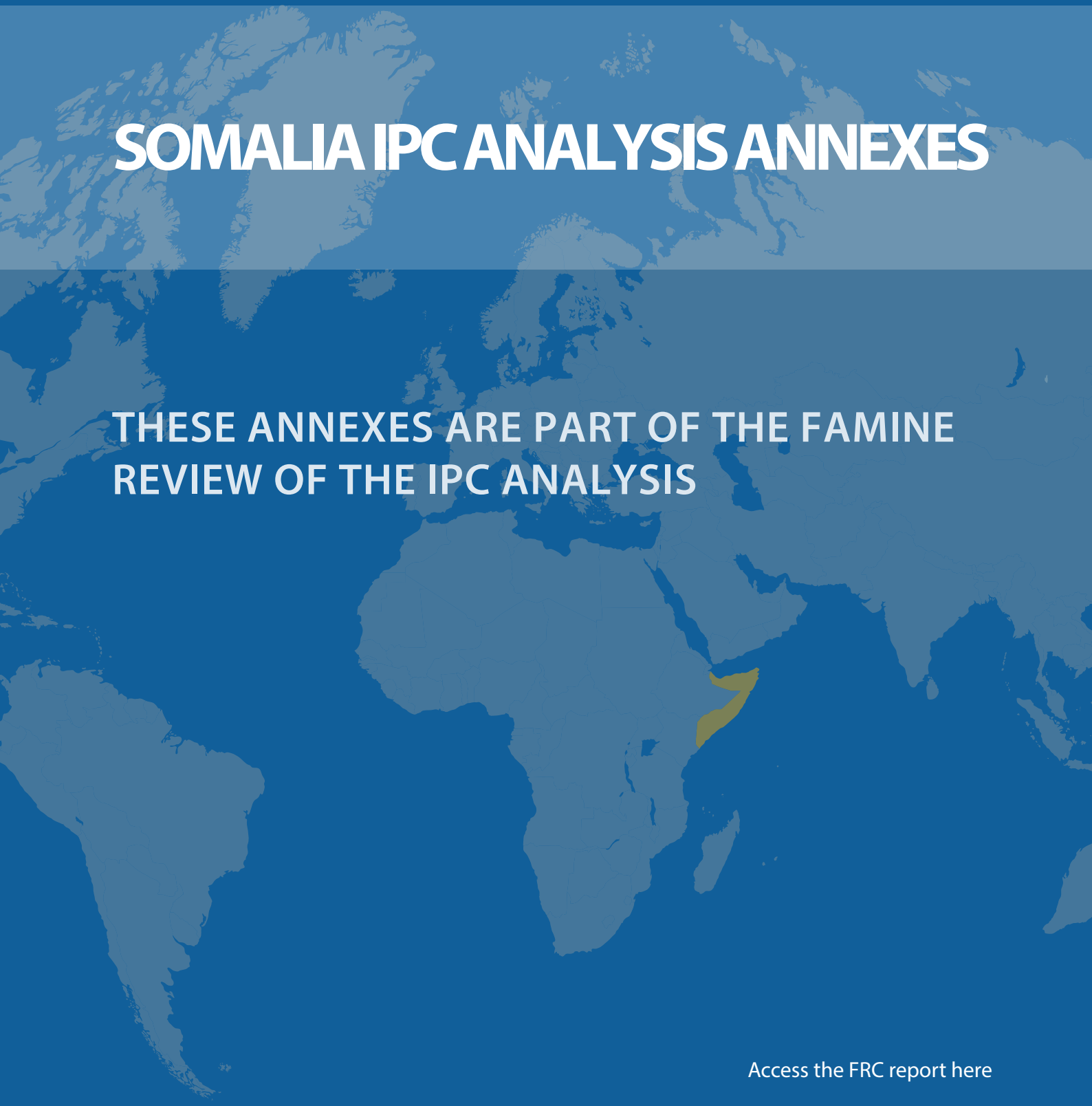
IPC

Integrated Food Security Phase Classification

*Evidence and Standards for Better Food Security and Nutrition Decisions*

# SOMALIA IPC ANALYSIS ANNEXES

## THESE ANNEXES ARE PART OF THE FAMINE REVIEW OF THE IPC ANALYSIS



Access the FRC report here

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## 1. Area description

Bay region includes four districts, namely Baidoa in the north, Burhakaba in the southeast, Dinsoor in southwest and Quashandere in the west. The review focuses on rural population in Baidoa and Burhakaba districts as well the IDPs in settlements established in or around Baidoa town.

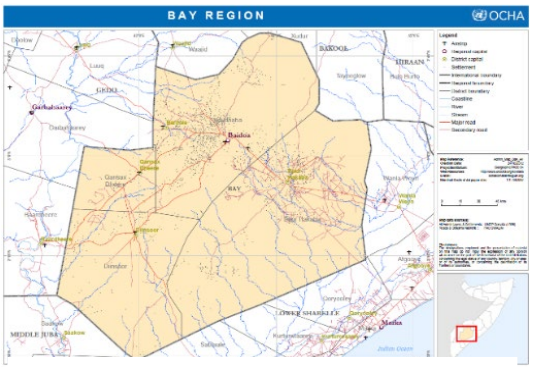
Baidoa and Burhakaba districts are part of the Bay region that is covered by two livelihood zones (LZ): SO 15 – Sorghum High potential agropastoral and SO 16 – Low potential agropastoral. According to the Livelihood baseline profiles[1], households in these two zones are mainly engaged in agriculture and livestock activities. The crop production, largely rainfed, dependent on two rainy seasons: the *Gu* that is the main rainy season from April through June and the Deyr that typically occurs from October to December. These periods are alternate with two dry seasons (Jilaal and Hagaa).

In normal years, crops mainly serve as a source of food for households, especially sorghum that is the main cereal produced in these two zones, traditionally during the *Gu* season. SO15 is typically known as the sorghum basket for Somalia. Maize and sesame also tend to prevail in SO 15 and cowpeas in SO 16. Little maize is planted in these areas. Cash crops like the sesame and groundnut can be an important source of income for Middle or Better off households as in SO 15. However, livestock provide the majority of cash income to the local economy and can also be a source of food for some households in the form of milk / ghee and meat.

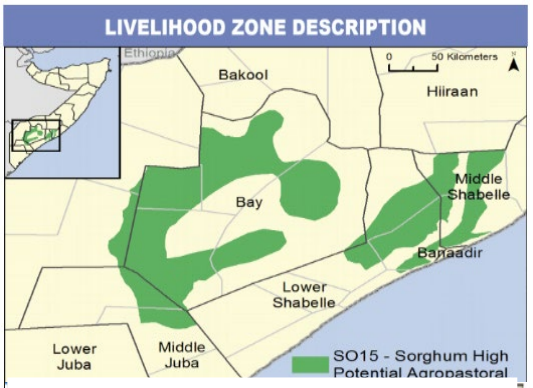
Camel, cattle and goat/sheep are the most important livestock raised in these two LZ and are subject to migration: camels are usually taken to browse and graze farther away, whereas cattle and goat / sheep remain behind with female family in a radius from 10 – 20 km of the home settlement.

The Poor wealth group is heavily dependent on casual labour for its cash income, mainly working on seasonal agricultural activities like planting, weeding or harvesting.

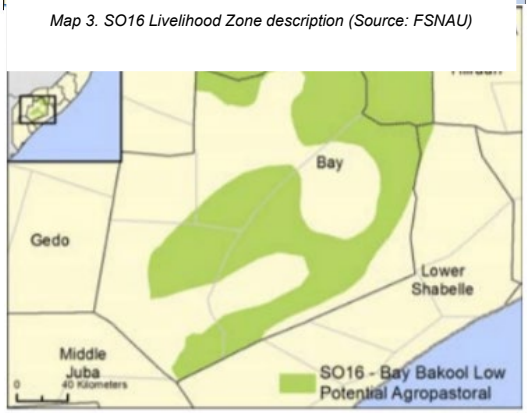
*Map 1. Bay Region administrative map (Source: OCHA)*




*Map 2. SO15 Livelihood Zone description (Source: FSNAU)*




*Map 3. SO16 Livelihood Zone description (Source: FSNAU)*

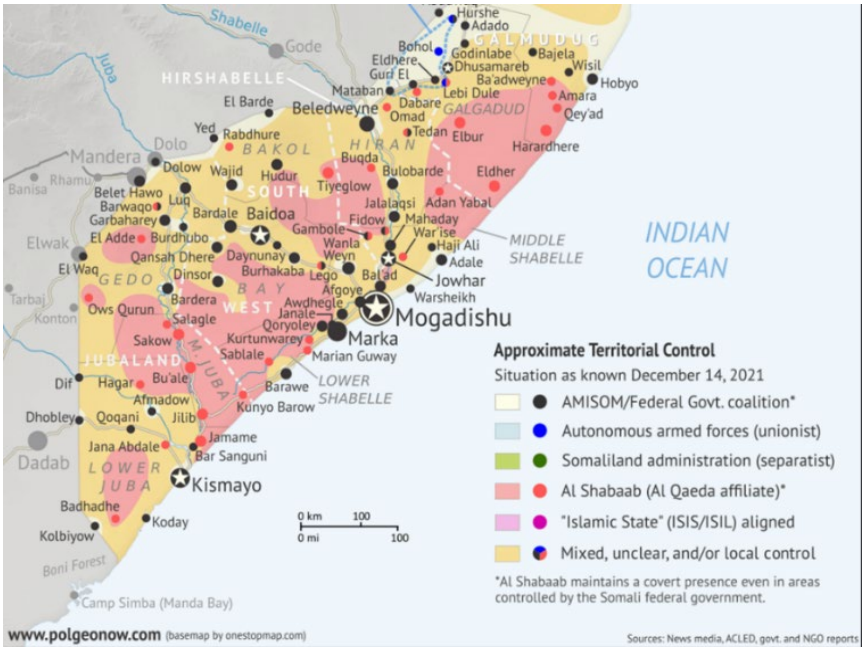



[1] Source: FNSAU Livelihood baseline profiles, SO15 – Sorghum high potential agropastoral and SO16 – Bay Bakool Low potential agropastoral, 2018.

## 2. Access

According to information from key informants, inaccessible areas are those controlled by non-state armed groups where humanitarian actors have minimal or no presence. Furthermore, in many of these areas even if very rarely accessible, there are bans on specific types of humanitarian programming. Key informants indicated that populations might be able to leave these locations recently to access humanitarian assistance in nearby areas, though generally no humanitarian partner can operate in these areas, with very few exceptions.

*Map 4. Approximate Territorial Control at December 14th 2021 (Source: ACLED)*




Located outside of areas seemingly controlled by non-state armed groups, lies the accessible and hard to reach (HTR) areas (or the areas with high access constraints according to the Somalia Access Working Group).

The HTR areas are characterized by key informants as areas with very complex access conditions that largely prevent humanitarian partners from operating regularly or at scale. Areas that lie beyond 10 km from urban areas, in the case of Baidoa and Burhakaba towns, or in areas where direct road access is not available. Other logistical examples included towns accessible only via air or where non-state armed groups have a presence on access roads, thus controlling access to areas without being directly present in these areas. Furthermore, due to security concerns, many humanitarian partners are unable to maintain a permanent field presence in these areas. Regular disruptions of humanitarian operations are reported from logistical, security or other constraints.

Accessible areas were characterized by key informants as areas where humanitarian partners currently access and regularly operate in.

## 3. Population and displacements

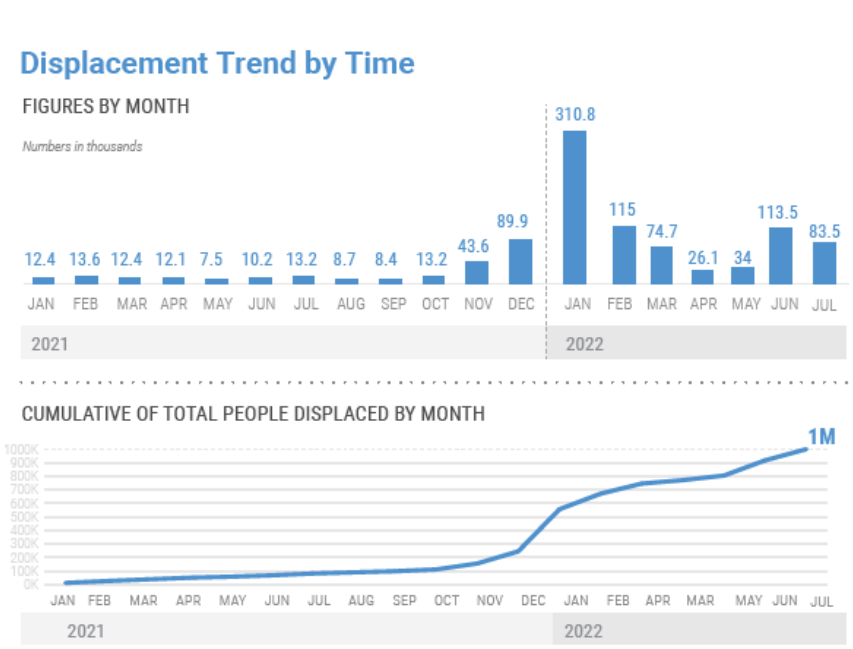
The population base used by the IPC Technical Working Group (TWG) in Baidoa and Burhakaba districts is distributed as follows:

*Table 1. Population estimated in the units of analysis*

| Area of analysis | Population analysed |
|---|---|
| Burhakaba RURAL population | 149,326 |
| Burhakaba URBAN population | *23,477 (not subject to FRC review)* |
| Baidoa RURAL population | 79,558 |
| Baidoa URBAN population | *86,991 (not subject to FRC review)* |
| Baidoa IDPs in sites | 454,200 figure employed in the TWG analysis, of which 309,556 urban and 144,644 rural<br>596,593 according to CCCM Site verification July 2022[2] Baidoa IDPs. Additional 87,000 people reached Baidoa in August 2022 (NAT[3]), bringing the total number of IDPs to approximately 650-680,000 people. |

Concerning the IDPs, the FRC has employed the CCCM figure and this has obviously implications for the calculation of the coverage of the Humanitarian Food Assistance (HFA).

*Graph 1. Displacement Trend by Time (source: NAT)*




According to the Drought Displacement Monitoring Dashboard of July 2022[4], over one million people have been displaced by drought since 2021 with regular displacements each month in 2022 and peaking in January 2022. Observed displacements have included both intra-regional and inter-regional movements as populations continue to move. The UNHCR Protection and Return Monitoring Network (PRMN) reports[5] that Bay region has the highest departures of any region in Somalia during 2022. Around 91% of all departures citing drought while 9% citing conflict as reason for displacement. Both new arrivals and those multi-displaced in Bay region overwhelmingly report food as the priority need.

The IOM estimates on displacements from inaccessible areas from 2021 – 2022[6], does identify one displacement route from inaccessible areas in Bakool region into Bay region (Baidoa district). Reportedly numbers are low (2,200 individuals), however this does

[2] Source: CCCM Baidoa IDP site verification Oct 2021 and July 2022, https://reliefweb.int/attachments/de04e777-3640-4473-8164-df86610ebee4/CCCM%20Dashboard%20-%20Jul%202022.pdf.

[3] Source: CCCM cluster, New Arrival Tool (NAT), https://app.powerbi.com/view?r=eyJrIjoiMTc0OTMzZWEtNTFmMS00OTY1LWIxNDAtNTU1ZTljZjA2MmUyIiwidCI6IjE1ODgyNjkLTIzZmItNDNiNC1iZDZlLWJjZTQ5YzhlNjE4NiIsImMiOjh9.

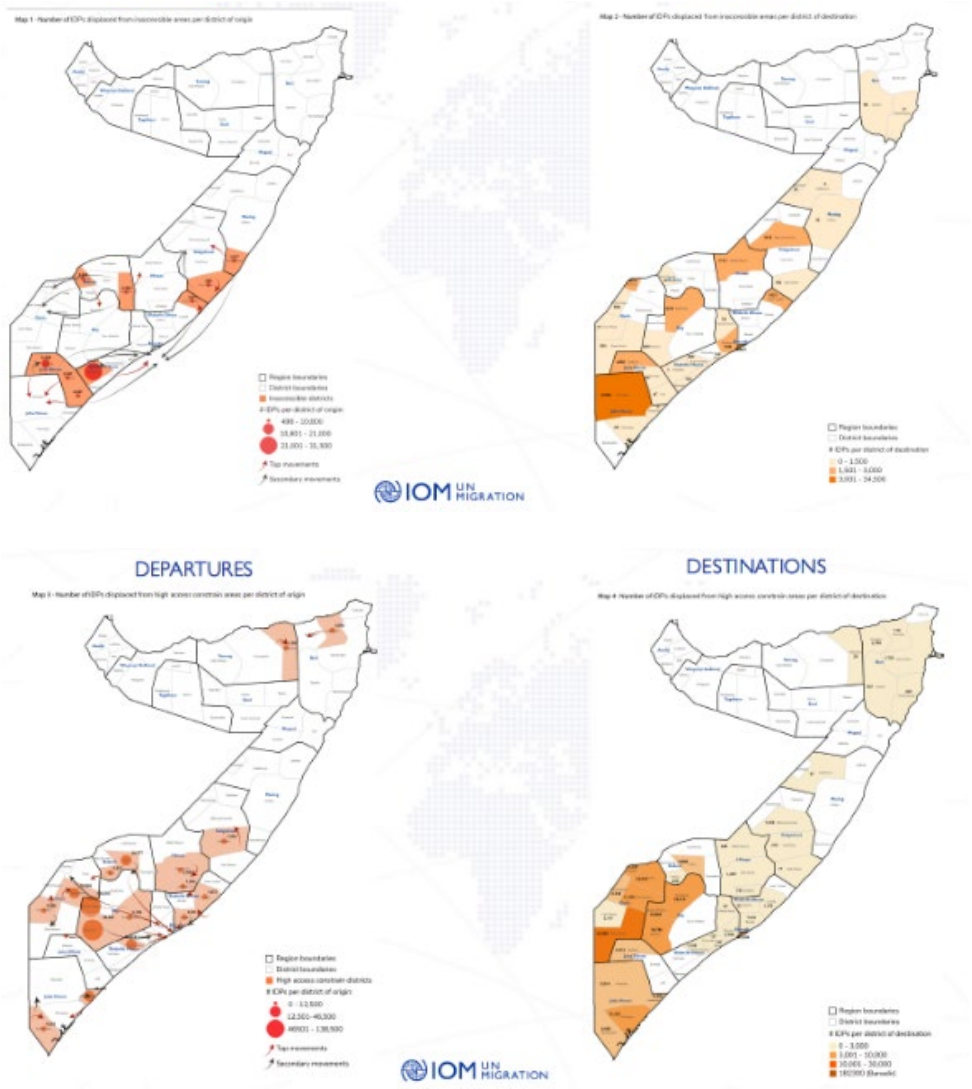
[4] Source: OCHA, PRMN, DTM, Somalia Drought Displacement Monitoring Dashboard, July 2022.

[5] Source: UNHCR Protection and Return Monitoring Network (PRMN), https://data.unhcr.org/es/dataviz/1 .

[6] Source: IOM, estimates on displacements from inaccessible areas and areas with high access constraints from 2021 – 2022.

highlight the possibility to enter Bay region and that some new arrivals into Bay may come from areas controlled by non-state armed groups.

*Map 5 and 6. IDPs Departures and Destination areas (Source: IOM)*




Further IOM estimates on displacements from HTR areas indicate that significant displacements originated from two districts (Dinsoor and Quashandere) in Bay region. This portrays the access constraints already present in Bay region and highlights the role of Bay region as a transitory route for IDPs (both inter-regionally and intra-regionally).

