

VOICES OF RESILIENCE:

A Multisectoral Approach
to Combatting the Hunger
Crisis to Drought-Affected
Communities in Somalia

Stories of Change from Save the Children's
USAID/BHA Funded Program in Somalia



Save the Children



Cover photo: The USAID-funded program is a multi-sectoral humanitarian aid program implemented by Save the Children in Somalia. The program aimed to aid vulnerable communities affected by conflict, displacement, and natural disasters, with a focus on six key sectors: health and nutrition, child protection, food security and livelihoods, water, sanitation, and hygiene (WASH), and emergency response.

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FOREWORD

This booklet encapsulates the impactful stories emerging from Save the Children Somalia programs funded by USAID-BHA, offering a pragmatic look at its role in confronting hunger crises. It sheds light on the program's interventions, spanning education, health, nutrition, water, sanitation, and food assistance, emphasizing the importance of multi-sectoral approaches in addressing complex challenges.

With Save the Children Somalia team working side by side with communities to mitigate the effects of food scarcity and malnutrition. Their commitment has been a driving force behind the positive changes documented in these pages.

A sincere acknowledgment goes to our donor BHA-USAID, whose crucial contributions have made these initiatives a reality. Their foresight has empowered Somali communities to forge a more resilient path forward.

These narratives, rooted in real-life impact, underscore the tangible outcomes of strategic investments. From healthcare accessibility to nutrition initiatives, and from water and sanitation projects to food assistance programs, each story adds a layer to a comprehensive response to hunger crises.

As we delve into these accounts, we're reminded that collective action, resilience, and practical solutions are key in navigating challenges. This booklet is a call to join forces in supporting ongoing humanitarian endeavors in Somalia and beyond, recognizing that even in adversity, practical solutions can pave the way for a brighter future.

Mohamud Mohamed Hassan
Save the Children Somalia,
Country Director.



SUMMARY

This booklet is a powerful compilation of success stories that highlight Save the Children Somalia Integrated Program's significant role in combating hunger crises in Somalia. Each narrative underscores the program's transformative influence on children and families, demonstrating how multi-sectoral interventions are crucial to mitigating the consequences of food scarcity and malnutrition.

The dedication and commitment of Save the Children Somalia team, as well as the resilience and determination of the communities they serve, are evident in the

stories within this booklet. The team has worked tirelessly to provide life-saving health and nutrition services, protect children from violence and exploitation, enhance food security, improve access to safe water and sanitation facilities, and provide swift assistance to communities affected by crises.

We hope these success stories will inspire others to support humanitarian efforts in Somalia and around the world. They are a reminder that, even in the face of adversity, there is always hope for a brighter future.

OUTCOME A HEALTH

Analyzing the Overview

Access to healthcare and nutrition services is critical in the fight against hunger, especially in areas affected by drought. These services are essential in preventing malnutrition and improving the overall health of the population, making them more resilient to food insecurity.

This health-oriented initiative is in line with Strategic Objective 2 of the 2022 Humanitarian Response Plan, which aims to sustain the lives of 5.5 million individuals requiring humanitarian aid across seventy-four districts. The goal is to ensure safe, just, and dignified access to livelihoods and crucial services by the conclusion of 2022.

In several regions of Somalia, women and children are plagued by limited access to fundamental health services, resulting in unnecessary hardship. Faduma, a mother of seven from Baidoa, experienced this challenge firsthand. Thankfully, the Bardale Maternal and Child Health (MCH) Center provided free access to critical maternal, neonatal, and child health services, resulting in improved health and prosperity for both Faduma and her fellow mothers.



THE IMPORTANCE OF MATERNAL AND CHILD HEALTH CENTERS IN DEVELOPING COUNTRIES: FADUMO'S STORY

Fadumo* is a mother of seven who resides in Baidoa. Three of her children were born at the Maternal and Child Health (MCH) center, which is supported by Save the Children. During her pregnancies, Fadumo received vaccinations, medication, and all the necessary care required, thanks to the center's top-quality medical staff, including midwives.

“Following the birth of my child, I received breastfeeding awareness, a mosquito net, and all necessary vaccines were administered to my newborn. Regular sessions were held to educate mothers on the importance of breastfeeding and vaccines for children under five years of age. Additionally, we were taught about positive parenting, which provided invaluable guidance on raising healthy and happy children.”

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Fadumo and her family have benefitted greatly from the MCH center. Not only did the center provide crucial supplies such as oats, vaccines, and milk cans during Fadumo’s pregnancy, but they also offered continued assistance for all her children’s health. In the event of malnutrition, the center provided nutritional products to support the children’s well-being.

Malaria medication, mosquito nets, and nutritional syrups are also provided by the center to ensure the children receive the necessary nutrition and medication.

“ I cannot speak highly enough of the MCH center and its exceptional midwives for their crucial role in delivering my three youngest children. The medical care provided by the Save the Children-supported MCH was vital to ensuring a smooth pregnancy and healthy development of my children. Without their assistance, I could not have overcome the numerous obstacles that were presented, and my children would not have received the necessary medical attention. ”

The MCH Center is dedicated to providing a variety of services to the community without any charge and employees go above and beyond to ensure that those in need receive high-quality care.



*Names have been changed to protect identity

“ We are truly appreciative of their hard work and commitment. Looking towards the future, we hope that the center will continue to expand their offerings to help even more people. ”

FACTS & FIGURES

COMPREHENSIVE HEALTHCARE PROJECT RESULTS

The project made significant strides in improving healthcare access, as 63% of beneficiaries now live within a 16-minute walk to the nearest health facility. Private clinics and pharmacy reliance have reduced from 52.6% to 12.4% and 21.3% to 14.7%, respectively. The impact was regional, with Lower Shabelle showing an impressive 100% rate of caregivers taking children to supported medical facilities. The community support was overwhelming, with over 80% recognizing health support as a top priority.

The project surpassed its goals by supporting 122 health facilities and reaching 177% of its target

To address the crisis of hunger, prioritizing investments in health systems is critical. This approach not only improves access to healthcare but also guarantees its safety and affordability. Health support initiatives have yielded significant improvement in the regions where the project was implemented. Before these interventions, a substantial portion of the community struggled to access healthcare services. The positive impact of these programs is clear from the following statistics:

beneficiaries for outpatient consultations and treatment. The project also achieved 130.7% of its targeted goal in treating children for infectious diseases and 80.6% for Penta 3 vaccination. Maternal health services improved, with an increase in attendance for antenatal care and facility deliveries. Even though there was a slight decrease from the baseline, health education message recall remained high at 62.0%, with most beneficiaries (84.1%) reporting that they practiced what they had learned.

These achievements demonstrate the project's extensive impact on addressing the hunger crisis.

