EMERGENCY APPEAL

Somalia | Hunger Crisis 2021

Appeal №: MDRSO011	**People to be assisted: 563,808 people (93,968 households)**	**Appeal launched: 18/07/2021**
	DREF allocated: Loan to appeal 451,800 CHF	**18 months duration**
Glide №: DR-2021-000054-SOM	**IFRC Funding requirements: 8.7 million Swiss francs**	**Appeal ends: 18/01/2023**

This Emergency Appeal seeks a total of **8.7 million Swiss francs** to enable the International Federation of Red Cross and Red Crescent Societies (IFRC) to support **Somalia Red Crescent Society (SRCS)** to deliver humanitarian assistance to **563,808 people (93,968 households) over 18 months** to address the current hunger crisis in Somaliland and Puntland. The operation will focus on: **Livelihood & Basic Needs, Health and Nutrition, Water, Sanitation and Hygiene (WASH), Protection, Gender & Inclusion, Disaster Risk Reduction** and **Strengthening National Society Capacity**. The planned response reflects the current situation and information available at this point of the evolving operation and will be adjusted based on further developments and more detailed assessments.

This Emergency Appeal will contribute to IFRC's Pan-Africa Zero Hunger Initiative, which aims at lifting the most vulnerable people in Africa from poverty and eradicating dependence on food assistance. The Pan-Africa Zero Hunger Initiative is aligned with SDG#2, the Africa Union (AU) 's Regional Initiative on 'Africa's Commitment to End Hunger by 2025', the AU's Agenda 2063, Governmental plans, and other agencies' programmes.

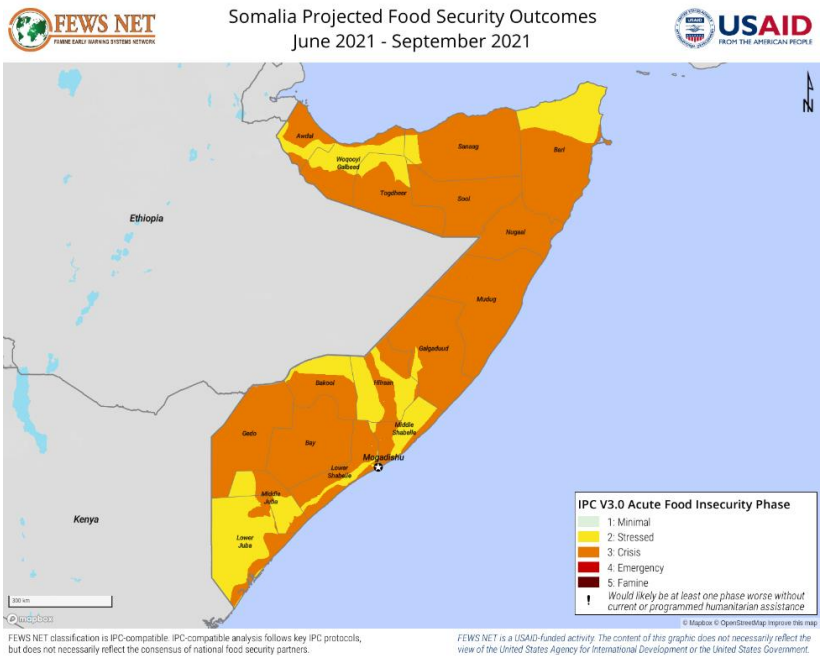
A. EVENT TO DATE

- May 2021: The Government of Somalia declared a National Emergency due to the Drought situation and called for support in responding to the humanitarian crisis
- May 2021: IFRC issues DREF for CHF451,800 for 120,936 people for 4 months Puntland and Somaliland.
- July 2021: IFRC issues Emergency Appeal for 8.7m CHF for 563,808 people for 18 months Puntland and Somaliland.

SRCS volunteer doing assessment in Xooray village, Awdal region

Situation overview

Poor rains and extended drought over multiple seasons have had a major impact on rural livelihoods and food security in Somalia. The Gu' rain season[1] April to June has ended early with a poor rainfall performance in many parts of Somalia even though there were heavy rains and flooding in parts of the country in late April and early May. With no more rains forecast until the next rainy season (October-December), mild to moderate drought conditions are foreseen across the country in the coming months. Dry conditions will contribute to the likelihood of crop losses and deterioration in pasture and water availability in some areas.



