

HORN OF AFRICA - COMPLEX EMERGENCY

FACT SHEET #9, FISCAL YEAR (FY) 2017

AUGUST 31, 2017

NUMBERS AT A GLANCE

6.2 million

People in Somalia Experiencing Acute Food Insecurity FEWS NET, FSNAU – August 2017

8.5 million

People in Ethiopia
Experiencing Acute Food
Insecurity
GoE – August 2017

3.4 million

People in Kenya
Experiencing Acute Food
Insecurity
GoK – July 2017

3.1 million

People in Somalia Experiencing Crisis or Emergency Levels of Acute Food Insecurity FEWS NET, FSNAU – August 2017

875,486

Somali Refugees in Neighboring Countries UNHCR – August 2017

HIGHLIGHTS

- UN and GoE release revised 2017 HRD, identifying approximately
 8.5 million people in Ethiopia requiring emergency food assistance
- Estimated food-insecure population in Kenya increases to 3.4 million people
- USAID Administrator announces an additional \$91 million to support humanitarian interventions in Ethiopia

HUMANITARIAN FUNDING

FOR THE HORN OF AFRICA RESPONSE IN FY 2016–2017

USAID/OFDA ¹	\$327,054,137		
USAID/FFP ²	\$1,096,470,056		
State/PRM ³	\$346,392,670		
\$1,769,916,863			

KEY DEVELOPMENTS

- On August 7, the Government of Ethiopia (GoE) and the UN released the Mid-Year Review of the 2017 Humanitarian Requirements Document (HRD) for Ethiopia, identifying an estimated 8.5 million people in need of emergency food assistance through December 2017—a 9 percent increase from the 7.8 million people identified in April. The revised HRD is also targeting approximately 3.6 million children and pregnant and lactating women for prevention and treatment of moderate acute malnutrition (MAM) and 375,000 children for prevention and treatment of severe acute malnutrition (SAM) in 2017—significant increases from the estimated 2.7 million MAM cases and 303,000 SAM cases targeted in the initial 2017 HRD, released in January. The revised appeal outlines nearly \$488 million in additional funding required to meet urgent humanitarian needs in Ethiopia from August–December 2017.
- An estimated 3.4 million people in Kenya are food-insecure and in need of humanitarian assistance—a 31 percent increase from the estimated 2.6 million food-insecure people identified in March, according to the results of the Government of Kenya (GoK)-led long rains assessment, released in early August. The current caseload represents the highest number of food-insecure people in Kenya since 2011.
- On August 31, USAID Administrator Mark A. Green announced nearly \$91 million in new U.S. Government (USG) humanitarian assistance to support critical relief interventions in Ethiopia. The total includes nearly \$19 million from USAID/OFDA to bolster humanitarian coordination and meet the health; nutrition; and water, sanitation, and hygiene (WASH) needs of drought-affected households and nearly \$72 million from USAID/FFP for emergency food and nutrition assistance. The new funding brings total USG humanitarian assistance for Ethiopia to nearly \$454 million to date in FY 2017.

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¹ USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA)

² USAID's Office of Food for Peace (USAID/FFP)

³ U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM); State/PRM funding provided for Somali refugees in Yemen is reflected in the FY 2017 USG Yemen Complex Emergency fact sheets.

