



Integrated Food Security Phase Classification

Evidence and Standards for Better Food Security and Nutrition Decisions

Somalia

2025 Post *Gu* IPC Analysis

A Briefing Presentation for All Stakeholders

23 September 2025, Mogadishu

FSNAU Managed by



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FSNAU funding for the 2025 Post *Gu* seasonal assessments and subsequent IPC analyses was provided by: UK, EU, Sweden, Switzerland & AfDB

Somalia 2025 Post *Gu* Food Security and Nutrition Outcomes and Projections

Participating Institutions



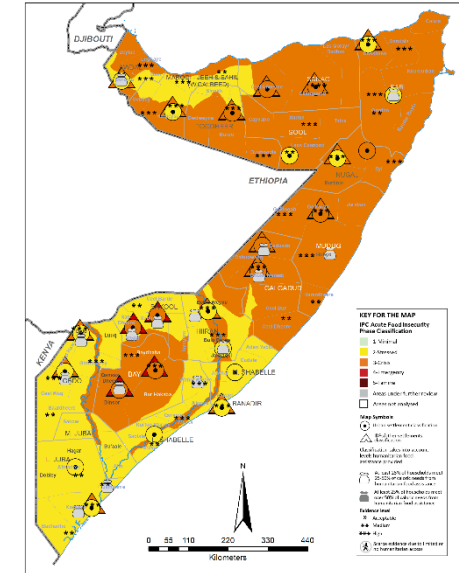
Somalia TWG Members: FGS Ministries/Institutions (Agriculture, Livestock, Health, Disaster Management, Statistics), FSNAU/FAO, FEWS NET, WFP/VAM, UNICEF, WHO, Action Against Hunger, REACH, Food Security Cluster, Nutrition Cluster, Health Cluster, WASH Cluster, CARE, GREDO, NRC, SCI, WASDA, WARDI, and Somali NGO Consortium

- ❑ **IPC Analysis process:** The 2025 Post *Gu* IPC AFI/AMN analysis was organized by the IPC Core Group. The IPC Global Support Unit (GSU) provided technical support throughout the analysis.
- ❑ **Participation:** **203** participants drawn from **94** institutions: Government Institutions (FGS, FMSs and Somaliland) – 27, UN (Agencies, Funds and Programmes) – 9, Local and International NGOs – **55**, and other Technical Partners (FEWS NET, REACH , IPC GSU) – 3
- ❑ **Unit of analysis:** Livelihoods zones in rural areas, internally displaced population groups and urban populations groups across Somalia
- ❑ **Analysis period** was determined considering seasonality of food security and nutrition outcomes in Somalia:
 - IPC AFI and IPC AMN Current: July-September 2025 (*Hagaa*)
 - IPC AFI and IPC AMN Projection: October-December 2025 (*Deyr*)
- ❑ **Population Analysed** - **19,280,850** total population of Somalia, used of humanitarian planning purposes for 2025
Source: OCHA

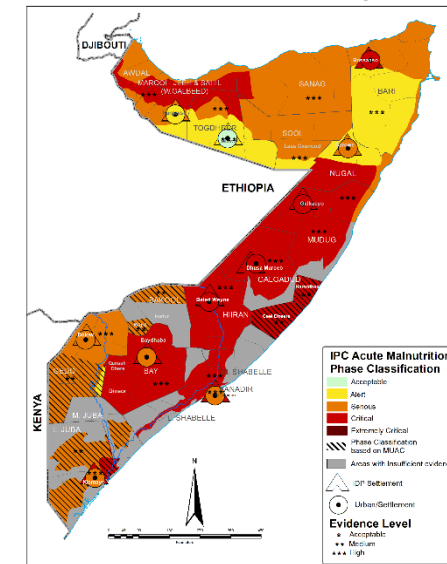
Data Sources:

- FSNAU, WFP, FEWS NET/USGS, FAO SWALIM, IGAD/ICPAC, Food Security Cluster, Nutrition Cluster, UNHCR, OCHA, WHO, UNICEF, ACLED, REACH, AYUUB, EDRO, GREDO, and SRC.

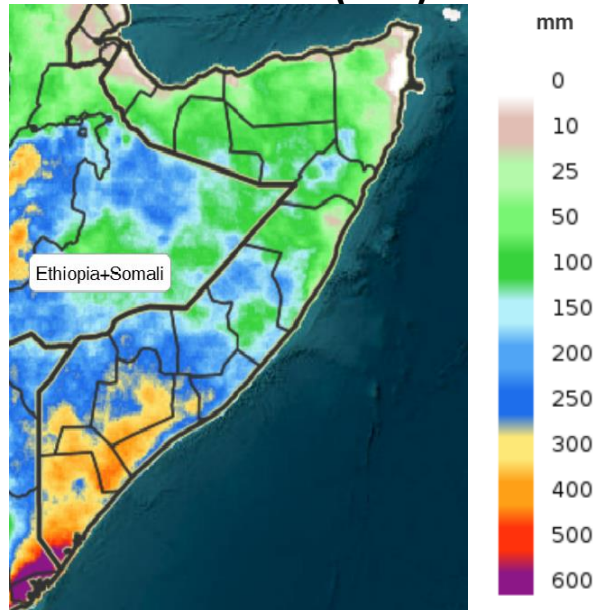
- Driven by poor rainfall, localized flooding, conflict/insecurity, high food prices, disease and poor access to health and nutrition services, levels of acute food insecurity and malnutrition remain high in many parts of Somalia.
- 3.4 million people (18%)** of the population are in Crisis or worse (IPC Phase 3 and higher) between July and September 2025
- In the projection period from October to December 2025, food security is expected to deteriorate further, with **4.4 million people (23%)** of the total population facing Crisis or worse (IPC Phase 3 and higher)
- Approximately **1.85 million children** under the age of five years face acute malnutrition between August 2025 and July 2026 (total acute malnutrition burden), including **421 000** who are likely to be severely malnourished.