Somalia Projected Food Security Outcomes (June 2021 – September 2021)

The combined impact of drought and floods are likely to exacerbate the already critical food security situation in Somalia. Out of a population of 12.3 million in Somalia, 5.6 million people are food insecure and a fifth of the population, 2.8 million people, cannot meet their daily food requirements[2]. It's reported that approximately 840,000 children under the age of five are likely to be acutely malnourished, including nearly 143,000 children who are likely to be severely malnourished. The main drivers of acute food insecurity in Somalia include the **compounding effects of poor and erratic rainfall distribution, flooding, desert locust infestation, socio-economic impacts of COVID-19, and conflict**.

According to the Food Security and Nutrition Analysis Unit – Somalia (FSNAU) food assistance reached an average of 1.6 million people per month between January and April 2021. Humanitarian assistance is currently preventing further deterioration of food security outcomes at the household level in many areas. However, given the scale of need, current level of food assistance is inadequate to prevent widespread crisis and assistance must be scaled up and longer-term support provided. On 1 May 2021 the Government of Somalia declared a National Emergency due to the drought situation and called for support in responding to the humanitarian crisis.

Summary of Red Cross Red Crescent response to date

A DREF was launched by the IFRC on 15 May 2021 to support the SRCS to initially focus on Livelihood and Basic needs support through Unconditional Mobile Cash Transfer to meet basic needs of households and Health and Nutrition support through additional SRCS Emergency Mobile Health Clinics (EMHCs). By the end of June eight fully staffed SRCS EMHCs had been activated. Medical supplies had been procured and delivery is underway. Screening of pregnant women and under-5 children for malnutrition at the EMHCs is ongoing. Severely malnourished cases requiring hospital care are being referred through the Government Referral system while moderately malnourished cases that need homecare are being registered for the planned Unconditional Mobile Cash Transfer of USD 125 per month for two months. The unrestricted Mobile Cash Transfer is a mitigation measure against the sharing and sale of nutrition supplies provided directly to those in need by UNICEF / WFP and to help limit negative coping strategies such as the sale of livelihood assets. In addition to the DREF, SRCS has also implemented some WASH activities in response to the drought in partnership with the German Red Cross.

B. THE OPERATIONAL STRATEGY

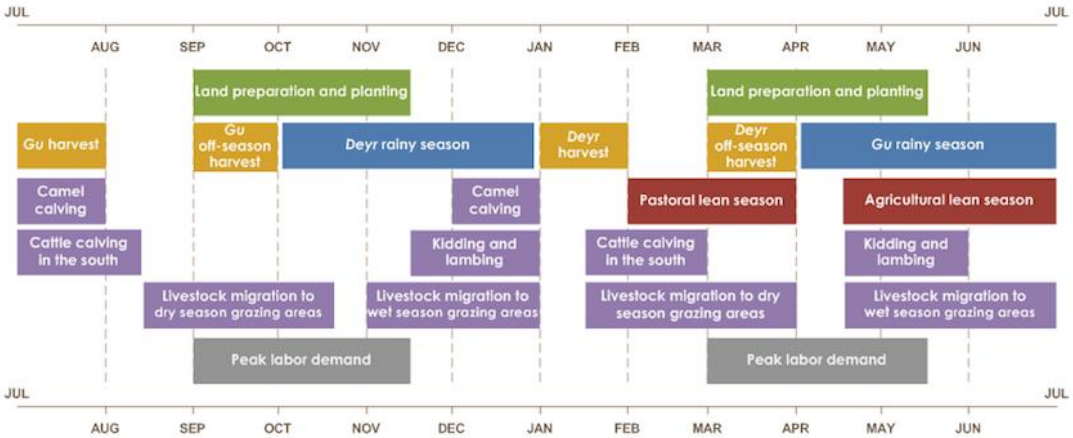
Needs assessment

Food insecurity: According to the Somalia Integrated Food Security Phase Classification, up to 2.8 million people (or 21% of 12.3 million total) of the population across Somalia are expected to face high levels of acute food insecurity (18%

[1] *Gu'* is a rainy season in Somalia which has cumulative rainfall during the March-June
[2] FSNAU and FEWSNET Somalia. Food Security and Nutrition Quarterly Brief. 18 May 2021

IPC Phase 3 and 3% IPC 4) through mid-2021 with further projections showing a similar trajectory in the absence of humanitarian assistance. According to FAO food insecurity is particularly intense in rural areas: 68 % (2.2 million) of all people in IPC 3 and 4 are rural farmers and pastoralists; 9 out of 10 people at greatest risk (IPC 4) live in rural areas.