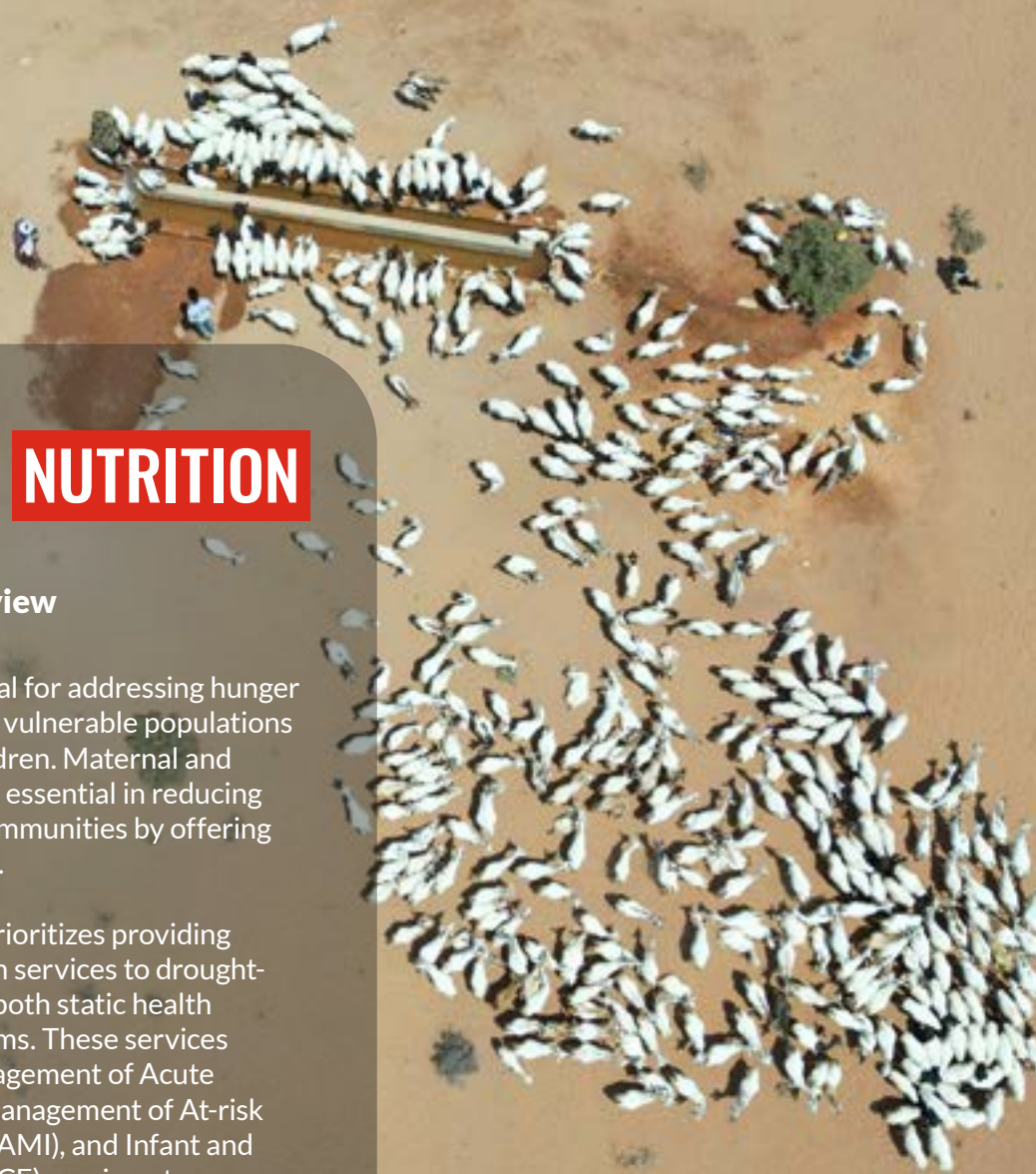


— OUTCOME B **NUTRITION**

Analyzing the Overview

Proper nutrition is crucial for addressing hunger crises, especially among vulnerable populations such as women and children. Maternal and child health services are essential in reducing malnutrition in these communities by offering vital nutritional support.

In Somalia, this sector prioritizes providing comprehensive nutrition services to drought-affected areas through both static health facilities and mobile teams. These services include Integrated Management of Acute Malnutrition (IMAM), Management of At-risk Mothers and Infants (MAMI), and Infant and Young Child Feeding (IYCF) services, to save lives.



SURVIVING IN A HARSH AND UNFORGIVING ENVIRONMENT: KALTUM'S STORY

Kaltum*, a 30-year-old mother of nine, was forced to leave her home in El-Madobe with her family due to repeated droughts that had decimated their livestock and crops, leaving them with little access to food or water. They were among the thousands who sought shelter within the confines of a dire Internally Displaced People camp. Deprived of life's necessities such as clean water, food, and medical care, Kaltum's life took a turn for the worse when her youngest daughter fell ill.



*Names have been changed to protect identity



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Just a few days after we arrived at the camp, my youngest daughter became ill with diarrhea and vomiting. I was overwhelmed with worry and had no idea where to turn for help. Fortunately, my new neighbors suggested I contact the mobile team, which another mother had recommended.

As it turned out, my daughter was malnourished, which was a heartbreaking diagnosis. The team began providing her with formulas and nutritious biscuits, and they monitored her closely. With their care and medical support, my daughter began to recover within a week.”

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Save the Children's USAID/BHA Funded Program is taking extra steps to combat malnutrition and hygiene issues in the community. In addition to their regular initiatives, the program has arranged informative sessions focused on educating mothers. The sessions are incredibly valuable, providing parents with the knowledge to detect and prevent malnutrition in children, as well as the tools to encourage proper hygiene to prevent the spread of illness.



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The mobile team has been a significant factor in improving my family's life by providing access to essential health services and education that were previously unavailable to us. Thanks to them, my daughter has made a complete recovery and is now in good health. I have also learned how to recognize and prevent malnutrition, which gives me hope that I can ensure that none of my children will ever experience malnutrition again. I am confident that our family will stay healthy and never face this issue again.

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A DEDICATED INTEGRATED COMMUNITY
CASE MANAGEMENT (ICCM) WORKER
IMPROVING CHILDREN'S WELLBEING:
AHMED'S STORY

Ahmed is a healthcare worker who takes pride in his work in improving children's health. His journey began in 2012 when he observed that the people in his village and the surrounding areas struggled to access healthcare services. To address this issue, Ahmed underwent training as an ICCM worker, equipping him with the skills to enhance children's health in the region. Since then, Ahmed has remained dedicated to serving his community and improving the lives of children and their families.

“ From the early hours of the morning, I am up and running, dedicated to serving the community's health needs. My daily schedule goes as follows:

5:00 AM - I wake up and begin my day with morning prayers before taking a short nap.

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“ 7:00 AM - As the sun rises, I wake up and prepare myself for the day ahead. I have a simple breakfast of traditional food and tea, which fuels me for the challenging day ahead.

8:00 AM - After completing my morning routine, I gather my backpack filled with essential medical supplies. My bag contains a stethoscope, thermometer, first-aid kit, nutritional supplements, and, most importantly, the Mid-Upper Arm Circumference (MUAC) bands used for malnutrition screening. I double-check my inventory, as we can't afford to miss a thing.

8:30 AM - I meet up with my colleagues who share my passion for improving children's health. We huddle together, coordinating our activities, discussing updates, and addressing any challenges we may encounter during our rounds. It's a moment of unity and purpose that strengthens our resolve.