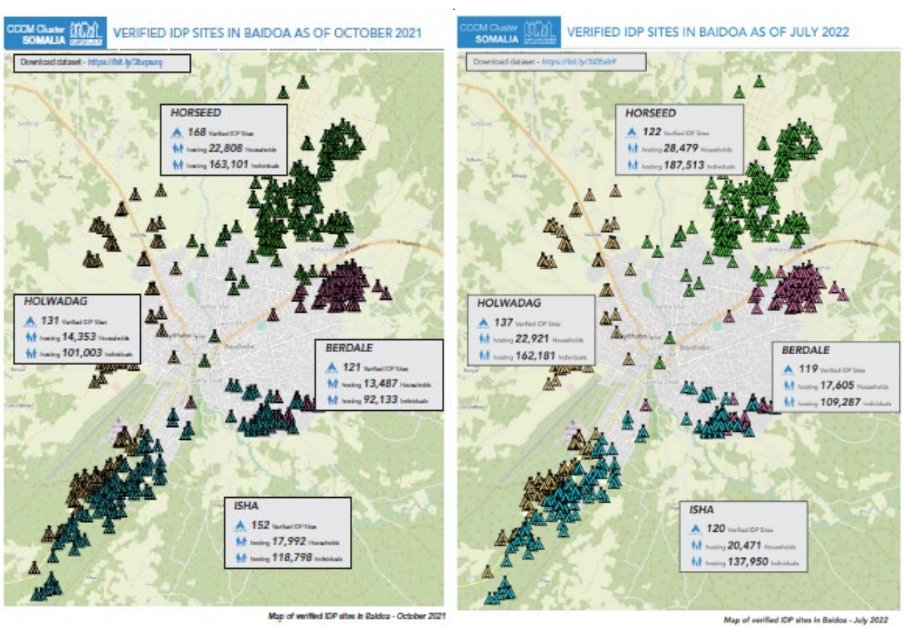
Estimates suggest that movements from inaccessible areas and hard to reach areas towards hard to reach or accessible areas have greatly increased in 2022 as the severity of the drought intensified. Movements from inaccessible areas were high in November - December 2021, and February, June and July of 2022. Whereas movements from hard to reach areas regularly increased from November 2021 – March 2022 period, peaking in January, with additional spikes in June and July 2022.

## Baidoa district

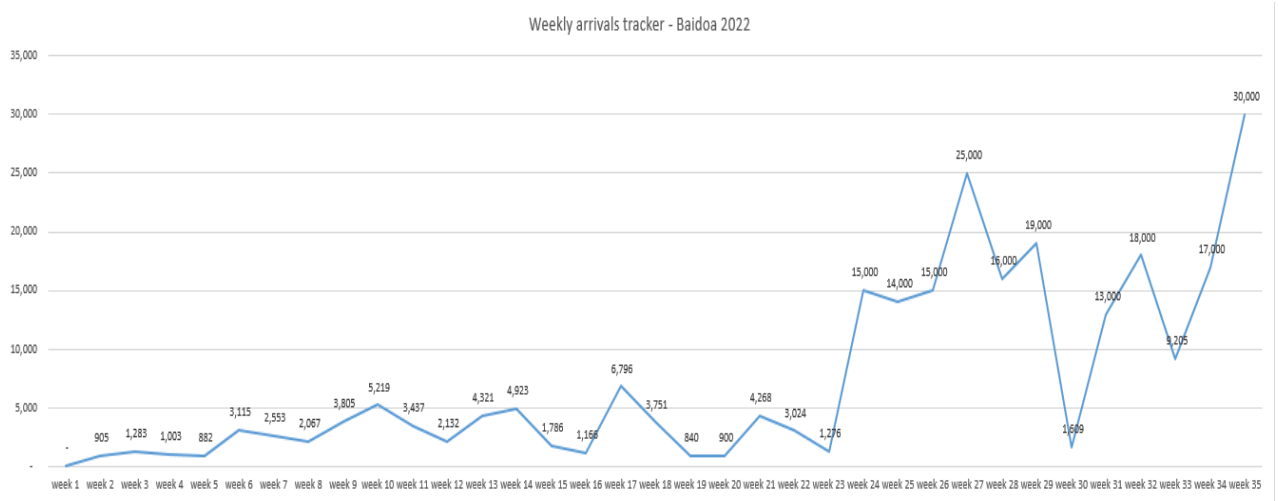
The CCCM site verification of IDP sites in Baidoa district in October 2021 identified 475,035 individuals[7]. While in July 2022, 596,931 individuals were found in 572 sites, an additional 121,896 individuals in less than a year. These suggest a continuous influx of IDPs into Baidoa district well into 2022. Food has consistently remained the highest immediate need reported by new arrivals.

According to the CCCM New Arrival Tracker (NAT), since January 2022, 252,000 people have arrived in Baidoa in different waves of about 5,000 people per week in the first months of the year, though increasing significantly in the past two months, with 15-17,000 per week in the last quarter and more than 87,000 in August alone. The displacement is extremely fluid, with returns and back and forth, as well as possibly even further displacements towards Mogadishu. In summary, the number of estimated people in Baidoa district IDP sites agreed between humanitarian agencies and local authorities the estimates for July 2022 are of 597,000, of which 121,896 are new arrivals (2022 arrivals). The final number however does not take into account the 87,000 people who reached Baidoa in August; therefore, the final estimates could be close to 200,000.

*Map 7. Verified IDP sites in Baidoa in October 2021 and July 2022 (Source: CCCM)*




*Graph 2. Weekly arrivals tracker – Baidoa 2022 (Source: reanalysis of NAT weekly arrival (CCCM))*



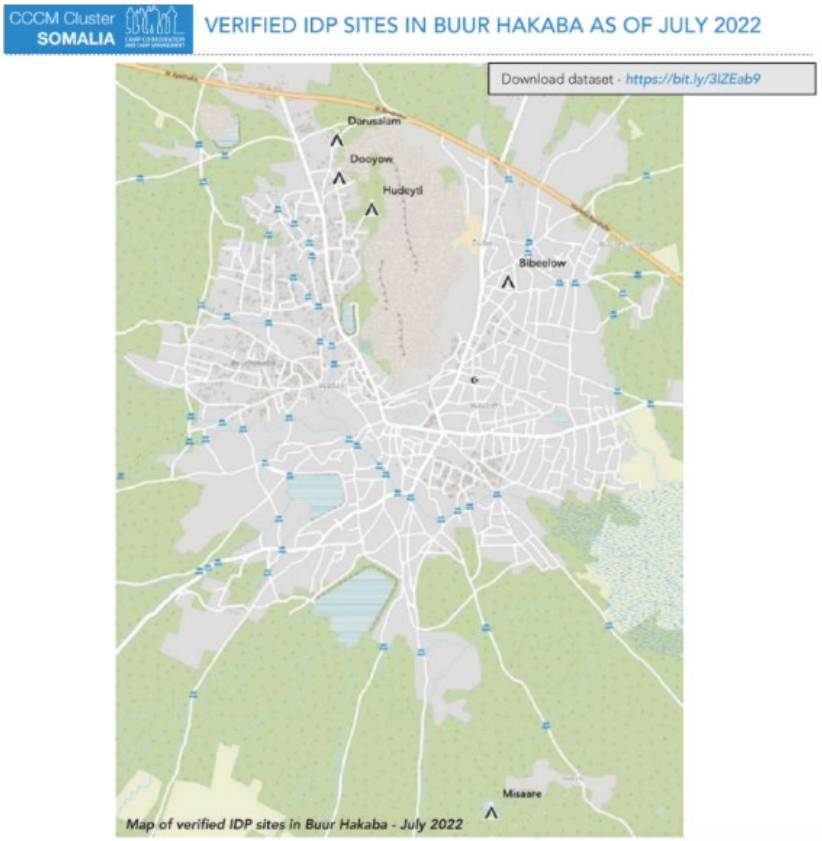

Similar to Bay region, 88% of new arrivals in Baidoa district are citing the drought as reason for displacement with 8% citing conflict. The majority of displacement into Baidoa district is intra region movement from Baidoa district itself (43%), while other regions of Bay region, Dinsoor (16%), Quashandere (15%) and Burhakaba (2%), also follow this trend. This is aligned with key informant information and reports reporting that IDPs are leaving distant rural areas for district capitals or where humanitarian actors are operating. Key informants have repeatedly stated that humanitarian assistance in Baidoa town is a pull factor for nearby regions as it's seen as a hub for services and assistance which are non-existent elsewhere in the district. Furthermore, Baidoa town and markets may provide some livelihood opportunities also not present in other areas of the district.

[7] Source: CCCM Baidoa IDP site verification Oct 2021 and July 2022, https://reliefweb.int/attachments/de04e777-3640-4473-8164-df86610ebee4/CCCM%20Dashboard%20-%20Jul%202022.pdf .

## Burhakaba

According to the CCCM site verification of IDP sites in Burhakaba district in July 2022[8], 8,680 IDPs are located in five verified sites. Key informant information suggested that most of the rural population has also relocated to the urban areas of Burhakaba town due to security conditions.

*Map 8. Verified IDP sites in Burhakaba in July 2022 (Source: CCCM)*




[8] Source: CCCM, Burhakaba IDP sites verification, July 2022.

## 4. Drought

Since 2021, there have been a succession of four subsequent dry seasons capped by a driest on record March – April – May 2022 season. According to the last FAO SWALIM bulletin[9], these conditions left 90% of Somalia under Extreme drought conditions in July 2022. The groundwater levels across the country are going down and reached in some regions alarming rates from over pumping due to increased pressure to meet demand. Southwest states and especially the Bay and Bakool regions are the most affected by the drought with, according to the OCHA[10], 67% of the population affected in the Bay region.

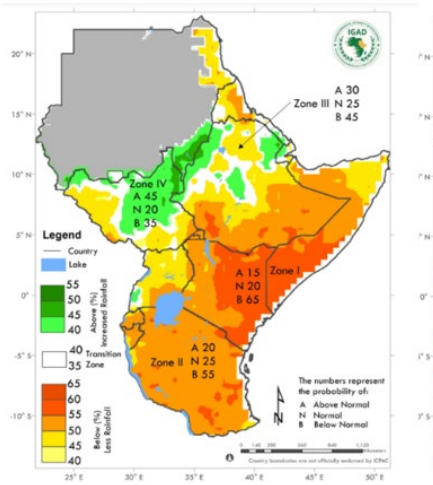
In March 2022, there were a short improvement occasioned by *Gu* rains that reached few regions including the Bay region and Baidoa district. Nevertheless, the rains were localized and inadequate to alleviate the drought conditions. Crops grown during the last *Gu* rains have failed, and pasture is depleted pushing livestock from these areas to migrate further in others regions in search of pasture or to death.

Comparing to previous droughts, in 2011/12, the drought conditions were evident from October 2010, peaked in March 2011 and lasted for ten months. However, the rains of Deyr 2011 were good, and the situation improved[11]. There were only three failed consecutive seasons whereas the current drought has been ongoing for the last 17 months and will continue, given the rainfall forecast for the coming Deyr 2022.

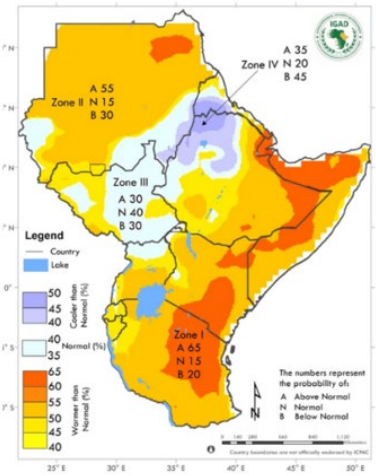
Approaching the projection period (October to December), forecasts of a fifth consecutive drought season have come with higher confidence establishing a high likelihood of well below average rainfall and extremely high temperatures for the period October-November- December (OND). Furthermore, there is a considerable likelihood of continuation of these conditions throughout the March-April-May (MAM) 2023 rainy season. This represents and will represent an unprecedented protraction of drought conditions.

According to the IGAD's Climate Prediction and Applications Center (ICPAC)[12], the October to December (OND) 2022 forecast shows high chances of drier than average conditions across most parts of the Greater Horn of Africa. In particular, the drought-affected regions of Ethiopia, Kenya, and Somalia are expected to receive insufficient rainfall until the end of the year. Temperatures are expected to remain warmer than average across most of the region.

*Map 9: Rainfall outlook Oct - Dec 2022*




*Map 10: Temperature outlook Oct - Dec 2022*




**Zone I -** Dark orange: the below normal rainfall (drier) category has the most enhanced probability. The probability varies with location and can be read from the legend. For the most widespread dark orange shade (65%) the probabilities for the normal and above normal categories are provided.

**Zone II** – Orange: the below normal rainfall (drier) category has the highest probability (55%). The probabilities for the other categories are provided.

**Zone III** – Yellow: below normal rainfall (drier) category has the highest probability (45%). Probabilities of the near normal and above normal categories are 30% and 25% respectively.

**Zone IV** – Light green: probabilities for the above normal categories is the highest (45%).

According to CHC[13], based on the current forecast, there is a high probability that virtually the entire Eastern Horn of Africa will experience below-normal root zone soil moisture through December (Map 11). The FLDAS-Forecast simulations predict that conditions in Somalia and the Somali region of Ethiopia will be particularly bad, regarding root zone soil moisture with projected soil moisture percentiles falling in the D2-Severe Drought (6-10%), D3-Extreme Drought (3-5%), and D4-Exceptional drought (0-2%) categories, following the NOAA CPC Soil Moisture Drought Classification system (Map 12).

[9] Source: FAO Somalia Drought Update, August – September 2022, 11 August 2022. https://reliefweb.int/attachments/20ee7c67-6a44-437b-b2c7-853901567c43/somalia_drought_pdate_aug_2022.pdf .

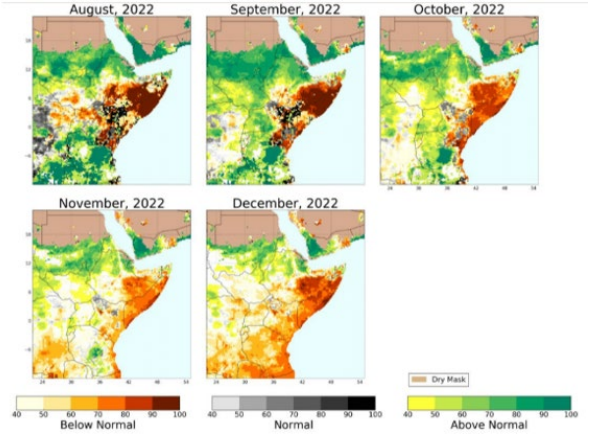
[10] Source: OCHA, 2022 Drought impact snapshot, August 2022. https://reliefweb.int/report/somalia/somalia-2022-drought-impact-snapshot-august-2022.

[11] Source: FAO SWALIM bulletin, 11 August 2022. http://www.faoswalim.org/content/somalia-drought-update-%E2%80%93-issued-12-august-2022.

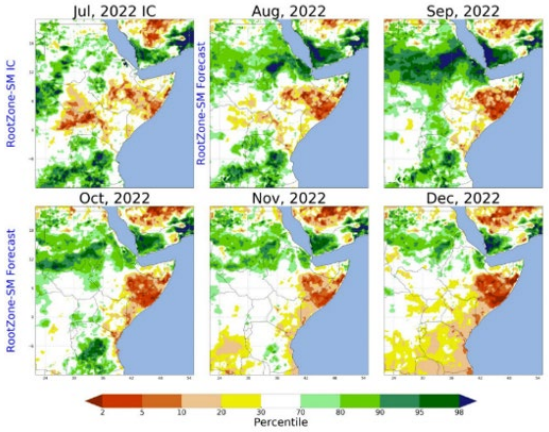
[12] Source: IGAD's Climate Prediction and Application center (ICPAC) Press release, 25 August 2022 https://www.icpac.net/news/the-greater-horn-of-africa-is-bracing-for-a- 5th-consecutive-failed-rainy-season/ .

[13] Source: https://blog.chc.ucsb.edu/?p=1219. Chris Funk, Gideon Galu, Diriba Korecha, Laura Harrison, Abheera Hazra, Weston Anderson, Andrew Hoell, Kim Slinski, Juliet Way-Henthorne, Greg Husak), CHC, August 16th, 2022.

*Map 11: Probabilistic rootzone moisture forecast for July conditions (IC) and Aug- Dec forecast (FLDAS – Forecast syst.)*

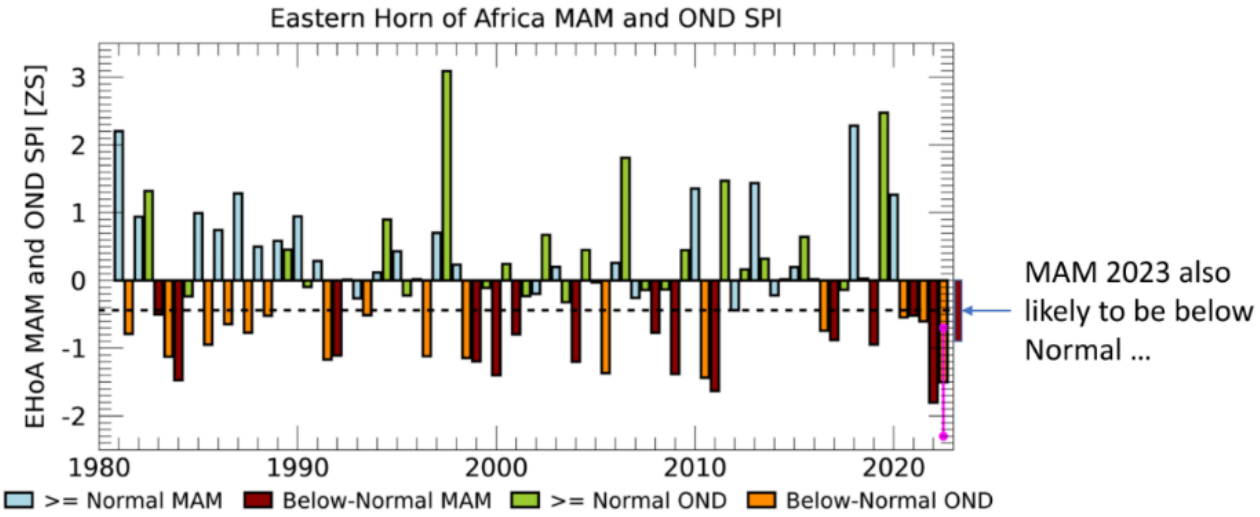



*Map 12: Rootzone soil moisture percentiles for July conditions (IC) and Aug – Dec forecast using the FLDAS – Forecast system*




The drought forecast for the Eastern Horn extends not just to soil moisture, but would also translate to reduced streamflow in the region. These dry soils and reduced streamflow are indicative of poor crop growing conditions, poor pasture conditions, and reduced water availability for livestock across the region that could further stress crop production and livestock management at a time when relief is badly[14]. According to CHC forecast, there are also high chances of a failure of the MAM 2023 likely to be below normal as shown in the graph below.

*Graph 3. Weekly arrivals tracker – Baidoa 2022 (Source: reanalysis of NAT weekly arrival (CCCM)*




[14] Source: *Ibid.*

## 5. Market availability and prices

According to the GREDO/IRC survey in July 2022[15], with regard to markets, the majority of households surveyed reported having a functional market within one hour or less. The availability of food in these markets appears to be highly variable, with cereals, sugar and oil/fats mentioned as available most frequently, while produce was on the other end of the spectrum, mentioned far less often (fruit only 11 mentions). According to market trader key informant (KI) interviews conducted by GREDO/IRC, staples like maize, sorghum, and beans/pulses have not been available at all in certain markets, nearly all of which are located in Hudur district. These KIs also indicated that, where these staples are available, prices are generally rising sharply. Some market traders who have had to start sourcing imported goods due to local and national shortages have seen prices jump dramatically, as much as 200% for vegetable oil in the past three months in one Baidoa district location.

