This Emergency Appeal seeks a total of **1,290,936 Swiss francs** to enable IFRC support the Somali Red Crescent Society to deliver assistance and support to **78,990 drought-affected people for 6 months**, with a focus on the following sectors: health and care, water, sanitation and hygiene, food security, nutrition and livelihoods interventions. The planned response reflects the current situation and information available at this time of the evolving operation, and will be adjusted based on further developments and more detailed assessments.

Details are available in the Emergency Plan of Action (EPoA) [click here](#).

### The disaster and the Red Cross Red Crescent response to date

**August 2015:** Poor post-Gu (long rains) exacerbates drought conditions leading to reduced pasture land, water shortages, and deaths of livestock. This has increased the number of acutely food insecure people to emergency levels, with 38% of the Somalia population acutely food insecure, and 304,700 children under 5 years of age acutely malnourished. Reports indicate that 4.7 million people are food insecure with an estimated 930,000 already in IPC Phase 3 (crisis) and 22,000 in Phase 4 (emergency). Without humanitarian assistance the situation will deteriorate.

**January 2016:** Governments of Somaliland and Puntland declare the drought situation an emergency.

**February 2016:** IFRC Surge Capacity deployed to support the Somali Red Crescent Rapid Situational and Needs Assessment.

**March 2016:** Emergency Appeal launched for 1,290,936 Swiss francs. 129,394 Swiss francs allocated from the IFRC’s Disaster Emergency Relief Fund (DREF) for assessments and support the start of assistance.
The operational strategy

Needs assessment and beneficiary selection

According to Food Security and Nutrition Analysis Unit (FSNAU), 38% of the population of Somalia is acutely food insecure and 304,700 children under 5 years of age are acutely malnourished, including 58,300 who are severely malnourished and face the risk of morbidity and mortality. FSNAU reports that 4.7 million people are food insecure with an estimated 930,000 already in IPC Phase 3 (crisis) while 22,000 are in Phase 4 (Emergency) and without humanitarian assistance the situation will deteriorate. The findings of the IFRC-supported rapid assessment show that households are resorting to negative coping mechanisms such as the selling cattle at below market rates.

The drought situation has affected pastures forcing some people to migrate in search of food and water for their livestock. The water and pasture shortages has resulted in deaths of livestock as well as an increase in disease outbreaks. Households also have to pay between USD 6 and 10 for a 200 litre drum of drinking water as most water sources have dried up. FSNAU reports that the average distance to nearest water points is 48km, with most of the water sources being unsafe for household consumption.

There has been a relative increase in the incidence of disease outbreaks reported by the Ministry of Health-led Rapid Drought Assessment as well as feedback from focus group discussions with health centre staff and communities during the IFRC led assessment. The common diseases affecting the population include diarrhoea, typhoid, malnutrition (severe and acute) acute respiratory infections and anaemia. Health centre officials in Kalabeyr clinic in Gabiley (Hargeisa) reported 2 deaths in January 2016, one due to malnutrition (1 year old child) and the other due to diarrhoea (9 year old child). Skin infections linked to water shortages have also been reported. Due to long distances to health centres (an average of 15km), it is reported that most families are not taking their children for vaccination despite a high level of awareness on the importance of immunization.

The selection of beneficiaries will be based on their level of vulnerability, including: households who have lost their source of livelihoods (loss of crops and animals), the chronically ill, elderly, female-headed households, lactating mothers and children < 5 years (malnourished), pregnant women, and/or people with disabilities. The Somalia Redcross Cross Society (SRCS) is working closely with the government, stakeholders and other agencies to ensure that there will be no duplication of activities. The selection process will be participatory. This includes conducting community meetings to set up beneficiary selection committees who will assist to define vulnerability criteria and identify the beneficiaries.

