

Appeal 2008-2009



International Federation
of Red Cross and Red Crescent Societies

Somalia

Appeal No. MAASO001

21 December 2007

This appeal seeks CHF 9,986,001 (USD 8,932,022 or EUR 6,052,121) to fund programmes to be implemented in 2008 and 2009.

In a world of global challenges, continued poverty, inequity, and increasing vulnerability to disasters and disease, the International Federation with its global network, works to accomplish its Global Agenda, partnering with local community and civil society to prevent and alleviate human suffering from disasters, diseases and public health emergencies.



A young mother attending to her child's vaccination at the SRCS clinic in Burao, Somaliland. Source: Somalia Office, International Federation

Current context

The majority of the Somalia population is poor and public infrastructure is minimal in much of the country, relying largely on external support for even the most basic services. The vulnerability is further exacerbated due to chronic armed conflict, huge and persistent humanitarian needs arising from climatic disasters and disease outbreaks, population displacements, minimal health care and education as well as limited scope for significant economic recovery. A continuous succession of natural disasters (including drought, floods, cyclone and tsunami) aggravate the fragile condition that already prevails on lives, livelihoods and infrastructure.

The Somali Red Crescent Society will continue its existing core programmes into 2008-2009 with modifications to enhance their relevance. All programmes are in line with the Federation Global Agenda Goals and will focus mainly on integration of those that have common goals to maximize effectiveness, improving the human resource capacity through volunteer mobilization to deliver services and respond to emergencies.

Links with the revived DM programme and branch development will be seen in the emergence of a new integrated Community Based First Aid programme (CBFA in Action) that aims to combine elements of the two programmes to improve results at community and household levels. The integrated health and care programme (IHCP), which has been supported for 14 years and whose coverage has been scaled up in the last two years will be sustained further. All SRCS programmes will embrace humanitarian Principles and Values as cross cutting issues through all core programmes. Diversity, non-discrimination, training and efforts to reduce HIV-related stigma are among the key areas for consideration.

Programme summary

The Appeal focuses on health and care, capacity development, fundamental principles and humanitarian values while the priority will be to sustain and support all ongoing programmes including disaster management.

Disaster Management

In line with Global Agenda Goal 1, the Somali Red Crescent Society disaster management programme will continue to be funded primarily by the tsunami appeal in addition to new funding obtained from the American Red Cross. Planned disaster management activities including emergency response, disaster preparedness at community and institutional levels and disaster risk reduction. The following outcomes have been expected at the end of the implementation:

- Impact of disasters and emergencies on people's lives in Somalia reduced through adequate and timely response (life-saving assistance, shelter and basic health care)
- Improved SRCS capacities (structural and human) to effectively respond to and recover from common disasters/emergencies (including drought, flood, cyclone, and tsunami).
- Vulnerability of communities to the impacts of disaster in disaster-prone areas reduced through timely information, capacity building and livelihood resilience to disaster risk.

Health and Care

Three health and care programme components will form the basis of the programme implementation during the appeal period. These include, Community Based First Aid (CBFA), HIV and AIDS and maternal and child health, out-patient clinics and hospitals. The outcomes of branch vulnerability and capacity assessments will be fed into ongoing activities to develop the CBFA programme by improving aspects such as health education. Communities are already represented and receive feedback through the health committees at clinic level and through the board in Nugal General Hospital. These institutions will be fully involved in the SRCS evaluation activities and add value to the implementation; in addition to the gains from the 2007-2008 mid-term evaluation of the SRCS health strategy that has provided recommendations and lessons learnt that will be incorporated into programme implementation.

Targeting remote areas of high vulnerability, HIV and AIDS is being addressed through the Integrated Health and Care Programme and active collaboration with zonal AIDS Secretariats. The IHCP provides promotive, preventive and curative health care services to the vulnerable people in all zones of the country, with emphasis on mothers and children. Overall, the main outcomes of the health programme are as follows:

- Improved community basic first aid skills within target populations.
- Improved access to quality and gender-sensitive health services.
- Reduced prevalence of HIV and AIDS through community mobilization, outreach activities and advocacy.