Of the major commodities tracked regularly in Baidoa market by FEWSNET[16] marketing monitoring, the June 2022 prices, with few exceptions, were higher each month in 2022 versus their 2021 monthly prices. In comparison to previous years, most commodities saw an increase in the January – April period, notably after February 2022. While prices in May 2022 have reduced for most commodities, prices in June 2022 remain higher than 2021 prices. Of note, Sorghum prices have remained over double the previous year's price for each month of 2022, with June 2022 having a 154% increase since June 2021. Gasoline prices doubled in March 2022 and continue to remain high while diesel has also remained very high in comparison to 2021 monthly prices. Camel's milk has steadily increased in comparison to 2021 monthly prices, peaking in June 2022 with a 120% increase since June 2021. Vegetable oil prices have increased month on month from January – April 2022 period, peaking in April 2022 with a 113% increase since April 2021. Water prices have increased each month in the January – March 2022 period, with a 100% increase since March 2021.

In comparison to the five-year average, all major commodities are well above the five-year average with the exception of some livestock. Month on month prices have remained above the average with six commodities doubling their prices from their respective monthly five-year average in 2022, with Sorghum peaking at a 194% increase in June 2022. Maize grain prices are higher than the average (66% - 130%) and double for the months of January, February, and June 2022. Rice has remained higher (12% - 31%), Sorghum (128% - 194%), wheat flour (14% - 47%), diesel (21% - 75%), firewood (31% - 38%), gasoline (18% - 104%), peaking in April 2022, camel's milk (28% - 92%), peaking in June 2022, vegetable oil (83% - 174%), peaking in April 2022, and water (9% - 43%), peaking in May 2022.

*Table 2. Baidoa market June 2022 versus June 2021 prices (Source: FEWSNET)*

| Commodity | Jan | Feb | Mar | Apr | May | Jun |
|---|---|---|---|---|---|---|
| Maize Grain (White) | 135% | 119% | 93% | 83% | 66% | 84% |
| Rice (Parboiled) | -1% | 8% | 33% | 14% | 14% | 25% |
| Sorghum (Red) | 135% | 142% | 142% | 142% | 110% | 154% |
| Wheat Flour | -3% | 14% | 41% | 16% | 19% | 23% |
| Diesel | 25% | 25% | 75% | 75% | 75% | 65% |
| Firewood | 17% | 17% | 17% | 17% | 3% | 0% |
| Gasoline | 30% | 35% | 95% | 102% | 76% | 76% |
| Camels (Local Quality) | -12% | -6% | -10% | -14% | -16% | -12% |
| Cattle (Male, 2-3 years old, Local Quality) | 19% | 18% | 13% | 2% | 8% | 7% |
| Goats (Local Quality) | -26% | -42% | -38% | -21% | -2% | 8% |
| Camel's Milk (Raw) | 27% | 78% | 83% | 72% | 81% | 120% |
| Refined Vegetable Oil | 41% | 43% | 84% | 113% | 95% | 67% |
| Water (potable, drinking) | 42% | 59% | 100% | 65% | 60% | 39% |

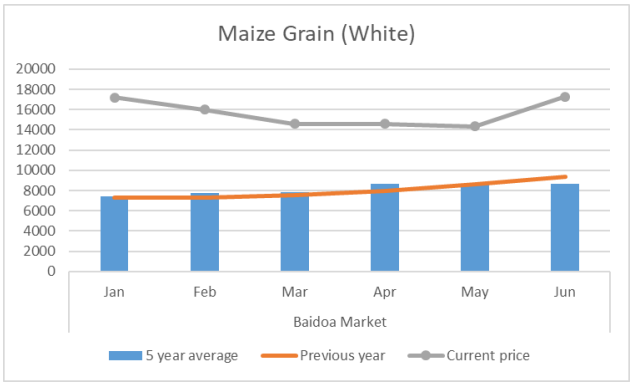
*Table 3: Baidoa market June 2022 versus five-year average price (Source: FEWSNET)*

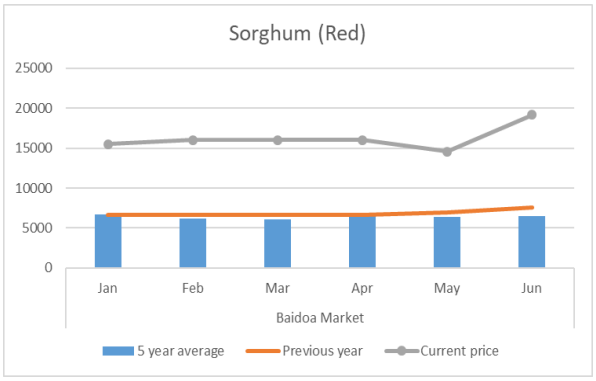
| Commodity | Jan | Feb | Mar | Apr | May | Jun |
|---|---|---|---|---|---|---|
| Maize Grain (White) | 130% | 105% | 86% | 69% | 66% | 100% |

[15] Source: GREDO / IRC, Multi-sectoral Needs Assessment Report, Southwest State, Somalia, Drought crisis, July 2022.
[16] Source: FEWSNET market monitoring, July 2022.

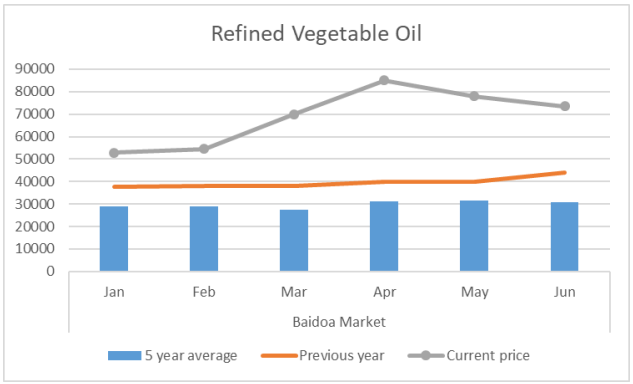
| | | | | | | |
|---|---|---|---|---|---|---|
| Rice (Parboiled) | 12% | 14% | 37% | 28% | 26% | 31% |
| Sorghum (Red) | 130% | 159% | 161% | 148% | 128% | 194% |
| Wheat Flour | 14% | 27% | 47% | 39% | 39% | 42% |
| Diesel | 21% | 23% | 72% | 72% | 73% | 75% |
| Firewood | 38% | 35% | 35% | 35% | 31% | 30% |
| Gasoline | 18% | 23% | 89% | 104% | 72% | 85% |
| Camels (Local Quality) | 23% | 19% | 15% | 6% | 4% | 5% |
| Cattle (Male, 2-3 years old, Local Quality) | 92% | 72% | 64% | 45% | 43% | 45% |
| Goats (Local Quality) | -22% | -33% | -31% | -10% | 4% | 15% |
| Camel's Milk (Raw) | 28% | 60% | 73% | 54% | 49% | 92% |
| Refined Vegetable Oil | 83% | 88% | 155% | 174% | 148% | 137% |
| Water (potable, drinking) | 27% | 32% | 38% | 9% | 43% | 27% |

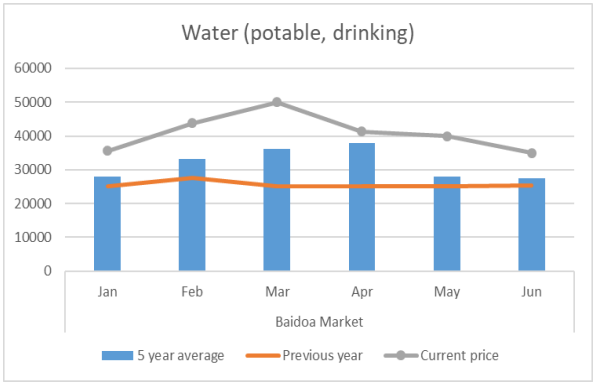
*Graph 4. Maize Grain (White) and Sorghum prices – five-year average, previous year and 2022. (Source: reanalysis of FEWSNET data)*



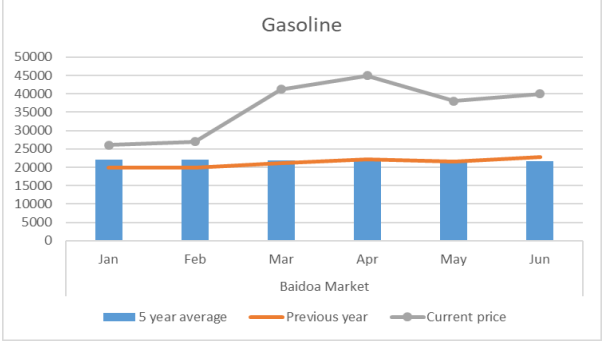



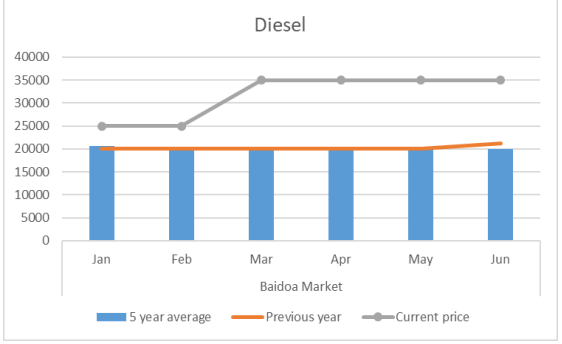

*Graph 5. Refined Vegetable Oil and Water prices – five-year average, previous year and 2022. (Source: reanalysis of FEWSNET data)*



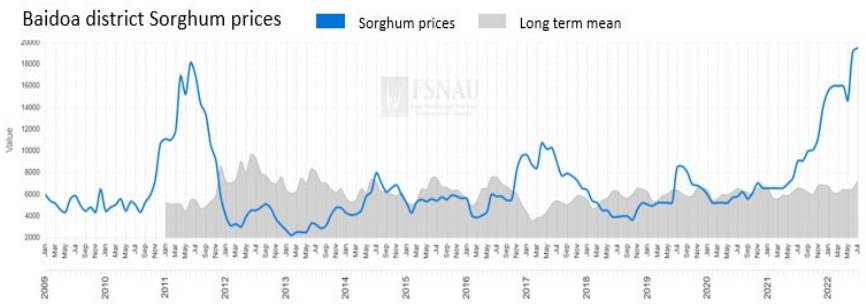




*Graph 6. Gasoline and Diesel prices – five year average, previous year and 2022. (Source: reanalysis of FEWSNET data)*



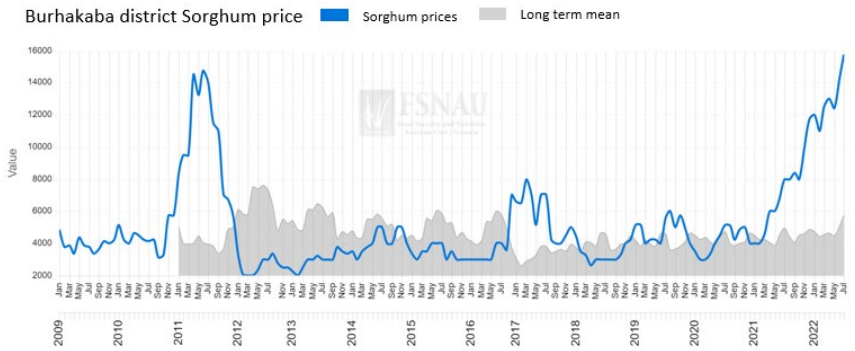



*Graph 7. Baidoa District Sorghum Prices long term mean and 2022 (Source: FSNAU)*



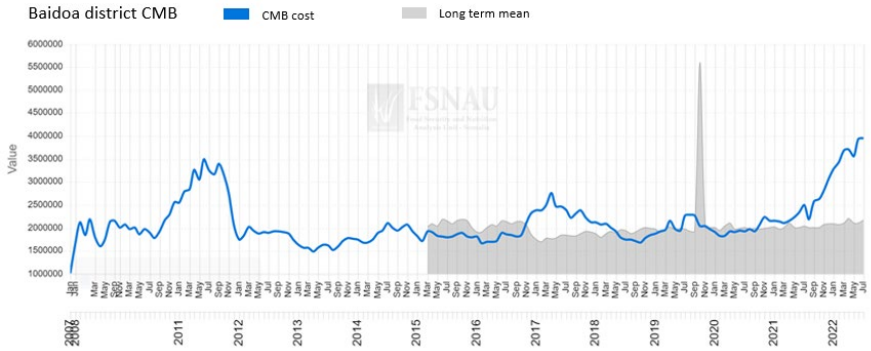

Information presented by the TWG for Baidoa district indicate these high prices continued in July in comparison to the five year average with sorghum still at 169% above five year average in July 2022, and rice prices still 33% higher in July 2022. In comparison to 2011 and 2017, sorghum prices are higher than 2011 and around double 2017. The rise in sorghum prices has been steadily increasing since mid-2020 and again sharply in 2022, peaking in the June/July 2022 period.

*Graph 8. Burhakaba District Sorghum Prices long term mean and 2022 (Source: FSNAU)*




Information presented by the TWG for Burhakaba indicate these high prices continued in July in comparison to the five year average with sorghum still at 174% above five year average in July 2022, and rice prices still 33% higher in July 2022. In comparison to 2011 and 2017, sorghum prices are higher than 2011 and more than double 2017. The rise in sorghum prices has been steadily increasing since mid-2020 and again sharply in 2021, peaking in the June/July 2022 period.

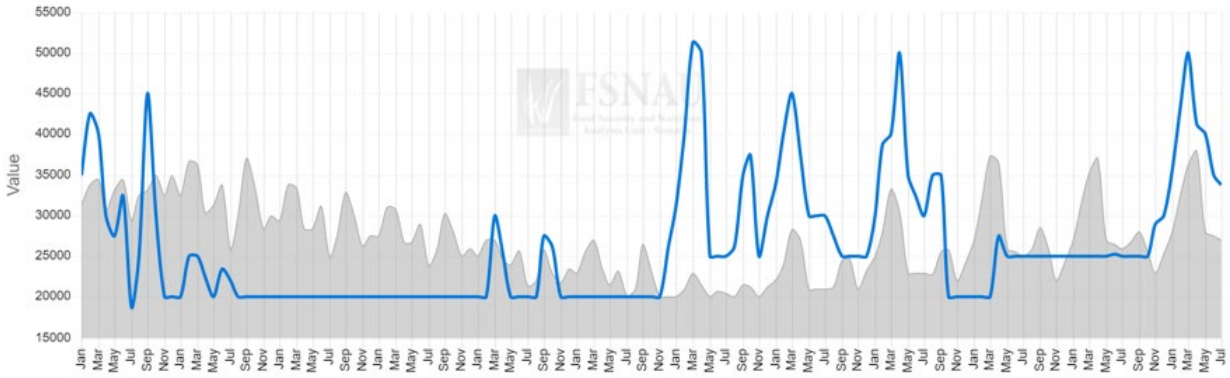
*Graph 9. Baidoa District Cost of Minimum Basket long term mean and 2022 (Source: FSNAU)*




Information presented by the TWG indicate that the cost of the minimum basket (CMB) has also been steadily climbing since early 2021 and peaking in the June/July 2022 period. In comparison to 2011 and 2017, the CMB is higher than 2011 and nearly double 2017. In Bay region, the cost of the CMB is 106 USD (2,757,500 SOSH) in July 2022, which is 248% above the five year average for the CMB in July of 43 USD (1,040,840 SOSH).

According to FSNAU Livelihood baseline profile[17], in normal years, water is sourced from shallow wells and water catchments, which are communally shared. Normally, there is sufficient water supply, and water is free; however, during the dry seasons, when water availability is low, there could be a payment for water, especially by middle and better off households. Poorer households spend more of their limited time searching for water at this time.

*Graph 10. Baidoa District Price of water long term mean and 2022 (Source: FSNAU)*



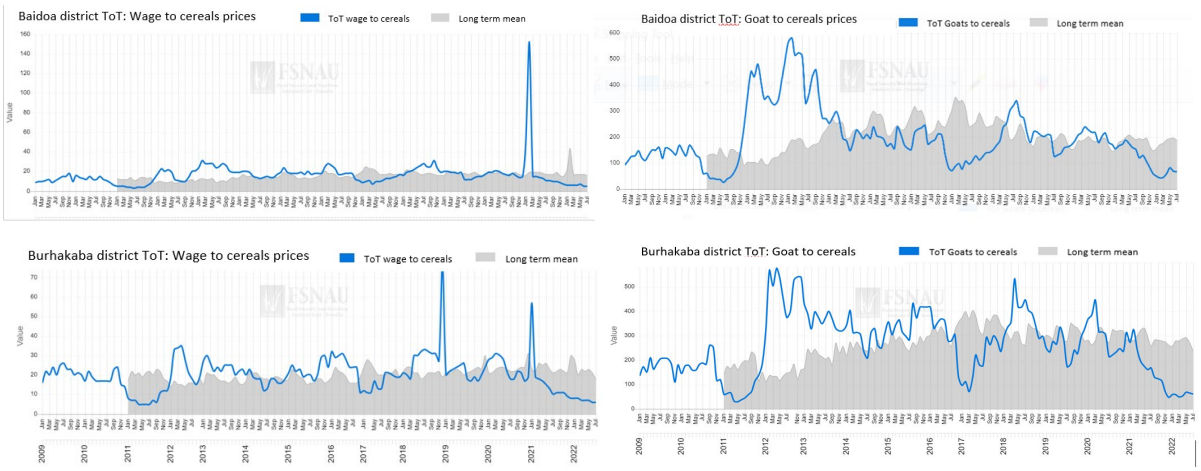

[17] Source: FSNAU, Livelihood Baseline Profile, SO15 – Sorghum high potential agropastoral and SO16 – Bay Bakool Low potential agropastoral, 2018.

Information presented by the TWG indicate that the cost of water in Baidoa district has been continually rising from late 2022 and peaking in the June/July 2022 period. In comparison to 2011 and 2017, water prices are currently higher than 2011 and nearly double that of 2017.

Regarding terms of trade (ToT) wage to cereals, there has been a steady decline since late 2020 with a prolonged period of unfavourable ToT from mid-2021 to July 2022. The sharp decline in the ToT is concerning, however the prolonged period with unfavourable or decreasing ToT is equally concerning. In comparison to 2011 and 2017, current ToT in Baidoa district are higher than 2011, and lower than 2017 in terms of value traded, while the current period under the long term average is longer in the 2021 – 2022 period than both 2011 and 2017. In Burhakaba district, the ToT are similar to 2011 and lower than 2017 in terms of value traded, while the current period under the long term average is longer than 2011 and 2017.

Concerning ToT goats to cereals, there has been a consistent decline since 2021 with a prolonged period of unfavourable ToT in 2022. In comparison to 2011 and 2017, current ToT in Baidoa district are higher than 2011 and lower than 2017 in terms of value traded, while the current period under the long term average in longer than 2011 and similar to 2017. In Burhakaba district, the ToT are higher than 2011 and lower than 2017 in terms of value traded, while the current period under the long term average is longer than 2011 and similar to 2017.

*Graph 11-12-13-14. Baidoa and Burhakaba Districts Terms of trade wage to cereals and Goat to cereals long term mean and 2022 (Source: FSNAU)*




*Note: The spike observed on the graph ToT wage / cereals for Baidoa in January and February 2022 are likely due to missing values in the database.*

For these two districts and the hosted IDPs, the ToT wage to cereal evidence suggests that purchasing power was generally decreasing in 2020 – 2021 in comparison to previous years. The ToT goats to cereals shows a similar decline in purchasing power in the 2020 – 2021 period from previous years and highlight a similar concern for pastoral/agropastoral communities.