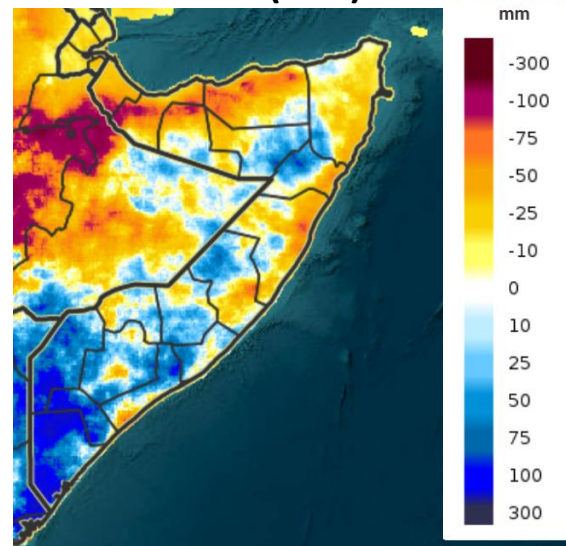
Projected Nutrition Outcomes (Oct-Dec 2025)



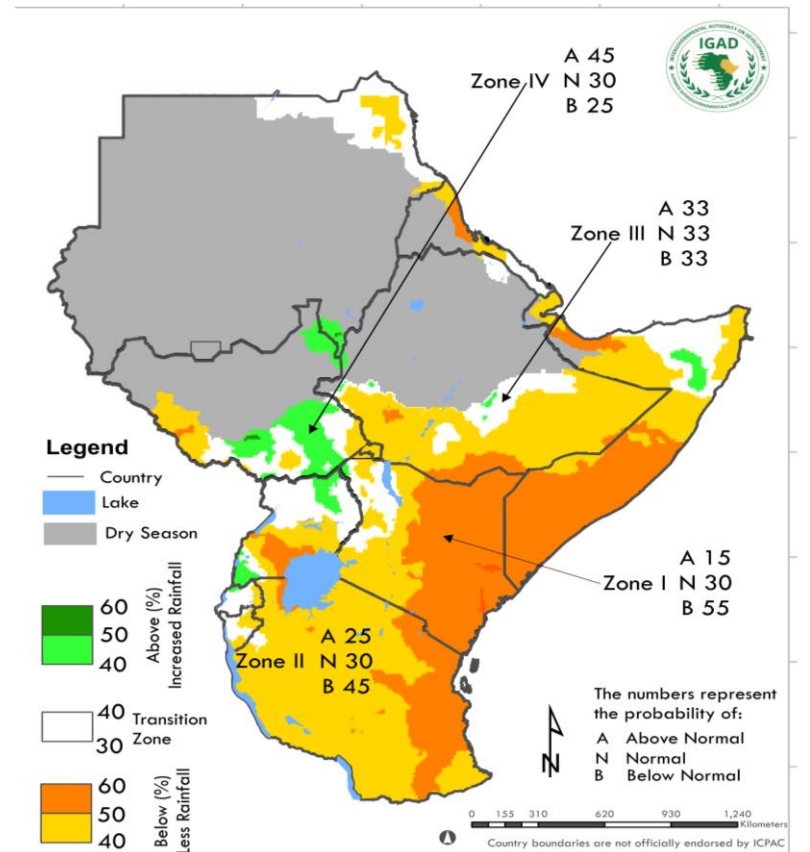
**CHIRPS 2025 Gu (Apr-Jun)
Rainfall Totals (mm)**



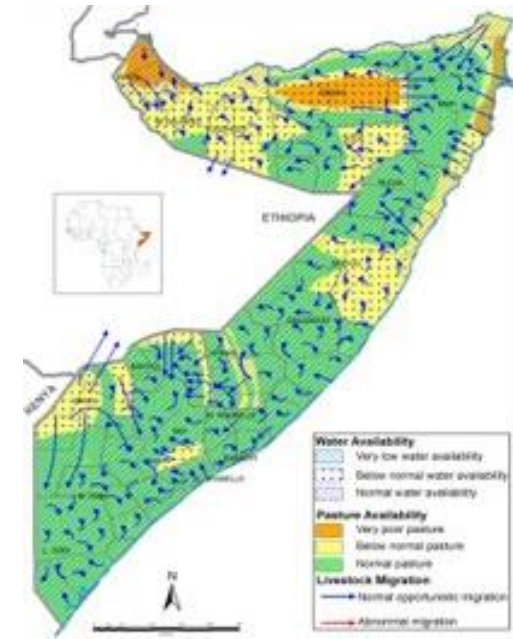
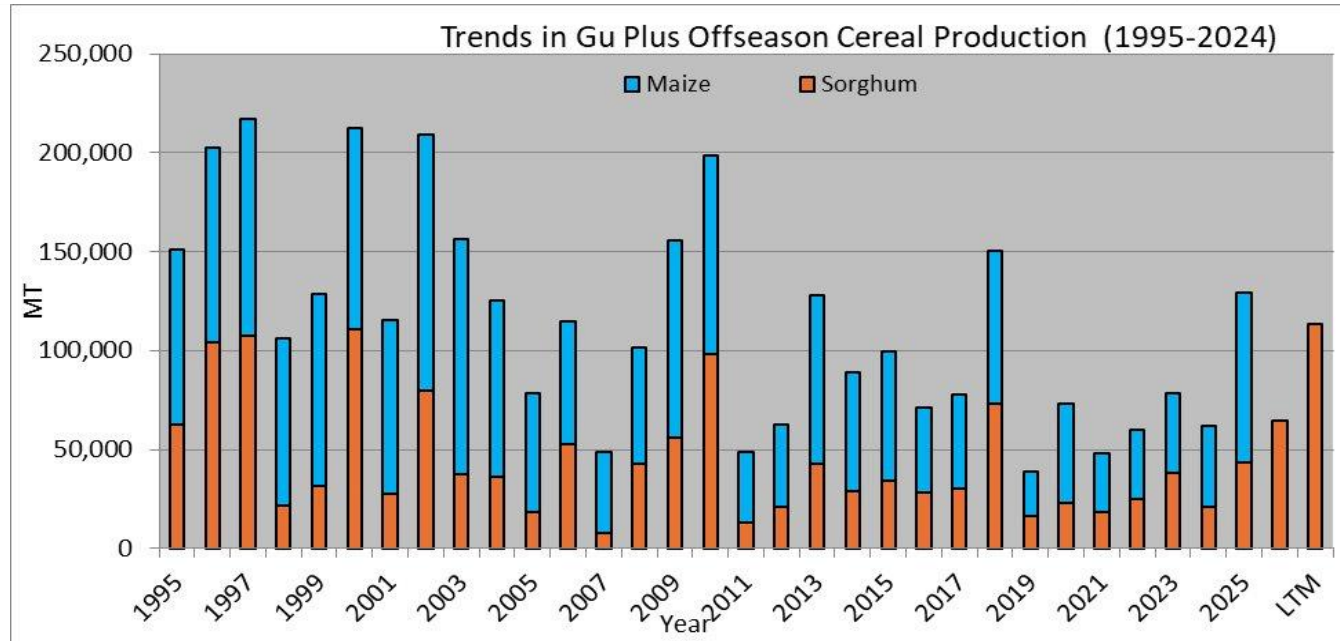
**CHIRPS 2025 Gu (Apr-Jun)
Rainfall Deviation from Average
(mm)**