SOMALIA

- An estimated 3.1 million people will likely face Crisis—IPC 3—or Emergency—IPC 4—levels of acute food insecurity through December 2017, according to the results of the post-gw rains assessment, released by the Somalia Food Security and Nutrition Analysis Unit (FSNAU) and the USAID-funded Famine Early Warning Systems Network (FEWS NET) in late August.⁴ The projected food-insecure population represents a slight decrease from the estimated 3.2 million people facing Crisis and Emergency-level food insecurity as of April, primarily due to sustained humanitarian assistance and localized gw rainfall; however, FSNAU and FEWS NET warn that the risk of Famine—IPC 5—persists through December in acutely drought-affected areas. The assessment found that overall gw cereal yields are nearly 40 percent below average, with yields as much as 87 percent below average in northwest Somalia, due to the late onset and early cessation of the April-to-June gw rains. FSNAU and FEWS NET also report that substantial livestock losses—an estimated 20–50 percent in southern areas and up to 60 percent in central and northern areas—have increased household vulnerability and reliance on humanitarian assistance among pastoral and agro-pastoral communities.
- Acute malnutrition levels remain high and continue to deteriorate, particularly among displaced populations, according to the post-gu findings. Results from more than 30 nutrition surveys conducted by FSNAU and partners between June and July indicate that approximately 388,000 children younger than five years of age are acutely malnourished, including 87,000 children experiencing severe acute malnutrition (SAM). In two-thirds of the nutrition surveys conducted, Global Acute Malnutrition (GAM) prevalence exceeded the UN World Health Organization (WHO) emergency threshold of 15 percent. In addition, morbidity rates were at least 20 percent or higher in more than half of the surveyed populations, contributing to reported high levels of acute malnutrition. Elevated levels of acute malnutrition, particularly among internally displaced persons (IDPs) in Somalia, are primarily due to disease, poor food consumption, high food prices, frequent population movement, and limited access to livelihood activities, according to the UN.
- During July, relief organizations treated nearly 512,000 children and pregnant and lactating women experiencing acute malnutrition in Somalia, exceeding the monthly target of more than 450,000 acutely malnourished people, according to the UN. The emergency nutrition response in July supported the highest number of acutely malnourished individuals to date in 2017, which the UN attributes to deteriorating nutrition conditions, due in part to humanitarian access constraints and limited availability of health services. Relief actors in Somalia also provided nutrition supplements to nearly 474,000 children and pregnant and lactating women during July to prevent deterioration of nutrition conditions.
- The UN reported that drought contributed to the displacement of an estimated 68,400 people in July, bringing the total number of drought-related IDPs in Somalia to approximately 859,000 people since November 2016. In addition, conflict and insecurity displaced approximately 60,000 people in July, primarily in Lower Shabelle Region, where intercommunal clashes and military operations continue. On August 1, intercommunal clashes in and around Marka town in Lower Shabelle's Marka District displaced an estimated 9,600 people to nearby areas of the region. The early August fighting follows late-July clashes in Marka District between African Union Mission in Somalia (AMISOM) forces and suspected members of the al-Shabaab armed group, which displaced more than 15,000 people from Lower Shabelle's Golweyn village. Between January and July, the UN recorded more than 237,000 IDPs in Lower Shabelle, including 87,000 people displaced due to conflict and insecurity.
- The Federal Government of Somalia (FGoS) and WHO reported less than 100 suspected cholera cases and no related deaths from August 14 to 20, representing an approximately 91 percent decrease from the nearly 1,070 suspected cholera cases reported from July 10–16. WHO attributes the decreased transmission to timely interventions by national health authorities and other response stakeholders. Health actors continue to report new suspected cholera cases in Banadir Region, which accounted for more than 60 percent of the new cases reported during the time period. Health actors in Lower Juba reported the majority of the remaining cases.
- Cumulatively, the FGoS Ministry of Health (MoH), the Somaliland MoH, and WHO recorded nearly 76,240 suspected
 cholera cases and nearly 1,160 related deaths between January and July, with a case fatality rate (CFR) of approximately
 1.5 percent, exceeding the WHO emergency threshold of 1 percent. The CFR for suspected cholera cases as of July,

⁴ The Integrated Food Security Phase Classification (IPC) is a standardized tool that aims to classify the severity and magnitude of food insecurity. The IPC scale, which is comparable across countries, ranges from Minimal—IPC 1—to Famine—IPC 5. A Famine classification applies to a wider geographical location, while the term Catastrophe—IPC 5—refers to an extreme lack of food at the household level even with full employment of coping strategies. Famine is determined when more than 20 percent of households in an area are classified as experiencing Catastrophe, when the GAM level exceeds 30 percent, and when the crude mortality rate exceeds two people per 10,000 persons per day.

however, was 0.3 percent, significantly less than the emergency threshold. Relief organizations, including USAID/OFDA partners, continue to conduct health and WASH interventions in affected areas to identify and treat cholera cases and prevent continued transmission.