Seasonal calendar: According to FSNAU, the 2021 Gu' season cereal production in Somalia is expected to be 20 - 40 % below average. According to OCHA Somalia Humanitarian Bulletin, published 17 June, the Gu' rain season (April-June) has ended and with no more rains forecasted until the next rainy season (October-December), mild to moderate drought conditions are foreseen across the country in the coming months. Dry conditions will contribute to the likelihood of crop losses and deterioration in pasture and water availability in some areas. According to FEWSNET, a forecast of low rainfall in the Ethiopian highlands is also expected to lead to a significant decline in water levels of the Shabelle and Juba rivers. In addition, concerns remain of another surge of Desert Locusts, particularly in northern parts of the country due to favourable conditions following the Gu' rains. The latest forecasts indicate that the Desert Locust swarm will continue in the coming months in the parts of northern Somalia that did receive some recent rainfall. This is expected to give rise to hatching and band formation from mid-May onwards, thereby posing another risk to Gu' season crop production and pasture availability which have already been adversely impacted by drought conditions. Latest seasonal calendar below:



Seasonal calendar

WASH: The drought at the beginning of the year brought extreme water shortages, widespread reliance on water trucking. High-water prices have been reported in most pastoral and agro-pastoral livelihood zones. Most livestock are concentrated near water points with limited migration options. A recent FEWS NET/FSNAU Joint Food Security Outlook for Somalia (June 2021 – January 2022) reported worsening drought conditions in many parts of Somalia particularly in the north, north-east and central-south regions. The drought is exacerbating the water scarcity and poor crop and livestock production conditions. The drought-related damage to water supply and sanitation assets have been mainly related to sources of water (boreholes, shallow wells, berkads (traditional water dams)), while there has been an associated increased burden on already insufficient household income to pay more for accessing water. The cost of vended water has increased in some areas by 50 % during the critical drought period.

Health and Nutrition: The outbreak of epidemic-prone diseases such as Acute Watery Diarrhea (AWD)/cholera, measles and malaria and COVID-19, some of which are cross-border outbreaks, has occurred due to the drought earlier this year. The drivers of acute malnutrition include high morbidity, low immunization, and vitamin-A supplementation, reduced access to milk, and food insecurity. It is reported that across Somalia urgent treatment and nutrition support are required for approximately 838,800 children under the age of five years (total acute malnutrition burden), who will likely face acute malnutrition through December 2021, including 143,200 who are likely to be severely malnourished. Living conditions and recurrent disasters (floods, droughts and storms) exacerbate disease risks and potential for outbreaks of acute watery diarrhoea, cholera, measles and acute respiratory infections (incl. COVID-19).

Displacement: UN OCHA reported that more than 112,000 people were displaced in the first three months of 2021, with about 34% of them displaced because of the drought conditions (UN OCHA Situation Overview April 2021). Armed conflict and violence, protracted displacement, inequality, marginalization and poverty remain prevalent across Somalia. Some 2.6 million internally displaced persons are living in over 2,000 sites in often poor conditions. According to FSNAU most of the IDPs in the main settlements and the urban poor are currently facing food consumption gaps due to limited income-generating activities and rising staple food prices that have reduced household purchasing power.

