



unicef 
for every child

Humanitarian Action for Children

Shankaron, 13 years old, and her friends attend a Power4Girls programme session in Mogadishu, gaining skills in menstrual hygiene, nutrition, and self-confidence for a healthier future.

Somalia

HIGHLIGHTS

- In 2026, humanitarian conditions in Somalia are expected to deteriorate further, leaving at least 4.8 million people, including 3 million children, in urgent need of humanitarian assistance.¹ Acute malnutrition threatens 1.85 million children under five², including 430,000 with severe wasting, driven by recurrent climate shocks, prolonged conflict, and a fragile health system facing potential collapse³. Below-average rainfall linked to persistent La Niña conditions⁴ is likely to exacerbate food insecurity, with more than 4.4 million⁵ people projected to face crisis-level hunger (IPC Phase 3 or higher) by the end of December 2025.
- UNICEF will accelerate programmatic shifts in 2026 to strengthen the delivery of life-saving assistance across sectors. This includes stronger localization, community-based services, fulfillment of UNICEF's role as provider of last resort, and enhanced service integration across health, nutrition, WASH, child protection, education, and social protection.
- UNICEF is appealing for \$121 million to reach 1.2 million people, including 744,000 children (372,000 girls), with priority funding directed to nutrition, health, WASH, and child protection – the sectors with the highest needs.

KEY PLANNED TARGETS



850,000

children and women
accessing primary health
care



430,000

children with severe
wasting admitted for
treatment



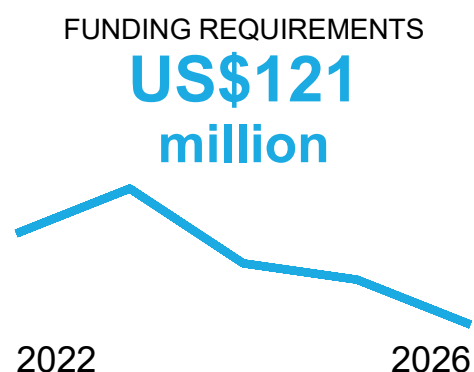
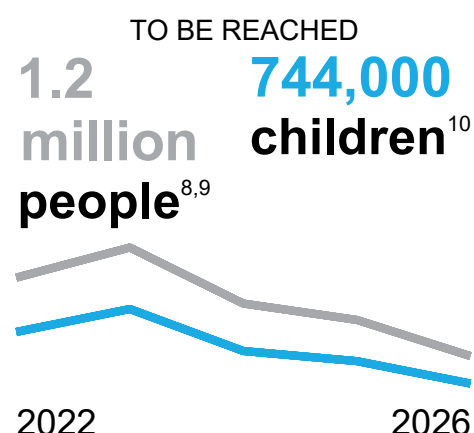
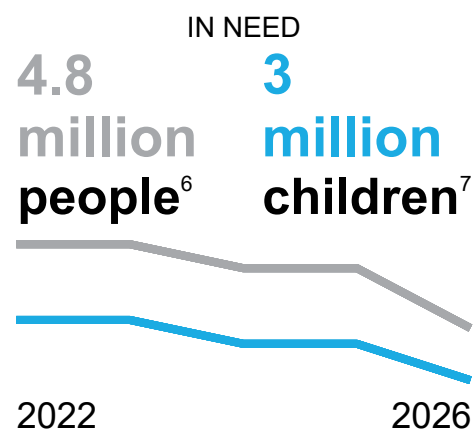
116,000

children/caregivers
accessing community-
based mental health and
psychosocial support



1.2 million

people reached with critical
WASH supplies



Figures are provisional and subject to change upon finalization of the 2026 inter-agency planning documents.

HUMANITARIAN SITUATION AND NEEDS

Somalia continues to face overlapping humanitarian crises driven by recurrent climatic shocks, sustained conflict and public health threats. In 2026, the situation is expected to worsen as drought, localized flooding and a fragile security and political environment, coupled with a decline in humanitarian funding, continue to weaken livelihoods, limit access to essential services, and deepen gender disparities. About 4.8 million people,¹¹ including 3 million children, are projected to need humanitarian assistance.

By late 2025, an estimated 4.4 million people¹² face crisis levels of food insecurity or worse (IPC Phase 3 or above) – about 1 million more than the beginning of the year, reflecting rising food insecurity and deepening vulnerability. Through mid-2026, a projected 1.85 million children¹³ under five will suffer from wasting, including 430,000 children with severe wasting. This represents a 12 per cent rise in global acute malnutrition and a 5 per cent rise in severe wasting compared with 2025. The forecast for below-average 2025 Deyr (October–December) rains could deplete water sources, reduce crop yields, and worsen livestock conditions.¹⁴ These climatic stresses, alongside elevated food prices, prolonged conflict, and shrinking livelihoods, will likely push more households into crisis. The expected unprecedented funding reductions in 2026 will exacerbate existing vulnerabilities.