**IGAD/ICPAC (GHACOF71) Probabilistic Rainfall
Forecast for Oct-Dec 2025 (Deyr)**



- The 2025 Gu rains started on time but ended early in May for most areas. This has impacted crop production & pasture and water availability in rural livelihoods in North and Central regions.
- Low river flooding in Middle Shabelle facilitated recession cultivation, with above average off-season production expected.
- La Niña conditions will likely persist between October and December 2025. As a result, a below-average rainfall is likely for the October-December 2025 Deyr season in most parts of Somalia.
- Exceptions are most of Bari, Nugaal and Sanaag regions that likely receive near-average to above-average rainfall.



- The 2025 Gu cereal production in southern Somalia is estimated at 129 400 tons (including 12 000 tons off-season harvest). This is 14 percent higher than the long-term average for 1995-2024.
- The above-average production is mainly due to average to above-average rainfall, which enabled timely land preparation and expansion of cultivated areas
- For northwest regions, the 2025 Gu/Karan cereal production is preliminarily estimated at 830 tons, 93% below the average for 2010-2024, indicating near total crop failure. This is mostly due to poor rainfall, long dry spells, high input prices and pest infestations.
- Gu rains enhanced pasture, browse, and water availability in most parts of the country.
- Camel and cattle births are low to medium; small ruminants are medium to low. Milk production is average in the south but low in central and northern regions.
- Small ruminant holdings increased in the South but slightly declined in North and Central regions among poor pastoralists. By December 2025, herd sizes in most southern regions. In North and Central regions, herd growth is declining and will remain below baseline.

January-June 2025 (Current)

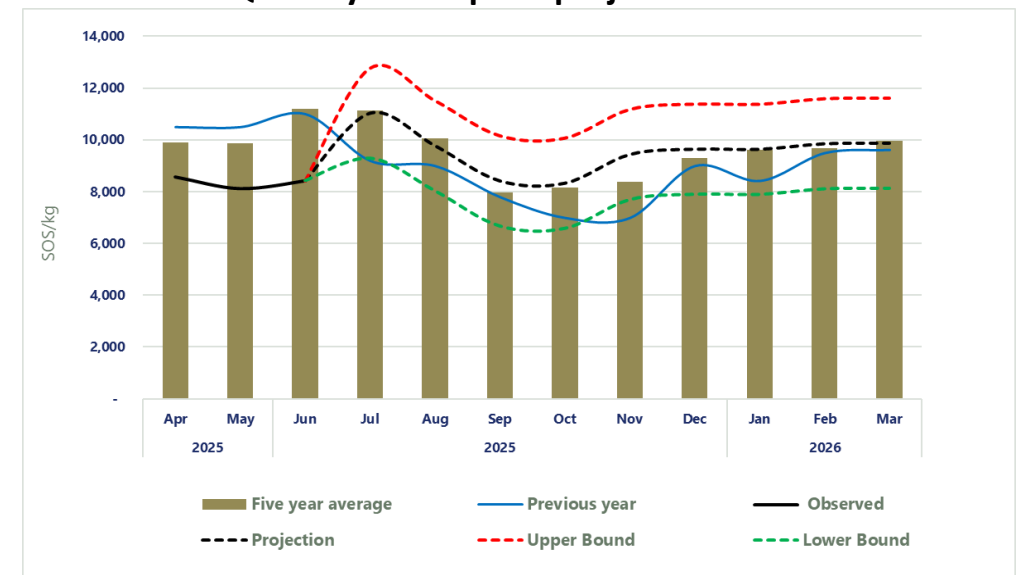
- Prices of maize and sorghum decreased in July slightly due to improved supplies from the current 2025 Gu harvest.
- Prices of imported cereals declined amid ample global supply but remained above average due to weak local currency, conflict and high transport costs.
- Consumer Price Index was stable or decreased due to stable or decreased food prices
- Local quality livestock prices are generally higher compared to the five-year average
- Fresh milk prices are near average in most parts of the country
- A total of 3.9 million livestock were exported during the first half of 2025, marking the second-highest volume since 2016

Market Price Trends

July-December 2025 (Projection)