PGI: The drought has exacerbated the existing vulnerabilities and social marginalization of women and has induced displacement, with the majority of those displaced being women and children. Drought also places additional burdens on women in terms of their responsibilities around household food consumption, water collection, and household care

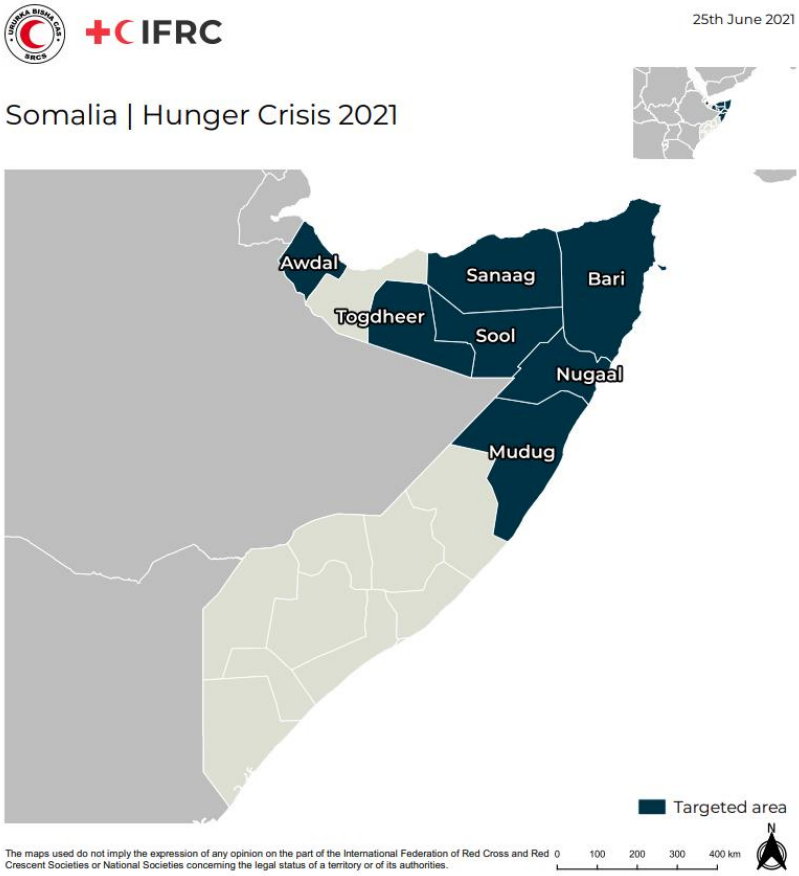
responsibilities, which expose them to greater risks. The drought impact is reflected in the extent and nature of vulnerability and poverty and the increased risk of falling into poverty, losing autonomy and facing increased discrimination and marginalization. Droughts also negatively affect the traditional roles of older people, and perhaps more specifically their social position, as communities and power and support structures are dismantled, leaving older people with less influence and power.

Targeting

This operational strategy and plan are the outcome of continuous assessments and data analysis, as well as consultation between the IFRC, SRCS and Red Cross Red Crescent Movement partners on how to respond to this complex emergency in an integrated manner. Through the SRCS branches this Appeal aims to assist six regions in Somaliland and three in Puntland who are at risk of food insecurity, deteriorating health and hygiene conditions, and limited access to safe water due to factors such as drought, conflict and economic instability.

Initial targeting is based on current and projected IPC levels. Targeting vulnerability criteria shall include: the elderly, persons with a disability, people with chronic illnesses, child headed households, orphans and vulnerable children, female-headed households, pregnant women and lactating women and those who are destitute. The criteria is subject to change as the emergency evolves and additional resources are mobilized to deliver life-saving and longer-term interventions to the projected increased caseloads in IPC3+. Further sector lead targeting is included in Section C.

The total target population for this Emergency Appeal will be 563,808 people (93,968 households).



Targeted areas

COVID-19 pandemic:
The Federal Ministry of Health reported a total of 13,915 positive cases with 775 deaths as of 2 July 2021. The socio-economic impacts of COVID-19 (mainly declines in remittances and household employment and incomes) are likely to lead to worsening nutrition outcomes among vulnerable groups, including poor households in urban areas and among Internally Displaced Persons (IDPs), many of whom live in crowded, unhygienic conditions and makeshifts shelters against the context of increasing food prices and reduced employment and income-earning opportunities as well as declining remittances. This operation is aligned with the IFRC global emergency appeal that supports National Societies to deliver assistance and support to communities affected or at risk of being affected by the COVID-19 pandemic. The National Societies' response to COVID-19 is supported through the IFRC global appeal, which is facilitating and supporting them to maintain critical service provision while adapting to COVID-19. The National Societies will keep monitoring the situation closely and revise the plan accordingly if needed, taking into consideration the evolving COVID-19 situation and the operational risks that might develop, including operational challenges related to access to the affected population, availability of items, procurement issues, and movement of National Societies volunteers and staff. For more information, please consult the COVID-19 operation page IFRC Go platform.