9:00 AM - We begin our visits to households within the community, following a well-structured plan to cover as many areas as possible. Our focus is on providing door-to-door health services with care and compassion. We start with households that are the most vulnerable and in need of our care.

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Ahmed's team is committed to delivering top-quality healthcare services to children under the age of five. However, they are often faced with the challenge of adults in the community seeking their assistance.

“ While we do our best to manage their expectations and provide guidance, our resources and expertise are primarily dedicated to the well-being of young children. Nevertheless, we ensure that everyone receives the care they need by referring them to appropriate healthcare providers. ”

One of the team's most challenging tasks is keeping medical supplies stocked throughout the day. Their backpacks carry the lifeline of their mission, and there are times when they may run low, especially when encountering a large number of children.



“

12:00 PM - I take a brief break to perform the Dhuhr prayer, which allows me to pause, reflect, and reconnect with my faith throughout the day.

12:15 PM - My team joins me for lunch, where we catch up, share experiences, and provide emotional support to one another.

2:00 PM - We resume our rounds, visiting additional households while addressing the health needs of children under five, conducting health assessments, and offering nutritional supplements.

5:00 PM - We wrap up our visits and gather to reflect on our progress. We ensure that every critical case or update is shared with our line managers promptly, with a sense of urgency and responsibility.

6:00 PM - I return to the office, debrief with my team, and document any necessary information or data collected during our visits. I also restock supplies to ensure we're prepared for the challenges of the next day.

7:00 PM - I head home, feeling fulfilled knowing that I've made a difference in the lives of children and families in my community. In the evenings, I take some time to rest and prepare myself for another purpose-driven day as an Integrated Community Worker.

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The unfortunate reality of malnutrition has become prevalent in the community due to the prolonged drought. This serves as a somber reminder that not everyone has access to nutritious food. ICCM workers are committed to providing hope and a healthier future to the community, especially for vulnerable children. They aim to break the cycle of malnutrition and hunger that continues to affect the country.

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As ICCM workers, we are often confronted with heart-wrenching moments during our visits. However, these moments also remind me of why I chose this profession. We often meet children who are severely malnourished, and their families are often unaware of the severity of the situation. Our team responds to these urgent needs with empathy and a sense of urgency. We understand that these children require more than routine assessments and nutritional supplements. We take action by referring them to the nearest medical facility and advocating for their immediate admission and intensive care. It's a sobering reality that highlights the gravity of the crisis we face.

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FACTS & FIGURES

TACKLING MALNUTRITION: AN INITIATIVE TO ENHANCE CHILDREN'S HEALTH

The project's screening of 366,846 children under the age of five revealed 29,506 cases of Severe Acute Malnutrition (SAM) and 98,020 cases of Moderate Acute Malnutrition (MAM). Children were treated with cure rates reaching 99.1% and 98.6% respectively. A significant majority of the children with suspected malnutrition were admitted to treatment programs, and 93.5% of children enrolled in the Outpatient Therapeutic Program (OTP) and Targeted Supplementary Feeding Program (TSFP) completed their treatment with a recovery rate of 91.2%.

The project also established 157 Infant and Young Child Feeding (IYCF) support groups, which engaged 1,212 mothers. Additionally, 56,369 mothers were trained on Mid-Upper

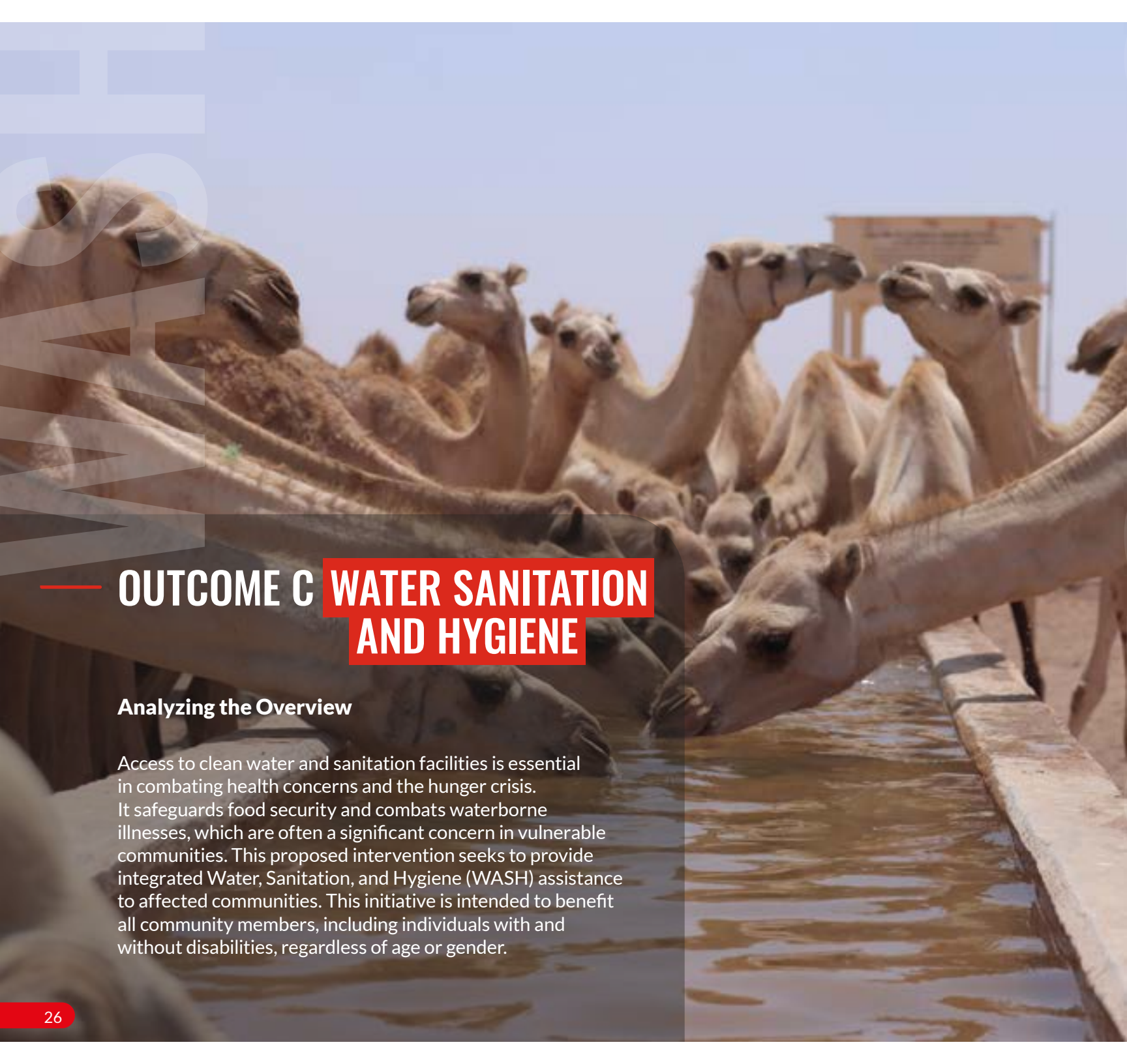
To combat the hunger crisis in the region, nutrition-focused programs are crucial. These programs are designed to not only alleviate hunger immediately but also enhance the overall health and well-being of individuals, especially children under five years old and pregnant or lactating women. By prioritizing both the treatment and prevention of malnutrition, these initiatives play a significant role in building resilient communities and putting an end to the cycle of poverty and hunger. The outcomes of these programs are evident in the following statistics:

Arm Circumference (MUAC). Screening 24,582 children for IYCF resulted in 4,178 cases of acute malnutrition being identified.