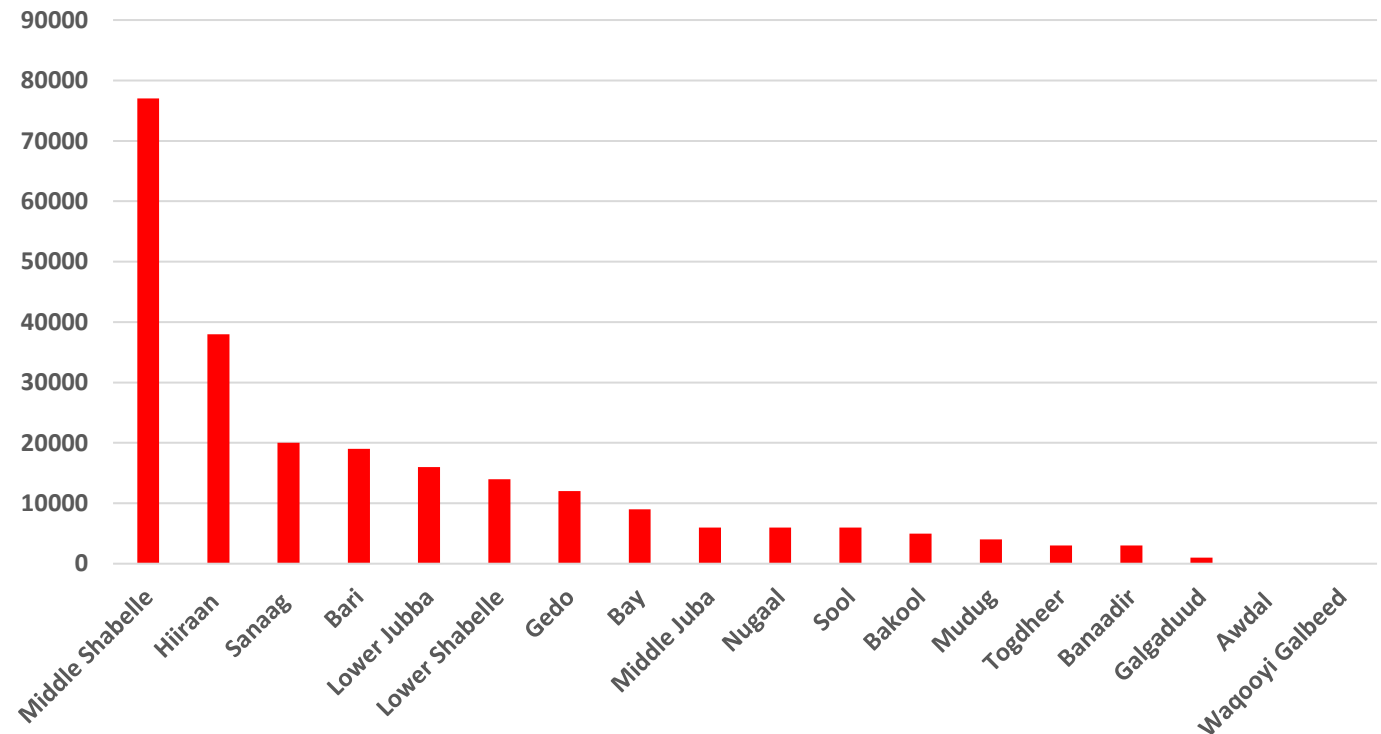
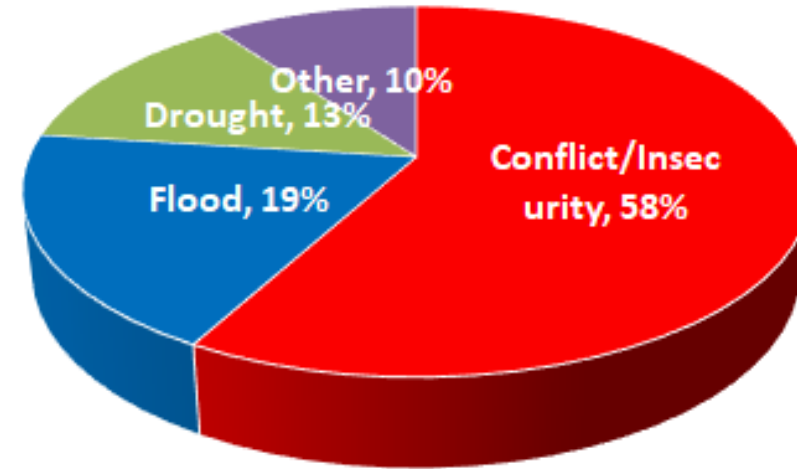
- Staple cereal prices are expected to trend near average levels due to increased supply of cereals from the 2025 Gu harvest but likely to increase later in the year.
- The prices of imported food commodities (rice, wheat, and sugar) are expected to remain stable or decrease due to ample supplies on the global market, but prices will likely remain above average through at least December 2025.

Qorioley maize price projection



- Based on UNHCR/PRMN data, nearly 244 000 people were displaced between January and July 2025, mainly due to: insecurity/conflict (58%); floods (19%); and drought (13%)
- Majority of insecurity/conflict-induced displacement occurred in Middle Shabelle and Hiiraan
- Insecurity/conflict related displacements have contributed to restricted to farming related activities, livestock migration options and access to water points
- Conflict/insecurity and other triggers of displacements are expected to continue through July-December 2025, exacerbating food insecurity across many parts of Somalia, mainly in the central and southern Somalia

Conflict/Insecurity and Population Displacement



- Humanitarian assistance remains the critical lifeline in addressing acute food insecurity and malnutrition in Somalia.

Food Security

- Due to severe funding cuts, the Somalia HNRP 2025 (only 20.2% funded as of 21 Sep 2025), has been re-prioritized to ensure a targeted and more effective response.
- Humanitarian Food Assistance (HFA) is reaching 963,000 people in July 2025 and an average of 1.3 million people per month representing around 38% of people in IPC Phase 3 or above, between August and October 2025.
- For the projected period (Oct-Dec 2025), the planned HFA based on confirmed funding is expected to decline substantially and reach only 375 000 people per month between November and December 2025. For these two months, this will only cover 9 percent of the total number of people in IPC Phase 3 and above.
- Over 600 000 people from FSC's current target will stop receiving humanitarian assistance in November and December 2025, due to lack of funding.

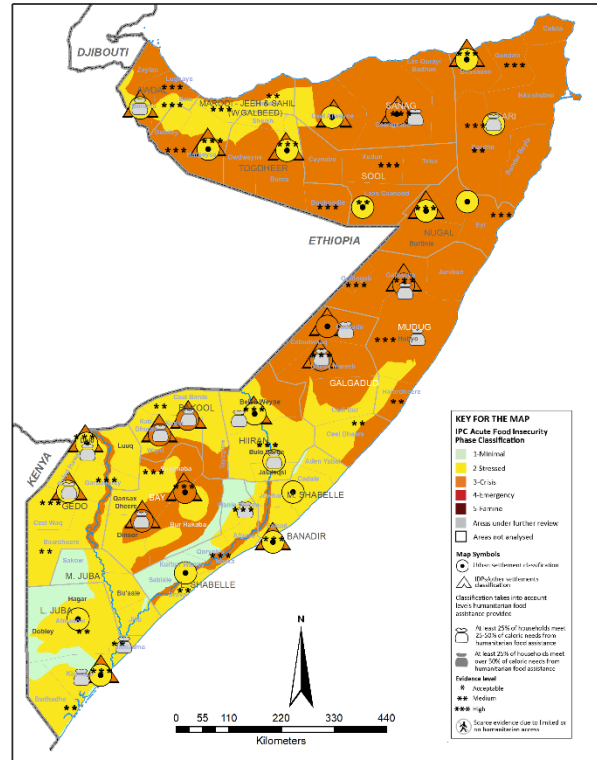
Nutrition

- Between January and July 2025, a total of 253 400 children with SAM, 412 500 with MAM, and 83 700 pregnant and lactating women with MAM received treatment.
- Additionally, 681 400 caregivers received IYCF counselling, 274 000 benefited from BSFP; 20 300 children received micronutrient powders, and 168 000 received Vitamin A.
- Gaps continue to persist with underfunded preventive nutrition, limited BSFP/micronutrient supplementation, weak IYCF impact.
- Recent funding cuts reduced OTP sites from 775 in January to 629 in July 2025, and TSFP sites from 617 to 300 currently, disproportionately affecting rural and hard-to-reach areas.
- Insecurity and access constraints in Sablaale, Bu'aale, Jilib, Jamaame, and Saakow prevent delivery despite high levels of acute malnutrition.
- Long-term investment in prevention, resilience, and system capacity urgently required to tackle systemic drivers of acute malnutrition.

