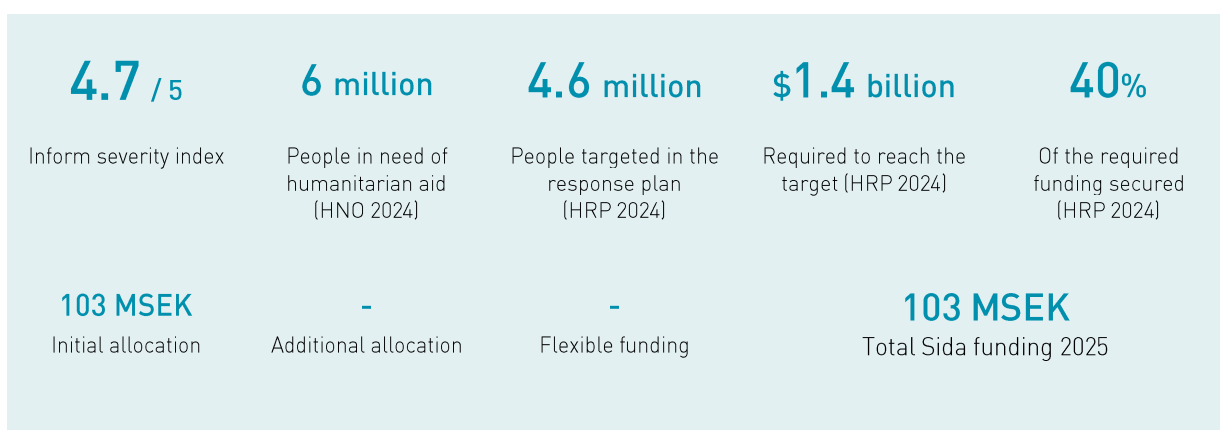


1. Crisis overview



Somalia remains one of the most severe and protracted humanitarian crises in the world. Drought, widespread insecurity, the internal conflict with Al-Shabaab (AS), flooding and extreme poverty has resulted in mass displacement, emergency levels of food insecurity and alarming rates of malnutrition. Violence against civilians is common, including sexual and gender-based violence (GBV). Somalia ranks first in the Inform Risk Index, meaning that it is extremely vulnerable and any additional shock would have a severe impact on the needs of the population. After the extreme drought in end 2022 and early 2023 which increased food insecurity to such levels that the risk of starvation was looming, Somalia struggled with massive floodings during the *El Niño* in the second half of 2023. 2024 has been somewhat less intense, but floodings were also witnessed during the *Gu* season (March-June) in the first half of 2024. People are still struggling to recover from the combination of drought and flooding and there are worrying indications of another drought during the next *La Niña* in late 2024 and early 2025.

Security remains one of the key concerns in Somalia, also affecting access to people in need of humanitarian assistance. The withdrawal of the African Union's Mission African Transition Mission in Somalia (ATMIS) was scheduled to be completed by the end of 2024. However, in November 2024, the UN Security Council decided to prolong the UN mandate, under a new name – UN Transitional Assistance Mission in Somalia (UNTMIS). UNTMIS is responsible for the two-year phased transfer of UNSOM's functions to the United Nations Country Team by October 2026. It is still unclear what this transition will entail in regards to potential security gaps for the Somali people, the UN and partners, as well as potential of increased violence in different parts of the country.

2. Humanitarian needs & affected population

In the Humanitarian Needs and Response Plan (HNRP) for 2025, 6 million are identified as people in need of humanitarian assistance. Of these, 4.6 million are targeted in the HNRP with a funding requirement of \$1.4 billion. In the latest Integrated Food Security Phase Classification (IPC) review, released in September 2024, it is estimated that 4.4 million will experience crisis levels of food insecurity (IPC Phase 3 or higher) from October-December, out of whom one million experience emergency levels (IPC Phase 4). Projections show an 80 per cent chance of *La Niña* conditions, which will likely result in drought including below average *Deyr* rains (October-November) leading to increased food insecurity. Currently, it is estimated that 1.6 million children are facing acute malnutrition, including over 403,000 who are assessed to be severely malnourished. Increased prevalence of communicable diseases, including cholera and measles, driven by low vaccination rates, lack of safe and potable water, and recurring flooding, directly contributes to rising levels of acute malnutrition. In 2024, the number of reported cases of AWD/cholera was three times higher than 2023.