Furthermore, 69.7% of interviewed mothers received IYCF information and 92.7% implemented it. A significant majority of mothers (97.1%) initiated breastfeeding, and 70.6% knew the correct age to start weaning. Moreover, 65.4% of mothers exclusively breastfed their children below six months.

Vitamin A supplementation was confirmed by 27.8% of mothers. Although there was a high prevalence of diarrhea in the project areas, only 10.5% of children were given Oral Rehydration Salts (ORS). Mothers offered various fluids to their children, including water (36.4%), milk (32.8%), and juices (21.6%). Lastly, it was found that 41.8% of mothers used feeding bottles.





OUTCOME C WATER SANITATION AND HYGIENE

Analyzing the Overview

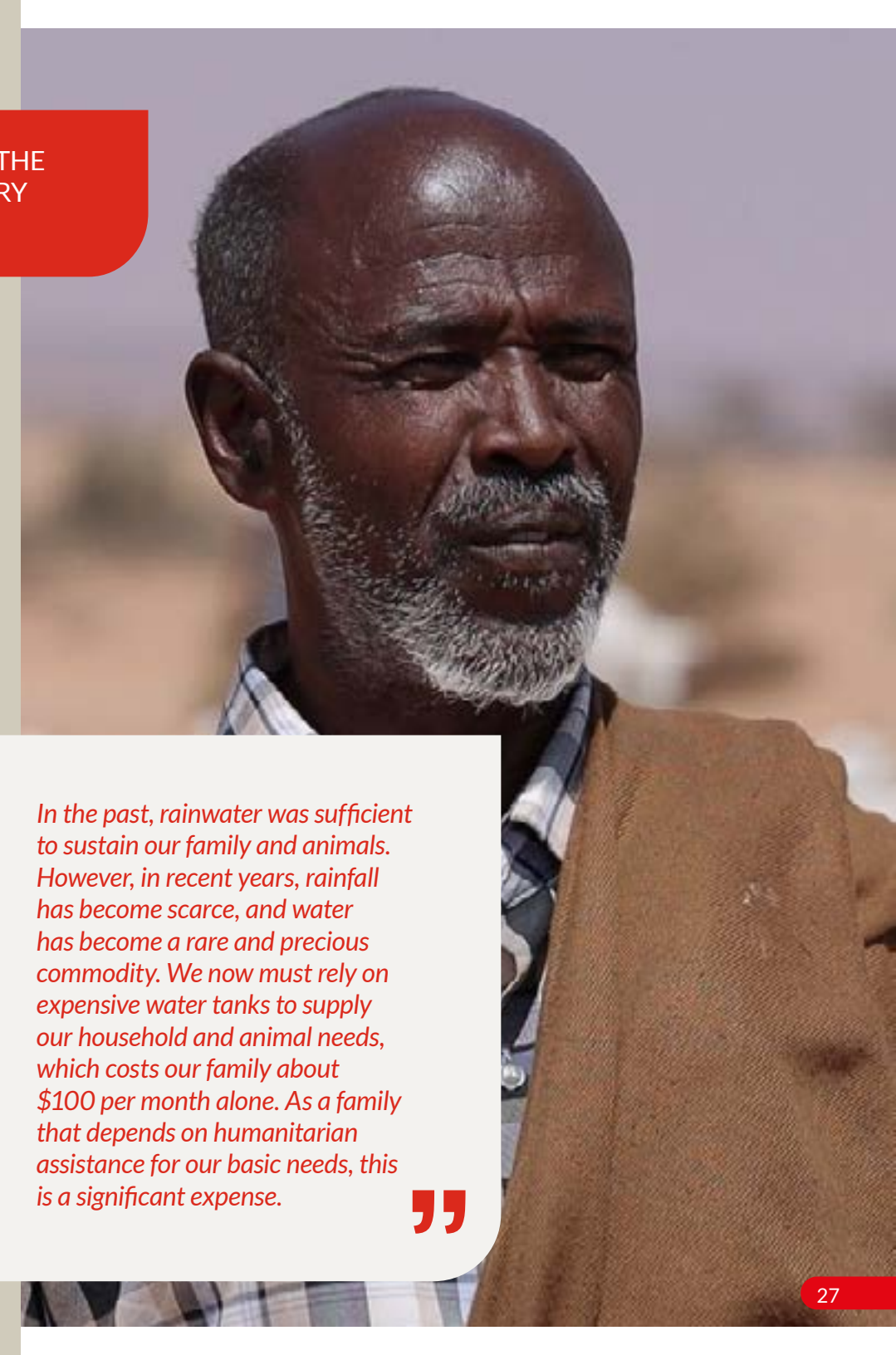
Access to clean water and sanitation facilities is essential in combating health concerns and the hunger crisis. It safeguards food security and combats waterborne illnesses, which are often a significant concern in vulnerable communities. This proposed intervention seeks to provide integrated Water, Sanitation, and Hygiene (WASH) assistance to affected communities. This initiative is intended to benefit all community members, including individuals with and without disabilities, regardless of age or gender.

TRANSFORMING COMMUNITIES - THE IMPACT OF A WELL: AHMED'S STORY

Ahmed's life in Qalwo was once defined by the hardships of drought and a never-ending search for water. His days were consumed by worry, and his heart ached for his family and their animals who struggled to survive in the harsh conditions. But ever since a well was constructed in their village, life has taken a remarkable turn.

“ I am a 55-year-old father living in Qalwo, raising eight children alongside my wife. For the past 13 years, we have called this village our home. While we have experienced some beautiful seasons in this region, recent droughts have made life difficult for all of us. As a family of livestock herders, we rely heavily on our goats for income. At one point, we had about 150 goats that provided us with milk, meat, and occasional cash from sales.

In the past, rainwater was sufficient to sustain our family and animals. However, in recent years, rainfall has become scarce, and water has become a rare and precious commodity. We now must rely on expensive water tanks to supply our household and animal needs, which costs our family about \$100 per month alone. As a family that depends on humanitarian assistance for our basic needs, this is a significant expense.



“ *The shortage of water has also affected our animals, with 80 goats dying due to dehydration and resulting illnesses. Our remaining 70 goats and one donkey require constant attention, and our mothers and children have to undertake long, tiring journeys to water them. It has been a difficult and heartbreaking experience to see them struggle to survive.* ”

Water tanks can be expensive and unreliable, as they may take time to arrive and bring water that is unsafe to drink. The negative health effects of this have caused illness among both people and animals in the village. However, since a well was installed, Ahmed and his family's lives have improved drastically. Not only have they saved time, energy, and money, but they can now use the \$100 they once spent on water to purchase other necessities like food and animal care plus they no longer have to travel long distances to fetch water for their goats.