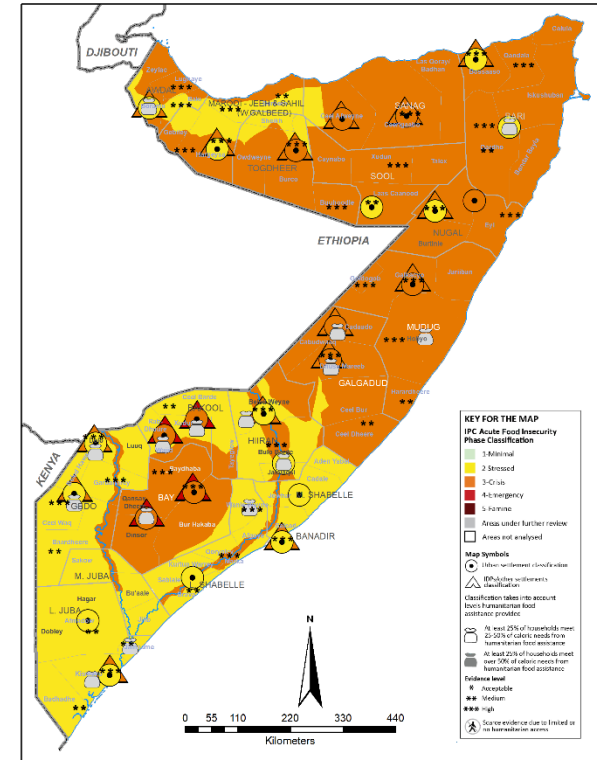
Key Assumptions for IPC AFI and IPC AMN Projections (Oct-Dec 2025)


- Below-average Oct-Dec 2025 Deyr season rainfall likely in most parts of Somalia
- Agricultural employment opportunities and wage levels are expected to decline in crop growing areas.
- Rangeland conditions will likely be marginally adequate for livestock production and reproduction until December
- Milk availability will likely improve slightly
- Staple food prices are expected to increase and remain average to above-average due to declining stocks.
- Civil insecurity and conflict will likely persist in central and southern regions, negatively affecting food security and livelihood outcomes.
- Humanitarian cash and food assistance is expected to further decline due to funding constraints
- Underfunding and pipeline breaks will lead to reduced services, with TSFP/BSFP limited to districts with high levels of acute malnutrition (GAM)
- Recurrent diphtheria, measles, and AWD/cholera outbreaks will persist and worsen acute malnutrition
- Poor vaccination, weak health services, and limited WASH access in rural areas will continue to affect the nutritional status of children.
- Poor breastfeeding and complementary feeding will remain key drivers of acute malnutrition, worsened by limited IYCF funding.
- Worsening food insecurity is expected to further exacerbate acute malnutrition among children in several areas.


Current (Jul-Sep 2025)



Projection (Oct-Dec 2025)