ETHIOPIA

- On August 7, the GoE released the Mid-Year Review of the 2017 HRD, identifying an estimated 8.5 million people in need of emergency food assistance through December 2017—a 9 percent increase from the 7.8 million people identified in April. The revised HRD also targets approximately 3.6 million children and pregnant and lactating women will for prevention and treatment of MAM and 375,000 children for prevention and treatment of SAM in 2017—significant increases from the estimated 2.7 million MAM cases and 303,000 SAM cases targeted in the initial 2017 HRD.
- On July 31, USAID/FFP partner the UN World Food Program (WFP) commenced the fifth round of emergency food distributions for vulnerable populations in 22 woredas, or districts, of Ethiopia's acutely drought-affected Somali Region, where FEWS NET projected in mid-July that the most vulnerable populations could experience Catastrophe—IPC 5—levels of acute food insecurity if gaps in emergency food distributions persisted.⁵ The distributions are targeting approximately 3.3 million beneficiaries in the region.
- As of June, Somali Region hosted approximately 577,700 IDPs in 265 sites—an increase of approximately 120,900 IDPs since March/April, the International Organization for Migration (IOM) reports. Approximately 51 percent of surveyed IDPs identified drought as the primary cause of displacement, while 48 percent identified conflict. IDPs' primary humanitarian needs included emergency shelter and WASH support, with people in approximately 88 percent of surveyed sites reporting plastic sheeting as the most needed relief commodity and 96 percent requesting shelter repair materials, IOM reports. Approximately 89 percent of surveyed IDP sites did not meet the Sphere standard of at least 15 liters of safe drinking water per person per day, while 83 percent of sites reportedly lacked latrines.⁶
- Health workers in Ethiopia recorded more than 38,400 cases of acute watery diarrhea (AWD) and approximately 800 related deaths between January and July, according to WHO. The weekly AWD caseload has declined significantly since mid-March, when health workers recorded approximately 4,400 new AWD cases during a single week. In comparison, health actors reported between 120 and 140 suspected cases countrywide per week during the last three weeks of July. Despite the decline in new AWD cases, health stakeholders note that AWD risk factors persist. The GoE and humanitarian organizations are conducting multi-sector interventions and strengthening national health systems in AWD-affected areas to prevent further transmission, the UN reports.
- As of mid-August, Ethiopia's ongoing fall armyworm (FAW) infestation had spread to more than 400 districts across six regions—Amhara; Benishangul Gumuz; Gambella; Oromiya; Southern Nations, Nationalities, and Peoples (SNNP); and Tigray—according to the GoE and the UN Food and Agriculture Organization (FAO). Oromiya remained the most-affected region, with FAW infestations impacting more than 741,000 acres of crops across 185 districts. FAW had affected nearly 1.5 million acres—22 percent—of the nearly 6.7 million acres of planted maize crops as of mid-August. Overall, the GoE and FAO estimate that as many as 6.2 million acres of maize crops are at risk of FAW infestations.
- As of August 16, the GoE and international donors had provided \$831 million—including nearly \$233 million carried over from the previous year—toward the \$1.3 billion revised HRD appeal, accounting for increased needs through December 2017. The GoE had provided more than \$40 million—approximately 34 percent of its \$117 million pledge—toward the appeal as of the same date. With the ongoing drought and increasing needs, the UN reports that additional funding is urgently needed across all sectors, particularly for food, nutrition, and WASH interventions. Overall, the revised HRD outlines nearly \$488 million in additional funding required to meet urgent humanitarian needs in Ethiopia from August—December 2017.

⁵ The Sphere Project was launched in 1997 by the International Committee of the Red Cross (ICRC), the UN, NGOs, and donors to develop a set of universal minimum standards for humanitarian assistance and thereby improve the quality of assistance provided to disaster-affected persons and to enhance the accountability of humanitarian agencies.