Capacity Development

In line with Global Agenda Goal 3, the SRCS plans to develop its branch and volunteer capacity as well as strengthen the governance system. The National Society has coordination offices in Mogadishu, Hargeisa and Nairobi with 19 fully operational branches working in all regions of the country. SRCS sub-branches have been established in every district, giving it an extensive grass-roots coverage and access in all areas of the country.

Improved volunteer management and the respected image of the SRCS resulting in wider acceptance among Somali communities are major advantages that contribute to effective programme implementation. The SRCS volunteers, community health centres and focus groups will form strong community resource groups to ensure sustainability.

With the above factors in mind, the main outcomes are:

- Enhanced SRCS capacity to implement its HIV strategic plan and Global Alliance initiative.
- Strengthened governance structures.

Principles and Values

In a bid to promote gender equity and diversity, the SRCS maintains a balanced composition of national health staff with a female presence of 2 out of 3. It is intended that there should be a wider variety of all age groups and gender balance among volunteers in all branches. The IHCP is primarily targeting women and children facilitated by clinic staff and volunteers who give health education on various topics including female genital mutilation and HIV. As a result, improved awareness of Fundamental Principles and humanitarian values among the targeted communities and reduced stigma and discrimination towards people living with HIV will enhance participation from vulnerable members.

Please go to: [detailed 2008 to 2009 National Society support plan](#), [planning and resource summary matrix](#), and the [budget summary](#)

Needs

Programmes	2008 budget (CHF)	2009 budget (CHF)	Total budget (CHF)
Health and Care	3,942,687	4,294,516	8,237,203
Capacity Development	595,363	622,099	1,217,462
Coordination	265,668	265,668	531,336
Total	4,803,718	5,182,283	9,986,001

Working in partnership

The SRCS and the Federation work in close collaboration with respective local authorities, United Nations agencies and other humanitarian agencies working in Somalia. Collaboration is geared towards learning, updating experience and sharing information at different levels. The SRCS and the Federation are members of the health sector committee of the Coordination of International Support to Somalis (CISS) that reviews and coordinates all health activities in Somalia. Movement partners including the International Committee of the Red Cross (ICRC) and partner National Societies (German, Netherlands, Norwegian, Italian and Swedish Red Cross) hold regular information sharing forums to coordinate their efforts. In addition, the American and Finnish Red Cross and the Saudi Red Crescent have shown interest in funding some programmes.

The Federation's zonal office in Nairobi supports the SRCS integrated healthcare programme in addition to other health activities including community health, HIV/AIDS, reproductive health and hospital services. At community level, the SRCS is committed to improving community ownership and management of health committees in all clinic locations to manage and plan health activities.

How we work

All International Federation assistance seeks to adhere to the [Code of Conduct](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering quality and accountable assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in this or other countries, or for a full description of the national society profile, please access the Federation's website at <http://www.ifrc.org>

<p>The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".</p>	<p>Global Agenda Goals:</p> <ul style="list-style-type: none">• Reduce the numbers of deaths, injuries and impact from disasters.• Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.• Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.• Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.
<p>Contact information</p>	
<p>For further information, contact:</p> <ul style="list-style-type: none">• In Kenya (ICRC compound): Nur Hassan Hussein, Secretary General, Somali Red Crescent Society, Nairobi; email: srcsnai@bishacas.org; telephone +254.20.271.37.85; fax +254.20.271.88.62• In Kenya: Asha Mohammed, Federation Head of Eastern Africa Zone Office, Nairobi; email: asha.mohammed@ifrc.org; telephone: +254.20.283.5124; fax +254.20.271.2777• In Geneva: Sabine Feuglet, Zone Management Support Officer for Europe and Eastern Africa; email: sabine.feuglet@ifrc.org; telephone: +41.22.730.4349; fax : +41.22.733.0395	