Prolonged drought and continuous insecurity have led to massive internal displacements, with 3.9 million people currently displaced in Somalia, including 427,000 displacements recorded in 2024 alone. The majority of Internally Displaced Persons (IDPs) reside in urban areas, and the majority of IDPs from previous crises have not returned to their communities and it is likely that any new crises will have similar outcomes. Women, children and minority groups in IDP camps remain particularly at-risk of malnutrition, disease outbreaks, exploitation and abuse.

Women and children make up over 80 per cent of the displaced population and are often forced to trek long distances to access water and shelter, making them more vulnerable to GBV. Boys, on the other hand, are more at-risk to be recruited into armed groups. In Somalia's clan-based society, minorities often face challenges accessing assistance, especially in IDP settings where local leaders try to manipulate the response and enforce control over delivery.

Large parts of the country are under control of AS, where access is particularly challenging. Gaining a clear understanding of humanitarian needs in these areas is challenging, with few humanitarian actors able to ensure continued and unimpeded access to vulnerable populations in parts of these areas. Security and access challenges make operations very expensive, and dangerous for humanitarian workers. Most of these areas are assessed as hard-to-reach, both considering the limited humanitarian space and ongoing conflict between AS, clan militias and the federal government. However, information received from IDPs displaced from these AS-controlled regions provide a grim picture about the needs and protection concerns.

Drought, followed by extensive flooding, has had devastating consequences on livelihoods for farmers and herders, a sector that provides employment for a majority of Somalia's population. This in combination with low domestic capacities to cope with any shock leaves the whole country at risk of deteriorating food insecurity. Sustained levels of humanitarian assistance are therefore required to avoid a further deterioration in food insecurity and malnutrition.

3. The humanitarian response

Many lessons were learnt during the System Wide Scale Up in 2022/2023 that also included the Secretary General's report on Post Distribution Aid Diversion (PDAD). An emphasis on implementing PDAD recommendations have been in focus for the Humanitarian Country Team (HCT), including efforts such as moving to vulnerability based targeting and improving monitoring procedures. Community feedback mechanisms (CFM) were also identified in the PDAD as a weakness in the humanitarian response. As mentioned above, Somalia is a challenging context with high access constraints which, coupled with other weaknesses identified in the PDAD report, suggests that reporting of irregularities is inadequate. Thus, continued focus on strengthening CFM should be a priority for the wider humanitarian and development community moving forward.

Other lessons learnt showed the need for continued focus on the Integrated Response Framework with its concept of first line and second line responses in displacement and hard-to-reach areas, and the relevance of evidence-based geographical prioritisation. These efforts have been in focus for the HCT and Humanitarian Donor Group (HDG) during 2024 and will continue to be in 2025.

The coordination structure in Somalia is undergoing a restructuring exercise with focus on streamlining the system and creating opportunities for an efficient and qualitative response. The HNRP for 2025 include a stronger focus on the relevance and capacity of Area Based Coordination (ABC), an operational coordination platform at local level, as well as strong normative capacities in the clusters at national level.

The global freeze and scale-back of US humanitarian funding announced in January 2025 is having major consequences on aid operations, and the HCT is adapting the response in light of the new funding landscape. This processes has been led by the Resident Coordinator/Humanitarian Coordinator (RC/HC) and has included consultative meetings with various stakeholders. The main aspects of the re-prioritisation process in Somalia are clear focus on ten priority districts, and focus on four life-saving clusters (WASH, health, food security, and nutrition).