Overall objective: The SRCS, through the Emergency Appeal, seeks to improve health, nutrition, food security and access to safe water for the drought-affected population in the regions of Somaliland (Hargeisa, Sahel, Sool Sanaag) and Puntland (Bari and Nugal). This objective will be achieved through:

- Food assistance through mobile money transfers to 900 households (5,400 people) for over 3 months Provision of health services to 78,990 people through the deployment of mobile clinics
- Nutrition screening for 15,798 children (<5 years), treatment and referrals of complicated cases.
- Provision of clean and safe water for consumption through rehabilitation of 12 boreholes and 12 berkeds (Somaliland and Puntland)

• Provision of fuel subsidy for 10 boreholes and 6000 ceramic water filters.
• Health and hygiene promotion through training 120 volunteers (Somaliland and Puntland).

SRCS is seeking a start-up DREF allocation of CHF 129,394 to support initial actions, such as beneficiary targeting, procurement and distribution of nutrition supplements and setting up the Cash Transfer system.

Coordination and partnerships
The IFRC’s Country Office is supporting the Somali Red Crescent Society in implementing health programmes including mobile and static clinics. The ICRC is supporting the National Society with Restoring Family Links (RFL) and tracing activities. The German Red Cross has in-country presence supporting the National Society with a drought response operation funded by ECHO. Water trucking is the main activity implemented under the ECHO project.

The Somali Government through its National Environmental and Research and Disaster Authority (NERAD) coordinates all interventions by humanitarian agencies with support from UN-OCHA. The SRCS participates in all coordination meetings including in Government led assessments. Other agencies implementing humanitarian activities related to the drought response include UNICEF implementing water and sanitation activities while World Vision with support from WFP is implementing nutritional support projects through health centres. Norwegian and Danish Refugee Councils are implementing food assistance through cash transfer programmes.

SRCS and IFRC held meetings with mobile money service providers to develop an overview of the capacity of the mobile operators. The meetings highlighted the widespread use of mobile money platforms by the communities in Somalia including livestock trade and food purchases. The mobile money platform is widespread with sufficient network coverage in the areas targeted under the operation. The mobile operators indicated that they are able to support the operation through free registration of beneficiaries who are not on the mobile money platform, and will provide training on how the systems work.

Proposed sectors of intervention

<table>
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<th>Health and care</th>
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**Outcome 1 The immediate risks to the health of affected populations are reduced**

**Output 1.1 Community-based disease prevention and health promotion measures provided**

Activities planned:
- Community health promotion sessions (house to house, schools & community gatherings)
- Production of IEC materials
- Conduct Community education on behaviour change integrated with hygiene promotion activities.
- Community mortality surveillance is carried out and reported in the Health Information system.

**Output 1.2 Severe Acute Malnutrition is addressed in the target population**

Activities planned:
- Screening children (<5 years) for malnutrition
- OTP services for the malnourished children
- Conduct defaulter tracing
- Hospital referrals to children with severe malnutrition complications.
- Conduct sessions for exclusive breastfeeding and nutrition counselling with involvement of mother to mother support groups.

**Output 1.3 Increased access to primary health care services through the mobile clinics**

Activities planned:
- Provide immunization services to children (<5 years)
- Provide children (<5 years) with Vitamin A, Zinc and de-worming.
- Provide anti-natal services including tetanus toxoid vaccine to pregnant and women of child bearing age
- Provide micronutrients to pregnant and lactating mothers
- Offer post-natal services to mothers
- Treatment of minor illnesses to the target community
- SRCS volunteers conduct community health promotion sessions.
### Water; Sanitation; Hygiene promotion

**Outcome 2** Immediate reduction in risk of waterborne and water related diseases in targeted communities.

**Output 2.1** Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population.

Activities planned:
- Provide fuel for 10 borehole generators.
- Rehabilitate 12 boreholes.
- Carry out regular water quality monitoring for quality assurance.
- Conduct routine and scheduled system maintenance for boreholes and berkeds.

**Output 2.2** Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population.

Activities planned:
- Train 120 volunteers on PHAST methodology.
- Distribution of ceramic water filters.
- Conduct one-on-one communication targeting 57,500 people for improved hygiene awareness.