Conflict, insecurity and fragility remain major drivers of displacement. An estimated 3.5 million people¹⁵ are internally displaced, with violence escalating sharply in 2025. More than 7,700 conflict fatalities were recorded in the first nine months of 2025, up from 5,554 fatalities in 2024.¹⁶ Inter-clan clashes, political violence, military operations against non-state armed groups, and transition to the African Union Support and Stabilization Mission in Somalia¹⁷ continue to constrain humanitarian access and expose more children and women to grave protection risks, including recruitment by armed groups and gender-based violence. Access to mental health and psychosocial support remains severely limited.

Low vaccination coverage, poor WASH conditions, and gender barriers to healthcare have driven epidemics and communicable diseases across Somalia. Outbreaks of cholera, acute watery diarrhoea, measles, and diphtheria remain widespread. By September 2025, more than 7,900 cholera cases and 2,700 diphtheria cases were reported, alongside a surge in measles infections.¹⁸ The health system, already fragile, will likely see a reduction of at least 35 per cent in the number of functioning facilities by mid-2026. There is little government fiscal capacity to fill gaps.

Many Somali children have limited access to education, healthcare, and safe water, exposing them to multiple overlapping risks that threaten their survival and development. With two-thirds of children out of school and limited government investment in social services, the combined pressures of conflict, climate, and funding constraints mean that high levels of humanitarian need are likely throughout 2026.

SECTOR NEEDS



5 million
people in need of
health assistance¹⁹



2.4 million
people in need of
nutrition assistance²⁰



2.1 million
children in need of
protection services²¹



1.7 million
children in need of
access to learning²²



4.5 million
people lack access to
safe water²³

STORY FROM THE FIELD



Cosobo Osman Abdi holds her daughter at the UNICEF-supported Ifin Health Centre in Bardhere town, where vulnerable families receive life-saving healthcare, nutrition and cash assistance for recovery.

In Bardhere town, 350 KM west of Mogadishu, Ifin Health Centre provides lifesaving care to over 33,000 people despite insecurity and funding cuts. Accessible only by air, it offers maternal, child health, and immunization services. Through UNICEF's social protection program, vulnerable women receive cash assistance and links to essential services like nutrition and birth registration, strengthening resilience amid climate shocks. Yet the projected humanitarian funding cuts in 2026 threaten these lifelines, risking service shutdowns. Nearly 6 million could lose outpatient care, 479,000 pregnant women miss antenatal care, 250,000 children go untreated for severe acute malnutrition, and 372,000 under-fives remain unvaccinated.

HUMANITARIAN STRATEGY

In Somalia, UNICEF collaborates with federal and state governments, civil society, the private sector and United Nations agencies to maximize the reach and impact of humanitarian assistance and protection to the most vulnerable children, women and adolescents. Through strategic partnerships, UNICEF delivers essential services and protection for vulnerable children, strengthens local systems and ensures an integrated response aligned with the Humanitarian Needs and Response Plan (HNRP) for Somalia.

UNICEF leads the coordination of core clusters for nutrition, WASH and education, while remaining a key partner in health, protection and cross-sectoral coordination. Under the cluster simplification and localization approach, UNICEF will place greater emphasis on strengthening area-based coordination structures at subnational levels to enhance coherence, local capacity and responsiveness to community priorities. UNICEF will strengthen humanitarian coordination support, emphasizing nationalization and stronger locally led locally structures under the Humanitarian Reset agenda. Dedicated support will ensure child protection and gender-based violence mitigation and response remain priorities in the new consolidated protection cluster.

Through a decentralized field presence, UNICEF delivers integrated programming that brings essential services closer to children and families most at risk. Core interventions include treating and preventing acute malnutrition among children and pregnant and lactating women; expanding access to primary healthcare; and improving availability of safe water, sanitation and hygiene services. Education in emergencies through creation of safe and inclusive learning spaces remains a life-saving intervention: it protects children, reduces negative coping mechanisms, and connects children to core services. Education also helps create a better bridge to longer-term recovery efforts. Child protection interventions focus on case management, mental health and psychosocial support, gender-based violence prevention and response and reintegration of children formerly associated with armed groups. Humanitarian cash transfers are linked to key sectors, including nutrition, WASH and health.