The capacity of national and federal government institutions to support crisis-affected people remain low across Somalia. Many parts of national structures are dependent on international funding. The decentralised federal system of governance, and considering that large parts of the country is controlled by AS, also hampers the government's ability to reach all parts of the country even if adequate resources and capacity would be available.

During 2024, the US has remained the largest donor to the humanitarian response, contributing about 44 per cent of total funding. The EU and Germany contributes about 10 per cent of total funding, while Sweden ranks as the sixth largest humanitarian donor country. Food security is the most funded sector receiving about 42 per cent of funding, with the second largest sector being Nutrition at only 7.5 per cent.

4. Sida's humanitarian allocation

A continued decrease in humanitarian funding for Somalia is anticipated, and also showcased in Sida's initial allocation for 2025. Thus the already begun process of streamlining partnerships, focusing on urgent life-saving assistance, and partners that have the capacity to deliver multi-sectoral response in large parts of the country both to IDPs, newly displaced, and hard-to-reach populations before they displace, remains relevant for 2025. As presented in the table below, all partners, except for FSNAU, will provide multi-sectoral response. However, some focus can be seen on sectors such as WASH, nutrition and protection when considering the specific capacities of selected partners.

INITIAL ALLOCATION (SEK)		
PARTNER	SECTOR	INITIAL ALLOCATION
Action Against Hunger	Multisector	20,000,000 ¹
Danish Refugee Council	Multisector	30,000,000
FAO/FSNAU	Food security	3,000,000
ICRC	Multisector	15,000,000
Somalia Humanitarian Fund	Multisector	20,000,000
UNICEF	Multisector	15,000,000
TOTAL		103,000,000

5. Partner assessment

Action Against Hunger (AAH) is receiving multiyear funding from Sida for its full country programme. AAH is working through a multisectoral approach with focus on Nutrition, Health, WASH and Food security. Previous experience has shown that AAH is a valuable partner working in areas with limited humanitarian coverage, and in a coordinated manner with other actors. As the humanitarian response is in an evolving process in Somalia, AAH has been in the forefront in these changes and providing evidence for what works and not for the whole humanitarian community.

Danish Refugee Council (DRC) has been in the forefront of improving the humanitarian response in Somalia, for example by developing the integrated response framework, strengthening coordination efforts, and moving to vulnerability based targeting. Sida assess DRC to be a strong actor in Somalia and thus suggest to provide DRC Somalia with programme-based funding in 2025. DRC's overall objective is to support vulnerable IDP

¹ Of which SEK 10 million already committed in 2024

households (HHs) and communities affected by conflict and natural disasters to meet life-saving basic needs. Sectorial focus is put on CCCM, protection, WASH, shelter/non-food items, emergency response and economic recovery. DRC works in various parts of the country, with a strong focus on areas identified as those with highest level of needs in the HNRP.

FAO/Food Security and Nutrition Analysis Unit (FSNAU) the Food Security and Nutrition Analysis Unit (FSNAU) hosted in FAO provides critical information and analysis to guide the overall humanitarian projection and response related to Food Security. FSNAU is responsible for regular IPC assessments which is of utmost importance in a country prone to drought, famine and high levels of food insecurity. In 2025, discussions with development colleagues at the Swedish Embassy in Nairobi will be conducted to explore possibilities to include this support under the bilateral strategy.

International Committee of the Red Cross (ICRC) will provide emergency assistance, promote and monitor international humanitarian law, restore contact between family members separated by conflict and continue to reinforce its engagement with authorities, weapon bearers and civil-society groups. ICRC works closely with and supports the Somali Red Crescent Society that operates across Somalia. Sida considers ICRC's added value as being able to deliver assistance to parts of the country where others are not present, as well as its unique mandate. During 2025 Sida will also implement its pilot in risk management together with ICRC in Somalia.

Somalia Humanitarian Fund (SHF) delivers an integrated response through its standard and reserve allocations. The SHF target under-served and hard-to-reach areas through an integrated response across clusters and by complementing other funding sources in support of a stronger collective response. The SHF allocates a significant part of its' funds to national humanitarian actors, which also contributes to the localisation agenda. Sida is currently a donor representative in the Advisory Board and will focus its engagement on strong risk management, monitoring and evaluation processes considering the high number of projects in difficult circumstances which Sida assess to increase the risk level of this contribution.