- USAID recently contributed an additional \$91 million in humanitarian assistance for Ethiopia. Of the total, USAID/OFDA contributed an additional \$16 million to the Ethiopia Humanitarian Fund (EHF)—a country-based pooled fund managed by the UN Office for the Coordination of Humanitarian Affairs (OCHA)—to address prioritized life-saving needs identified across sectors, as well as nearly \$2 million to NGO partners to support critical health, nutrition, and WASH interventions in drought-affected areas.
- USAID/FFP also contributed \$55 million to WFP to provide approximately 87,900 metric tons (MT) of food assistance and specialized nutrition products, procured locally or regionally, to drought-affected Ethiopians and refugees in Ethiopia who fled drought in areas of origin. In addition, USAID/FPP is providing 19,470 MT of in-kind food assistance—valued at an estimated \$15 million—to WFP to support emergency food distributions for approximately 1.7 million food-insecure people in Somali, as well as nearly 470 MT of specialized nutrition products—valued at an estimated \$742,500—to Mercy Corps to provide MAM treatment in the region.

KENYA

- An estimated 3.4 million people in Kenya are food-insecure and in need of humanitarian assistance—a 31 percent increase from the estimated 2.6 million food-insecure people identified in March, according to the results of the GoK-led long rains assessment, released in early August. Of the total food-insecure population, approximately 2.6 million people are experiencing Crisis—IPC 3—and higher levels of acute food insecurity, and an estimated 800,000 people are facing Stressed—IPC 2—levels. The current caseload represents the country's highest number of food-insecure people since 2011. The assessment attributes deteriorating food security to previous years of below-average rainfall, reduced crop production, crop damage from FAW infestations, high staple food prices, and reduced food stocks at the household and national levels. The GoK and food security stakeholders—including FEWS NET, WFP, and NGOs—expect current food insecurity levels to persist through the end of 2017.
- Approximately 420,700 children younger than five years of age and 39,100 pregnant and lactating women are
 experiencing acute malnutrition—a slight decrease from the estimated 465,600 people facing acute malnutrition as of
 March, according to the assessment results. Nutrition actors report that conditions are most critical in Kenya's arid and
 semi-arid lands (ASALs), with the nutrition situation expected to remain the same or deteriorate through October.
 Improved seasonal rainfall during the upcoming October-to-December short rains could moderately improve food
 security and nutrition conditions by early 2018.
- The UN Children's Fund (UNICEF) reported a significant increase in SAM cases in Kenya from January to May compared to 2015/2016; however, reported SAM admissions declined significantly in June and July. UNICEF attributes the June/July decrease to under-reporting of SAM admissions due to a nationwide nurses' strike that began in early June. In the ASALs, for example, health center reporting rates declined from an average of 92 percent to just 42 percent as of July. UNICEF notes that countrywide consumption of Ready-to-Use Therapeutic Food and other nutrition supplements have remained stable in recent months, indicating that the number of children receiving SAM treatment likely exceeded recorded figures.
- In response to deteriorating food security and nutrition conditions, particularly in the ASALs, the GoK and relief actors—including USAID partners—are scaling up life-saving interventions and providing health, nutrition, and WASH services in the worst-affected counties. USAID/FFP recently contributed an additional \$10 million to WFP to provide urgently needed assistance in drought-affected ASALs. This contribution includes an additional \$1.25 million to support WFP's blanket supplemental feeding program in counties with the highest acute malnutrition levels, as well as \$8.75 million for WFP's drought relief operations, enabling WFP to target 360,000 individuals with cash-based transfers for food throughout the post-harvest months. To date in FY 2017, USAID/FFP has contributed more than \$59 million to WFP to address ongoing drought-related needs and high levels of acute malnutrition, as well as to support refugee response and elections contingency operations.
 - USAID/OFDA recently provided nearly \$9 million in additional FY 2017 assistance for critical agricultural, nutrition, and WASH interventions in drought-affected areas of Kenya. With USAID/OFDA support, NGO partners are conducting interventions to treat and prevent acute malnutrition, facilitating increased access to safe drinking water, and promoting safe hygiene practices, among other activities.