UNICEF continues to expand community engagement through digital feedback platforms (e.g., U-Report) and community consultations that amplify the voices of children, women, and minority and marginalized groups. UNICEF will scale up prevention of aid diversion through digitization of the nutrition register and supplies, which strengthens traceability of essential services and supplies, and by enhancing inclusion of minority and marginalized groups. UNICEF will also strengthen preparedness and anticipatory action to enhance early response capacity and reduce the impact of shocks.

In line with the Humanitarian Reset and the 2026 HNRP, UNICEF will prioritize targeted life-saving interventions for the most vulnerable children and women in areas with the highest needs and limited access.

2026 PROGRAMME TARGETS



Health (including public health emergencies)

- 850,000 children and women accessing primary health care in UNICEF-supported facilities
- 150,000 children vaccinated against measles, supplemental dose



Nutrition

- 430,000 children 6-59 months with severe wasting admitted for treatment
- 900,000 primary caregivers of children 0-23 months receiving infant and young child feeding counselling



Child protection and GBV

- 116,000 children, adolescents and caregivers accessing community-based mental health and psychosocial support
- 83,000 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
- 1,500 children who have exited armed forces and groups provided with protection or reintegration support
- 10,000 unaccompanied and separated children provided with alternative care and/or reunified



Education

- 110,000 children accessing formal or non-formal education, including early learning
- 95,000 children receiving individual learning materials
- 2,400 teachers and facilitators trained in basic pedagogy and/or mental health and psychosocial support



Water, sanitation and hygiene

- 800,000 people accessing a sufficient quantity and quality of water for drinking and domestic needs
- 150,000 people accessing appropriate sanitation services
- 1,200,000 people reached with critical WASH supplies



Social protection

- 16,000 households reached with UNICEF-funded humanitarian cash transfers (including for social protection and other sectors)²⁴



Cross-sectoral (HCT, SBC, RCCE and AAP)

- 6,444,000 people reached with timely and life-saving information on how and where to access available services
- 650,000 people sharing their concerns and asking questions through established feedback mechanisms
- 120,400 people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations

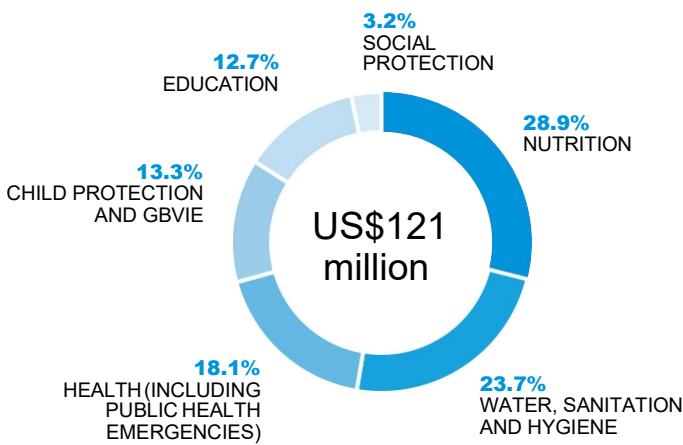
FUNDING REQUIREMENTS IN 2026

For 2026, UNICEF is appealing for \$121 million to meet the most critical humanitarian and life-saving needs of 1.2 million people in Somalia, including 744,000 children who will receive such essential services as treatment for severe wasting, primary healthcare and emergency WASH assistance. While humanitarian needs in Somalia remain alarmingly high due to the combined impacts of climate shocks, conflict and disease outbreaks, this appeal represents a 29 per cent reduction compared with 2025. The lower appeal requirement reflects a shift towards prioritizing life-saving interventions and alignment with the Somalia Humanitarian Needs and Response Plan and the Humanitarian Reset.

Given the widening gap between humanitarian needs and resources, UNICEF is adopting a prioritized, district-focused approach, focusing on the most vulnerable children and women and areas with the highest severity and overlapping risks. Funding will enable UNICEF and its partners to provide integrated multisectoral assistance and expand services in hard-to-reach locations.

UNICEF will also enhance activities supporting accountability to affected populations along with humanitarian cluster coordination and information management work. However, without the requested funding, UNICEF's capacity to support vulnerable families in accessing vital services – including clean water, health and nutrition services, learning opportunities, pivotal child protection support and responses to gender-based violence – will be hindered.

Flexible and predictable humanitarian funding remains essential not only to respond to immediate life-saving priorities but also to reinforce the resilience of Somali communities facing crises and fragility. Without urgent support, thousands of Somali children risk losing access to health and nutrition services, including infants who may miss life-saving vaccinations in 2026.



Sector	2026 requirements (US\$)
Health (including public health emergencies)	21,900,000
Nutrition	35,000,000
Child protection and GBViE	16,100,000
Education	15,400,000
Water, sanitation and hygiene	28,700,000
Social protection	3,900,000
Total	121,000,000

Figures are provisional and subject to change upon finalization of the 2026 inter-agency needs and planning documents.