Moreover, the well has positively impacted the overall hygiene of the entire village, with a significant

decrease in hygiene-related diseases. Even in times of financial strain, water is always readily available.

“ *Despite its slightly unpleasant taste, the well water serves a variety of purposes, from cleaning and cooking to farming and animal care. During times when rainwater is scarce, we rely on the well for drinking water.* ”

We were part of the well's construction process from the very beginning, participating in the planning, building, and maintenance. This sense of ownership instills a sense of responsibility among us, and it has strengthened our community ties. We were once strangers, but now we are like a big family, working together and supporting each other through thick and thin.

Reflecting on the transformational impact of this water project, we are grateful for the free, clean water that is always available to us, even during tough financial times. My hope for the future is that the well will be further improved and expanded, with the addition of water softeners and sweeteners, so that we can always drink from it without worry or fear. ”



FACTS & FIGURES

When it comes to tackling health-related issues, WASH initiatives are often the go-to blueprint. By enhancing water and sanitation access, food safety and disease prevention can be improved. One project, for example, provided clean water to 91,414 beneficiaries through the rehabilitation of five boreholes and the construction of one new borehole. On average, households used 108 liters of water per day. Sanitation needs were addressed with the creation of 155 community latrines, benefiting 38,054 individuals. Additionally, four out of five planned water user committees were fully operational, ensuring effective management. Lastly, hygiene promotion activities reached 36,995 individuals (19,816 females, 17,179 males) with messages and distributed hygiene Non-Food Items (NFIs), contributing to improved hygiene practices.





OUTCOME D FOOD ASSISTANCE (FA)

Analyzing the Overview

In light of the current hunger crisis, interventions that enhance access to food are paramount. The proposed initiative seeks to tackle this crisis by providing food access to over three million people, including 1.1 million internally displaced persons (IDPs) across sixty-four districts by the end of 2022. This aligns with the objectives outlined in the Humanitarian Response Plan. The Unconditional Food Assistance program forms a significant part of this intervention, providing families with the means to purchase food when they face severe food deficits. This is particularly crucial amid food shortages caused by drought, allowing families to meet their nutritional requirements.

TURNING HARDSHIP INTO HOPE THROUGH SAVE THE CHILDREN'S UNCONDITIONAL CASH TRANSFER PROGRAM: FARTUN'S STORY

Once a livestock herder and mother of eight, Fartun*, a woman in a drought-stricken community faced significant adversity. The loss of her family's livestock left them with no food, water, or income. Fortunately, their lives took a positive turn when she was chosen as a beneficiary for Save the Children's unconditional cash transfer program.

“ My family and I experienced an unprecedented hardship during a severe drought in our area. For generations, our livestock was our primary source of income and sustenance. We grazed them in the eastern region of Puntland, but when the drought struck, everything changed. The lack of water and dry pastures led to the demise of most of our animals. It was a devastating loss for our family, leaving us with no means to support ourselves.

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When Fartun's family lost all their livestock, they were faced with a tough decision. In the end, they decided to relocate to an IDP camp situated 45 km away in the Karkar region. But this meant leaving behind their home and everything with which they were familiar.

“ Leaving behind the life and memories we had built in our community was not easy. Though relocating to the IDP camp was our only option, it came with mixed feelings. Life in the camp wasn't a walk in the park, and as a mother of eight children, I was concerned about being able to provide for them and the uncertainty of the future. ”

Despite facing tough times, Fartun and her family were fortunate enough to be selected as beneficiaries for Save the Children's unconditional cash transfer program. This program proved to be a lifeline for her family, particularly since Fartun is a mother to eight children living in an IDP camp due to the recent droughts in Somalia.

Throughout the program, Fartun received \$82 per month for the first three months, followed by an increased amount of \$90 per month for the remaining three months.



“ Receiving cash relief during the challenging times of the drought proved to be a turning point for families like ours. Besides alleviating our immediate struggles, we were also equipped with new skills and knowledge to improve our livelihoods. Through income-generating activities, I learned to contribute to my family's well-being and enhance our prospects for a better future. The cash we received was critical in our efforts to put food on the table, and we are now able to break free from that constant struggle. This positive transformation has been life-changing, and I am forever grateful for the support. ”

FACTS & FIGURES

FACTS & FIGURES

The results were overwhelmingly positive. The Food Consumption Score (FCS) for the beneficiaries significantly improved from the baseline, with 55.8% achieving an acceptable score. The Household Hunger Scale (HHS) score indicated little to no hunger - a significant improvement from the baseline. Additionally, the Reduced Coping Strategies Index (rCSI) indicated low food insecurity, although there were regional variations.

The program also helped address the immediate needs of beneficiaries. It enabled them to

To tackle the hunger crisis, effective food security activities are necessary. The Unconditional Food Assistance Program in Somalia is a shining example of this. In this project, 19,695 vulnerable households were supported with cash transfers. These funds were primarily used for food and other household necessities.

purchase food (99.7%), secure water (58.6%), and acquire essential non-food items such as medicine (33.4%). It also facilitated repaying debts (45.8%) and covering education expenses (55.9%).

Furthermore, Universal Cash Transfer (UCT) support had a broader impact on the local economy, benefiting local traders due to the improved income and purchasing power of the population. These findings emphasize the comprehensive benefits of such integrated initiatives in addressing the hunger crisis.





OUTCOME E PROTECTION

Analyzing the Overview

Child protection programs are critical for ensuring the safety and well-being of children, as well as their access to food. By building on past successes, the proposed intervention aims to enhance the quality and reach of services that prevent child protection violations and gender-based violence, thus improving the psychosocial well-being of children and their families. The program takes a multi-sectorial approach, with the Child Protection (CP) activities designed to restore a sense of safety and normalcy for children affected by conflict, drought, and COVID-19. Meanwhile, the Gender-Based Violence (GBV) intervention seeks to enhance the safety and well-being of all individuals by providing prevention and response services. These programs empower children to lead healthier lives and underscore the importance of such initiatives in addressing hunger crises.

EMPOWERING VULNERABLE CHILDREN THROUGH COMMUNITY-BASED INTERVENTIONS - DAHABO'S STORY

Meet Dahabo*, a young girl who has faced a multitude of challenges in her short life. Limited access to education, inadequate shelter, and insufficient nutrition left her with few prospects. However, with the help of community-based structures and mechanisms, the project identified and addressed protection concerns in Dahabo's community. They provided timely case management services, psychosocial support, and prevention activities. The Child Friendly Space (CFS), in particular, has been a significant positive change for Dahabo.



“

Hello, my name is Dahabo, and I am a nine-year-old girl visiting a CFS supported by Save the Children. Before I arrived here, I was missing out on some of life's necessities, such as education, shelter, and proper nourishment. However, now I have everything I need! This place is a total sanctuary where we can learn about our rights and how to stay safe from harmful practices such as child marriage and female genital mutilation/cutting (FGM/C).