CONTEXT

- Recurrent natural disasters and ongoing complex emergencies remain major contributors to vulnerability across the Horn of Africa, negatively affecting the lives and livelihoods of populations across the region. Somalia has experienced a persistent complex emergency since 1991 due to chronic food insecurity, widespread violence, and recurring droughts and floods. The 2011 drought severely reduced food security among Somali pastoralists and populations in marginal farming areas, resulting in Famine levels of food insecurity in areas of Bakool, Bay, Lower Shabelle, and Middle Shabelle regions, as well as among IDPs in Mogadishu and the nearby Afgooye corridor.
- Despite modest improvements in recent years, malnutrition rates in Somalia remain among the highest in the world, and ongoing insecurity in the country—particularly in areas that lack established local authorities and where al-Shabaab is present—contributes to the complex emergency. Sustained life-saving assistance, coupled with interventions aimed at building resilience, is critical to help vulnerable households meet basic needs, reduce malnutrition, and protect livelihoods. An estimated 6.7 million people require humanitarian assistance through December 2017.
- Since the Horn of Africa drought crisis of 2011, USAID has scaled up efforts to build resilience in drought-prone areas. The GoK continues to lead drought response efforts, and the GoE is building increased response capacity, with support from the USG, other donors, and relief actors.
- Multiple consecutive seasons of below-normal rainfall and the effects of the 2015/2016 El Niño climatic event
 resulted in deteriorating agricultural, livestock, food security, and nutrition conditions in northeastern and central
 Ethiopia. By December 2015, the GoE estimated that 10.2 million people required relief food assistance and other
 humanitarian interventions during 2016, in addition to nearly 8 million chronically food-insecure people requiring
 Productive Safety Net Program support.
- In response to the drought in Ethiopia, USAID activated a Disaster Assistance Response Team (DART) and Washington, D.C.,-based Response Management Team (RMT) in March 2016; the DART and RMT stood down in November 2016 as humanitarian conditions improved. In August 2017, the GoE estimated that 8.5 million people will require humanitarian assistance in Ethiopia through December, primarily due to newer drought-related needs in southern and southeastern parts of the country.
- In addition to drought, populations across Ethiopia confront other challenges—including seasonal flooding, localized intercommunal conflict, above-average food prices, disease outbreaks, and limited access to health and WASH services—that contribute to sustained humanitarian needs and an ongoing complex emergency.
- In Kenya, drought conditions have exacerbated chronic stressors, including food insecurity and malnutrition. Through ongoing FY 2015–2017 programs, USAID/OFDA and USAID/FFP are supporting efforts to strengthen health and nutrition systems in drought-affected areas in coordination with USAID/Kenya resilience initiatives to mitigate the effects of recurrent natural hazards.
- On October 6, 2016, U.S. Ambassador Stephen M. Schwartz renewed the disaster declaration for the complex emergency in Somalia for FY 2017. On March 28, 2017, Ambassador Schwartz declared a separate disaster due to drought and food insecurity in Somalia for FY 2017.
- On October 18, 2016, U.S. Chargé d'Affaires, a.i., Peter H. Vrooman redeclared a disaster for Ethiopia in FY 2017 in response to the ongoing complex emergency.
- On February 17, 2017, U.S. Ambassador Robert F. Godec declared a disaster for Kenya due to the effects of drought and increasing food insecurity and malnutrition.