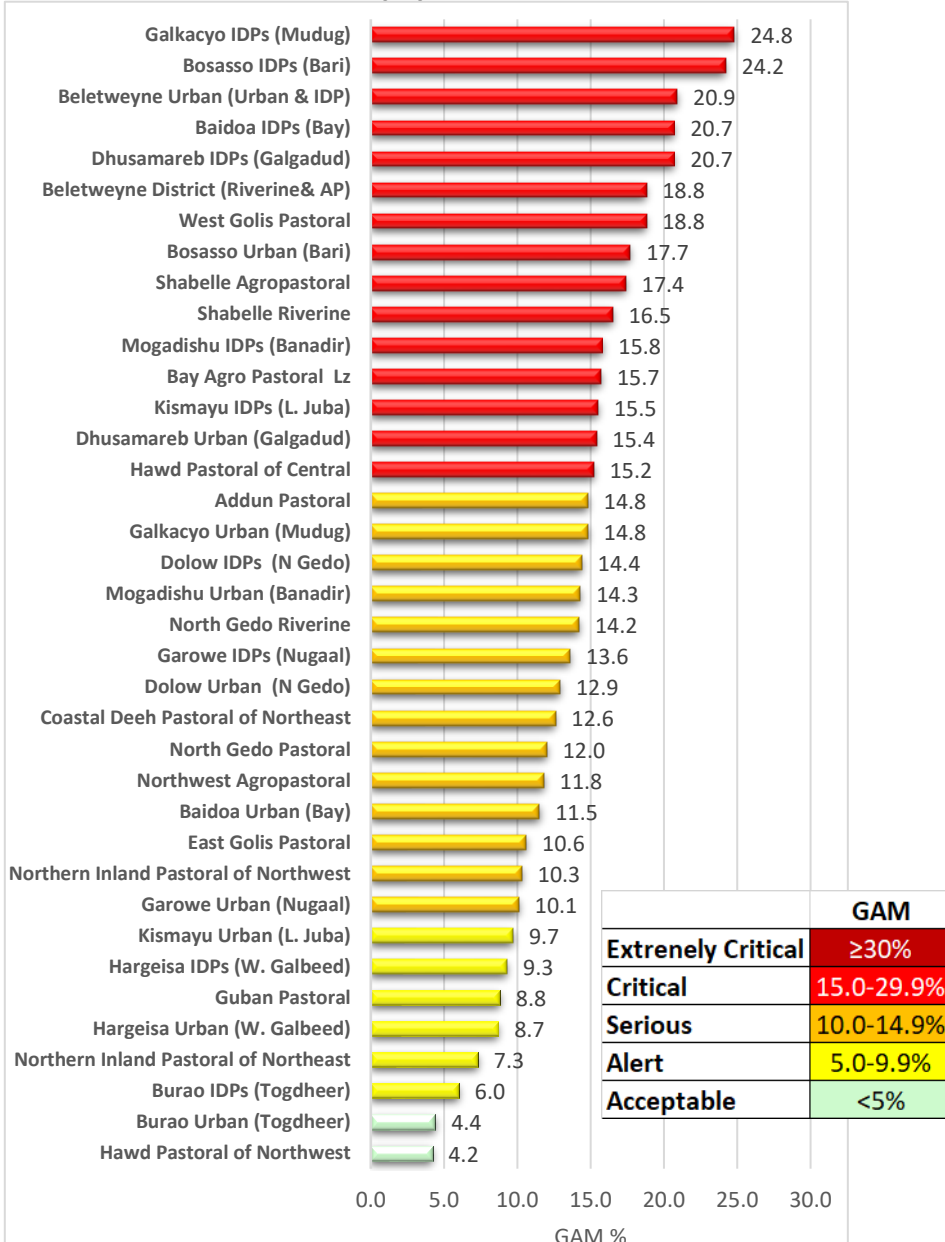


 3.4M 18% of the analysed population People facing high levels of acute food insecurity (IPC Phase 3 or above) IN NEED OF URGENT ACTION	Phase 5	0 People in Catastrophe
	Phase 4	624,000 People in Emergency
	Phase 3	2,800,000 People in Crisis
	Phase 2	6,281,000 People in Stressed
	Phase 1	9,577,000 People in food security

 4.4 M 23 % of the analysed population People facing high levels of acute food insecurity (IPC Phase 3 or above) IN NEED OF URGENT ACTION	Phase 5	0 People in Catastrophe
	Phase 4	921,000 People in Emergency
	Phase 3	3,430,000 People in Crisis
	Phase 2	6,964,000 People in Stressed
	Phase 1	7,965,000 People in food security

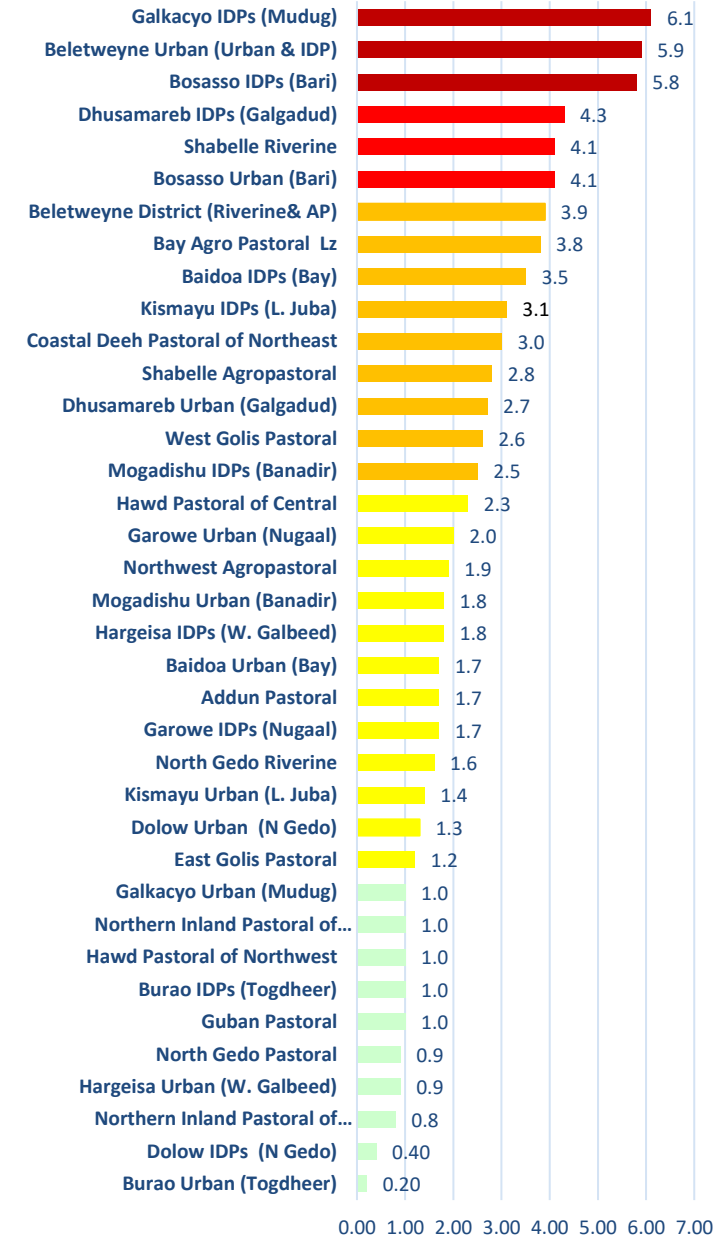
Nutrition Situation: GAM and SAM

GAM (%)



- The 2025 Post Gu assessment results indicate a persistent *Serious* level of acute malnutrition, with the national median Global Acute Malnutrition (GAM) prevalence at 14.3%. This reflects a deterioration compared to the 2024 Post Gu median (11.7%).
- Critical level of acute malnutrition (15-29.9% GAM) was recorded in 15 out of 37 assessed populations.
- Significant deterioration ($P < 0.05$) in the nutrition situation since 2024 Post Gu was noted among IDPs in Baidoa, Garowe, Dhusamareb, Bosasso, and Beledweyne Urban/IDPs and among rural populations in West Golis Pastoral, Addun Pastoral and Beletweyne District (Riverine and Agropastoral).

SAM (%)



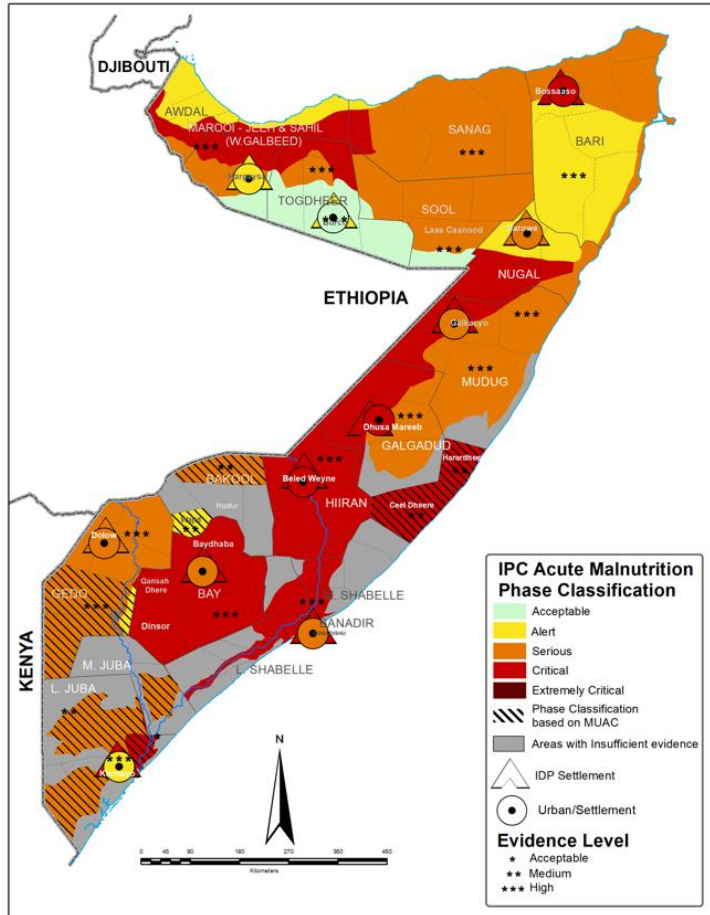
- Due to access constraints, nutrition assessment in hard-to-reach areas was conducted using Mid-Upper Arm Circumference (MUAC) measurements of children