## 6. FOOD SECURITY DATA

According to the main food security surveys conducted in July (FSNAU) and August (REACH), the vast majority of the food consumption indicators at the time of the data collection (July and August 2022 respectively) converge over a high IPC phase 3 (Crisis) or low IPC Phase 4 (Emergency). The degree of the severity varies among indicators and surveys, with the Food Consumption Score (FCS) generally portraying a higher severity than the other indicators. For FSC and the Household Dietary Diversity Score (HDDS), the new IDPs are portraying more severe values than the agropastoral area; however, the experiential indicators, Reduced Coping Strategy Index (rCSI) and the Household Hunger Scale (HHS), differ. While food consumption indicators are not at an extreme level of severity, in either the agropastoral, or the IDP settlements with minimal/no prevalence of HHS in phase 5, trend analysis indicates a steady deterioration in all outcomes compared to April 2022 and December 2021.

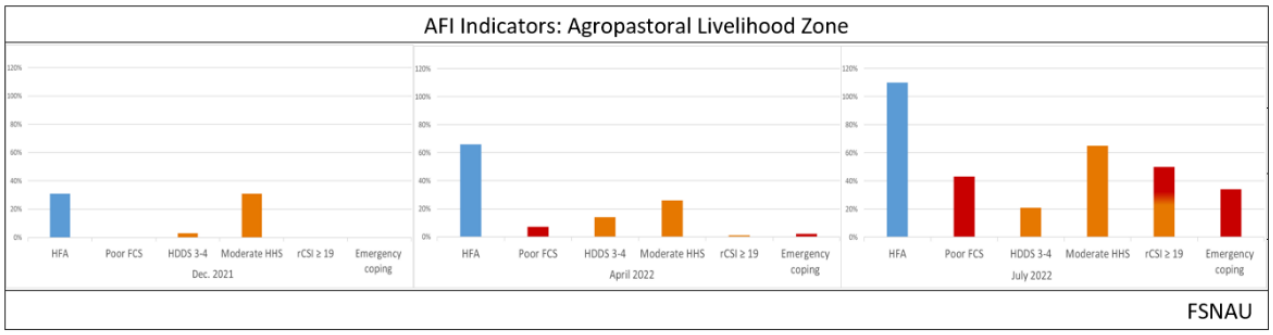
Livelihood change of the agropastoral populations is also indicative of IPC Phase 4 (Emergency) in both FSNAU and REACH surveys, while a high number of non-applicable answers exclude the significance of this indicator for the IDPs. Exhaustion of strategies in the past 12 months or lack of applicability of the strategy could be interpreted as unavailable strategies, indicating a lack of further options, especially for the displaced populations.

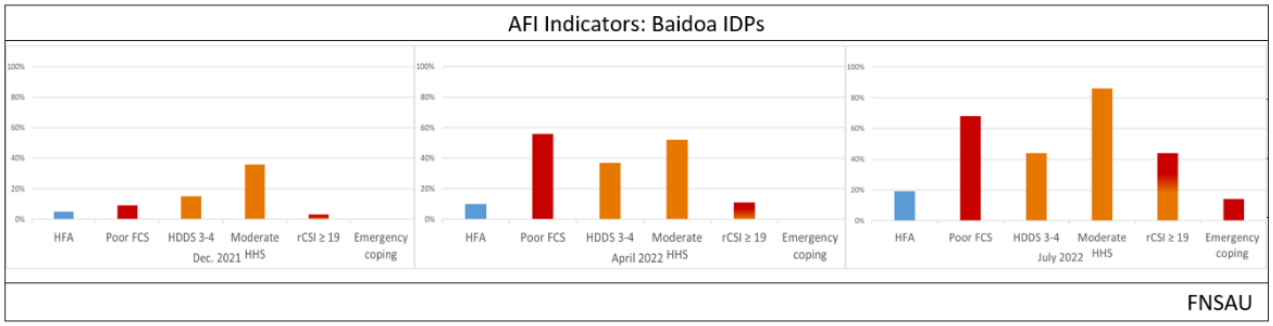
### *Bay Agropastoral Rural Residents*

### *Baidoa rural district residents - Agropastoral Area*

According to FSNAU[18], 54% of the rural residents of Baidoa district have a Poor Food Consumption Score (FCS – cut off at 28) and 27% consumed four or less food groups in the 24 hours prior to the survey. According to the REACH MSNA survey from July 2022[19] , the FCS is Poor for 21% of households, and, for the Gredo / IRC survey[20], for 78% of households. According to the FSNAU survey, 82% of the households consumed cereals and tubers six to seven days during the week prior to the survey. 57% consumed sugar six to seven times (seven times for 35% of households reported) and 46% fat and oils on the same frequency (seven times for 28% of households in the last seven days).

*Graph 15 - 16. AFI indicators for the agropastoral area (rural residents) and IDPs in Baidoa in July 2022 (Source: FSNAU)*




According to REACH MSNA, 28% of respondents have a Household Hunger Scale (HHS) Moderate (indicative of a phase 3). According to FSNAU survey, this applies to 75% of respondents, while 6% displays a Severe or Very Severe HHS, indicative of IPC phase 4. 88% of

[18] Source: FSNAU, Food Security and Nutrition Assessment, July 2022, R2. Bay Agropastoral 36 clusters, n=282; Baidoa district rural residents: 22 clusters, n=181; Burhakaba rural residents: 14 clusters, n=101. For details on the indicators analysis, please refer to the recommendations for data collection at page 24.

[19] Source: REACH MSNA July 2022, Baidoa and Burhakaba districts Host Community sampling 2 clusters and 158; IPDs 34 clusters and 210 observations; REACH Rapid Assessment, August 2022, New Arrivals: 38 sites and 158 observations.

[20] Source: Gredo / IRC, 210 households (32% IDP, 68% host community) across Baidoa and Hudur districts.

households mentioned that in the past 30 days, there were no food to eat of any kind in their house because of lack of resources and 81% reported they went to sleep at night hungry because there was not enough food in their household. In addition, 52% of households spent a whole day and night without eating because there was not enough food, one to two times (rarely) over the last 30 days.

The reduced coping strategy Index is high (rCSI ≥ 19), indicative of IPC phase 3 and above, for 18% of the households according to the REACH MSNA survey and for 62% of households per the FSNAU survey. 47% of the households mentioned having relied on less preferred or less expensive food the week prior to the survey and 25% reduced the number of meals eaten per day six or seven times the week prior the survey. The FSNAU survey, 47% of households reported not having reduced the quantities consumed by adults/mothers for young children in the past 7 days and 25% did not reduce the portion size of the meals (Beekhaamis). From the Gredo / IRC survey, 41% of IDPs and residents from the Baidoa and Hudur regions have a high rCSI, indicative of IPC phase 3 and above.

Regarding the Livelihood Coping Strategies Index (LCS), in REACH MSNA survey, 13% of respondents employed Emergency strategies, indicative of IPC phase 4, while from the FSNAU survey, 34% of the households. 4% have already sold their last breeding animals.

The contributing factors from the FSNAU survey show that the households reported a strong livestock decapitalization: at the beginning of the year, 79% of the households did not have Camels against 92% in July 2022. Above 50% of households mentioned owning no Cattle at the beginning of the year (January 2022 or Jilaal season) against 71% currently (in June – July 2022). Around 40% of households reported no Goat and Sheep at the beginning of the year versus 50% in June – July 2022. The percentage of households owning more than four goats and sheep also dropped from 41% beginning of the year to 13% in July 2022. Moreover, in the three months prior to the survey, the main source of food for 76% of households was the market and 17% got their food from their own production. All the respondents mentioned not having received cash remittances from family members, relatives or friends who live outside of Somalia in the last three months and 99% no in-kind cereal food aid or vouchers for food from humanitarian agencies.

### *Burhakaba rural district residents - Agropastoral Area*

For the Burhakaba Agropastoral area, according to the REACH MSNA survey[21], 15% of households have a FCS Poor (FCS cut off at 28), phase 4 and above. For the FSNAU survey[22], 29% of the households have a FCS Poor (with 3% with FCS below 14) and 13% consumed four or less food groups 24 hours prior the survey. As for Baidoa district, the household frequency consumption is high for the cereals and tubers (consumed seven times a week for 75% of households), for sugar (seven times a week for 69% of households), and for oil and fats (seven times a week for 60% of households).

For the rCSI, according to the REACH MSNA survey, 32% of respondents have a high rCSI (35% of FSNAU respondents). Almost 25% of households relied on less preferred, less expensive food every day or almost every day (six to seven times a week) whereas 22% reduced the number of meals eaten per day, six to seven times a week prior the survey.

In FSNAU survey, the LCS shows that 35% of households in Burhakaba are employing Emergency strategies (25% in REACH MSNA), indicative of IPC phase 4 and above. 7% have depleted the strategy of begging at the mosque for food or money to buy food.

The contributing factors from the FSNAU survey also show a livestock decapitalization trend at household level: beginning of the year, around 30% of the households owned Camels and, for a majority (around 17% of the households), more than four heads. In July 2022, not more than 20% of households owned Camels and only 5% with owned more than four. The proportion of households not having Cattle increased from around 41% (January 2022) to 65% in July 2022 with a significant reduction on the livestock above four cattle (from 38% to 5%). Regarding the Goats and sheep, beginning of the year (January 2022), 83% of households reported having more than four against around 40% in July. Around 51% of the households have as main source of food the market and 36% their own production. 10% of the households reported having received cash remittances from family members, relatives or friends who live outside of Somalia over the last three months. The totality of respondents declared not having received neither in-kind cereal food aid nor vouchers for food from humanitarian agencies or cash assistance in the past three months.

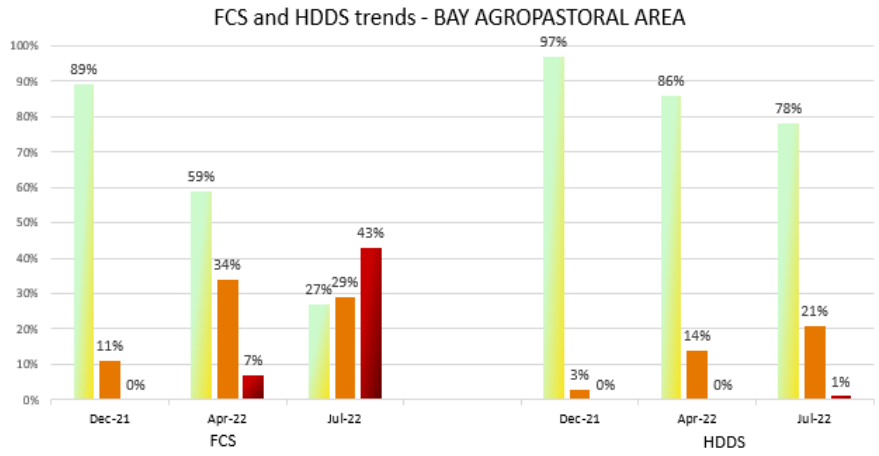
### *Trends analysis*

In order to produce trends, the FNSAU July 2022 survey has been analysed merging the two districts of Baidoa and Burhakaba as in the previous analyses. Comparing the last three analysis (December 2021, April 2022 and July 2022), there is a degradation of the Food Security and Livelihood indicators over the time.

[21] Source: REACH MSNA, July 2022.

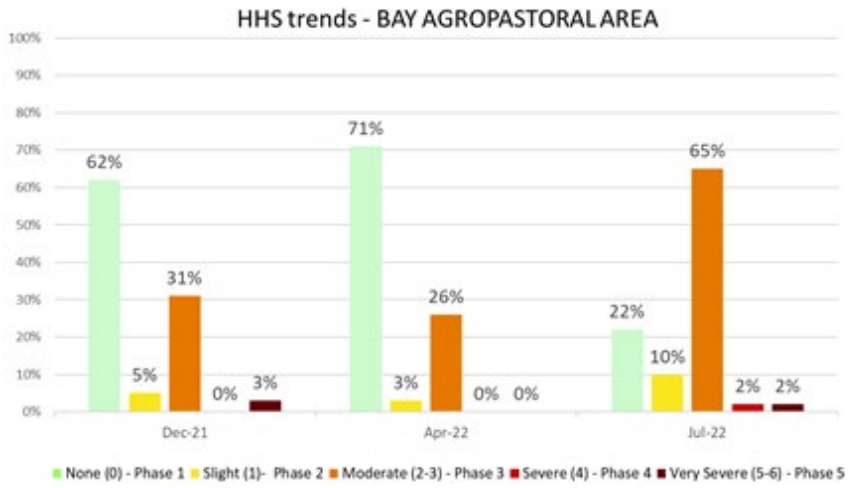
[22] Source: FSNAU, Food Security and Nutrition Assessment, July 2022.

*Graph 17. FCS and HDDS for the agropastoral area (rural residents) (Source: FSNAU)*



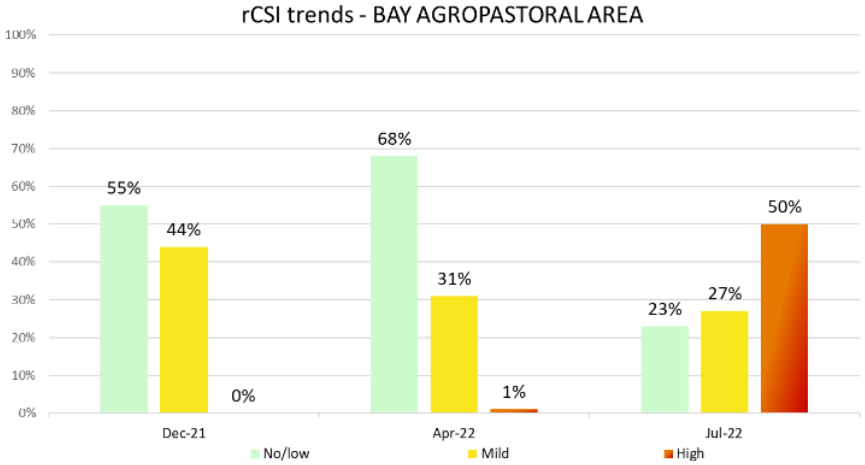

For the FCS, the degradation is quite rapid considering the 0% FCS Poor in December 2021 and the subsequent 7% in April 2022 and 43% in July 2022. The HDDS is also reducing to a lower extend however, in July 2022, 22% of households consumed four food groups or less versus 14% in April 2022 and 3% in December 2021.

*Graph 18. HHS for the agropastoral area (rural residents) (Source: FSNAU)*



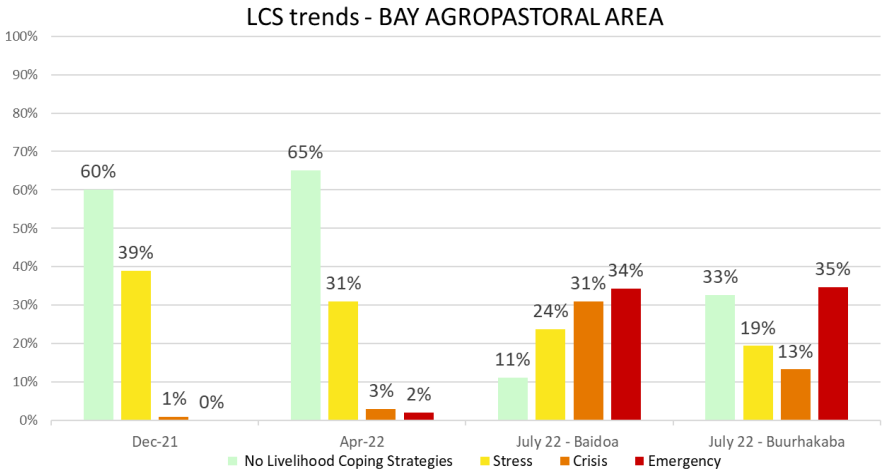

For the HHS, a deterioration is also observed from the 31% HHS moderate, phase 3 and 3% very severe, phase 5, in December 2021 to the 65% HHS moderate, phase 3, in July 2022. In comparison to December 2021, 3% of households had a severe or very severe, phase 4 or 5, HHS versus 4% in July 2022.

*Graph 19. rCSI for the agropastoral area (rural residents) (Source: FSNAU)*




For the rCSI, the trend is also completely different in July 2022 comparing to previous years. In July 2022, 50% of surveyed households employed crisis coping strategies related to food against 1% in April 2022 and 0% in December 2021. The proportion of households also mentioned not having implemented coping strategies in the past 30 days has also greatly reduced from 62% and 71% in December 2021 and April 2022 respectively versus 23% in July 2022.

Graph 20. LCS for the agropastoral area (rural residents) (Source: FSNAU)




The livelihoods have also been largely depleted over time. In July 2022, 34% to 35% of households implemented Emergency livelihood coping strategies against 2% in April 2022 and 0% in December 2021. The proportion of population relying on crisis livelihood coping strategies, indicative of IPC phase 3 and above, also increased: from 13% - 31% according to the districts against 3% in April 2002 and 1% in December 2021.

### *Newly arrived IDPs in Baidoa district*

According to FSNAU[23], around 78% of the new settled IDPs (displaced less than six months ago) have a Poor Food Consumption Score (FCS below 14 is 10%) and above 47% consumed four food groups or less 24 hours prior to the survey (3% from zero to two food group).

74% of new IDPs consumed cereals and tubers six or seven times the week prior to the survey (including 45% that consumed seven times), 54% consumed sugar six or seven times (38% of households consumed seven times during the week) and 49% of households oil and Fat six or seven times the week before the survey (33% consumed 7 times). According to REACH MSNA[24], 49% of the IDPs settled more than six months ago in the area (old IDPs) have a Poor FCS (cut off 28) and 43% of the new IDPs have a Poor FCS. According to a Rapid assessment conducted in August 2022 by REACH[25] , 61% of the IDPs in the Bay region have a Poor FCS.

The Reduced Coping Strategy Index (rCSI) is High (≥19 In July 2022, indicative of IPC Phase 3 and above), or 45% of the new IDPs according to the FSNAU assessment and for 26% according to the MSNA REACH July 2022. For the oldest IDPs, the rCSI is also high for 24% of them. The detail of the rCSI from the FSNAU assessment shows that nearly 95% of the new IDPs borrowed food or relied on help from friend or relatives (Qaraabo/ Kaalmo) and, for the majority, two to three times a week whereas 88% relied on less preferred food (for 15% of the respondents every day). Moreover, 89% of new IDPs reduced the number of meals eaten per day (two to four times a week for 66% of them) and 82% reduced the portion size of meals (Beekhaamis).

Regarding the Livelihood Coping Strategy Index (LCS) from the MSNA REACH survey, 34% of the new IDPs implemented Emergency, phase 4 and above, livelihood copying strategies in the past 30 days and 36% of the old IDPs. According to the FSNAU survey, 14% of new IDPs implemented Emergency, phase 4 and above, livelihood coping strategies and 0% have depleted the Emergency, phase 4 and above, strategy of begging at the mosque for food or money to buy food, or selling the house or the land. In August 2022, according to the REACH rapid assessment conducted in August 2022, 68% of the IDPs arriving in the Bay region implemented Emergency coping strategies.

The contributing factors information provided through the FSNAU assessment show that 78% of the new IDPs have as original permanent area of residence some districts from the Bay region (Dinsoor, Quashandere or Baidoa) and 22% comes from Bakool region (Hudur, Waajid or Radhuure) and for 0.3% from the Sakow district (Middle Juba region?). The most recent IDPs come this last district and from other districts in the Bay region. For 98% of these IDPs, the reason of their displacement is related to the drought. None of them mentioned some clan conflicts, floods or eviction as main reason of their displacement. However, for 1% of these IDPS, the displacement is also link to livelihood loss and for 0.3% to insecurity in their area of residence.

In terms of income, 39% of the new IDPs reported as main source of income casual labour like portage or construction and for 13% casual labour wage linked to agricultural activities (labour farm, agricultural labour …). On these two activities, the household's members managed to work almost 28 days, over the last three months, for a daily income of 74,730 SOSH. In addition, 29% of new IDPs were engaged in self-employment activities (sale of bush product, handicraft...), for approximately 13 days and for a daily income of 22,447 SOSH and 14% of new IDPs get their main income through some gift/zakaat (cash, food in-kind, animals etc...). Almost 5% of the new IDPs have as main source of income pretty trade they practiced for two days, for a daily income of 1,109 SOSH. Skilled salary has also engaged more than 2% of new IDPs that practiced this activity for more than a day for a daily income of 1,113 SOSH. In average, for almost 79% of the households, the food expenditures represented more than 75% of the total household expenditures. In terms

[23] Source: FSNAU July 2022, Baidoa and Burhakaba district rural residents sampling: 36 clusters and 282 observations; IDPs survey: 36 clusters and 293 observations.