USG HUMANITARIAN FUNDING FOR THE HORN OF AFRICA RESPONSE IN FY 2017

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
	USAID/OFDA ²		
	ETHIOPIA		
Action Contre la Faim (ACF)	Nutrition, WASH	Oromiya	\$1,779,464
CARE	Agriculture and Food Security, WASH	Oromiya	\$951,003
	Nutrition, WASH	Amhara, Tigray	\$1,642,303
Concern	Agriculture and Food Security, Health, Nutrition, WASH	Amhara	\$1,995,141
Catholic Relief Services (CRS)	Joint Award with USAID/Ethiopia: Risk Management Policy and Practice	Countrywide	\$992,920
GOAL	Nutrition	SNNP	\$2,000,000
iMMAP	Humanitarian Coordination and Information Management	Countrywide	\$152,814
International Medical Corps (IMC)	Health, Nutrition, WASH	Oromiya, SNNP	\$2,750,000
IOM	Economic Recovery and Market Systems (ERMS), Humanitarian Coordination and Information Management, Logistics Support and Relief Commodities, Shelter and Settlements, WASH	Countrywide	\$1,700,000
International Potato Center (CIP)	Agriculture and Food Security	SNNP	\$500,000
International Rescue Committee (IRC)	Humanitarian Coordination and Information Management	Countrywide	\$311,953
	WASH	Somali	\$2,070,219
Mercy Corps	Nutrition, WASH	Somali	\$1,711,287
	Ethiopia Humanitarian Fund	Countrywide	\$29,500,000
OCHA	Humanitarian Coordination and Information Management	Countrywide	\$2,000,000
Oxfam	Agriculture and Food Security, ERMS, WASH	Somali	\$6,900,000
Project Concern International (PCI)	Joint Award with USAID/Ethiopia: Risk Management Policy and Practice	Countrywide	\$500,000
Troject Concern mechanisma (CC)	Agriculture and Food Security, WASH	Oromiya	\$783,160
Save the Children/U.S. (SC/US)	Agriculture and Food Security, ERMS, Nutrition, WASH	Afar, Somali	\$6,300,000
UN Department of Safety and Security (UNDSS)	Humanitarian Coordination and Information Management	Addis Ababa, SNNP, Somali	\$258,786
UNICEF	Health, Nutrition, WASH	Afar, Oromiya, SNNP, Somali	\$9,482,408
U.S. Forest Service (USFS)	Disaster Assistance Support Program	Countrywide	\$200,000
UN Humanitarian Air Service (UNHAS)	Logistics Support and Relief Commodities	Somali	\$500,000
LISAID/Ethiopia	Agriculture and Food Security	Oromiya	\$499,500
USAID/Ethiopia	Agriculture and Food Security	Somali	\$499,974
	Agriculture and Food Security	Countrywide	\$250,000

WFP	Logistics Support and Relief Commodities	Countrywide	\$8,000,000
		Program Support	\$859,751
TOTAL USAID/OFDA FUNDING FOR TH	HE ETHIOPIA RESPONSE IN FY 2017		\$85,090,683
	KENYA		
Agency for Technical Cooperation and Development (ACTED)	WASH	Baringo, Samburu	\$1,000,000
Concern	Nutrition, WASH	Marsabit	\$2,000,000
Food for the Hungry (FH)	Agriculture and Food Security, Nutrition, WASH	Marsabit	\$1,099,951
IRC	Nutrition, WASH	Turkana	\$2,000,000
Kenya Red Cross Society (KRCS)	WASH	Kilifi, Kwale, Marsabit, Turkana	\$500,188
Mercy-USA	Nutrition, WASH	Garissa	\$1,499,490
Rural Agency for Community Development and Assistance (RACIDA)	Agriculture and Food Security, ERMS, WASH	Mandera	\$812,871
SC/US	Nutrition, WASH	Mandera, Turkana	\$4,000,000
UNICEF	Nutrition	ASAL counties	\$750,000
WASDA	ERMS, WASH	Wajir	\$499,937
World Vision	Nutrition, WASH	Kilifi	\$1,295,183
TOTAL USAID/OFDA FUNDING FOR TH	HE KENYA RESPONSE IN FY 2017		\$15,457,620
	SOMALIA		
Implementing Partners	Agriculture and Food Security, ERMS, Health, Humanitarian Coordination and Information Management, Logistics Support and Relief Commodities, Nutrition, Risk Management Policy and Practice, WASH	Countrywide	\$81,645,251
		Program Support	\$34,653
TOTAL USAID/OFDA FUNDING FOR TH	HE SOMALIA RESPONSE IN FY 2017		\$81,679,904
TOTAL USAID/OFDA FUNDING FOR TH	IE HORN OF AFRICA RESPONSE IN I	FY 2017	\$182,228,207

	USAID/FFP		
	DJIBOUTI		
UNICEF	Nutrition Assistance	Countrywide	\$380,473
WFP	2,960 MT of In-Kind Food Emergency Assistance	Countrywide	\$4,249,890
TOTAL USAID/FFP FUNDING FOR THE DJIBOUTI RESPONSE IN FY 2017			\$4,630,363
	ETHIOPIA ³		
CRS/Joint Emergency Operation (CRS/JEOP)	261,963 MT of In-Kind Relief Food Assistance	Amhara, Dire Dawa, Oromiya, SNNP, Tigray	\$154,120,300
Mercy Corps	1,136 MT of In-Kind Nutrition Commodities	Somali	\$1,498,900
UNICEF	Nutrition Assistance	Countrywide	\$89,614