Population Group	Acute Malnutrition Prevalence among Children Under-Five		Morbidity among Children Under-Five (%)
	MUAC < 12.5 CM (%)	MUAC < 11.5 CM (%)	
Juba Cattle Pastoral	16.3	5.3	22.1
Juba Riverine	6.4	0.9	9.6
South Gedo Pastoral	7.9	0.8	21.1
South Gedo Agropastoral	7.2	1.4	17.6
South Gedo Riverine	8.8	0.7	20.9
Elberde Southern inland Pastoral	12.2	2.0	2.8
Harardhere & Eldhere Districts	14.2	3.8	-
Wajid District	8.7	2.2	-

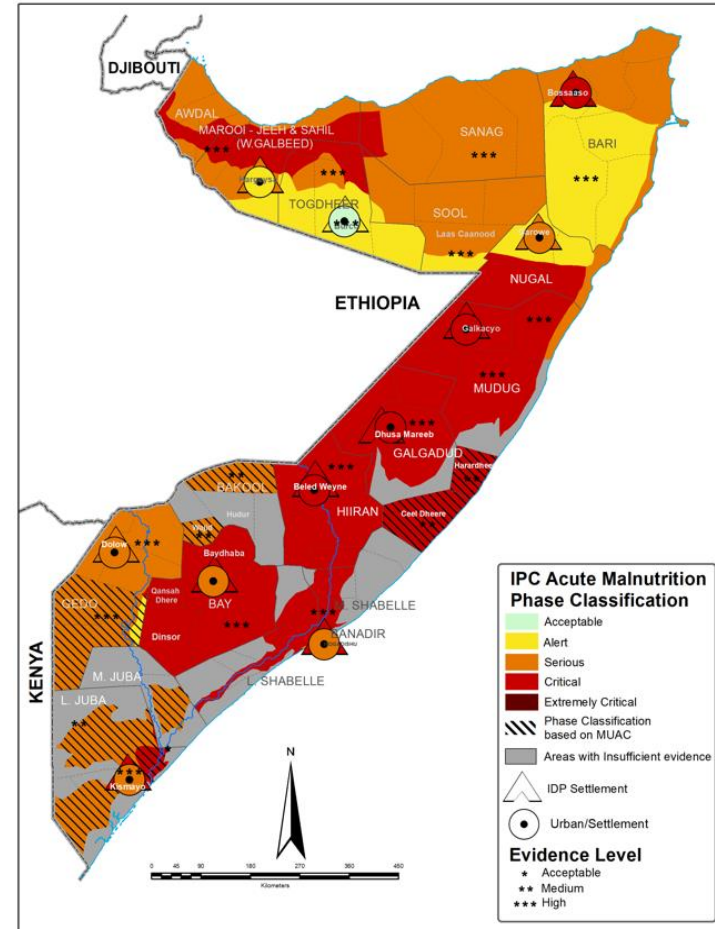
- Out of the eight rural areas screened using MUAC, two are classified as Critical (IPC AMN Phase 4): Juba Riverine and Harardhere & Eldhere.
- A Serious nutrition situation (IPC AMN Phase 3) was observed in four other rural areas: Juba Cattle Pastoral, South Gedo Pastoral and South Gedo Riverine and Southern Inland Pastoral (Elberde).
- Among the six surveyed areas, three reported a high morbidity prevalence of over 20%.
- For Juba riverine only accessible areas were assessed; vulnerability could be higher in other areas (Middle Juba).

- Crude Death Rate (CDR) and Under-Five Death Rate (U5DR) were low across most of the assessed population groups.
- Exceptions were among the rural population in Shabelle Agropastoral, Shabelle Riverine, West Golis, among IDPs in Dhusamareb, Baidoa, Kismayo and Beletwyne (Urban & IDPs) which recorded Serious levels of CDR (0.5 to <1)/10 000/day.
- Beletweyne Urban & IDPs, Kismayo IDPs and among the rural in Shabelle agropastoral also recorded Serious levels of U5DR (1 to 1.9/10 000/day/day).
- A total of 25 assessed areas recording a high morbidity prevalence ($\geq 20\%$)
- Coverage of vitamin A supplementation and measles vaccination remains low, falling below 80% in many of the assessed areas
- Access to water, sanitation, and hygiene (WASH) facilities remains inadequate, especially in rural areas.
- All Infant and Young Child Feeding (IYCF) practices remain sub-optimal across the country, constituting an additional high-risk factor for acute malnutrition.

Jun-Sep 2025



Oct-Dec 2025



1.85M

cases of children aged 6-59 months acutely malnourished

IN NEED OF TREATMENT

Severe Acute Malnutrition (SAM)

421,000

Moderate Acute Malnutrition (MAM)

1,428,000

- Divergence is a difference of at least two phases or more between the IPC AFI and IPC AMN classifications. Out of the 47 areas analyzed, 10 have divergence between Acute malnutrition (AMN) and Acute food insecurity (AFI) classifications.

