



What we do in Somalia/Somaliland

- We're supporting clinics that have provided healthcare to 30,464 children
- We're treating 9,000 children under five for malnutrition
- We're educating 44,172 children in primary schools
- We're supporting 20,664 children in need of emergency help



One of the poorest countries in the world, Somalia is facing its most severe crisis in nearly 20 years, fuelled by the conflict raging in the south and centre of the country. Almost 20% of children are malnourished as a result of severe drought, crop failures, rising food prices and hyperinflation. A recent escalation in fighting has forced thousands more families from their homes (the number of internally displaced people rose by 40% in the last six months, to over 1.5 million). Displaced children live in dire conditions without access to enough food, clean water or medical care. Many children die from preventable illnesses such as malaria and diarrhoea. As people cope with yet another year of poor rains, and the global economic crisis begins to take its toll, it's estimated that 3.2 million people – 43% of the population – need life-saving emergency support.

Since the collapse of the central government in 1991, healthcare and education services have been destroyed in Somalia/Somaliland. There's been no effective central government for the past 19 years, when the north-western part of the country declared itself the independent Republic of Somaliland. The north east – known as Puntland state of Somalia – has formed a regional autonomous government. Much of the rest of the country remains fragmented.

The election of a new government in Puntland in February 2008 brought some hope that the very real dangers of kidnappings, car-jackings and piracy might be brought under control, but the new government has very limited resources. And in late 2008, suicide bombings in Somaliland – which had been relatively peaceful and stable – were a reminder that security can never be taken for granted.

Save the Children in Somalia/Somaliland

We have been working in Somalia for more than 40 years. During this time we've focused on improving access to basic healthcare and education for the poorest and most vulnerable children and families and enabling them to get enough food. We work mainly in the Hiran region of central Somalia, the Karkaar region of Puntland, and Togdheer region of Somaliland.

In 2008, our education, health and nutrition work benefited almost 200,000 children. Together with other NGOs, our advocacy work has focused on getting Western governments and the UN to concentrate on securing humanitarian space and access. Although the security situation means our international staff have only limited access to project areas, we've been able to continue all of our programmes in Somaliland, Puntland, and to implement an emergency response project from the Hiran office, south-central Somalia.

In 2010, Save the Children UK in Somalia/Somaliland is beginning the process of pooling our resources with two other members of the International Save the Children Alliance, Denmark and Finland, to become a unified presence. This means we will be able to maximise our resources to have the greatest impact possible on children's lives.

We're improving children's health

More than half of all child deaths are due to diarrhoeal diseases, respiratory infections and malaria. The main underlying causes of diarrhoea are lack of access to clean water, inadequate diet and poor hygiene. Cholera claims hundreds of lives each year. Health posts and centres in rural areas are barely functioning or non-existent.

Last year, our health work benefited 30,464 children. We're supporting health workers to better assess children's health needs, referring them on for more treatment if necessary. We've helped build and renovate clinics and trained community health workers to staff them. We've developed a skills-based curriculum for community health workers that has been adopted by the Somaliland government and is under consideration in Puntland. We've also helped the local health administrations to develop and implement a more effective system for managing health records.

We're working to reduce the number of children who die before they reach the age of five. We've provided access to healthcare for 10,000 children under 15. And we regularly provide medical supplies to 15 health facilities, including surgical kits and obstetric and blood screening equipment. We've trained 40 community health workers and supplement the salaries of medical staff, including two consultants – a gynaecologist and a surgeon. Both consultants provide on the job training for local staff.

We've also provided healthcare for 1,442 children and 214 pregnant women in pastoralist communities through 'child health days'. These involve promoting public health messages,

and providing treatment (including immunisation) and preventive measures such as bed nets to protect against malaria. They've proved very successful in areas where services are non-existent, so we plan to organise more child health days in future.

We work with local authorities where possible, and have provided technical and financial support to the Regional Health Office. We've been advocating with and on behalf of children to persuade the government to make healthcare affordable and accessible for all, especially the most vulnerable groups. While the government and international donors have adopted the principle of free healthcare at the point of delivery, the problem is that there are very few functioning services available in the country. Our advocacy work supports the 'professionalisation' of community health workers through training, support structures and payment of salaries, laying the groundwork for the time when both the security situation and resources available will allow a functioning health service to become a reality.

One of the biggest constraints for our health programming has been lack of funding. In future, we'll focus on developing smaller proposals for district-level work, including pilot projects for integrated health packages.

We're improving children's food intake

In many areas, drought, floods or outbreaks of disease occur year after year, destroying crops and livelihoods, and limiting people's ability to grow enough food. The last three years have seen poor harvests and prolonged drought interspersed with floods, and children's malnutrition has reached critical levels. Rising food prices have made the situation worse. One in 20 children are severely malnourished and may die if they're unable to get specialist medical help.