WFP	58,970 MT of In-Kind Relief Food Assistance,	Somali	\$42,998,000
	Local and Regional Procurement, Nutrition Assistance	Somali	\$73,000,000
	39,150 MT of In-Kind Food Assistance for Refugees	Countrywide	\$30,198,000
	Local and Regional Procurement, Nutrition Assistance	Countrywide	\$20,000,000
TOTAL USAID/FFP FUNDING FOR THE	ETHIOPIA RESPONSE IN FY 2017 ⁴		\$321,905,641
	KENYA		
UNICEF	Nutrition Assistance	Countrywide	\$89,614
WFP ⁴	Nutrition Assistance	ASAL counties	\$8,250,000
	5,040 MT of In-Kind Food Assistance, Cash Transfers	Countrywide	\$16,000,000
	28,450 MT of In-Kind Food Assistance, Cash Transfers, Complementary Activities	Garissa, Turkana	\$35,000,000
TOTAL USAID/FFP FUNDING FOR THE KENYA RESPONSE IN FY 2017			\$59,339,614
SOMALIA			
WFP	56,720 MT of In-Kind Emergency Food Assistance	Countrywide	\$94,995,126
	Food Vouchers and Cash Transfers for Relief Food and Livelihoods	Countrywide	\$53,425,000
Implementing Partners	Food Vouchers and Cash Transfers for Relief Food and Livelihoods, In-Kind Nutrition Assistance	Countrywide	\$71,450,000
TOTAL USAID/FFP FUNDING FOR THE SOMALIA RESPONSE IN FY 2017			\$219,870,126
TOTAL USAID/FFP FUNDING FOR THE HORN OF AFRICA RESPONSE IN FY 2017			\$605,745,744

	State/PRM ⁵		
	DJIBOUTI		
IOM	Contribution to Yemen Revised Regional Appeal for Djibouti	Obock	\$1,200,000
Office of the UN High Commissioner for Refugees (UNHCR)	Protection and Assistance for Refugees	Countrywide	\$5,400,000
TOTAL STATE/PRM FUNDING FOR THE	DJIBOUTI RESPONSE IN FY 2017		\$6,600,000
	ETHIOPIA		
IOM	Contribution to Yemen Revised Regional Appeal for Ethiopia	Countrywide	\$1,100,000
IRC	Livelihoods and Protection for Refugees	Somali	\$1,000,000
UNHCR	Protection and Assistance for Refugees	Countrywide	\$43,965,000
UNHAS	Logistics Support and Relief Commodities	Countrywide	\$560,000
TOTAL STATE/PRM FUNDING FOR THE ETHIOPIA RESPONSE IN FY 2017 \$46,625,000			
KENYA			
UNHCR	Protection and Assistance for Refugees	Countrywide	\$38,200,000

UNHAS	Logistics Support and Relief Commodities	Countrywide	\$530,000	
		Program Support	\$83,924	
TOTAL STATE/PRM FUNDING FOR TH	HE KENYA RESPONSE IN FY 2017		\$38,813,924	
	SOMALIA			
International Humanitarian Organizations	Multi-Sector Protection and Assistance Activities for Refugees, IDPs, and Conflict-Affected people	Countrywide	\$35,130,000	
TOTAL STATE/PRM FUNDING FOR THE SOMALIA RESPONSE IN FY 2017		\$35,130,000		
TOTAL STATE/PRM FUNDING FOR THE HORN OF AFRICA RESPONSE IN FY 2017		\$127,168,924		
TOTAL USG HUMANITARIAN FUNDING FOR THE HORN OF AFRICA RESPONSE IN FY 2017		\$915,142,875		