Our amazing facilitators provide us with a safe learning environment where we can spend time without any fear of violence or abuse. Additionally, we have access to snacks, toys, and even sports gear to keep us entertained. But the best part? The people here make everything so much fun and enjoyable. That's why I want to be a teacher in the future, so I can give back and teach other children like me. I am living my best life here and couldn't be happier.

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A CFS FACILITATOR INSPIRING FUTURE EDUCATORS - FILSAN'S STORY

We follow Filsan* on a typical day as she inspires countless children to pursue teaching as a career.

“ My name is Filsan, and I'm a 26-year-old facilitator at a CFS. I've been working here for the past five years. As a child, I always knew I wanted to teach. While my peers played doctor or soldier, I played teacher, helping others understand their lessons. After finishing high school, I started tutoring younger children and fell in love with the experience. A year later, I began teaching Somali and Math part-time at my old school. This is when I realized teaching was my true calling. Working with children came naturally to me, as I was a great listener and could simplify complex concepts. I also learned that patience was key when working with children.

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*Names have been changed to protect identity



“ After taking a year off to give birth, I started revising with younger children and mothers in my neighborhood. It was a fulfilling experience that prepared me for my role at the center. Although I've been teaching for some time, working at the CFS felt like an entirely different world. Children at that age are vulnerable and require protection more than they need to learn.

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As a mother of six, I start my day at four in the morning, beginning with morning prayer and cooking breakfast for my children. Our breakfast is typically a simple traditional Somali meal. My eldest two handle their morning routine independently, but I assist my younger four with their preparations. Once everything is in order at home, I get dressed and walk with my four middle children to the center located just five minutes away.

I arrive at the center at 7 am, on time to set an example of punctuality for the children. Upon arrival, I check that everything is in order, from the cleanliness of the space to the availability of toys and board. We have a timetable that guides us through the day, and during the first fifteen minutes, we greet the children as they arrive. Most of them come on their own since the center is in the neighborhood. The younger ones are usually accompanied by an adult, often a parent, sibling, or neighbor. We currently have 102 children registered at the center, and as they arrive, we check their hygiene, including clipping their nails.

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We are truly appreciative of their hard work and commitment. Looking towards the future, we hope that the center will continue to expand their offerings to help even more people.

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The primary goal of the center is to provide a secure environment for children while also encouraging intellectual growth and development. Filsan, who teaches at the center, is committed to fostering a creative atmosphere that allows children to explore their interests. Both indoor and outdoor activities are offered, and Filsan engages with the children by playing games and teaching them through fun and interactive methods.

Each day begins with outdoor activities, such as jumping rope, skipping, and hide-and-seek, in which students participate. The children are given the freedom to create and innovate, resulting in some surprising and imaginative results. Although mistakes may occur, the children ultimately discover something new about themselves and produce something truly wonderful.

“Our activities for the day begin with the children sharing their plans for the day. We then sing songs to learn the alphabet and numbers, draw animals, and learn their names. I believe that children are naturally creative and can thrive if they are taught at an early age. As a mother, I find it quite easy to read the children’s emotions – their eyes say it all. Happiness, sadness, and even their desires are clearly expressed.”

During break time, the children get to rest and enjoy some snacks after two hours of activity. This break, which lasts for 30 minutes, is a perfect opportunity for them to relax and participate in activities such as listening to story time or playing games outdoors based on their preference.



“At 11:30 AM, once I’ve made sure that all the center children have safely returned home, I begin cleaning up the playground area, organize all the equipment into their respective places, and then head home to prepare lunch for my family.

Since most of my children attend afternoon Quran classes in the afternoons, my schedule is much more open than it is in the morning. I spend time with my two youngest children and try to learn something new at the same time.

My eight children consist of five daughters and three boys. My two eldest children are in third and second grade, while the next four come to the center with me. The youngest two are too young to join me, so I have a family member look after them while I’m at the center.

In the evenings, I sit with my children and help them review their Quran lessons. I also assist the older two with their homework and tell them stories about the prophets before bedtime. Normally, we only have enough energy for one activity before sleep, but Fridays are everyone’s favorite day since we get to spend almost the entire day together.”



Children can occasionally become ill or injured while at the center. The facility is situated in an area where weather fluctuations and droughts are frequent, rendering it more susceptible to infections. When children become ill, it is usually due to flu, malaria, or typhoid. In such situations, they are taken to the nearby Maternal and Child Health (MCH) facility for routine checkups.

“ During one of our outdoor activities, a child fell ill, and we acted quickly by taking him to the MCH while informing his mother. Fortunately, it was only food poisoning, and he was back to his usual self the next day. As facilitators, we are well-prepared to handle such situations, drawing on our experiences as parents. ”

The establishment of a CFS has brought about remarkable improvements within the IDP community. Prior to its opening, children were forced to play in hazardous environments and were at risk of various diseases. Now, they have a secure area to play, learn, and be protected from harm. The children are thrilled to visit the center and frequently inquire why it cannot stay open in the afternoons so they can continue to play and learn.



“ It's important to note that disability is not always noticeable, especially if it is non-physical. At our center, we have two children with physical disabilities, and we treat them just like any other child. They have the same rights and responsibilities as their peers. However, we do encounter situations where children may use derogatory words related to physical disabilities. In these instances, we use it as an opportunity to teach them about what is right and wrong. The few hours they spend with us at the center are safe hours in a safe space for everyone, and we ensure they leave with an understanding that all children are the equal, regardless of their disabilities. ”

The ever-changing weather has posed a significant challenge for everyone at the center, especially the children. With the rising temperatures, it is difficult for them to participate in outdoor activities under the scorching sun. Moreover, the occurrence of rainy and windy days has disrupted the center's daily schedule on numerous occasions.

Another obstacle is that some parents have continued to bring their children to the center year after year, despite being of school age. Although the center provides a safe, friendly environment and snacks, convincing parents to register their children for school can be difficult. Nevertheless, the center is committed to doing its best for everyone.

“ Every day at the center is a rewarding experience for me. Engaging with children, teaching them, and being a supportive and friendly presence fills me with satisfaction. However, the most fulfilling aspect of my job is seeing children graduate and move on to primary school. It's like watching a child take their first step, and it's a privilege to support them on their journey. ”

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“ What's even more satisfying is receiving acknowledgment that children who transitioned from our center to primary school perform better academically than those who didn't receive a similar opportunity. It confirms that our efforts are making a positive impact on children's lives.. ”

Balancing work and motherhood are sometimes daunting, but creating a safe and nurturing environment for children is always rewarding. As a working mother, the satisfaction of being a shield to protect and brighten the future of children in this friendly space makes it all worthwhile - one step at a time. ”

