading to less milk availability for consumption and sale. Food access and supply will remain stressed until December. In some areas, cereal market prices are the highest they have been in over six years and developments in Mogadishu could impact on the supply of imported food.



Water collection at shallow well, which the rains have helped replenish.
Source: OCHA

In Lower and Middle Juba, heavy rainfall at the start of May caused some localised flooding along riverine areas, particularly in Jamame district. The flood response by aid partners was limited due to restricted access, however, efforts of the local communities were commendable with local farmers raising funds to hire bulldozers and buy fuel and sand bags. The rains also rendered roads impassable impacting on WFP's plans to deliver highly needed food in the two regions. This lack of access and delay in the delivery of food assistance comes at a particularly bad time given the worryingly high malnutrition rates reported in the nutritional assessments conducted in Lower and Middle Juba mentioned above. WFP had developed a contingency air operation but no funds were made available by donors. WFP has now submitted a project proposal to the Central Emergency Response Fund to initiate the air operation.

FAO/FSAU will conduct a comprehensive *Gu* seasonal food and livelihood security assessment during June-July 2006 to determine levels of severity in the humanitarian situation and generate estimated numbers of people in crisis. The executive findings of the assessment are expected in early August 2006.

COORDINATION and CONSOLIDATED APPEALS PROCESS (CAP)

The OCHA administered Humanitarian Response Fund (HRF) for Somalia has to date supported 39 projects in a range of humanitarian interventions that have addressed emergency needs arising from various emergencies including the December 2004 tsunami, drought, floods, internal displacement and HIV/AIDS. Since the HRF was established in 2004 (HRF-tsunami specific established in 2005), it has attracted a total of US\$9.2 million from various donors including UK, Sweden, Ireland, Norway, and the Netherlands. The HRF has been instrumental in providing more flexible access to funds for responding to emergencies in all parts of Somalia. In 2006, 11 projects have been funded targeting around 138,000 direct beneficiaries. Presently, 13 projects are in different stages of implementation in all parts of Somalia, the majority of which are addressing needs emerging from the drought. Eight projects are presently being processed addressing livelihoods support as well as water and sanitation interventions aimed at reinforcing affected populations' coping strategies. An HRF Advisory Board meeting in May noted that livelihood support was under-funded through the 2006 Somalia CAP agreed to prioritise interventions in this area in order to stop further erosion of livelihoods.

In May, an evaluation of the HRF was conducted in Nairobi which looked at ways of improving the management of the Fund. An assessment team met with partners implementing projects through HRF grants and Advisory Board members as well as other stakeholders. The final report is still being finalized, but among the preliminary recommendations is the need to improve the timeliness of disbursement as well as increase the HRF's accessibility by local Somali partners. So far, the HRF has directly supported only one Somali NGO, while 17 projects have been implemented by international NGOs in partnership with Somali entities.

2006 Somalia CAP¹	
Sector	% Coverage
Agriculture	8
Coordination & Support Services	19
Economic Recovery	0
Education	0
Food	62
Health	12
Multi-sector	22
Protection/Human Rights/Rule of Law	14
Security	10
Shelter & Non-Food Items	0
Water & Sanitation	21
TOTAL	42

Six months into 2006, the Somalia CAP is 42% covered with around US\$ 140 million of the US\$ 331,371,720 appealed for received. This said, a large proportion of what has been received has been toward the food sector, leaving, as has been highlighted before and as indicated in the table, many critical sectors like agriculture, health, protection, security, shelter, water and sanitation to implement emergency response activities with less than 20% of what has been appealed for.

JOINT NEEDS ASSESSMENT (JNA)

Following the initial research and assessment phase of the JNA, draft Cluster Reports were supposed to be submitted in mid-May to the JNA Senior Technical Coordinators. For various reasons, not all the reports have been submitted, and those that have are undergoing an internal review before being circulated for a wide quality assurance review. In parallel to, and as part of this review process, stakeholder workshops will also be held in-country in mid to end June 2006.

In keeping with the JNA commitment to reach all regions despite security restrictions on international team members visiting Mogadishu, a JNA Consultation and Validation Workshop was held between 24 and 30 May in Mogadishu. The workshop was organized by civil society organizations together with the local JNA Expert Team and included close to 200 Mogadishu stakeholders and participants from professional groups, women's group, youth groups, traditional leaders, religious leaders, business groups, regional administration, including the Mayors from the 16 Mogadishu districts, the Mogadishu Governor, Somali local NGO consortiums, and exceptionally internally displaced people. Additionally to the Mogadishu workshop, Civil Society JNA Workshops have so far been held in Garowe (10-11 April), Mogadishu (17-18 May) and Beletweyne (22-23 May). Additional Civil Society Workshops are being planned for Kismayo, Hargeisa and Baidoa. The purpose of these meetings is to ensure civil society participation and representation in the JNA process.

On 25 May, the UN and World Bank briefed the Somali Transitional Federal Parliament in Baidoa to keep the latter fully informed of the JNA progress and receive suggestions and feedback on the JNA through the Parliamentary Committees.

The next steps to the JNA process include the circulation of draft reports and subsequent peer review process; the development of final Cluster Reports, draft regional reports and the JNA Synthesis Report all of which will ultimately feed into a Reconstruction and Development Programme (RDP) for Somalia to be presented at a donor conference. The RDP will also be presented as a bill for Parliament and become a national document.

¹ For more information on the funding status, visit: <http://www.reliefweb.int/rw/dbc.nsf/doc105?OpenForm&emid=ACOS-635PL7>
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