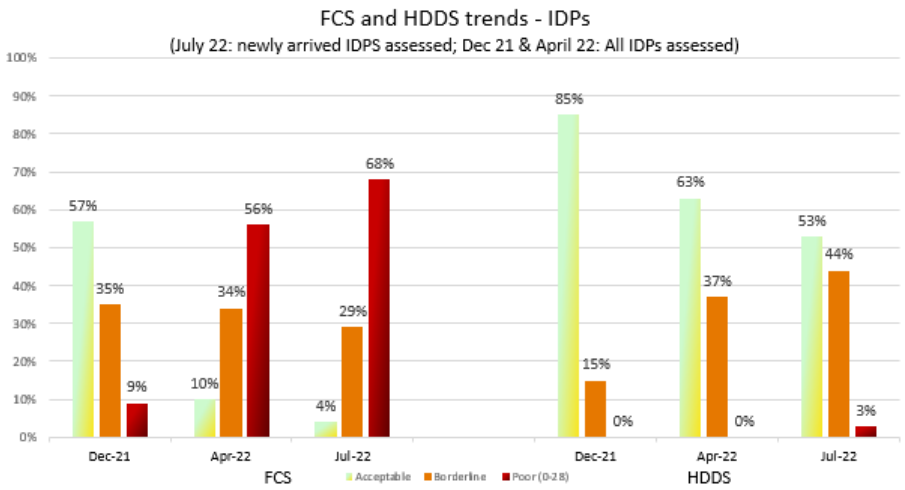
[24] Source: REACH MSNA July 2022, Baidoa and Burhakaba district Host Community sampling: 2 clusters and 158; IPDs 34 clusters and 210 observations.

[25] Source: REACH, Rapid assessment, REACH Rapid Assessment, August 2022, New Arrivals: 38 sites and 158 observations.

of assets ownership, 81% of the new IDPs own a mobile phone, 22% a land, 11% some farm tools and around 6% respectively a house and some skilled work tools.

Looking at the last FSNAU assessments from December 2021 to July 2022 for IDPs in Baidoa area, it has to be noted the Post *Gu* assessment of June - July 2022 only considered the newly arrived IDPs, while previous assessments focused on all IDPs. The trend analysis shows a deterioration of all the food consumption and livelihood indicators over time.

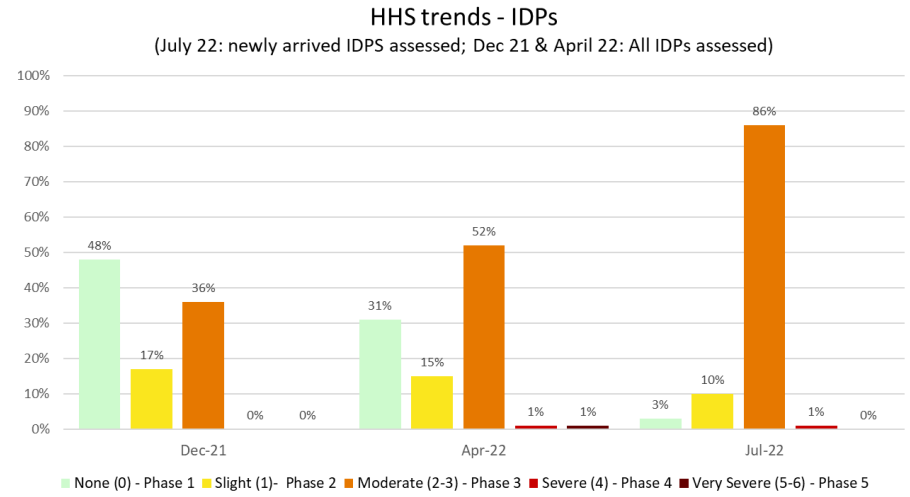
*Graph 21. FCS and HDDS for the IDPs in Baidoa (Source: FSNAU)*




FCS deteriorated over time: from 9% poor in December 2021 to 68% in July 2022.

Regarding the dietary diversity, 44% of newly arrived IDPS consumed three to four food groups in July 2022 against 15% in December 2021 for all IDPs. The proportion of households consuming zero to two food groups 24 hours prior to the survey also increased from 0% in Dec 2021 to 3% in July 2022 for all IDPS and newly arrived IDPs respectively.

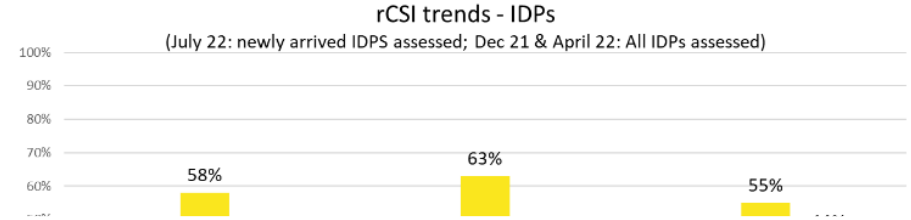
*Graph 22. HHS for the IDPs in Baidoa (Source: FSNAU)*



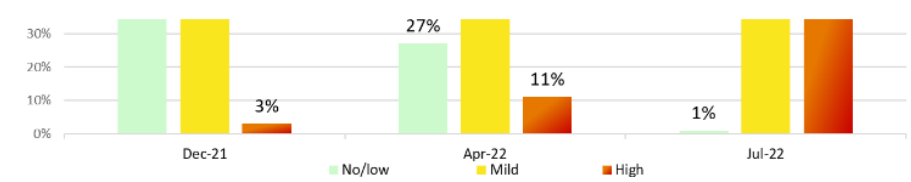

For the HHS, 86% of newly arrived IDPs have a Moderate HHS (reporting value two – three, phase 3) in July 2022 against 36% for all IDPs in December 2021. Only in the April 2022 assessment did 1% of all IDPs have a Severe, indicative of IPC phase 4, HHS.

The proportion of IDPs implemented Crisis coping strategies applied to food also significantly increases over the time: in July 2022, 44% of the new IDPs have a rCSI Crisis, phase 3, (rCSI ≥ 19) against 3% in December 2021.

*Graph 23. rCSI for the IDPs in Baidoa (Source: FSNAU)*

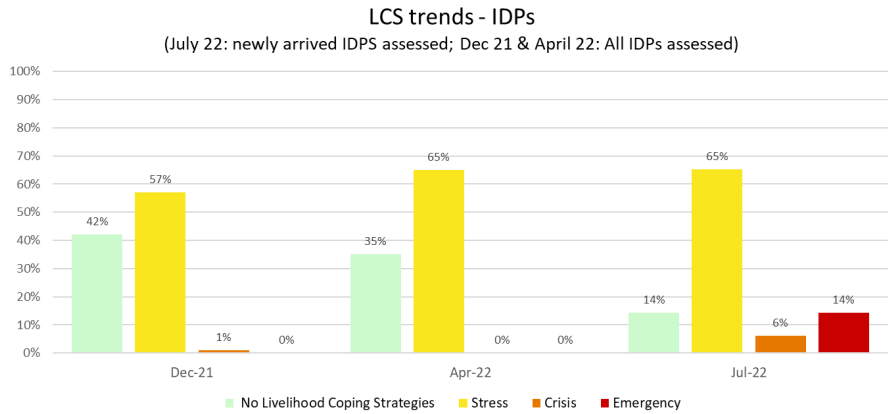



*Graph 24. LCS for the IDPs in Baidoa (Source: FSNAU)*




Regarding the LCS, IDPs implement more Emergency and Crisis livelihood coping strategies in July 2022 compared to April 2022 or December 2021: 14% and 6% respectively in

July 2022, for newly arrived IDPs, while 0% and 1% for all IDPs in December 2021 and no use in April 2022 respectively.

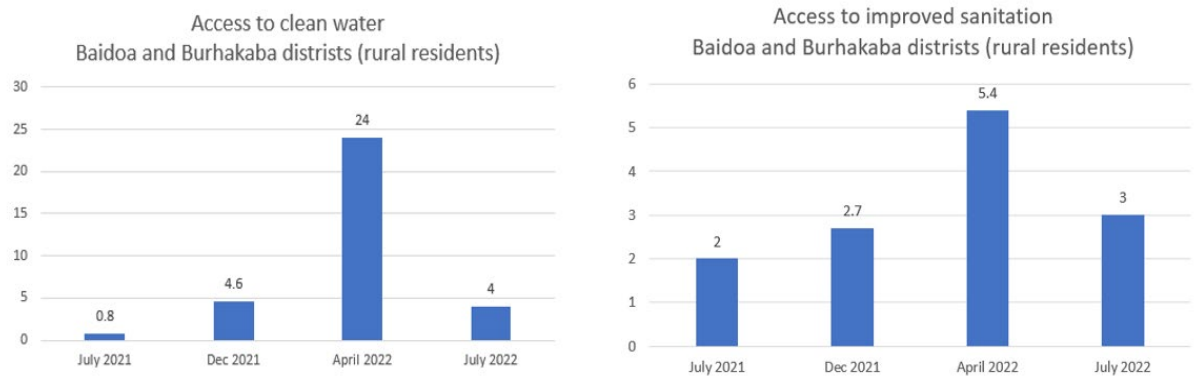



## 7. WASH DATA

### *Baidoa and Burhakaba Agropastoral Rural Residents*

According to the Livelihood baseline profiles SO-15 and SO-16, the most common source of water for rural populations in Bay agropastoral areas, in a normal year, are shallow wells (around 12 – 15 meters deep), water catchments and boreholes. Shallow wells are mostly used for livestock. Water catchments and boreholes supply around a third of the water needs for the population, relied on for drinking cooking and bathing. These seasonal sources can last from 2 to 5 months, depending on the level of rainfall and their capacity to hold water. The average distance to a water source during the rainy seasons is 5.6 km[26].

*Graph 25. Access to clean water and improved sanitation in Baidoa and Burhakaba districts (rural residents) (Source: FSNAU)*




According to the FSNAU survey [27] conducted in July 2022, only 4% of the households living in the Bay Agropastoral area reported having access to safe water, mainly through a protected Shallow well (covered with hand pump/motorized pump).

From the Gredo / ICR survey[28] conducted in July 2022 in the Baidoa and Hudur districts with IDPs and resident population, only 34% have access to safe water. The main source of water for 40% of the respondents is through unprotected well, rainwater for 11% and borehole for 11%. The households also reported having collected an average of 64 liters of water the day before the interview, which give 8.3 liters of water per persons (considering the average household size of 7.73 persons from the survey). This is barely half of the Sphere standard of a minimum of 15 liters of water per person per day[29]. Moreover, 75% of households reported not being able to meet their families' daily water needs. In particular, they mentioned long distances to get to a functional, protected source (18% of the households surveyed said they require more than 2 hours), increasingly long wait times, as more people have to rely on fewer functional wells, and insufficient funds to purchase water as an alternative. Only 21% of the respondents reported treating the water before use and 51% stored their water in covered containers.

[26] Source: FSNAU, Livelihood baseline profiles, SO15 – Sorghum high potential agropastoral and SO16 – Bay Bakool Low potential agropastoral, 2018.
[27] Source: FSNAU, Food Security and Nutrition Assessment, 2021 – 2022.
[28] Source: Gredo/IRC, 210 households (32% IDP, 68% host community) across Baidoa and Hudur districts.
[29] Source: SPHERE Handbook, Humanitarian Charter and minimum standards in humanitarian response, water supply and sanitation and hygiene promotion chapter. https://spherestandards.org/.

Regarding Sanitation, according to the FSNAU survey, only 3% of the households from the Bay agropastoral areas have access to improved sanitation, mainly household latrines.

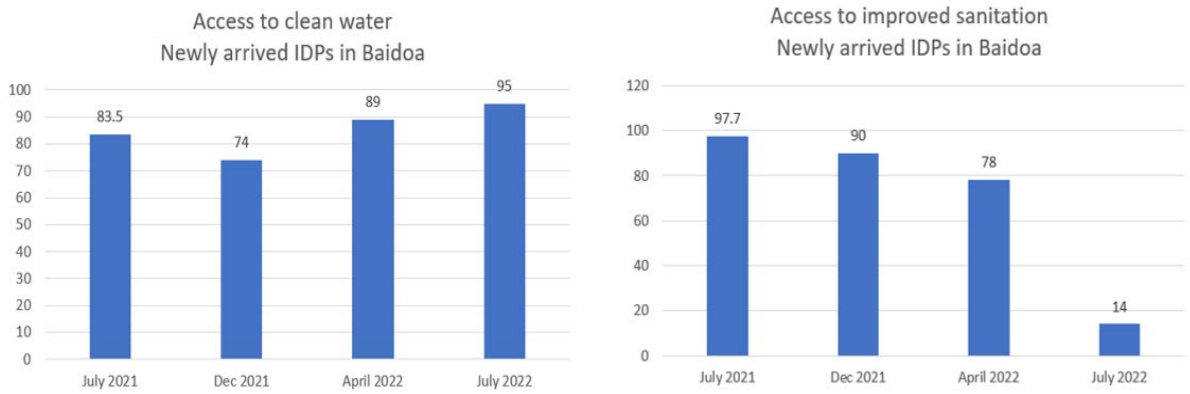
From the Gredo / IRC assessment, 83% of the IDPs and residents from the Baidoa and Hudur districts have access to a latrine: amongst them, 57% have access to public latrines and 53% to private latrines. For the households with no access to latrine, the vast majority reported open defection.

### *Newly arrived IDPs in Baidoa district*

According to CCCM,[30] in July 2022, 61% of IDP sites in Baidoa do not have a water source on site, which indicates that roughly 170,000 IDPs in sites do not have access to a sustainable water source within reasonable distance. Additionally, only 33% of IDP sites in Baidoa have access to a water source within 20 minutes (accessing and retrieving water). The same report indicate that 61% of IDPs sites in Baidoa did not have a water source on site within reasonable distance. Of the 76% of Baidoa IDPs sites with access to sanitation facilities, there was only one latrine per 225 individuals on average, more than twice the number of people allowed under Sphere humanitarian standards.

From the FSNAU survey in July 2022[31], almost 95% of the newly arrived IDPs in Baidoa district reported having access to clean water whether through tanker (75% of the respondents), a standpipe (kiosk/public tap/taps connected to a storage tank; 15% of the IDPs) or a protected shallow well, covered with hand pump/motorized pump (5%).

*Graph 26. Access to clean water and improved sanitation in Baidoa and Burhakaba districts (rural residents) (Source: FSNAU)*




Data collected from new IDPs sentinel sites in Baidoa during late July 2022[32], also indicated a worrying WASH situation, with 31% of IDP households in Baidoa reporting open defecation and 42% reporting inadequate drinking water.

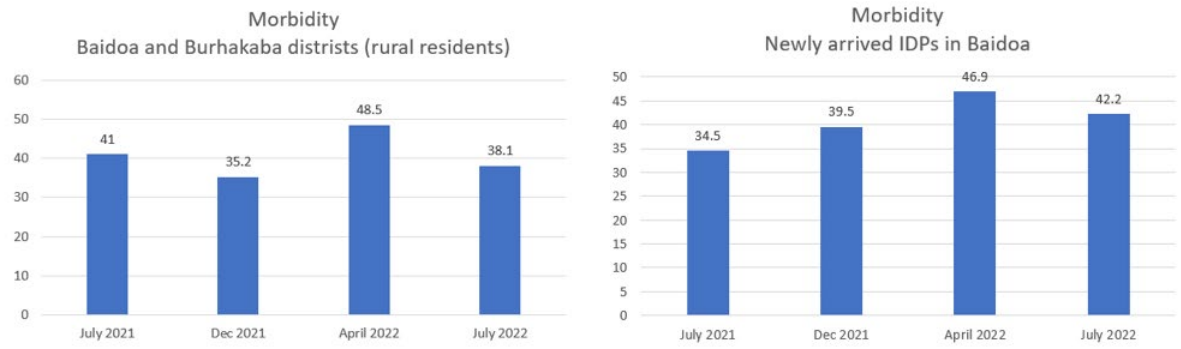
According to the new arrived IDPs interviewed in the Post *Gu* assessment from FSNAU[33], 14% of the respondents reported having an access of improved sanitation, mainly communal latrine and 86% mentioned no toilet at all, using an open pit or open ground.

[30] Source: CCCM Cluster, IDPs Site/Service Monitoring, Accessed on 15 August 2022.
[31] Source: FSNAU, Food Security and Nutrition Assessment, 2021 – 2022.
[32]Source: Nutrition and Mortality Monitoring in IDP Populations. Report on Round 1 - July 2022 https://reliefweb.int/report/somalia/nutrition-and-mortalitymonitoring-idp-populations-report-round-1-july-2022-report-issued-15082022.
[33] Source: FSNAU, July 2022, Baidoa and Burhakaba district rural residents sampling: 36 clusters and 282 observations; IDPs survey: 36 clusters and 293 observations.

## 8. HEALTH DATA

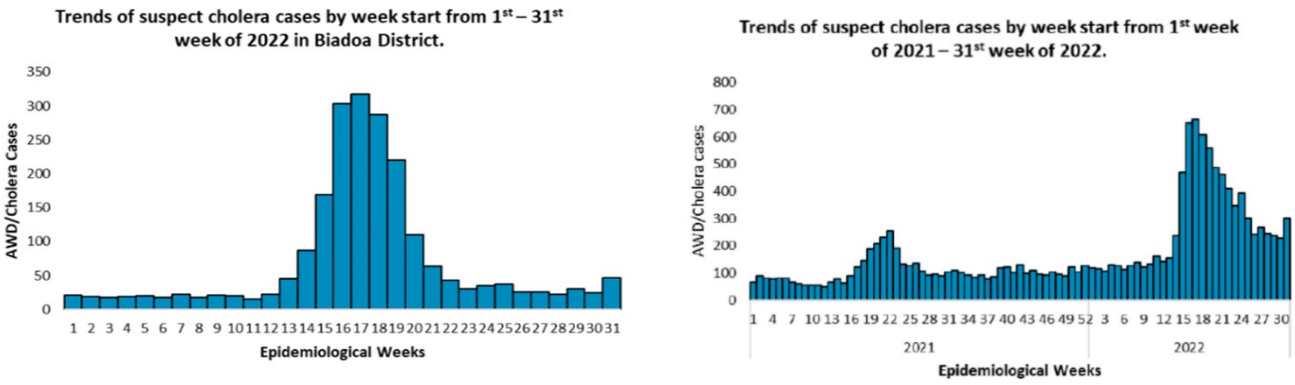
Morbidity among children 6-59 months has been consistently high in rural populations of Baidoa and Burhakaba districts as well as in IDPs in Baidoa district over the past two years. More than a third of children in rural areas of Baidoa and Burhakaba districts and more than 40% of children from newly arrived IDPs in Baidoa district were suffering from illnesses according to the FSNAU survey of July 2022[34]. Although there is a slight reduction in the prevalence of illnesses between April and July 2022 in both the IDPs (old and new respectively) and resident population, the levels of illnesses between December and July 2022 is comparable. Compared to July 2021, in July 2022, the prevalence of illnesses among children among IDPs in Baidoa district has increased (from 34.5% to 42.2%) while it has slightly decreased (from 41% to 38.1%) among children from the rural populations of Baidoa and Burhakaba districts.

*Graph 28. Morbidity in Baidoa and Burhakaba districts and in IDPs in Baidoa (Source: FSNAU)*




A cholera outbreak, peaking in the last week of April 2022 is of particular concern. While a new increase has been noticed in the epidemic curve in the last week (week 31)[35], it cannot be ascertained whether this will represent the beginning of a new increase in trends or simply an occasional deviation from an overall decreasing trend. Competition for water resources and further influx of IDPs might be in the future a trigger for cholera. Centres for cholera treatment are quasi non-existent in rural areas, let alone in poorly or not accessible areas.