### Livelihoods; Nutrition; Food security

**Outcome 3** Immediate food needs of the disaster affected population are met.

**Output 3.1** Cash transfers are provided to 900 households (5,400 beneficiaries) to purchase food.

Activities planned:
- Design beneficiary selection tools.
- Source for mobile money service providers through tendering.
- Sign MoU and contracts with mobile phone service provider.
- Train volunteers on beneficiary selection.
- Cash Transfer Training for 15 National Society staff and volunteers.
- Beneficiary selection and registration.
- Beneficiary training on the use of mobile money transfer system.
- Prepare monthly mobile phone cash transfer.
- Inform community on cash distribution.
- Cash transfers of CHF 105 to 900 households for 3 months.
- Monthly post distribution monitoring.
- Price and market capacity monitoring.

**Outcome 3.2** Critical nutritional status of the targeted community is improved.

**Output 3.1** Sufficient nutritious food accessed by children under 5 in vulnerable households/communities.

Activities planned:
- Nutrition screening.
- Procurement of nutritional supplements
- Supplementary feeding to moderately malnourished children under 5
- Volunteer training in food preparation and utilization
- Cascading of training on food preparation and utilization
- Monitoring of nutritional indicators

Output 3.2 Screening and referrals for acute malnutrition carried out for children under age 5
Activities planned:
- Nutrition screening
- Referral of severely malnourished children for therapeutic feeding.

Quality programming; Programme support services

Outcome 4 Continuous and detailed assessment and analysis is used to inform the design and implementation of the operation

Output 4.1 Initial needs assessment are updated following consultation with beneficiaries
Activities planned:
- Mobilization of staff and volunteers to carry out rapid needs assessment.
- Analyse and consolidate assessment data from the field and maintain constant liaison with SRCS staff and volunteers in the field.
- Continuous needs assessment
- Revise Emergency Plan of Action based on ongoing implementation and ongoing assessment
- Start-up meeting
- Coordination with relevant departments of the SRCS and IFRC.

Output 5.1 Monitoring information informs revisions of plan of action where appropriate
Activities planned:
- Continuous monitoring of the activities implementation by SRCS.
- Periodic monitoring by IFRC technical support team.
- Train 6 SRCS staff and 120 volunteers on safer access and do no harm

Output 5.2: The findings of evaluations lead to adjustments in on-going plans and future planning as appropriate
Activity planned: evaluation or review.

Operational support services

Human resources: One hundred and twenty volunteers in Somaliland and Puntland will be mobilized to support the implementation of the drought response activities for 6 months. Local level volunteers will receive a per diem of 15 Swiss francs per day while the mobile clinics volunteers (2 mobilizers for each mobile clinic) will receive a monthly incentive of 122 Swiss francs. SRCS staff will run the 6 mobile clinics and support the ongoing drought operation. The operation will have 3 SRCS Disaster Management National Staff (1 for Somaliland and 2 for Puntland) and 6 drivers to run the mobile clinics. An IFRC Disaster Management technical staff from the EAIOI multi country cluster will support the National Society with the implementation of the operation. A Puntland Police Special Protection Unit (SPU) security guard will be recruited to oversee the monitoring visits – refer to “Security” section.

Logistics and Supply Chain:

International procurement support will be provided for the purchase of supplementary feeding (plumpy nut), drug kits as well as aqua tabs. International procurement support will ensure quality of the drug kits that will be procured shipped to the targeted branches in Puntland and Somaliland. All other procurement will be carried out locally in accordance with
the IFRC standard procurement procedures. Due to the remoteness of the affected areas, and the rough terrain, there is need to budget for both fuel and rental of vehicles (activation of mobile clinics) for the duration of the operation.

**Information technologies (IT):**

Since Cash Transfer Programming will be part of the intervention, there is a need to purchase mobile phones for the targeted beneficiaries. Selection will be based on a basic mobile phone. Airtime costs for staff and volunteers will be budgeted for to ensure they are able to communicate while in the areas of intervention / implementation.