Lessons learnt from previous responses

Lessons from previous responses are being considered during the design of this Appeal: MDRSO005 - Somalia: Complex Emergency March 2016 to Dec 2018, MDRSO007 – DREF Drought Operation Mar 3019 to Aug 2019, MDR60005 – Locusts Surge. **Key lessons accounted for in this Appeal:** SRCS and the community felt unconditional cash transfers as a modality were highly relevant and timely and were provided at the end of each month as communicated to the recipients. The community members were unanimously in favour of mobile transfer over other methods, such as cash in envelopes in terms of security/discretion, accessibility and convenience. However, there is a need to provide better orientation for the community on Cash and Vouchers Assistance modalities: It was suggested that some community members were not familiar with the use of mobile money transfer. It is therefore recommended that future operations

using this modality include orientation of beneficiaries by volunteers. Cash transfer values for a household per month were based on recommendations by the Cash and Markets Quarterly Dashboard. However, the value was based on a household number of six and many of the targeted household were said to be in excess of six and reported the amount provided did not meet their food and other basic needs. It is therefore essential that for future operations the cash transfer value is amended based on household number. There is also a recommendation to consider the issue of sustainability because there was a pressure from communities that the intervention should continue. For future operations for slow on-set emergencies and protracted emergencies, a transition plan should be in place before the launch or at the latest during the first few couple of weeks of implementation. Longer-term sustainable programming, focused on income generating activities, was one of the key recommendations from community members.

Coordination and partnerships

Overview of Red Cross Red Crescent Movement Actions in-country

SRCS lead and are responsible for the implementation of this operation supported by the Appeal. The IFRC Country Delegation will provide coordination and technical support. In Somaliland and Puntland, SRCS branches are already supported by the IFRC, especially health clinics in the three regions of Bari, Nugaal and Bosaso. The International Committee of the Red Cross (ICRC) is present in South Central Zone, Hargeisa in Somaliland and Garowe in Puntland focussing primarily on economic security, health, water and habitat programmes. The SRCS is supported by seven partner National Societies: British Red Cross, Canadian Red Cross, Finnish Red Cross, German Red Cross, Icelandic Red Cross, Norwegian Red Cross and Swedish Red Cross. Only German Red Cross is present in country based in Somaliland. The German Red Cross, in partnership with SRCS, launched in April drought response activities including the rehabilitation of Berkeds and boreholes as well as the procurement and distribution of aqua tabs in affected areas. As part of wider ongoing programmes, they are also implementing cash for food and hygiene promotion activities. Effective coordination will take place to ensure that activities under this Appeal will complement, and not duplicate, these existing areas of response.

Overview of other actors' actions in-country

The SRCS has been working closely with the Government, stakeholders and other agencies to ensure that there will be no duplication of interventions of activities. The Government Disaster Response arms such as NERAD (Somaliland) and Humanitarian Affairs and Disaster Management Agency (HADMA) in Puntland have overall coordination of all responses to disasters and emergencies in the respective regions. The SRCS coordinates closely with the Ministry of Health and the Ministry of Water Management in both Somaliland and Puntland and has a seat on the emergency committee for the AWD outbreak in Somaliland. The UN, INGOs and NNGOs have been responding to the drought emergency. The Food Security and Livelihoods Cluster (FSL) is active and SRCS regularly takes part in cluster meetings.

Capacity analysis, risk analysis and scenario planning

The National Society has 19 branches spread across the country (six in Somaliland, three in Puntland and ten in South Central) with two coordination offices located in Mogadishu and Hargeisa. SRCS has a long-term record in providing life-saving assistance to people in need in Somalia. SRCS' presence and local networks across the country are exceptionally well-established, which enables SRCS to reach vulnerable populations who are not served by other humanitarian actors, for instance in highly remote and high-risk areas. SRCS has vast expertise with different types of programming through multilateral projects supported by IFRC, bilateral programmes with Movement partners, including the ICRC.