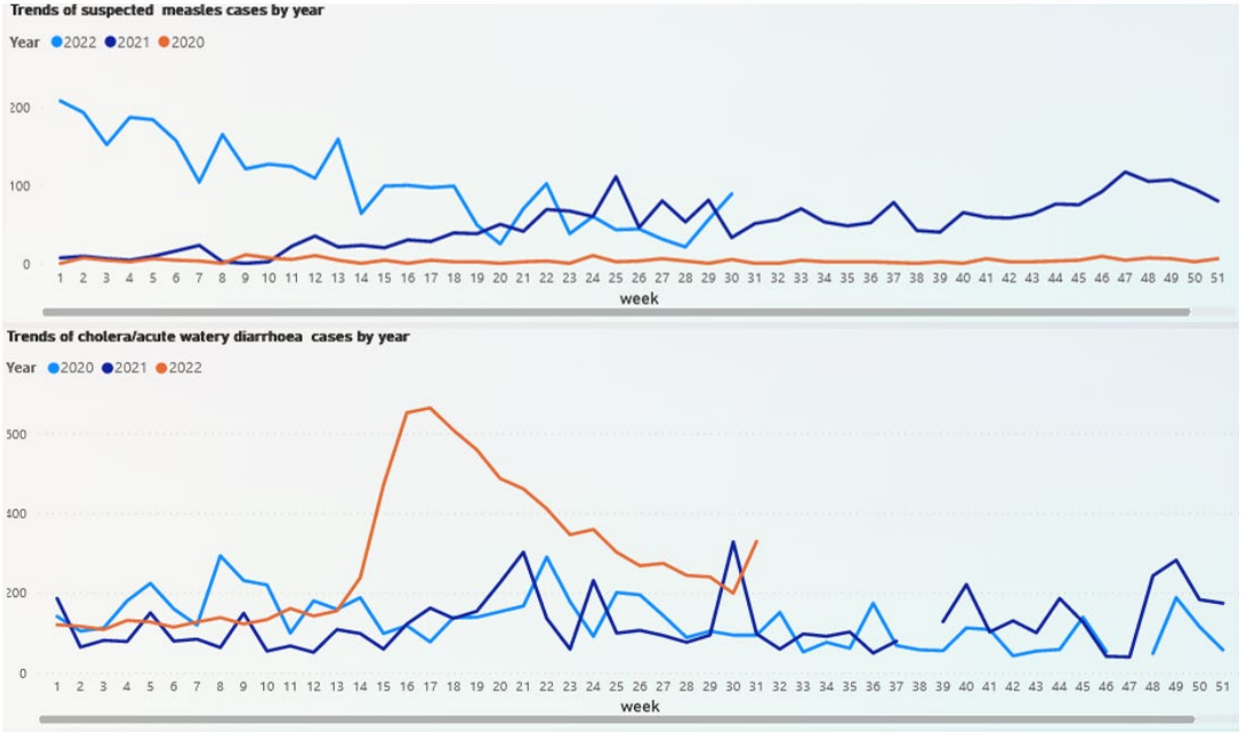
*Graph 29. Trends of cholera suspected cases in Baidoa district and national (Source: WHO)*




Acute Watery Diarrhoea (AWD) and measles curves for the southwest show globally a downward trend with the exception of the last two weeks[36].

[34] Source: FSNAU, Source: FSNAU, Food Security and Nutrition Assessment, July 2022.
[35] Source: Cholera weekly Epidemiological report, EPI week 31 (1 – 7 August 2022) for Baidoa district (left) and at national level.
[36] Source: Health Cluster, July 2022.

*Graph 30. Trends of suspected measles cases and trends of cholera / AWD – cases by year (Source: Health Cluster)*



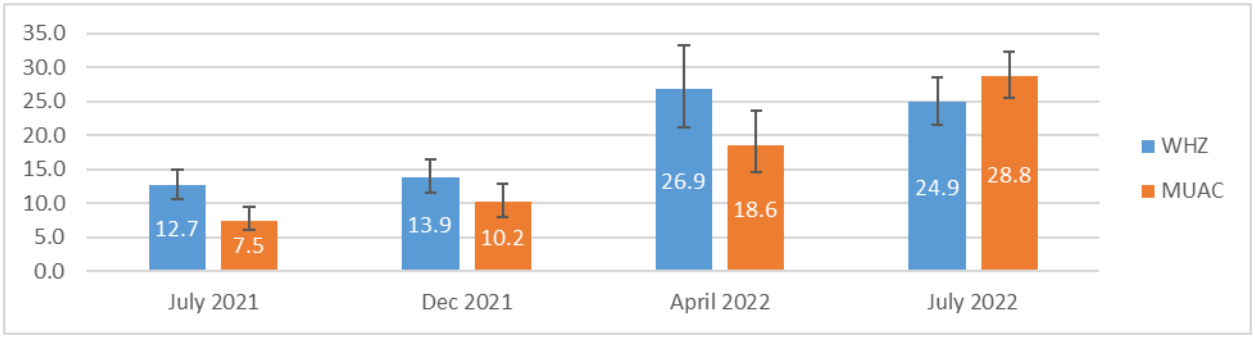
## 9. ACUTE MALNUTRITION DATA

### *Baidoa and Burhakaba Agropastoral Rural Residents*

In the agro pastoral areas of Baidoa district, excluding urban areas, according to the FSNAU SMART survey[37] conducted in July 2022, the Global Acute Malnutrition (GAM) based on the Weight for Height z-Score (WHZ) was at 24.9% (95% CI: 21.6-28.6) and the GAM based on the Mid-Upper Arm Circumference (MUAC) was at 28.8% (95% CI: 25.5-32.4). Compared to the previous survey of April 2022, portraying the GAM based on WHZ at 26.9% (95% CI: 21.2-33.3) and the GAM based on MUAC at 18.6% (95% CI: 14.5-23.6), a slight improvement of the GAM based on WHZ and a significant deterioration of the GAM based on MUAC can be observed.

A significant deterioration is observed compared to the survey of December 2021, in which the GAM based on WHZ (n=758) was 13.9% (95% CI: 11.6-16.4) and the GAM based on MUAC was 10.2% (95% CI: 8.0-12.8). There was also significant deterioration of acute malnutrition compared to the same period last year, i.e. July 2021, according to a survey showing a GAM based on WHZ prevalence of 12.7% (95% CI: 10.7-15.0) and a GAM based on MUAC prevalence of 7.5% (95% CI: 6.0- 9.4). The Severe Acute Malnutrition (SAM) levels in the July 2022 survey are also extremely alarming, portraying the SAM based on WHZ at 6.9% (95% CI: 5.0- 9.5) and the SAM based on MUAC at 12.5% (95% CI: 10.5-14.9).

*Graph 32. Global Acute Malnutrition prevalence in Baidoa and Burhakaba districts (rural residents) (Source: FSNAU)*




### *Newly arrived IDPs in Baidoa district*

According to the FSNAU SMART[38] survey covering newly arrived IDPs[39] in Baidoa settlements conducted in July 2022, the GAM based on WHZ is at 28.6% (95% CI: 24.3-33.3) and the GAM based on MUAC is at 28.5% (95% CI: 25.3-31.9).

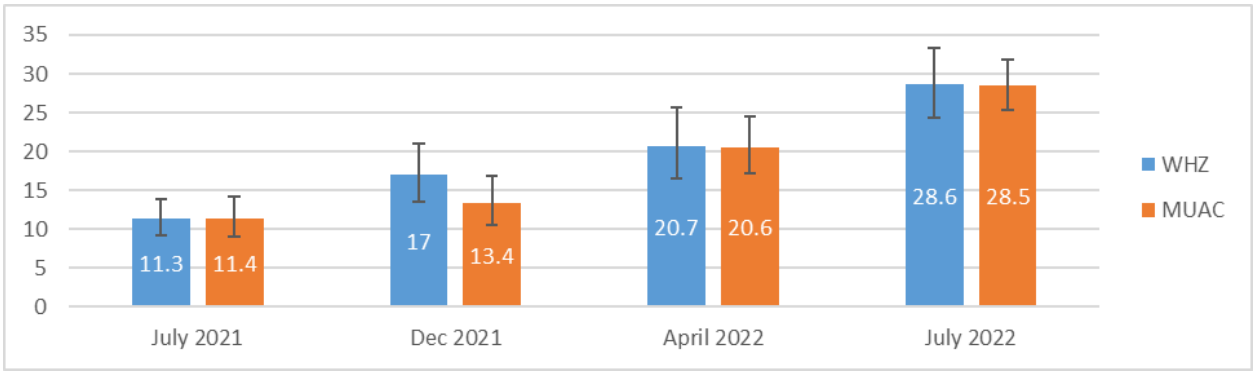
Compared to the previous survey of April 2022 portraying the GAM based on WHZ at 20.7% (95% CI: 16.5-25.7) and the GAM based on MUAC at 20.6% (95% CI: 17.2-24.5), a sharp deterioration of both the GAM based on WHZ and the GAM based on MUAC can be observed. A significant deterioration is also noted compared to the 2021 survey for December: 17% (95% CI: 13.6-21.0) GAM based on WHZ and 13.4% (95% CI: 10.6-16.8) GAM based on MUAC. Similarly, a deterioration is found compared to the same period last year, i.e. July 2021, with the GAM based on WHZ at 11.3% (95% CI: 9.2-13.8) and the GAM based on MUAC at 11.4% (95% CI: 9.1-14.2).

[37] Source: FSNAU, Source: FSNAU, Food Security and Nutrition Assessment – 2021-2022. Detailed sampling, Agro Pastoral - rural population: 36 clusters. July 2022 WHZ=766; MUAC=784; April 2022: WHZ=756; MUAC=767; December 2021: WHZ=758; MUAC=765.

[38] Source: FSNAU, Source: FSNAU, Food Security and Nutrition Assessment – 2021-2022. Detailed sampling, IDPs: 36 clusters. July 2022: WHZ=801; MUAC=818. April 2022: WHZ=791; MUAC=812. December and April 2021 not available.

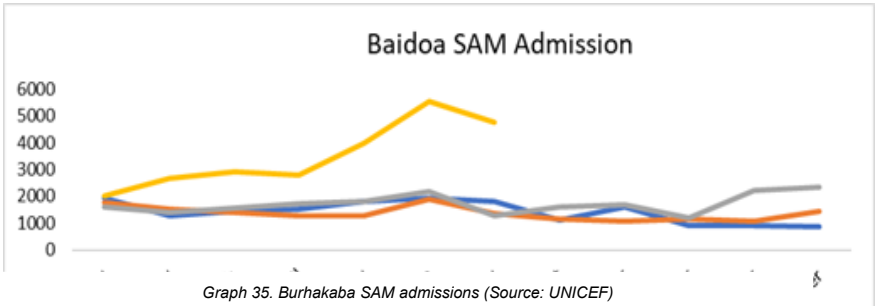
[39] Above 95% of respondents in the IDPs settlements had arrived in the previous six months, 71.5% in the three months preceding the survey and 24.4% in the 4-6 months preceding the survey. Trends analysis among IDPs surveys need to be done with the caveat that previous IDPs surveys did not include new arrivals.

*Graph 33. Global Acute Malnutrition prevalence in IDPs settlements in Baidoa (Source: FSNAU)*

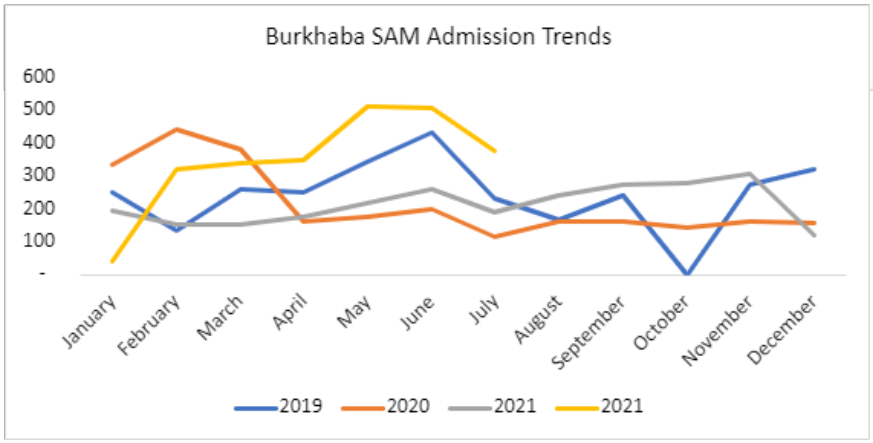



## *Nutrition feeding centres admissions and coverage in Baidoa (mixed Rural, Urban and IDPs)*

*Graph 34. Baidoa SAM admissions (Source: UNICEF)*




*Graph 35. Burhakaba SAM admissions (Source: UNICEF)*



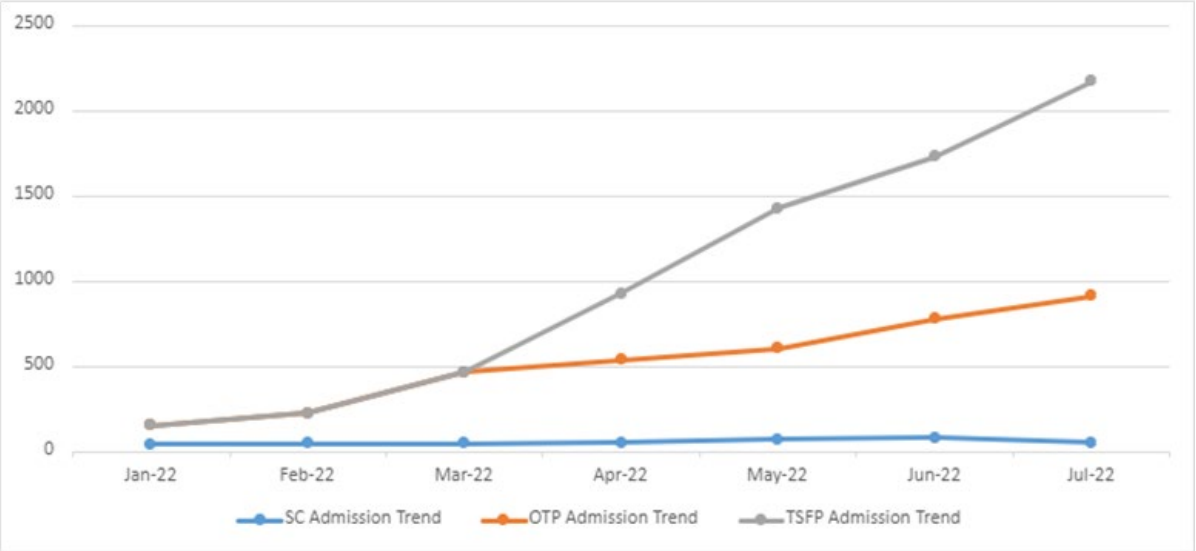

The number of admissions to nutrition feeding centres is also extremely alarming. According to UNICEF[40] records, SAM admissions In Baidoa and Burhakaba districts have continuously increased since January 2022 and only recently, there has been a slight decrease in both districts. This can be due to a number or reasons not necessarily linked to decrease in severity.

Conversely, ACF SC admission trends[41] declined slightly in July 2022, with admission in OTP and TSFP following a consistent upward trend.

[40] Source: UNICEF, SAM Admissions Trends at July 2022

[41] Source: Action Contre la Faim, SC, OTP, and TSFP admission trends, Jan-Jul 2022 Baidoa district. SC: Stabilisation Centre; OTP: outpatient therapeutic programme; TSFP: Targeted Supplementary Feeding Programme.

*Graph 36. SC, OTP, and TSFP admission trends for Baidoa district, Jan-Jul 2022 (Source: ACF)*




According to a SQUEAC survey conducted in Baidoa district in June 2022[42], the SAM admissions have been on increasing trend with highest peak observed in 2022 (January –April) when compared to previous years (2021 and 2020). The increase in SAM admissions was attributed to persistent drought with failure of Deyr and *Gu* rainfall seasons overtime coupled with burden of under-five illnesses such as AWD, ARI etc. The discharge outcomes for SAM treatment programs, i.e., cured rates, defaulter rates, death and non-response rates were at 96.1%, 2.4%, 0.5% and 1.0% respectively. The median MUAC at admission in OTP was 11.2cm, an indication of early admission to the program implying cases are detected early and referred to the program for treatment. The median MUAC at cured in OTP was 11.7cm an indication that cases receive the benefits of SAM treatment until recovery. The median length of stay at discharged cured in SAM treatment programs in Baidoa district was six weeks an indication that cases receive the benefits of SAM treatment within the recommended eight weeks in program.

Coverage of SAM treatment programs was found to be 43.3% (95% CI: 36.7%-50.0%). The coverage for SAM treatment programs in Baidoa was interpreted below >90% (minimum SPHERE threshold). The met-need was 41.6%. This implies that despite of the coverage reported at 43.3% the effectiveness of the program on SAM cases until recovery is also below 50%.

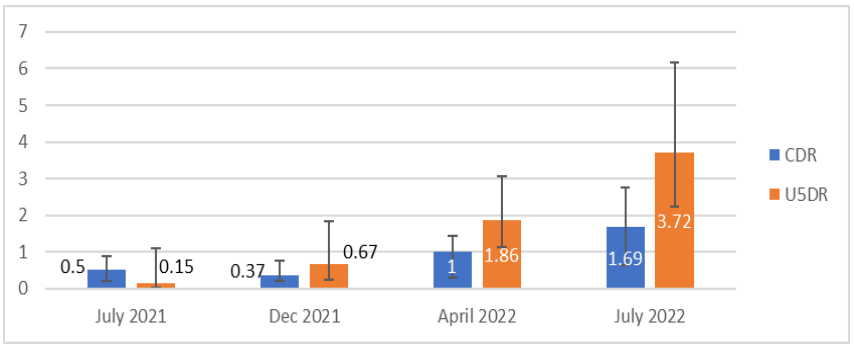
[42] Source: Save the Children International (SCI), Semi-quantitative evaluation of access and coverage (SQUEAC) survey report conducted in Baidoa district, Bay region, South West state, Somalia, -14 June 2022.

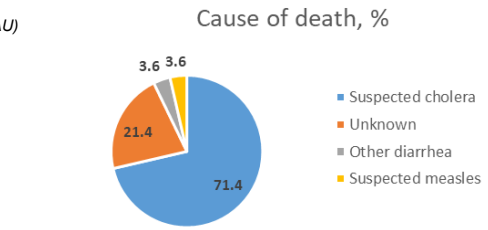
## 10. MORTALITY DATA

### *Baidoa and Burhakaba Agropastoral Rural Residents*

According to the FSNAU SMART[43] survey conducted for Bay agro pastoral area among rural residents in July 2022, the Crude Death Rate (CDR) is at 1.69 (95% CI: 1.04-2.75) and the Under-Five Death Rate (U5DR) at 3.72 (95% CI: 2.23-6.16). The previous survey (April 2022) portrayed a CDR at 1 (95% CI: 0.69-1.45) and a U5DR at 1.86 (95% CI: 1.12-3.07). The cause of death according to the survey of July 2022 shows the distribution below.