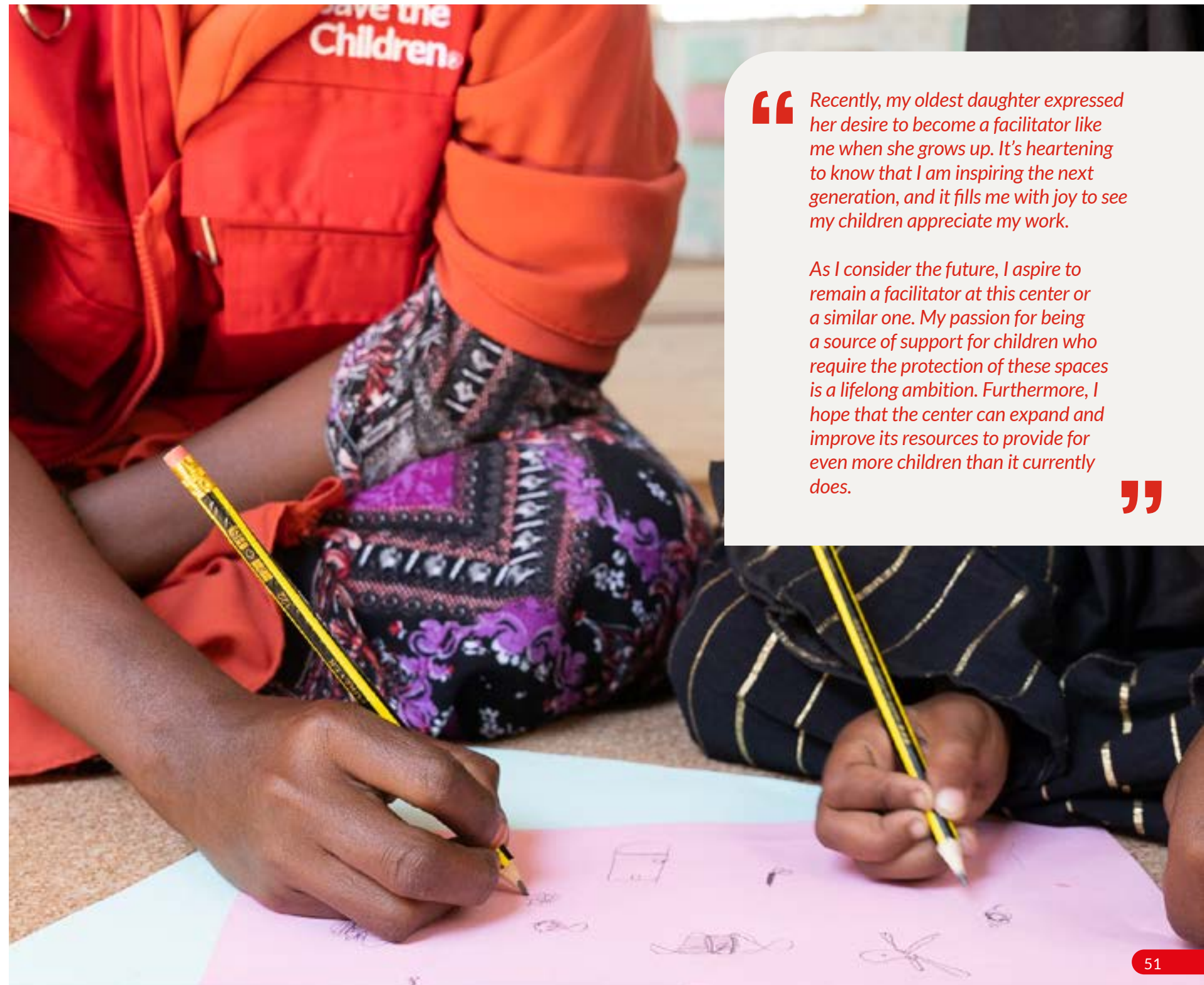
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Filsan's children are fully supportive of her work at the center, and it is a source of pride for them. Her oldest two boast to everyone about their “cool and friendly teacher” mom. The four children who go to the center with her have taken to calling her “Teacher Filsan” at the center and “hooyo” (mother) at home.

“ Recently, my oldest daughter expressed her desire to become a facilitator like me when she grows up. It's heartening to know that I am inspiring the next generation, and it fills me with joy to see my children appreciate my work. ”

As I consider the future, I aspire to remain a facilitator at this center or a similar one. My passion for being a source of support for children who require the protection of these spaces is a lifelong ambition. Furthermore, I hope that the center can expand and improve its resources to provide for even more children than it currently does. ”

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EMPOWERING CHILDREN: MARYAMA'S STORY

Meet Maryama*, a 12-year-old girl who is currently in sixth grade. She comes from a family of five siblings and enjoys spending time with her brothers and sisters. Maryama recalls getting into trouble with her siblings for doing things they were not supposed to, like playing outside without their mother's permission. Whenever their mother found out, she would get angry and punish them.

Although Maryama knew that her mother cared deeply for her and her siblings, she admits to occasionally hiding things from her mother out of fear of punishment. However, everything changed when she and her mother attended a training session that taught them about child discipline and protection.

**Names have been changed to protect identity*



“ During the training, I learned that physical punishment was not an acceptable method of disciplining children. Instead, children should be protected, cared for, and given a voice to express their thoughts and feelings. The training also helped me realize my responsibilities as an older sister and how I could help my siblings and classmates.

Thanks to the training, I now enjoy spending quality time with my little sister. I help her with her studies and play with her, which makes her feel happy.

”

As she continues to learn and grow, Maryama hopes to inspire others to understand the importance of child protection and their roles in society.



FACTS & FIGURES

Following back-to-back awareness campaigns, target communities' perspectives and knowledge on child protection have seemingly changed. In terms of child protection rights, there were varied responses: 36% believe every child should have a name, and 29% think children have a right to identity at birth. About 43% feel all children should live with their biological parents or guardians. Awareness of various forms of child abuse was also noted, with 62% recognizing physical child abuse, 42% acknowledging emotional abuse, and 43% identifying sexual abuse as a rising issue. Common issues included physical neglect (36%), emotional neglect (23%), and child labor (24%), with approximately 41% believing these issues are common.

In times of hunger crisis, safeguarding the welfare of children is pivotal, and child protection rights and community structures are key factors in achieving this. These aspects are critical in creating a nurturing environment that empowers children to flourish despite the adversities caused by food shortages.

Regarding protection threats and reactions to abuse, 25% of respondents witnessed child abuse, with females being more vulnerable. The majority (74%) took some form of action, such as reporting to the Child Rights and Child Protection Committees (CRCC). However, reasons for not acting included not knowing what to do (68.4%) and not wanting to upset parents or adults (16.3%). Among those unaware of child abuse, 56.4% expressed willingness to take appropriate actions. Notably, 88% believe parents have the greatest responsibility for their child's well-being. As for community structures responsible for child protection, responses include the police (37.3%), Child Protection Committees (59.2%), Parents' groups (47.8%), and local organizations (12.9%).



INTEGRATED INITIATIVES

Addressing the Challenge of Hunger with a Comprehensive Approach

The issue of hunger is a complex one that requires an integrated approach to address, rather than a narrow focus on a single sector. By implementing an integrated project that targets various community needs, it is possible to make a more significant and lasting impact. Programs implemented by Save the Children supported by USAID/BHA is a prime example of this, as it takes a comprehensive approach to address all aspects of livelihood. From health and nutrition to food security, water and sanitation, and protection and education, this project is an integrated effort to address the challenges of hunger.