Operational risks: The protracted insecurity in Somalia continues to impact food and livelihood security for both rural and urban populations. The lack of enabling factors for the affected communities to practice proper hygiene and sanitation can also trigger disease outbreaks and create complications in addressing health risks. SRCS will continue to monitor the news and impacts in the communities where SRCS has presence. The IFRC operational team only provides remote technical support to the SRCS Branches and clinics in Puntland.

Scenario Planning: The planned response reflects the current situation and information available at this point of the evolving situation and will be adjusted based on further developments and context changes. Particular consideration will be given to the FEWS NET/FSNAU Food Security Outlook Report which was published on 13 July; and the 2021 Post Gu All Team IPC Acute Food Insecurity (AFI) and Acute Malnutrition (AMN) Analyses Workshops which will be carried out 9 to 17 August; and on 2 September there will be a briefing for UN Heads of Humanitarian Agencies – HOHA (virtual).

C. PROPOSED AREAS OF INTERVENTION

Overall Operational objective

The overall objective of this Appeal is to respond to the immediate humanitarian needs of the population affected by the hunger crisis in Somaliland and Puntland through the provision of health care, nutritional interventions, the promotion of access to safe water, sanitation and hygiene and by enabling access to food and household items through cash transfers and protecting and recovering livelihoods activities until January 2023. The proposed response activities in this Appeal will also reinforce SRCS' disaster response capacity and expertise in areas such as health care provision, WASH and cash

programming, and strengthen its country-wide network of volunteers. These objectives will be closely linked to those of the national long-term (development) operational plan for Somalia, ensuring a concerted approach to capacity-building and allowing for an effective exit strategy. As the situation is highly unpredictable, the strategic priority is to ensure that the activities under the Appeal which are time critical are prioritized. At the same time, it is essential to work with contingency plans to be prepared for a scenario where the next rainy season is inadequate, which would lead to a further deterioration of the food security situation and an increased chance of further disease outbreaks.

STRATEGIC SECTORS OF INTERVENTION

Livelihoods and basic needs

People targeted: 37,800 (6,300 households)
Male: 18,900
Female: 18,900
Requirements (CHF): 4,123,000

Proposed intervention: Communities, especially in disaster and crisis-affected areas, restore and strengthen their livelihoods

Under food security and livelihood support, the focus will be on the provision of unrestricted cash for vulnerable communities to access food and household items, and support to fisheries, agro-pastoralist and small farmers. SRCS will target on average 500 households in each of the six regions of Somaliland and three of Puntland with unrestricted cash grant with an average value of USD 125 to purchase food and other basic needs for five months (Sep 2021 - Jan 2022). This cash support will be essential to ensure vulnerable households have access to food during the green hunger period. The MEB is based on the Somalia cash and markets quarterly dashboard. In the operational areas the recommended full MEB cash grant range is USD 85 to 128. There will be community orientation informing on the duration, frequency and recognising that if people know for how long they will receive a regular grant they are better able to plan and budget how to use it. The multi-purpose cash also provides a temporary income boost to livelihoods. In addition, the cash support will be used as a graduation mechanism for households receiving nutrition support, to enable mothers to continue providing food for children at risk of falling back into malnutrition. Cash grants will be provided via a financial service provider mobile money. SRCS have experience in past responses using the same delivery mechanism.

The cash transfer values are determined by the national cash working group to ensure harmonization across agencies and are followed in this programme. The main target group for cash support are families with malnourished children particularly moderate acute malnourished (MAM) cases. Linkages will also be made with health on nutritional education. Health screening and community-based targeting will be used for beneficiary selection and door to door as well as public verifications will be conducted to ensure the eligibility of the selected households. To ensure there is no overlap in targeted areas with other agencies, reference will be made to clusters. Regular updates will be shared with the cash working group members and the food security cluster.