*Graph 37. Mortality in Bay Agropastoral area - Rural residents May-June and Cause of death percentage - (Source: FSNAU)*

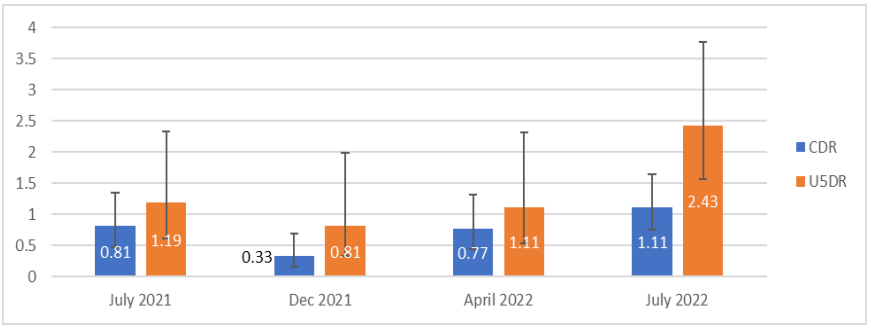


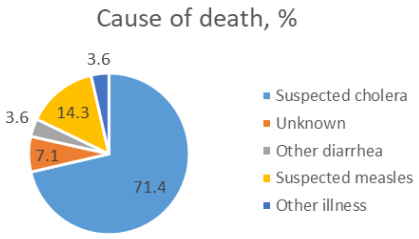




***Baidoa Internally Displaced People in Settlements established after April 2022***

According to the FSNAU SMART survey, conducted in July 2022 in newly arrived IDPs, the CDR is at 1.11 (95% CI: 0.75-1.64) and the U5DR at 2.43 (95% CI: 1.56-3.77), compared to the previous survey (April 2022), portraying CDR at 0.77 (95% CI: 0.44-1.32) and U5DR at 1.11 (95% CI: 0.53-2.31). The cause of death according to the survey of July 2022 shows the distribution below.

*Graph 38. Mortality in IDPs settlements in Baidoa April-May-June and Cause of death percentage (Source: FSNAU)*




[43] It should be noted that while the April 2022 mortality survey in Baidoa and Burhakaba districts had a recall period of 90 days, the recall period for the July survey was 60 days in the agro pastoral area and 90 days in the IDPs survey.

## 11. HUMANITARIAN RESPONSE IN PLACE

### *Baidoa district and Burhakaba district*

In Baidoa district, according to the FSNAU survey[44], less than 1% of resident, non-displaced households reported receiving in-kind cereal food aid, voucher or cash assistance during the past three months. Similarly, 0.6% of households reported the main source of food coming from the humanitarian agencies in the same period. According to humanitarian food assistance figures reported by the Food Security Cluster (FSC[45]), 88% of the resident population in Baidoa district received humanitarian food assistance (cash, voucher or in-kind), in April 2022, while the May – July 2022 period shows the entire resident population receiving assistance. In terms of daily kilocalorie coverage, assistance covered 70-74% between April - July 2022.

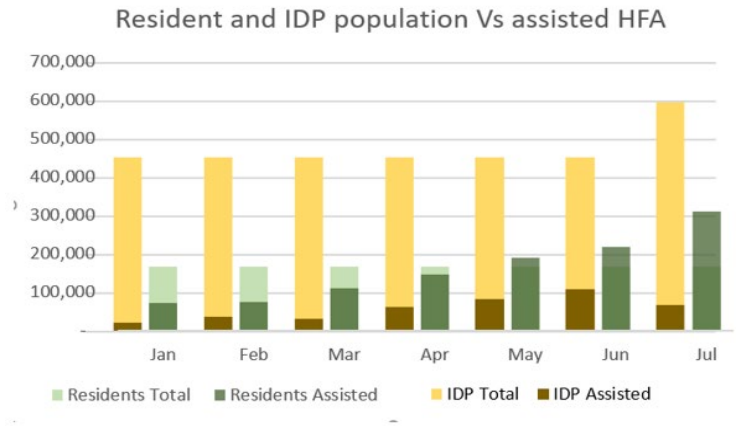
In Burhakaba district, no resident non-displaced households reported receiving any in-kind cereal food aid, voucher, or cash assistance in the past three months according to the FSNAU Post *Gu* assessment. No households reported receiving the aforementioned assistance, or as the main source of food in the March – April period of 2022. According to humanitarian food assistance figures reported by the Food Security Cluster (FSC), only 4-6% of the residents in Burhakaba district received humanitarian food assistance (cash, voucher, or in-kind) between April – June 2022, while this increases to 22% in July 2022. In terms of daily kilocalorie coverage, assistance covered 70-74% between April - July 2022.

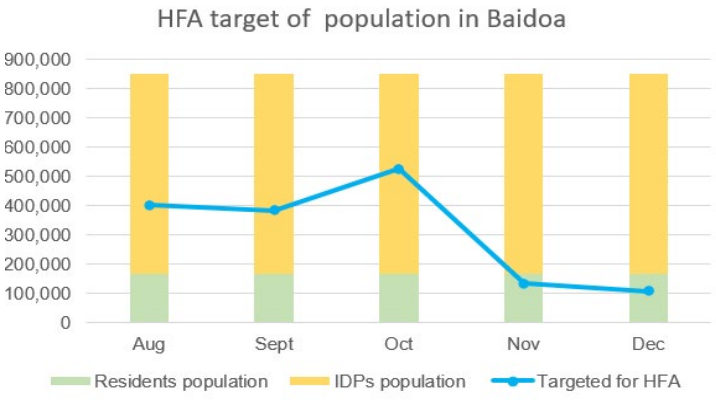
### *Newly arrived IDPs in Baidoa district*

According to FSNAU food security and nutrition assessment, only 2% of newly arrived IDPs reported receiving food aid of any kind in the past three months, 1.4% indicative cash assistance. No rural households reported in-kind food aid, voucher or cash assistance as the main source of food in the same period. Data from Food Security Cluster indicate that less than 24% of households have received food assistance (cash, voucher, or in-kind) between April – June 2022, with 14% in April, 18% in May, 24% in June and 15% in July. In terms of daily kilocalorie coverage, assistance covered 70-74% between April - July 2022.

According to the CCCM site monitoring[46] for 356 sites in Baidoa as of July 2022, unconditional food assistance reached 21% of new arrivals in the last six months, while 137 sites reported receiving no food assistance in the past six months (38% of all managed sites).

*Graph 39. Level of HFA for the current period and projection period (Oct – Dec (Source: FSAC)*




A significant scale up of HFA[47] between April and July 2022 has been put in place, from 210,000 people reached in April in Baidoa (urban, rural and IDP) to 380,000 people in July, representing 34% of population coverage in April and 50% in

*Graph 40. HFA Resources reallocation (Source: FSAC)*

| Areas | | Resources Reallocation on HFA (reduction expected in October-December compared to plans in July-September) |
|---|---|---|
| Region | District | |
| Bakool | Wajid | -39% |
| Bakool | Xudur | -37% |
| Banadir | Banadir | -4% |
| Bay | Diinsoor | -38% |
| Bay | Qansax Dheere | -17% |
| Gedo | Baardheere | -16% |
| Gedo | Luq | -15% |
| Gedo | Doolow | -12% |

[44] Source: FSNAU, Food Security and Nutrition Assessment, July 2022.
[45] Source: Source: Somalia Food Security and Agriculture Cluster (FSAC) & TWG Humanitarian assistance April – July and plans Aug – Dec 2022.
[46] Source: CCCM managed site service monitoring in Baidoa, July 2022 figures.
[47] Source: Somalia Food Security and Agriculture Cluster (FSAC).

July[48]. The almost doubling level of HFA did not reverse the trend of steady deterioration since December 2021, only impeding it from reaching the most extreme value for a significant magnitude of population. For the projection period, an alarming pipeline break in Cash-Based Transfers (CBTs) is anticipated. This will force a reduction in Baidoa from the around 387,000 people targeted in July - September (47% of the population including IDPs influx up to end of August) and 535,000 targeted in October (62% of the population) to 135,000 and 108,000 in November and December (16% and 13% of the population respectively). In Burhakaba, HFA is expected to reach around 110,000 people (64% of the population) in the period August to October, and then drop to less than 10,000 in November and December (representing a coverage of 6% of the population).

[48] Percentage of HFA coverage might not coincide with the FSAC/TWG information, as the population base has been adjusted with IDPs influx (around 600,000 total IDPs at the end of July as opposed to 454,000 considered by the Food Security Cluster/TWG in the IPC analysis). This figure is highly conservative as, in August 2022 alone, about 87,000 people were displaced towards Baidoa district.

| Area | | | Buur Hakaba AP - residents RURAL | Buur Hakaba AP - residents URBAN | Baidoa AP - residents RURAL | Baidoa AP - residents URBAN | IDP RURAL (readjusted for July & August with CCCM July and | IDP URBAN (readjusted for July & August with CCCM July and |
|---|---|---|---|---|---|---|---|---|
| Type of assistance (CASH or in-Kind) | | | >90% cash | | | | | |
| % Kcal received from HFA | | | >70% on average | | | | | |
| Population in worksheets | | | 149,326 | 23,477 | 79,558 | 86,991 | 144,644 | 309,556 |
| HFA ACTUAL DELIVERIES | JANUARY | Population in the area | 172,803 | | 166,549 | | 454,200 | |
| | | # of beneficiaries | - | | 70,277 | | 21,221 | |
| | | % of population reached | 0% | | 42% | | 5% | |
| | FEBRUARY | Population in the area | 172,803 | | 166,549 | | 454,200 | |
| | | # of beneficiaries | 7,473 | | 73,384 | | 37,204 | |
| | | % of population reached | 4% | | 44% | | 8% | |
| | MARCH | Population in the area | 172,803 | | 166,549 | | 454,200 | |
| | | # of beneficiaries | 7,473 | | 109,721 | | 32,325 | |
| | | % of population reached | 4% | | 66% | | 7% | |
| | AVERAGE Jan-March | Population in the area | 172,803 | | 166,549 | | 454,200 | |
| | | # of beneficiaries | 4,982 | | 84,461 | | 30,250 | |
| | | % of population reached | 3% | | 51% | | 7% | |
| | APRIL | Population in the area | 172,803 | | 166,549 | | 454,200 | |
| | | # of beneficiaries | 13,385 | | 145,810 | | 64,094 | |
| | | % of population reached | 8% | | 88% | | 14% | |
| | MAY | Population in the area | 172,803 | | 166,549 | | 454,200 | |
| | | # of beneficiaries | 11,014 | | 189,811 | | 82,893 | |
| | | % of population reached | 6% | | 114% | | 18% | |
| | JUNE | Population in the area | 172,803 | | 166,549 | | 454,200 | |
| | | # of beneficiaries | 7,470 | | 216,869 | | 109,941 | |
| | | % of population reached | 4% | | 130% | | 24% | |
| | AVERAGE april-june | Population in the area | 172,803 | | 166,549 | | 454,200 | |
| | | # of beneficiaries | 10,623 | | 184,163 | | 85,643 | |
| | | % of population reached | 6% | | 111% | | 19% | |
| | JULY (Data collection point) | Population in the area | 172,803 | | 166,549 | | 596,931 | |
| | | # of beneficiaries | 37,666 | | 308,932 | | 69,047 | |
| | | % of population reached | 22% | | 185% | | 12% | |
| HFA PLANS | AUGUST | Population in the area | 172,803 | | 850,480 | | | |
| | | # of beneficiaries | 110,687 | | 400,356 | | | |
| | | % of population reached | **64%** | | **47%** | | | |
| | SEPTEMBER | Population in the area | 172,803 | | 850,480 | | | |
| | | # of beneficiaries | 108,878 | | 383,298 | | | |
| | | % of population reached | **63%** | | **45%** | | | |
| | AVERAGE JULY - SEPTEMBER | Population in the area | 172,803 | | 850,480 | | | |
| | | # of beneficiaries | 85,744 | | 387,211 | | | |
| | | % of population reached | **50%** | | **46%** | | | |
| | OCTOBER | Population in the area | 172,803 | | 850,480 | | | |
| | | # of beneficiaries | 108,482 | | 525,612 | | | |
| | | % of population reached | **63%** | | **62%** | | | |
| | NOVEMBER | Population in the area | 172,803 | | 850,480 | | | |
| | | # of beneficiaries | 9,594 | | 134,566 | | | |
| | | % of population reached | **6%** | | **16%** | | | |
| | DECEMBER | Population in the area | 172,803 | | 850,480 | | | |
| | | # of beneficiaries | 9,594 | | 108,052 | | | |
| | | % of population reached | **6%** | | **13%** | | | |
| | AVERAGE OCTOBER - DECEMBER | Population in the area | 172,803 | | 850,480 | | | |
| | | # of beneficiaries | 42,557 | | 256,077 | | | |
| | | % of population reached | **25%** | | **30%** | | | |

Coverage of IDPs populations in settlements has been barely reaching 20% and the population residing in areas that are considered as hard to reach receive intermittent assistance. The population in completely inaccessible areas is excluded from the target population (considered in need but not computed in the total estimation for the programming).

It has to be noted that there was an effort done by partners to reallocate resources towards Baidoa, which however leaves other at risk areas with reduced plans.

### WASH response

Of the targeted populations for WASH interventions in 2022 at national level[49], the response for emergency water services, sanitation and hygiene has only reached around a third (30%, 29%, and 35% respectively). However, nearly 60% of targeted populations were reached with water supply programmes. According to the Financial Tracking System (FTS)[50], on September 2 2022, the WASH sector was funded at 61%. The WASH response is ongoing with water trucking, water chlorination, tabs and soap distribution.

### Nutrition response

Treatment of Severe Acute Malnutrition, in terms of supply, will be assured without discontinuity. The target for treatment between July 2022 and December 2022 will be about 550,000 children and the RUTF supply between stocks, pipeline and pledges will allow complete coverage.

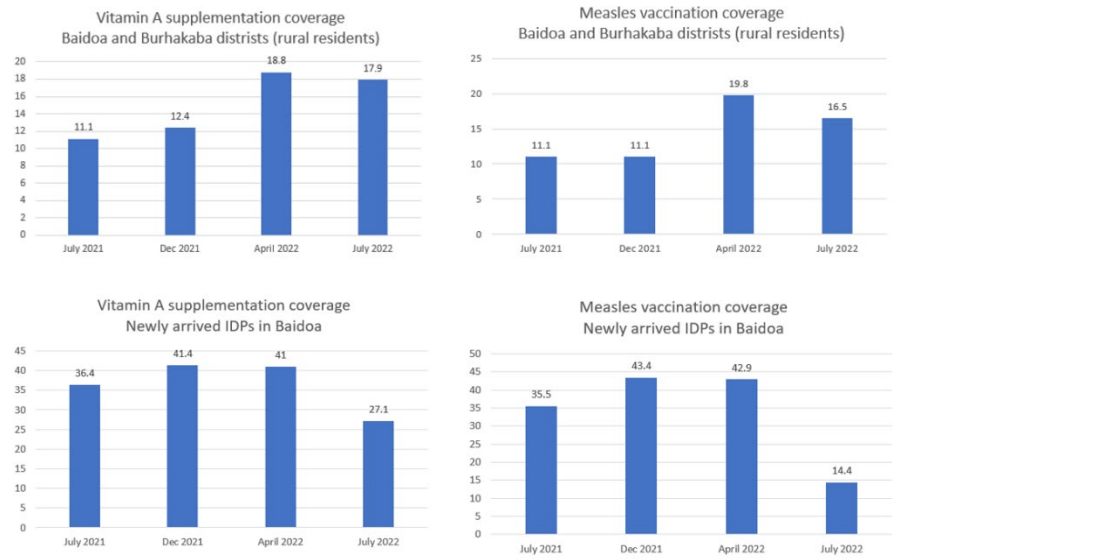
### Health Response

The vitamin A supplementation coverage is extremely poor among the rural Baidoa and Burhakaba populations as well as among the newly arrived IDPs. According to the FSNAU survey of July 2022[51], more than 80% of the children in the resident population did not receive a vitamin A supplementation and almost three quarters of the newly arrived IDP children did not receive a vitamin A supplementation. Although there were relatively high levels of vitamin A coverage between July 2021 and April 2022 among the IDP children near 40%, this has decreased to about 27% in July 2022 for the newly arrived IDPs. The vitamin A coverage among children in the resident population has consistently been poor (less than 20%) over the past two years.

Similar to vitamin A supplementation coverage, measles vaccination coverage remains extremely poor at present among both the residents and IDPs. This is of major concern in this context as there are outbreaks of measles. More than 85% of children of newly arrived IDPs and more than 80% children in the resident population were not vaccinated according to the FSNAU survey of July 2022. Although the measles vaccination coverage among the IDP children was higher (at about 40%) according to previous surveys, this has significantly reduced at present. As for the children in the resident population, it has remained consistently at less than 20%.

According to the CCCM cluster[52], people in only 79% of Baidoa IDPs sites have access to adequate health facilities, and nutrition facilities are reportedly accessible in only 50% of sites. In a recent REACH site assessment survey in old Baidoa IDPs sites[53], it was found that only 56% of assessed households who had experienced the death of a household member in the last three months prior to data collection had sought any healthcare in the two weeks prior to the death. The main reasons for not accessing healthcare were the immediacy of death, services being too expensive, and services being too far away.

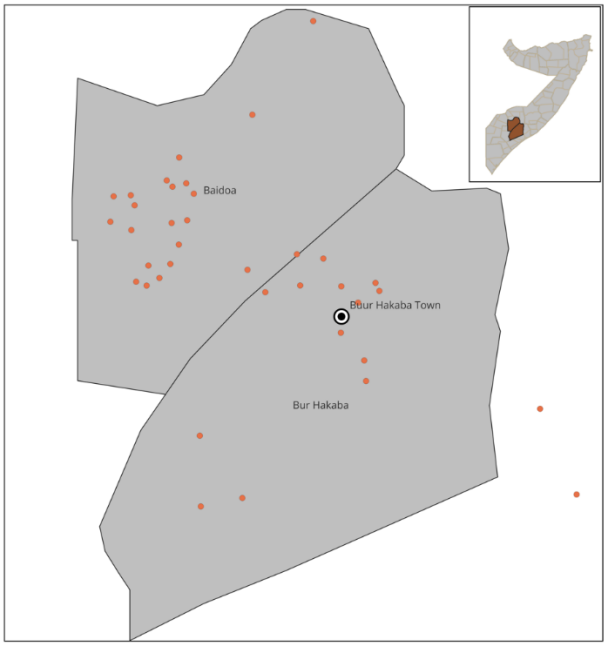
*Graph 41. Vitamin A supplementation and measles vaccination coverage for agropastoral areas (Baidoa and Burhakaba districts) and IDPs settlements in Baidoa (Source: FSNAU)*

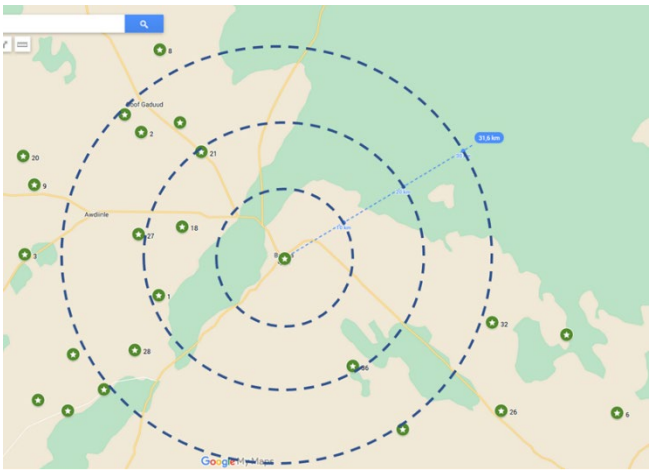



[49] Source: WASH response – From The Drought and Famine Prevention Response Dashboard (Jan – June 2022) - 17 July 2022.
[50] Source: https://fts.unocha.org/countries/206/summary/2022.
[51] Source: FSNAU, Source: FSNAU, Food Security and Nutrition Assessment, July 2022.
[52] Source: CCCM managed site service monitoring in Baidoa, July 2022 figures.
[53] Source: REACH MSNA July 2022, IPDs 34 clusters and 210 observations.