United Nations Children's Fund (UNICEF) delivers life-saving health, nutrition, education, WASH and child protection across Somalia with a strong focus on hard-to-reach areas. UNICEF leads the WASH and Nutrition Clusters and the Child Protection Area of Responsibility and co-leads the Education Cluster. In addition, UNICEF prepositions emergency supplies for the entire response in nine hubs. The worrying trend regarding prevalence of AWD/cholera is anticipated to be a focus of UNICEF's humanitarian action for children (HAC) in 2025.

6. Sida's past humanitarian support

Recent events, including significantly increased humanitarian needs and risk of famine in late 2023, as well as steady decrease in humanitarian funding has pushed humanitarian actors to prioritise the most affected geographical locations and populations. Sweden and other donors' humanitarian support have had to focus more sharply on direct life-saving support. Previously Sweden and others have focused on recently displaced populations in urban areas. However, lessons learned have showed the need to scale-up the provision of life-saving assistance in hard-to-reach rural areas to alleviate suffering, save lives and reduce the risk of displacement by limiting the pull factor of humanitarian assistance around urban areas.

Lessons learned from the scale-up of the famine prevention in 2022/2023 as well as flood response in 2023/2024 has showed that local coordination through Area Based Coordination (ABC) structures with a direct link to decision-making in Mogadishu is necessary to provide relevant and timely response. It has also shown the necessity to assure the implementation of the integrated response framework as the lack of presence of partners in many locations increases the necessity for each partner to cater to a range of needs. The integrated response framework also has the possibility to provide more efficient response.

Sida will continue to re-prioritise its' partnership for 2025 based on the effectiveness of the partners' ability to shift their operations based on the change of needs, including targeting, contribution to protection outcomes and delivery of integrated services, while upholding a focus on meeting the needs where people are, in order to limit the pull-factor to IDP camps throughout the country.

7. Synergies with other strategies

The fact that Somalia has been in a protracted crisis for over three decades with consistently high levels of humanitarian need, coupled with the trend in reduced humanitarian funding, clearly underscores the need for a Humanitarian-Development-Peace (HDP) nexus approach. As financial flows decrease, humanitarian action will need to increasingly focus on the strictly life-saving aspects of programming, meaning there is growing need for development actors to help build resilience at community level, and to help reduce (future) humanitarian needs.

Somalia is experiencing increased and intensified cyclic climate-related events in the form of drought, flooding and cyclones, now several shocks per year instead a few per decade as earlier. Evidence from FAO Somalia shows that every 1 USD spent to protect rural livelihoods saves around 10 USD in humanitarian food assistance. Both development and humanitarian actors are working more preventive ahead of shocks and focus on strengthened resilience of households, which has led to fewer deaths during the recent drought and flooding periods.

There are several strategic documents which inform and guide the HDP approach in Somalia. Among these are the Somalia National Transformation Plan (2025-2029), the 2021-2025 UN

Sustainable Development Cooperation Framework 2021-2025 (UNSDCF), and the 2025 HNRP. Many donors have incorporated durable solutions, anticipatory action and resilience in the development cooperation in Somalia.

The Swedish bilateral development cooperation strategy 2018-2022, extended in 2023 and then again in 2024, includes resilience-building and complement humanitarian action across different sectors. One challenge since 2023 has been the fact that the bilateral strategy has twice been extended on a 12-month basis. This has limited the ability to work long-term in general.

One example of a successful linkage between the humanitarian support and bilateral strategy is FAO Building Resilience in Middle-Shabelle (BriMS) which initially focused on water and flood management for increased agriculture productivity among the riverine areas to improve food security and resilience towards recurring floods and drought. Additional support was given for recovery in the aftermath of El Niño and strengthened weather data collection by Somalia Water and Land Information Management (SWALIM) which informs the humanitarian response.