A MOTHER OF FIVE LIVING IN AN IDP CAMP IN GARDU - NASRO'S STORY

Nasro*, a 21-year-old mother of five, resides in a Gardu camp for IDPs. The camp is where Nasro was born, raised, married, and where she gave birth to all her children. While living in the camp has its difficulties, Nasro* and her family are part of a closely-knit community that provides them with support and care. Although their lives are often challenging and they rely on humanitarian aid for their basic needs, Nasro and her loved ones find happiness with what they have.



“

My name is Nasro. I was born, raised, married, and had all my children here in the camp. My oldest child is six years old, while my youngest is just seven months old. Living in a camp has its pros and cons. On one hand, we have a strong sense of community and are always there for each other. On the other hand, our lives can be very challenging and often require assistance from humanitarian organizations.

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With seven mouths to feed, Nasro and her family could not cope with the difficulties of living on a single income. Therefore, both she and her husband work tirelessly to help support the household, with Nasro working as a cleaner and her husband as a porter. Despite facing challenges, the family has found a way to appreciate what they have and remain content.

“

These past few months have been challenging for my family. My husband and I both lost our jobs and our youngest daughter, who is only four months old, has been unwell. I had to stop working to care for her, while my husband struggled to find employment due to the economic downturn.

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Nasro's mother has been doing everything she can to help the family financially. Despite working as a cleaner for the local government and earning little, she still sent money to Nasro to buy food for the children. However, even with her contribution, the family could only afford to have one meal a day.

“ A few months ago, my youngest daughter fell ill. She was experiencing vomiting and diarrhea, and while I didn't think it was too serious at first, things quickly took a turn for the worse. She grew weaker and weaker, and we had no choice but to take her to the MCH (Maternal and Child Health Center). I have always had faith in the MCH, having given birth to all my children there and had them vaccinated there as well.

After a series of tests, the doctors diagnosed her with malnourishment. I was devastated to see the toll it took on her health and felt helpless in the face of such a diagnosis.

Considering my daughter's condition, and taking into account our family's living situation, I registered to receive a conditional transfer of 90 USD for six months. While it was never enough to fully support my family of seven, it did help alleviate some of our financial stress. With the help of the transfer, I was able to cook three meals a day and even paid off some outstanding debts. Additionally, I was able to save some of the money for future emergencies.

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Naso's daughter made a speedy recovery and regained her health with the help of nutritional biscuits and medical treatments provided at the MCH. With the added benefit of having three meals a day at home, she was even healthier than before.

“ I'm planning to return to work soon, while my husband has already started picking up jobs. I've been putting off sending our children to school, worried about how they'll cope without us, but I understand that it's important they receive an education and become successful in the future. We aim to improve our standard of living, and education is a vital part of that.

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*Names have been changed to protect identity

SAVE THE CHILDREN'S IHNW PROJECT:
EMPOWERING COMMUNITIES THROUGH
EDUCATION AND SUPPORT - NURTO'S
STORY

A Somali resident, Nurto*, was forced to flee her home with her family due to the severe drought in the southern region, leading to a multitude of difficulties. They struggled to obtain clean water, food, and other necessities. Fortunately, Nurto was able to benefit from the Save the Children's Integrated Health, Nutrition, and WASH (IHNW) Project, which was funded by USAID/BHA.



*Names have been changed to protect identity



“ Living in Southern Somalia, I have personally experienced the negative effects of drought and displacement. Fortunately, Save the Children's project has brought much-needed relief to our community. With access to clean water, food, and unconditional cash transfers, we have been able to meet our basic needs. Prior to the project, we had to travel long distances to fetch water or buy it at an inflated price. Now we have sufficient water in our homes and our access to clean water has improved significantly.

I am also a beneficiary of Save the Children's unconditional cash transfer project. With the funds received, I can afford to send my children to school, pay off debts, and take care of other necessities such as purchasing food and clothing. These contributions have impacted our lives in ways beyond measure.

Save the Children's support has also improved our access to healthcare. In the past, we faced many challenges in this area. However, with the construction of the MCH, we now have better access to healthcare. Whenever my children fall ill, I take them to the healthcare centers supported by Save the Children.

We are incredibly grateful to Save the Children for their support and dedication in providing access to clean water, healthcare, and cash transfers. Their contributions have made an enormous difference in our lives, and we cannot thank them enough.

”

Through the IHNW Project, Nurto and her family received education on proper hygiene and sanitation, nutritional support, and healthcare services, enabling them to maintain good health and well-being. Save the Children's intervention not only improved their living conditions but also empowered Nurto to become an advocate for better health practices within her community.





LESSONS LEARNT

Addressing malnutrition in children necessitates investment in the health system, including the provision of adequate, knowledgeable professionals to assist in times of need. Such initiatives have saved lives, especially those of children and women, and received significant community support for their role in addressing healthcare needs.

An integrated approach is pivotal to improving health systems, involving community-level volunteers, and delivering essential health messages during community activities to disseminate vital information and services. This comprehensive approach emphasizes healthcare's significance in preventing malnutrition and improves overall well-being in drought-affected areas.

Mobile health teams are critical in addressing malnourishment resulting from hunger crises in remote regions. These teams provide a comprehensive package of nutrition services, including Integrated Management of Acute Malnutrition (IMAM), Management of At-risk Mothers and Infants (MAMI), and Infant and Young Child Feeding (IYCF) services, and have significantly reduced malnutrition in vulnerable communities.

Access to clean water and sanitation facilities is crucial for health and hunger

crisis management. WASH assistance ensures food safety, mitigates health risks posed by waterborne diseases, and improves the quality of life in vulnerable communities.

The Unconditional Food Assistance program is an effective intervention in addressing the hunger crisis. The program provides families with the means to purchase food during drought-induced food shortages, enabling them to meet their nutritional needs while also contributing to the local economy.

Awareness campaigns have been instrumental in changing community perspectives on child protection rights. However, some community members are still unsure how to respond to child abuse despite these efforts. This highlights the need for continuous awareness campaigns to safeguard every child's right to survival, learning, and protection.

Community structures play a crucial role in child protection. Involving police officers, Child Protection Committees, parent's groups, and local organizations has proven effective in safeguarding children. Working closely with community members increases the success rate, as seen when community involvement improves, the acceptance of Community Health Workers (CHWs) and Female Health Workers (FHWs), key

drivers of Integrated Community Case Management (ICCM) also improve.

Partnering with government ministries, particularly the Ministry of Health (MoH), and local authorities promotes transparency, ownership, participation, and accountability. This ensures that community opinions guide project activities, contributing to hunger alleviation. Encouraging community members to maintain water infrastructure enhances the sustainability of WASH support, indirectly contributing to hunger-reduction.

Signing Memorandums of Understanding (MOUs) with sub-partners ensures community awareness and participation. This sensitizes them about project activities, enhancing their involvement.

Such integrated projects supported by USAID/BHA offer diverse community needs a profound and lasting impact on addressing the hunger crisis. These initiatives not only combat hunger directly but also build resilient communities that can better withstand and recover from such crises. The full support received from local authorities for the project underscores the importance of aligning with local administration priorities. This alignment facilitates the provision of basic services through decentralized units at the district level, enhancing the effectiveness and reach of such initiatives.





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