**Communications:**

The SRCS, in collaboration with the IFRC Somalia country representation and support from IFRC’s Africa regional communications, aims to coordinate various awareness and publicity activities, to sensitize the public, media and donors on the humanitarian response situation on the ground.

**Security:**

The security situation in the country remains unpredictable and volatile, and in some areas the security risk is extreme. The fluid security situation is of great concern for the humanitarian organizations, especially in Puntland. Over the past years, armed security guards from the Special Protection Unit (SPU) have been hired to escort non-Somali staff traveling on mission to Puntland and Somaliland or working outside the main city limits. However, in Bosaso town, armed security escort is required at all times. Hiring of armed security escorts from Puntland (SPU) is mandatory for all organizations operating in Puntland. The SRCS National staff and volunteers are not required to use armed escort from the SPU, however, in case of security changes the need may arise for National Society staff and volunteers to have armed escort during interventions. The IFRC Somalia Country Office will provide regular security briefings that indicate the level of security and measures to be taken for prevention and mitigation in case the situation deteriorates.

The IFRC’s Security Advisor will support and work closely with the Somalia Country Office through the monitoring of the security situation and guidance on how the operation will be implemented. The IFRC Staff will seek security clearance from the Security Advisor before undertaking any field missions to Somaliland or Puntland. Further to this, the Security advisor will be training the IFRC and SRCS staff as well as volunteers working directly with the operation on “Safer Access” and the “Do no Harm” concept.

**Planning, Monitoring, Evaluation, & Reporting (PMER):**

Continuous monitoring will be carried out through the SRCS staff members in the areas of implementation for 6 months to support the drought intervention, and will ensure that there is compliance with the minimum International humanitarian standards (Sphere, Fundamental Principles etc.), as well as beneficiary satisfaction and the management of the available resources. The IFRC Somalia Country Office will also carry out monitoring missions in collaboration with the SRCS to support the effective implementation of the Emergency Appeal and a revision of the Emergency Plan of Action (EPoA) and budget will be conducted based on the results of the monitoring report. The review of the Emergency Plan of Action will be based on the adequacy of the “Gu” (long rains).

**Administration and Finance:**

A Memorandum of Understanding (MoU) will be signed between IFRC Somalia Country Office and the SRCS, which will outline the parties’ responsibilities in implementing the planned activities within the Emergency Appeal and also to ensure that the appropriate guidelines are complied with in terms of the use of the funding allocations. The SRCS has a permanent administrative and financial department, which will ensure the proper use of financial resources in accordance with terms of the MoU. Monthly field returns will be sent to the IFRC Somalia County Office for verification and booking to ensure that the activities are reported in accordance with the IFRC Standard Financial Management procedures.
Budget

See attached IFRC Secretariat budget (below) for details.

Garry Conille
Under Secretary General
Programme and Operations Division

Elhadj As Sy
Secretary General

Contact information

For further information specifically related to this operation please contact:

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Partnerships and Resource Development Coordinator, Africa Region

- In IFRC Africa Region: Fidelis Kangethe, Partnerships and Resource Development Coordinator; phone: +254 714 026 229; email: fidelis.kangethe@ifrc.org; Please send all pledges for funding to zonerm.africa@ifrc.org

For Performance and Accountability (planning, monitoring, evaluation and reporting):

- IFRC Africa Region: Robert Ondrusek, PMER Coordinator Africa, phone: +254 731 067277; email: robert.ondrusek@ifrc.org

How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO’s) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere) in delivering assistance to the most vulnerable. The IFRC’s vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC’s work is guided by Strategy 2020 which puts forward three strategic aims:

- Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
- Enable healthy and safe living.
- Promote social inclusion and a culture of non-violence and peace.
### EMERGENCY APPEAL OPERATION

25/03/2016

**Somalia: Drought (MDRSO005)**

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