Longer term livelihood's seasonal support will be provided on average to 200 households per each of the six regions of Somaliland and three regions of Puntland. The households will be targeted with fisheries, agro-pastoralist and small farmer's (such as for farmers - agricultural inputs, animal restocking, vaccination, seeds, ploughing service through rental tractors, and trainings, etc). Support will also be targeted towards establishing small business initiatives for the drought displaced women. Capacity development through training will be made available to support the recipients of the multipurpose cash grants and longer-term livelihood support. Farmers still suffer crop loss from locusts and continued support will be provided based on experience and lessons gained from the recent East Africa Locusts Upsurge Emergency Appeal.

Households are provided with multipurpose cash grants to address their basic need - Planned activities

- Volunteer training and mobilization - 120 volunteers.
- Assessment, verification, registration and orientation of the most vulnerable households.
- Market assessments (also use the monthly market bulletin from the FAO/WFP and cash working group).
- Mobilise financial service provider and disbursement of cash to 4,500 households over five months.
- Post distribution monitoring, including markets and reconciliation of cash grant coordinated with the regular payments, this will include resourcing IM/data management capacity.

Livelihood's support: fisheries, agro-pastoralist and small farmers - Planned activities

- Through cash transfers providing agricultural inputs and fishing gear - supporting 1,500 households
- Support small business initiatives for the drought displaced women - 300 households.

- Support for communities affected by locusts – surveillance, tools, spraying.

Strengthening livelihoods through preparedness and anticipatory action included as part of multipurpose cash grants and livelihoods support activities

- Awareness sessions on gender equality including women, girls, men and boys. Engagement with women and men, girls and boys, and community leaders on risks and mitigation strategies including on double burdens for women because of Cash and Voucher Assistance (e.g., having to go to market, engaging in livelihoods or business activities) for example discussion groups on women's roles and responsibilities. Establish safety plans with women, e.g., through risk mapping sessions (how to keep cash safe, etc.)
- Promote partnerships and train communities in disaster and crisis affected areas to adopt climate risk informed, and environmentally responsible values and practices.
- Support communities to develop capacities in various livelihood programmes so that they can become self-reliant and achieve sustainability.
- Training in entrepreneurial skills, financial literacy, and management
- Training of Trainers to cascade down to farmers and school children. Some may include training: farmers on crop diversification; climate sensitive practices on how to protect crops from hazards; on food processing and food preservation; and school children and farmers on fruit planting.

Health

People targeted: 563,808 (93,968 households)
Male: 281,904
Female: 281,904
Requirements (CHF): 638,000

Proposed intervention: The immediate risks to the health of affected population are reduced and the psychosocial impacts of the emergency are lessened

Under this Emergency Appeal, a total of eight mobile clinics will be deployed in the four branches of Somaliland and three in Puntland. Together with Movement partners, government, UN agencies and other external partners, the aim is to coordinate and align resources in a way that covers the entire SRCS network of clinics in Somaliland and Puntland. Movement and external partners (UNICEF, WFP) will also support some of the operating costs and nutritional supplements, immunization antigens and cold chain facilities. All SRCS clinics have received training in case management, expanded program of immunization (EPI), nutrition, and safe motherhood to be able to scale up should the need arise. The clinics continue to serve as a main platform for the implementation of the nutrition interventions.

The mobile clinics provide health and nutrition services to the drought impacted communities. Pregnant and lactating mothers, children under five and adults are to be treated. EPI provision and health education sessions will also be provided by the mobile clinics. Also, volunteers are trained to conduct hygiene promotion activities. Volunteers have been trained on Community management of Malnutrition whereby they screen the children at home and those found to have malnutrition are referred to the clinic for treatment and follow-up.

The IFRC will support the roll out of the Community Based Surveillance (CBS) activities/strategy which will build on the health surveillance system, especially AWD surveillance. SRCS have volunteers trained on CBS, developed a volunteer surveillance system reporting platform and has data collection tools and CBS Standard Operating Procedures (SOP). SRCS, with support of the IFRC, will further develop its emergency response capacity for rapid prevention and control of outbreaks. As part of the referral pathway complicated cases will be referred to the regional hospitals. Through this Appeal it is estimated the mobile clinics will support a total of 563,808 people in Somaliland and Puntland and will provide health and nutrition services.