The bilateral strategy also supports two NGO resilience consortia, Somali Resilience Program (SomReP) and Building Resilience in Somalia (BRCiS). Both aim to strengthen resilience of most vulnerable households and some consortia members are humanitarian strategic partners of Sida, such as DRC, ACF and NRC. These two consortia provide direct linkages between Sida's development and humanitarian support, both in terms of sectoral focus and choice of implementing partners.

A large-scale health and SRHR project with Save the Children running from 2024-2027 also has a clear resilience strengthening approach. Finally, the World Bank is one of the largest partners in the strategy portfolio, supporting not only state-building but also projects within the areas of resilience, agriculture and WASH.

Regarding other strategies, the Early Warning 4 All initiative supported by Sida's global strategy is implemented in Somalia by the UNDP – for improved early warning messaging ahead of disasters to reduce the humanitarian impact and people in need. UNDP is also supported by the bilateral strategy for strengthened capacity of authorities on local level in disaster risk reduction.

The Strategy Plan for 2025 is intentionally vague given the lack of clarity for next year. Once a decision is taken by the Swedish government, the plan will be updated, although there is an overall recognition that Sweden's development assistance will need to continue to focus on strengthening communities' and individuals' resilience to withstand shocks.

8. Humanitarian coordination & engagement

Humanitarian agencies are organised and coordinated within the cluster system under the leadership of the HC and the HCT. The United Nations Office for the Coordination of

Humanitarian Affairs (OCHA) coordinates and monitors the humanitarian response through the cluster system and ABCs in hot-spot areas. Donors coordinate their response and key priorities within the HDG, which is currently co-chaired by ECHO and the Netherlands who also represent the donors at the HCT. The HDG also coordinates on measures to address PDAD, and how to best support partners to improve their mitigation measures for aid diversion.

UN agencies and INGOs have limited presence on the ground but are actively working to increase their field presence. Sweden supports this effort through MSB by developing the UN hub in Dolow together with WFP. During 2024 there has been a growing consensus that AS will remain a powerful force in the country. As part of this acknowledgment the UN has set up a working group to strengthen the reach and access of UN agencies in particular, which is also likely to enhance access of other partners. During this exercise, the UN has identified how the role and function of peacekeeping, development and humanitarian parts of the UN have been intertwined over a period of time, hampering the UN's ability to act according to the principle of neutrality. There is general acknowledgement that UN and others need to think and act differently in Somalia in order to be true to the humanitarian principles and be able to improve access to vulnerable populations. This work will most likely continue in 2025 and should be supported jointly with other donors.

Coordination with local organisations has increased over the last couple of years, especially with minority rights organisations that are also represented at the HCT. Although overall coordination has improved, there is still work that needs to be done at the implementation level. Organisations, agencies, clusters and Working Groups need to step out of their silos and work in an integrated response, which has time and again proven to be most effective. Efforts to implement Area-Based Coordination have proven efficient in the local context. Efforts to join up the coordination structure with ABCs and clusters for an efficient response should continue in 2025. There is a suggestion to include Somalia in OCHA's Flagship Initiative (FI) in 2025 which will affect how coordination is structured.

The Somali government and federal authorities are coordinating with UN and other parties at varying levels. Some issues still remain in regard to interference with targeting by the local government and gate keepers and imposed levies on humanitarian goods. However, the Somali government has been supportive in addressing challenges and implementing recommendations from the PDAD report. Even though progress has been seen, continued efforts by HCT and HDG to advocate for a principled humanitarian response will be a priority. In addition, Sweden will continue to advocate for safeguarding of the humanitarian principles, including the centrality of protection.

ⁱ The 2025 initial allocation of humanitarian funding is based on Sida's humanitarian allocation analysis methodology. The analysis reflects the current humanitarian situation across crises and is being updated continuously with the latest available data. The information in the HCA is based on reports, data, and information from partner organisations and other entities, as well as observations from field visits and dialogue with partners.