USG HUMANITARIAN FUNDING FOR THE HORN OF AFRICA RESPONSE IN FY 2016

TOTAL USAID/OFDA FUNDING FOR THE ETHIOPIA RESPONSE IN FY 2016	\$84,831,378
TOTAL USAID/OFDA FUNDING FOR THE SOMALIA RESPONSE IN FY 2016	\$59,994,552
TOTAL USAID/OFDA FUNDING FOR THE HORN OF AFRICA RESPONSE IN FY 2016	\$144,825,930
TOTAL USAID/FFP FUNDING FOR THE DJIBOUTI RESPONSE IN FY 2016	\$3,862,800
TOTAL USAID/FFP FUNDING FOR THE ETHIOPIA RESPONSE IN FY 2016	\$385,459,600
TOTAL USAID/FFP FUNDING FOR THE KENYA RESPONSE IN FY 2016 ⁶	\$30,396,000
TOTAL USAID/FFP FUNDING FOR THE SOMALIA RESPONSE IN FY 2016	\$71,005,912
TOTAL USAID/FFP FUNDING FOR THE HORN OF AFRICA RESPONSE IN FY 2016	\$490,724,312
TOTAL STATE/PRM FUNDING FOR THE DJIBOUTI RESPONSE IN FY 2016	\$5,643,713
TOTAL STATE/PRM FUNDING FOR THE ETHIOPIA RESPONSE IN FY 2016	\$80,934,815
TOTAL STATE/PRM FUNDING FOR THE KENYA RESPONSE IN FY 2016	\$77,595,218
TOTAL STATE/PRM FUNDING FOR THE SOMALIA RESPONSE IN FY 2016	\$55,050,000
TOTAL STATE/PRM FUNDING FOR THE HORN OF AFRICA RESPONSE IN FY 2016	\$219,223,746
TOTAL USG HUMANITARIAN FUNDING FOR THE HORN OF AFRICA RESPONSE IN FY 2016	\$854,773,988
TOTAL USG HUMANITARIAN FUNDING FOR THE DJIBOUTI RESPONSE IN FY 2016–2017	\$20,736,876
TOTAL USG HUMANITARIAN FUNDING FOR THE ETHIOPIA RESPONSE IN FY 2016–2017	\$1,004,847,117
TOTAL USG HUMANITARIAN FUNDING FOR THE KENYA RESPONSE IN FY 2016–2017	\$221,602,376
TOTAL USG HUMANITARIAN FUNDING FOR THE SOMALIA RESPONSE IN FY 2016–2017	\$522,730,494

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly reported amounts as of August 31, 2017.

TOTAL USG HUMANITARIAN FUNDING FOR THE HORN OF AFRICA RESPONSE IN FY 2016–2017

\$1,769,916,863

² Estimated value of food assistance and transportation costs at time of procurement; subject to change.

³ In FY 2017, USAID/FFP provided 669 MT of in-kind specialized nutrition commodities—procured during the previous fiscal year—to Mercy Corps for its joint USAID/OFDAand USAID/FFP-funded nutrition program in Ethiopia's Somali Region. The value of the commodity and associated transportation costs were reported in the previous fiscal year and are not reflected in FY 2017 funding.

⁴In FY 2017, USAID/FFP provided more than 22,100 MT of in-kind, non-emergency commodities, valued at an estimated \$20 million, to WFP Kenya Protracted Relief and Recovery Operation (PRRO) 200736. While these resources contributed to drought relief, they are not reflected in FY 2017 funding.

⁵ State/PRM funding provided through the Yemen revised regional appeal for Djibouti and Ethiopia is also reflected in FY 2017 USG Yemen Complex Emergency fact sheets. State/PRM funding provided through the South Sudan Supplementary Budget for South Sudanese refugees in Ethiopia is also reflected in the FY 2017 USAID/DCHA South Sudan Crisis fact sheets.

⁶ In FY 2016, USAID/FFP provided 21,650 MT of in-kind, non-emergency commodities, valued at an estimated \$22.9 million, and \$10.5 million in non-emergency cash transfers to support drought related efforts through WFP Kenya PRRO 200736. While these resources contributed to drought relief, they are not reflected in FY 2016 funding.

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations
 that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for
 disaster responses around the world can be found at www.interaction.org.
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietary, and environmentally appropriate assistance.
- More information can be found at:
 - USAID Center for International Disaster Information: www.cidi.org.
 - Information on relief activities of the humanitarian community can be found at www.reliefweb.int.