ENDNOTES

1. United Nations Office for the Coordination of Humanitarian Affairs (OCHA), Draft 2026 Somalia Humanitarian Needs and Response Plan, OCHA, November 2025. Figures are provisional and will be updated following the formal approval of the 2026 HNRP by the Humanitarian Country Team.
2. Ibid.
3. Integrated Food Security Phase Classification (IPC), Somalia: IPC Acute Food Insecurity and Malnutrition Snapshot, July – December 2025, 23 September 2025.
4. The La Niña weather pattern is defined as cooler than normal sea-surface temperatures in the central and eastern tropical Pacific Ocean that impact global weather patterns. La Niña conditions recur every few years and can persist for as long as two years.
5. Integrated Food Security Phase Classification (IPC), Somalia: IPC Acute Food Insecurity and Malnutrition Snapshot, July – December 2025, 23 September 2025.
6. OCHA, Somalia Humanitarian Needs and Response Plan 2026. The estimate includes 62 per cent children, 16 per cent persons with disabilities, and 50 per cent females. This figure will be revised as soon as the 2026 Humanitarian Needs and Response Plan is released.
7. Ibid.
8. UNICEF is committed to prioritizing the most critical humanitarian assistance in 2026 amid a projected decline in funding. The reduced targets for 2026 reflect this sharper prioritization and are consistent with the anticipated downward adjustments in Somalia's Humanitarian Needs and Response Plan for 2026. Thus, the 2026 UNICEF target for people to be reached is 33 per cent lower than in 2025.
9. This figure is based on the highest WASH target (1.2 million people to be reached with emergency WASH supplies, including 744,000 children, 192,000 people with disabilities and 119,000 children with disabilities) to prevent double counting. The disaggregation applied for humanitarian planning in 2026 assumes 50 per cent female, 62 per cent children, and 16 per cent children living with disabilities or other difficulties. In 2026, UNICEF is adopting a sharper prioritization approach, focusing more directly on children's needs. Accordingly, the target of 744,000 children to be reached also encompasses children who will receive WASH assistance, nutritional treatment, primary healthcare, community-based mental health and psychosocial support and access to formal or non-formal education, including early learning opportunities.
10. The estimate is based on 62 per cent children (744,000) among the overall target of 1.2 million people to be reached; 50 per cent are girls.
11. United Nations Office for the Coordination of Humanitarian Affairs (OCHA), Draft 2026 Somalia Humanitarian Needs and Response Plan, OCHA, November 2025. Sex, age and disability disaggregation includes: 32 per cent boys, 30 per cent girls, 16 per cent men, 17 per cent women, 5 per cent elderly people and 16 per cent people with disabilities.
12. Integrated Food Security Phase Classification (IPC), Somalia: IPC Acute Food Insecurity and Malnutrition Snapshot, July – December 2025, 23 September 2025.
13. Ibid.
14. Famine Early Warning System Network (FEWS NET), Somalia Key Messages Update: Needs likely to increase in north and central areas with below-average deyr forecast, FESNET, August 2025.
15. Office of the United Nations High Commissioner for Refugees (UNHCR), Somalia: Operational update, August 2025.
16. ACLED, Somalia country-level conflict events and fatalities dataset, 2024–2025, accessed 7 October 2025, at <https://acleddata.com/conflict-data/>.
17. The African Union Support and Stabilization Mission in Somalia is the peacekeeping operation that started in 2025 and replaced the African Union Transition Mission in Somalia.
18. Somalia Federal Ministry of Health: IDSR Epidemiology Bulletin for EPI Week 40 (29 September – 5 October 2025), 12 October 2025.
19. Health Cluster estimate to inform the Humanitarian Needs and Response Plan. This figure will be updated after the Humanitarian Needs and Response Plan 2026 is released.
20. Nutrition Cluster estimate to inform the Humanitarian Needs and Response Plan. This figure will be updated after the Humanitarian Needs and Response Plan 2026 is released.
21. Child Protection Area of Responsibility estimate to inform the Humanitarian Needs and Response Plan. This figure will be updated after the Humanitarian Needs and Response Plan 2026 is released.
22. Education Cluster estimate to inform the Humanitarian Needs and Response Plan. This figure will be updated after the Humanitarian Needs and Response Plan 2026 is released.
23. WASH Cluster estimate to inform the Humanitarian Needs and Response Plan. This figure will be updated after the Humanitarian Needs and Response Plan 2026 is released.
24. The targets are defined as households that UNICEF will directly assist with humanitarian cash transfers.