We're helping vulnerable families get better, more regular access to food so that children's food intake is increased and fewer children are malnourished. Last year, in Karkaar and Hiran, more than 30,000 children benefited from our food security and livelihoods programme.

We supported cash-for-work schemes in Karkaar as a way of enabling poor families to earn an income to meet their basic needs, while building infrastructure (eg, wells, bridges or roads) that benefit the whole community. And last year we made direct cash grants to 974 vulnerable households.

This year we are helping 1,500 refugee children and their families to access basic health and nutrition services in Somaliland, and helping 4,950 children get access to nutritional treatment in Hiran. A total of 1,940 vulnerable households have increased and diversified their food consumption through cash grants. Our experience in many countries has shown that cash transfers are one of the most effective ways of improving children's diet and their overall wellbeing.

Over the next three years, we aim to reduce malnutrition for 162,000 children under five, and increase the number of children who have access to clean water in the areas where we work by 20%.

We're helping children get a good education

Schools and education systems in Somalia/Somaliland were completely destroyed during the fighting and civil war that followed the 1991 coup. In 2006/07, only 30% of primary school-age children in Somalia and Somaliland were enrolled, and only 17% of adults are literate. Many teachers are poorly trained, low paid and unmotivated. There's a high drop-out rate for girls, who often miss out on school because they have to do other tasks at home.

Communities simply do not have the resources to support education for their children, so external support will continue to be needed for some time. We're addressing this through our advocacy work with donors and local administrations in Puntland and Somaliland.

Last year, we provided a good quality education for 146,076 children in Somaliland, Puntland and Hiran. We're renovating schools to improve facilities, including providing separate toilets for girls. We're distributing materials based on child-centred learning and curricula for teachers and students. We're also improving the quality of teaching by training teachers (including hundreds of female teachers) in Somaliland, Puntland and Hiran. Phase 3 of the teacher training programme is due to begin in early 2010, and through consortium partners, will be expanded to include secondary as well as primary teachers.

In Hiran, we're supporting 7,246 children affected by conflict and drought, of which 43% are girls, in 35 primary schools and Alternative Basic Education Centres in five districts. To improve the quality of education, we're providing incentives to 205 teachers (including 49 women) to encourage them to remain in schools. We're also helping to reduce the drop-out rate for girls by providing essential sanitary materials and other items to 621 girls. To improve community management of schools and encourage widespread support for education, we're supporting 35 community education committees, with a total of 304 members, 112 of whom are women.

We're providing alternative education for children who don't go to mainstream school. We're making the curriculum more relevant – for example, by including agriculture and care of livestock for children from pastoral communities. And we're getting children and their communities more involved in running and managing schools by supporting 857 community education committees in 137 schools in Somaliland.

In Togdheer region, Somaliland, more than 70% of the population are pastoralists who move around with their livestock to find pasture and water. Their migratory lifestyle means that most children from pastoral communities don't go to school regularly. Our Alternative Approaches to Basic Education (AABE) programme has delivered a better education for

these and other out-of-school children over the last seven years. We've developed flexible school calendars and timetables to fit in with the way these communities make their livelihood. Working with the Ministry of Education and the Ministry of Pastoral Development, we've piloted mobile schools to cater for children who migrate, as well as those who stay behind. Some of the teachers move with the families that migrate so the children don't lose out on their schooling. Last year, 11,630 children benefited from 44 AABE schools in Togdheer, including 4,875 girls.

By 2010, we aim to help an extra 23,061 children (including 9,610 girls) gain access to basic education in 288 schools. We'll also support teacher training for 1,118 teachers (including 150 women). We plan to start up new projects, including a basic education project funded by UNICEF in Karkaar (Puntland) and two emergency education projects in Hiran region.

We're helping children and families affected by conflict

We're scaling up our response to hunger and malnutrition in Hiran, and are looking to set up new feeding and livelihoods programmes in Somaliland and Puntland. We're also supporting Ethiopian refugees in Hargeisa.

Working with community-based partners, we're providing water and sanitation to 30,000 people in Hiran, half of whom are children. We're rehabilitating water sources, promoting good hygiene and public health, and providing family hygiene kits. We're also trucking water to 54,000 people from rural, pastoralist communities, whose water sources have dried up and who cannot afford to pay for water themselves.



Save the Children UK
1 St John's Lane
London EC1M 4AR
Telephone +44 (0)20 7012 6400
Fax +44 (0)20 7012 6963
savethechildren.org.uk

Registered charity England and Wales (213890) Scotland (SC039570)