## 12. DATA PLAUSIBILITY CHECKS

*Maps 13 – 14: Clusters from the FSNAU survey (36 clusters, 282 observations)*



### Consistency checks and cross tabulations

*Baidoa and Burhakaba Agropastoral Rural Residents*

GAM by MUAC * Food Consumption Score cross tabulation

| | | Acceptable | Bordeline | Poor | |
|---|---|---|---|---|---|
| GAM based on MUAC | No | 31.1% | 25.0% | 43.9% | 100.0% |
| | Yes | 15.6% | 37.5% | 46.9% | 100.0% |
| Total | | 28.8% | 26.9% | 44.3% | 100.0% |

GAM by MUAC * HDDS cross tabulation

| | | Minimal-Stressed (>4) | Crisis (3-4) | Emergency-Catastrophe (0-2) | |
|---|---|---|---|---|---|
| GAM based on MUAC | No | 79.4% | 20.0% | 0.6% | 100.0% |
| | Yes | 71.9% | 28.1% | | 100.0% |
| Total | | 78.3% | 21.2% | 0.5% | 100.0% |

GAM by MUAC * Household Hunger Scale cross tabulation

| | | None (0) | Stressed (1) | Crisis (2-3) | Emergency (4) | Catastrophe (5-6) | |
|---|---|---|---|---|---|---|---|
| GAM based on MUAC | No | 22.2% | 8.9% | 65.0% | 2.2% | 1.7% | 100.0% |
| | Yes | 18.8% | 12.5% | 59.4% | 3.1% | 6.3% | 100.0% |
| Total | | 21.7% | 9.4% | 64.2% | 2.4% | 2.4% | 100.0% |

GAM by MUAC * rCSI cross tabulation

| | | Minimal | Stessed | Crisis-Emergency | |
|---|---|---|---|---|---|
| GAM based on MUAC | No | 23.3% | 27.8% | 48.9% | 100.0% |
| | Yes | 18.8% | 34.4% | 46.9% | 100.0% |
| Total | | 22.6% | 28.8% | 48.6% | 100.0% |

*Newly arrived IDPs in Baidoa district*

GAM by MUAC * Food Consumption Score cross tabulation

| | | Acceptable | Bordeline | Poor | |
|---|---|---|---|---|---|
| GAM by MUAC | No | 4.1 % | 29.2 % | 66.7 % | 100.0 % |
| | Yes | 1.7 % | 25.4 % | 72.9 % | 100.0 % |
| Total | | 3.5 % | 28.3 % | 68.3 % | 100.0 % |

GAM by MUAC * HDDS cross tabulation

| | | Minimal-Stressed (>4) | Crisis (3-4) | Emergency (<3) | |
|---|---|---|---|---|---|
| GAM by MUAC | No | 55.0 % | 42.1 % | 2.9 % | 100.0 % |
| | Yes | 47.5 % | 44.1 % | 8.5 % | 100.0 % |
| Total | | 53.0 % | 42.6 % | 4.3 % | 100.0 % |

GAM by MUAC * Household Hunger Scale cross tabulation

| | | Minimal | Stressed | Crisis | Emergency | |
|---|---|---|---|---|---|---|
| GAM by MUAC | No | 2.9 % | 11.7 % | 84.2 % | 1.2 % | 100.0 % |
| | Yes | 1.7 % | 6.8 % | 88.1 % | 3.4 % | 100.0 % |
| Total | | 2.6 % | 10.4 % | 85.2 % | 1.7 % | 100.0 % |

GAM by MUAC * rCSI cross tabulation

| | | Minimal | Stessed | Crisis-Emergency | |
|---|---|---|---|---|---|
| GAM by MUAC | No | 0.6 % | 50.9 % | 48.5 % | 100.0 % |
| | Yes | | 52.5 % | 47.5 % | 100.0 % |
| Total | | 0.4 % | 51.3 % | 48.3 % | 100.0 % |

GAM by MUAC * LCS cross tabulation

| | | Minimal | Stressed | Crisis | Emergency | |
|---|---|---|---|---|---|---|
| GAM by MUAC | No | 19.9 % | 64.3 % | 4.1 % | 11.7 % | 100.0 % |
| | Yes | 10.2 % | 67.8 % | 6.8 % | 15.3 % | 100.0 % |
| Total | | 17.4 % | 65.2 % | 4.8 % | 12.6 % | 100.0 % |

| | | Acceptable | Bordeline | Poor | |
|---|---|---|---|---|---|
| How long has your household been living in this settlement? | 1-3 months | 3.8% | 28.8% | 67.3% | 100.0% |
| | 4-6 months | 2.8% | 26.8% | 70.4% | 100.0% |
| | 7-12 months | | 40.0% | 60.0% | 100.0% |
| | 1-3 years | 20.0% | 20.0% | 60.0% | 100.0% |
| | Over 3 years | | 100.0% | | 100.0% |
| Total | | 3.8% | 28.9% | 67.4% | 100.0% |

Time of settlement * FCS cross tabulation

Time of settlement * HDDS cross tabulation

| | | Minimal-Stressed (>4) | Crisis (3-4) | Emergency (<3) | |
|---|---|---|---|---|---|
| How long has your household been living in this settlement? | 1-3 months | 55.3% | 40.9% | 3.8% | 100.0% |
| | 4-6 months | 39.4% | 57.7% | 2.8% | 100.0% |
| | 7-12 months | 80.0% | 20.0% | | 100.0% |
| | 1-3 years | 60.0% | 40.0% | | 100.0% |
| | Over 3 years | 100.0% | | | 100.0% |
| Total | | 52.2% | 44.3% | 3.4% | 100.0% |

Time of settlement * HHS cross tabulation

| | | Minimal | Stressed | Crisis | Emergency | |
|---|---|---|---|---|---|---|
| How long has your household been living in this settlement? | 1-3 months | 3.8% | 10.6% | 83.7% | 1.9% | 100.0% |
| | 4-6 months | | 7.0% | 93.0% | | 100.0% |
| | 7-12 months | | | 100.0% | | 100.0% |
| | 1-3 years | | 40.0% | 60.0% | | 100.0% |
| | Over 3 years | | 50.0% | 50.0% | | 100.0% |
| Total | | 2.7% | 10.3% | 85.6% | 1.4% | 100.0% |

Time of settlement * rCSI cross tabulation

| | | Minimal | Stessed | Crisis-Emergency | |
|---|---|---|---|---|---|
| How long has your household been living in this settlement? | 1-3 months | 0.5% | 52.9% | 46.6% | 100.0% |
| | 4-6 months | 1.4% | 59.2% | 39.4% | 100.0% |
| | 7-12 months | | 80.0% | 20.0% | 100.0% |
| | 1-3 years | 20.0% | 80.0% | | 100.0% |
| | Over 3 years | | 50.0% | 50.0% | 100.0% |
| Total | | 1.0% | 55.3% | 43.6% | 100.0% |

Time of settlement * LCS cross tabulation

| | | Minimal | Stressed | Crisis | Emergency | |
|---|---|---|---|---|---|---|
| How long has your household been living in this settlement? | 1-3 months | 18.3% | 62.5% | 4.3% | 14.9% | 100.0% |
| | 4-6 months | 11.3% | 64.8% | 11.3% | 12.7% | 100.0% |
| | 7-12 months | | 100.0% | | | 100.0% |
| | 1-3 years | 20.0% | 80.0% | | | 100.0% |
| | Over 3 years | | | | 100.0% | 100.0% |
| Total | | 16.2% | 63.6% | 5.8% | 14.4% | 100.0% |

Time of settlement * GAM by MUAC

| | | GAM by MUAC | | Total |
|---|---|---|---|---|
| | | No | Yes | |
| How long has your household been living in this settlement? | 1-3 months | 74.4% | 25.6% | 100.0% |
| | 4-6 months | 73.6% | 26.4% | 100.0% |
| | 7-12 months | 80.0% | 20.0% | 100.0% |
| | 1-3 years | 75.0% | 25.0% | 100.0% |
| | Over 3 years | 50.0% | 50.0% | 100.0% |
| Total | | 74.1% | 25.9% | 100.0% |

## Missing values

There were no missing cases, with all food consumption and livelihood change outcome indicators reported for full sample.

## Correlation

Chi-square N = 293

| | FCS | HDDS | rCSI | HHS | LCS |
|---|---|---|---|---|---|
| FCS | | 0.000 | 0.000 | 0.173 | 0.617 |
| HDDS | 0.000 | | 0.214 | 0.096 | 0.046 |
| rCSI | 0.000 | 0.214 | | 0.018 | 0.005 |
| HHS | 0.173 | 0.096 | 0.018 | | 0.074 |
| LCS | 0.617 | 0.046 | 0.005 | 0.074 | |

Chi-square analysis was conducted for outcome indicators on food consumption and livelihood change. The analysis provides information on convergence of vulnerability within the analysis population. The results of the analysis show a varying degree of convergence between the indicators, with strong correlation between FCS and HDDS and between FCS and rCSI, and a somewhat weaker but still significant correlation between HHS and rCSI, LCS and rCSI and LCS and HDDS. Values of 0.05 of Peason's chi-square or lower show a statistically relevant correlation.

Spearman's rho correlation N = 293

| | FCS | HDDS | rCSI | HHS | |
|---|---|---|---|---|---|
| HDDS | 0.378** | | | | |
| rCSI | 0.265** | 0.075 | | | |
| HHS | 0.13* | 0.125* | 0.017 | | |
| LCS | 0.017 | 0.118* | 0.023 | 0.058 | |

* Correlation is significant at the 0.05 level (2-tailed)

** Correlation is significant at the 0.01 level (2-tailed)

Based on Spearman's rho correlation analysis there is a lot of variance in correlation between indicators. Correlation is highly significant between FCS and HDDS, and between FCS and rCSI. Correlation is also significant between HHS and FCS, between HHS and HDDS and between LCS and HDDS.

## ANNEX 2 – Famine Review Committee Terms Of Reference (TOR)

### Review on the Somalia IPC Acute analysis, covering the period July to December 2022

### I. Introduction and Purpose

#### A. Introduction

This document outlines the Terms of Reference that will guide the review of the IPC Acute analysis conducted in Somalia from to from August 3 – 5 2022[54]. Previously, four IPC analyses were conducted in the past year (August 2021, January 2022, March 2022 and May 2022), reflecting a higher frequency than usual (typically twice a year) due to the rapid deterioration of the food security and nutrition situation. The IPC analysis conducted in May raised particular concerns for Burhakaba and Baidoa districts (in Bay region) where acute malnutrition had passed Famine (IPC Phase 5) thresholds and mortality had reached Emergency (IPC Phase 4) thresholds. These areas were not classified, as additional data collection was required to ascertain whether, in the projected period, the most likely scenario would result in an IPC Phase 5 (Famine) classification. Following the IPC analysis in May, FSNAU collected new data, prioritizing the above-mentioned areas, which allowed the Somalia IPC Technical Working Group (TWG) to conduct an IPC analysis for these two areas in the first week of August. This resulted in the TWG's request for the activation of a Famine Review for the three areas (Agropastoral areas in Baidoa and Burhakaba districts, and newly arrived IDPs in Baidoa district).

This review will consist in the following steps: (i) IPC Global Support Unit (IPC GSU) and Partners' review in preparation of the IPC Famine Review Committee (FRC)'s review; and (ii) Review by the Famine Review Committee. The Famine Review started with the objective of either confirming or disproving Famine/Famine Likely classification for these areas in the projection period (October – December 2022). The Famine Review Report will be published at the end of August/early September. The IPC analysis for the rest of the country started on 15 August and will be completed on 25 August and is expected to be published in early September.

The review by the IPC Famine Review Committee together with the preparation work undertaken by the IPC GSU-led multi-partner team is a neutral and independent process aiming at supporting IPC quality assurance and helping to ensure technical rigor and neutrality of the analysis. The activation of the IPC FRC provides an additional validation step before the release of Country IPC results[55]. The FRC Review is a specific procedure activated in order to confirm or disprove Famine classifications when IPC AFI country analyses show a potential or already identified situation of Famine.

Famine Reviews are triggered when at least one of the following conditions is met: (i) the country IPC TWG reaches the conclusion that at least one area is classified in IPC AFI Phase 5 Famine or Famine Likely; or (ii) in case of a breakdown in technical consensus within the country IPC TWG regarding possible Famine or Famine Likely classification; or (iii) in case the IPC GSU, acknowledging the presence of evidence above IPC AFI Phase 5 thresholds, decides to activate the Famine Review; or (iv) in case, for similar reasons, an IPC Global Partner officially requests the IPC GSU to activate it[56]. This specific review is activated upon request of the Technical Working Group, considering the high prevalence of population estimated to be in IPC Phase 5 (Catastrophe) in the current period and a Famine classification in the projected period for the following areas: Agropastoral areas in Baidoa and Burhakaba districts, and newly arrived IDPs in Baidoa district. A process of Review by the FRC is set up according to the IPC Famine Classification Special Additional Protocols in Manual IPC V3.1. The process is composed of two phases: Phase 1 - Preparation of the FRC review by the multi-partner team and Phase 2 - FRC Review.

The FRC review and consultations are to remain confidential and internal to the members of the IPC FRC, and are not to be publicly released, by the IPC FRC nor the IPC GSU. An IPC FRC report will be shared with the country and subsequently publicly release in the IPC website. The ownership, final decision and the public release of the IPC analysis remains the responsibility of the country's IPC Technical Working Group (TWG).

#### Purpose

Phase 1 - The purpose of the ***preparation of the IPC FRC Review by the IPC GSU-led multi-partner team*** is to support IPC quality assurance and help ensure technical rigor and neutrality of the analysis. This exercise is done prior to FRC and provides technical inputs, structuring the information needed by the FRC to assess the validity of the analysis results in relation to Famine classifications.

Phase 2 - The ***IPC FRC review*** is an important mechanism of the global, regional and national partnership and governance structures. The committee is formed as needed and on demand and its activation represents an additional validation step before IPC results are

[54] AFI Analysis for the Agropastoral resident populations in Baidoa and Burhakaba districts and newly arrived IDPs in Baidoa district.
[55] Part 2A – Function 1 Building Technical Consensus, IPC Technical Manual Version 3.1.
https://www.ipcinfo.org/fileadmin/user_upload/ipcinfo/manual/IPC_Technical_Manual_3_Final.pdf .

[56] [3] IPC Famine Guidance Note can be found here: https://www.ipcinfo.org/fileadmin/user_upload/ipcinfo/docs/IPC-Guidance-Note-on-Famine.pdf

released to clear the IPC Phase 5 classification (i.e. IPC Phase 5 Famine or Famine Likely) estimated to support quality assurance and technical consensus building. The committee is to be convened by the request of the IPC Global Support Unit (IPC GSU).

**The preparation of the FRC Review will take place from August 8 to 12, 2022.**

## II. Composition of the Teams, Tools and Tasks

### A. Composition

**Phase 1 - Composition of the FRC Preparation Team.**

The FRC Preparation Team is composed by Senior officers from the IPC GSU and IPC global partners who, to the extent possible, are not involved in the analysis process. Under the leadership of the IPC Global Programme Manager, the team will be composed as follows:

- 3 Food Security Officers and 1 nutrition officers from IPC Global Partners and 2 Food Security Officers and 2 Nutrition Officer from IPC GSU who are responsible for the review of analysis worksheets and completion of the Matrix for the Preparation of the FRC.
- 2 Food Security Officer from IPC GSU who will coordinate the FRC preparation, link with the TWG, and ensure secretariat of FRC Review and report preparation.

**Phase 2 - Composition of the IPC Global Famine Review Committee (IPC FRC)**

The IPC Global Famine Review Committee (IPC FRC) will be composed by five independent technical experts. Members are identified at the activation of IPC FRC and selected based on the following criteria:

- Globally recognized as leading technical food security and nutrition experts
- Neutral to the IPC outcome, who have not participated in the analysis under review

The review process may include additional consultations with TWG and key informants to increase technical understanding and background context. This can be organized by the IPC GSU and should ensure a diversity of stakeholder organization representation (National Government, Country Technical Experts, and Partner Agencies). IPC GSU serves as the chair, secretariat and coordination support to the IPC FRC.

### B. Tools

**Phase 1 – Tools for the Technical Support in preparation of the FRC Review.**

The preparation of the FRC Review of the IPC Acute analysis will be conducted by applying the IPC FRC Matrix Tool, and IPC Famine Classification Special Additional Protocols.

**Phase 2 - Tools for the IPC Global Famine Review Committee (IPC FRC)**

The IPC Global Famine Review Committee will use the FRC Matrix Tool, which will have been partly filled by the FRC Preparation Team as a basis for the required Review, but will nonetheless have access to all IPC Analysis packages including the analysis worksheets and raw data available. The IPC FRC will be asked to summarize their feedback within the Matrix for the preparation of the FRC Review and a short report will be produced with support from the IPC GSU secretariat to summarize conclusions and recommendations.

### C. Documentation needed

As part of this standard process, The Technical Working Group is requested to confidentially share key information to allow the FRC to conduct the review. This includes:

1. The worksheets of the areas requested to be reviewed by the FRC,

2. The population estimates per phase for all areas covered by the TWG analysis. These are required for the FRC to contextualize the situation of the specific areas under review into the broader IPC analysis at country level.

3. The area population, possibly indicating resident and IDP (this latest can be an estimation of actual)

4. The IPC map showing the TWG classification for all areas covered by the TWG analysis. The entire map is required for the FRC to contextualize the situation of the specific areas under review into the broader IPC analysis at country level.

4. The raw data that allowed to produce the Food Security related indicators as well as the raw data from Nutrition SMART surveys that was used in the IPC classification for the areas under review. This is of critical importance as this will allow the FRC to assess by themselves both the reliability and validity of the data that feeds the IPC.

5. The repository of all the evidence employed in the classification of the area under review. This should include all reports and evidence employed in the analysis. WASH and Health reports are also requested for these areas if available. Any additional report from any partners or from the TWG supporting better contextualization will be welcome.

6. Information regarding Humanitarian Food Assistance (actual tonnage distribution, typology of beneficiaries, targeting method, etc..).

All the documentation will be treated confidentially.

### Tasks

#### Phase 1 – Task of the FRC Preparation Team.

This exercise consists in a technical desk review of the IPC Acute analysis conducted in Somalia from August 3-5 2022, in preparation of the FRC with the purpose of assessing evidence reliability, the confidence level of the analysis and the convergence of evidence for the areas identified as most severe. The tasks to be fulfilled by the FRC Preparation Team for a selected number of areas and will consist in the review the following:

- Convergence of evidence
- Evidence Reliability
- Confidence Level of the analysis based of the evidence reliability criteria
- Decision whether an area requires further review by the FRC
- Highlight of main issues for the FRC to review

#### Phase 2 – Tasks of the IPC Global Famine Review Committee (IPC FRC):

During their review, the FRC will assess the time and method validity of the evidence supporting the IPC TWG classification, appreciate the interpretation and documentation of evidence and analysis and the overall conclusion on Phase classification and population figures based on the parameters presented in this guidance note. The FRC will then conclude by producing recommendation to the TWG, including confirming or disproving Famine classifications.

## III. Process and Timeline

The proposed timeline for the Quality Review process is presented below.

| Step | Activity description | Dates |
|---|---|---|
| 1 | IPC Somalia TWG communicates to GSU the request for a Famine Review. The FRC is activated. | *August 5th 2022* |
| 2 | IPC Somalia TWG shares with the coordinator of the FRC preparation team the worksheets, classification and population tables for the areas identified for the review. Along with any additional | *August 5th – 31st 2022* |
| 3 | The FRC Preparation Team conducts the desk review of the Analysis Worksheets for the selected areas, completes the FRC Matrix Tool and identifies the main areas requiring FRC attention and shared the FRC matrix with the FRC, as they get completed. | *August 8th – 12th 2022* |

| | | |
|---|---|---|
| 4 | Teleconference are organized during this process between the FRC Preparation Team, the TWG and the FRC. . | *August 11th – 12th 2022* |
| 5 | The FRC conclude the review and share the FRC report with the Somalia TWG. | *September 1st, 2022* |