AREA ANALYSIS	OF	AMN Phase Current (June-Sep)	AMN Phase Projection (Oct-Dec)	AFI Phase Current (June-Sep)	AFI Phase Projection (Oct-Dec)	Divergence
West Golis Pastoral		4	4	2	2	2
Hawd Pastoral of Northwest		1	2	3	3	2
Bosasso Urban		4	4	2	2	2
Beletweyne (Riverine & AP)		4	4	2	3	2
Shabelle Agropastoral		4	4	2	2	2
Mogadishu Urban		3	3	1	2	2
Juba Riverine		4	4	2	2	2
Jubba cattle pastoral		3	3	1	1	2
Jalalqsi		4	4	2	3	2
Buloburte		4	4	2	3	2

Factors contributing to divergence:

- Poor child feeding and caring practices (Inadequate dietary intake) both in urban and rural areas ,
- Limited access to clean water sources and sanitation facilities in rural areas
- Low vaccination coverage rates in rural areas
- Childhood illness and outbreaks such as AWD/cholera, diphtheria, measles
- Limited access to health and nutrition services in the rural areas,
- Reduction of nutrition sites due to funding cuts
- Weak integration of programs (Nutrition, Health, WASH and Food security)

Nutrition and Food Security Hotspots

Areas that are classified in IPC Phase 3 or above for both acute food insecurity and acute malnutrition are considered hotspots. 25 such areas have been identified in the 2025 Post *Gu* IPC analyses (8 IDPs, 4 Urban and 13 Rural).

- IDPs: Bossaso, Garowe, Galkacyo, Dhusamareb, Mogadishu, Baidoa, Dolow and Kismayo.
- Urban: Garowe, Galkacyo, Dhusamareb, Beletweyne.
- Rural: Guban pastoral, Northwest agropastoral, NIP of Northwest, East Golis (Bari), East Golis (Sanag), Hawd pastoral of Central, Coastal Deeh of NorthEast, Addun pastoral, Beletweyne riverine and AP, Shabelle riverine, Bay agropastoral, North Gedo riverine, and South Gedo Riverine.
- The above areas require urgent humanitarian support to prevent further deterioration and saving of lives by provision of multi-sectoral response and integration with resilience programming.

Livelihood Zones	AMN		AFI	
	Curre	Projectio	Curre	Projectio
Guban Pastoral	2	3	3	3
Northwest Agropastoral	3	3	3	3
Northern Inland Pastoral of Northwest	3	3	3	3
East Golis Pastoral (Baari)	3	3	3	3
East Golis Pastoral (Sanaag)	3	3	3	3
Bosasso IDPs (Bari)	4	4	3	3
Hawd Pastoral of Central	4	4	3	3
Coastal Deeh Pastoral of Northeast	3	3	3	3
Garowe IDPs (Nugaal)	3	3	2	3
Garowe Urban (Nugaal)	3	3	3	3
Galkacyo IDPs (Mudug)	4	4	3	3
Galkacyo Urban (Mudug)	3	4	3	3
Dhusamareb IDPs (Galgadud)	4	4	3	3
Dhusamareb Urban (Galgadud)	4	4	3	3
Addun Pastoral	3	4	3	3
Beletweyne District (Riverine & AP)	4	4	2	3
Beletweyne Urban (Urban & IDP)	4	4	3	3
Shabelle Riverine	4	4	3	3
Mogadishu IDPs (Banadir)	4	4	3	3
Bay Agro Pastoral Lz	4	4	3	3
Baidoa IDPs (Bay)	4	4	3	4
Dolow IDPs (N Gedo)	3	3	3	3
North Gedo Riverine	3	3	3	3
Kismayu IDPs (L. Juba)	4	4	3	3
South Gedo Riverine	3	3	3	3

Key Drivers of Acute Malnutrition and Food Insecurity

Acute Food Insecurity Drivers



Poor rainfall: during 2025 Gu (Apr-Jun) in the north and anticipated below average Deyr season (Oct–Dec) rainfall across the country.



Flooding: Riverine floods caused population displacement and crop losses in some southern parts of Somalia during the 2025 Gu season.



Conflict and insecurity: resulted in population displacement and disrupted access to markets, livelihood opportunities, and humanitarian assistance.



High food prices: High local and imported food prices in the northwest and above-average imported food prices across the country constrain household food access.

Acute Malnutrition Drivers



High Disease prevalence ($\geq 20\%$) in 25 out of the 43 assessed areas, including outbreaks of Acute watery diarrhea and measles, mainly in the South.



Sub-optimal childcare and feeding practices. Only 1.4% of children had minimum acceptable diets while $< 50\%$ of children met the threshold for minimum dietary diversity and meal frequency.



Low coverage of essential health and nutrition services: Low Vitamin A supplementation and measles vaccination. Low access to preventive care.



Limited access to safe drinking water and sanitation facilities among rural populations.



Limited food access: Wide food consumption gaps in populations classified in Crisis and Emergency.

Acute Food Insecurity

- Sustained lifesaving and life sustaining humanitarian assistance, focusing on the most vulnerable.
- Ramp up efforts in advocacy and resource mobilization to increase funding for urgent humanitarian assistance.
- Improve the targeting of humanitarian assistance to ensure it reaches those most in need.
- Diverse and layered humanitarian and development interventions that address the underlying causes of acute food insecurity.
- Social safety nets and human capital development programmes to address predictable needs.
- Scale-up shock-responsive social protection programs targeting the most vulnerable and at-risk households.

Acute Malnutrition

- Predictable funding for nutrition supplies for SAM and MAM treatment.
- Fast-track the implementation of the new Integrated Management of Acute Malnutrition (IMAM) guidelines.
- Strengthen the integration of nutrition into the public health system.
- Scale up nutrition services in hard-to-reach and rural areas.
- Implement multisector/integrated approaches (food security, nutrition, health and WASH)
- Expand resilience programming, including nutrition-sensitive agriculture and cash-plus interventions
- Develop a robust integrated early warning system
- Mass MUAC screening, especially among new IDP populations.

The following risk factors need to be closely monitored throughout the projection period:

- Onset and performance of the Deyr rainy season and likely impacts
- Food and nutrition security, especially among displaced and marginalised populations.
- Prices of local and imported food commodities as well as terms of trade.
- Trends in the admission of acutely malnourished children into treatment programmes.
- Common childhood illnesses and disease outbreaks.
- Health and nutrition service delivery site functionality and coverage and availability of nutrition supplies.
- Infant and young child feeding practices.
- Access to safe water, sanitation, and hygiene facilities, particularly among rural and displaced communities.
- Population displacement patterns, including new IDP arrivals and settlement conditions.
- Humanitarian funding and delivery for food security, nutrition, health and WASH programming.



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Additional information on the 2025 Post *Gu* seasonal food security and nutrition assessment results can be found at:
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