The immediate risks to the health of affected population are reduced through the EMHCs - planned activities

- Mobilise EMHCs – staffing; vehicles; training the mobile teams on case management, data entry, EPI, nutrition; procuring all essential items for the team including furniture, PPE, registers and etc.
- Refer Moderate (with Oedema) or Severe Malnutrition Cases for treatment
- Provide immunization services to children under 5 years of age and pregnant women and women of childbearing age. Provide Vitamin A to children under 5.
- Provide tetanus toxoid vaccine to women of childbearing age (Pregnant and Non-Pregnant)

Nutrition support through the EMHCs - planned activities

- Carry out nutritional education sessions
- Provide Nutrition Screening Services through mobile clinics

- Provide nutritional supplements (plumpy nut and plumpy sup) to detected malnourished children

Water, sanitation, and hygiene

People targeted: 240,000 (40,000 households)
Male: 120,000
Female: 120,000
Requirements (CHF): 1,178,000

Proposed intervention: Sustainable reduction in risk of waterborne and water related diseases in targeted communities in the recovery phase

One of the biggest challenges that the IDP camps and host communities in Somaliland and Puntland are facing is access to safe and clean water for household and livestock consumption. It has been observed that many nomadic populations travel for fodder for various periods at a time and return to their village for water. Hence it is crucial to ensure the water points in these villages are rehabilitated and protected.

SRCS will implement a comprehensive package of WASH activities in each target area, ensuring improved and sustained access to safe water for underserved and at risk IDPs, schools and rural communities, improved access to basic sanitation and participatory hygiene education. Improved access to water will be achieved through rehabilitation of berkeds (traditional water storage dams)/water points, shallow wells and pumping equipment (including solar pumping system installations) in communities and at clinics. SRCS will disinfect water supplies in the target communities through provision of aqua tabs/pur sachets for four months, along with relevant training for community hygiene promoters to support alternative strategies for safe water treatment and storage. SRCS will also support the construction of latrines in IDP camps without latrines by training men and women, and through the provision of instruction materials for the construction of latrines with handwashing facilities. To ensure that all SRCS clinics have sufficient clean water for their operations, especially considering the increased need for water both for drinking and cleaning as a result of the AWD outbreak, the IFRC will support chlorination of water sources at the clinics through distribution of aquatabs with hygiene promotion awareness.

Planned activities

- WASH training for volunteers and staff, refresher training on Participatory Hygiene and Sanitation Transformation (PHAST) for 120 volunteers.
- Active CBS and increased vigilance on water quality and sanitation practices during disease outbreaks in branches not covered already.
- Health and hygiene promotion campaigns carried out by the volunteers.
- To procure and distribute 1,800 households with hygiene items
- To support 36 priority schools and 8 IDP camps with hygiene promotion activities.
- Assessment of boreholes and water systems and rehabilitate 27 existing water sources.
- Rehabilitation of 36 school and 900 latrines for IDPs camps and host communities, providing and maintaining latrines or toilets segregated by gender, or family units that are safe for women, girls, men and boys to use at all times.
- Water trucking activities to most affected districts - underserved IDP camps and communities - and water treatment campaigns.

Protection, gender, and inclusion

People targeted: 60,600 (10,100 households)
Male: 30,300
Female: 30,300
Requirements (CHF): 202,000

Proposed intervention: Communities become more peaceful, safe, and inclusive through meeting the needs and rights of the most vulnerable

SRCS is one of the few organizations that provides a combination of full medical and psychosocial support and additional material assistance (dignity kits) to the survivors of Gender Based Violence (GBV) in the region. The medical support provided to the survivors included emergency contraception to prevent unwanted pregnancy, emergency prophylactic infection of STI and HIV(PEP) treatment. Both displaced and stable populations in these regions have limited access to multi-sectoral response services and effective prevention mechanisms. IDP populations live in

conditions that do little to help with their safety and make it easier for anyone to harm them. They do not have light at night and proper toilets as they are poor people who cannot manage their daily lives. However, incidents like shame, stigma, low awareness of or access to services, and impunity, GBV is often under-reported. In some locations there are reports of violence against women and young girls is on the rise especially in IDP settings and rural communities when they are looking for water, firewood and food.

Activities planned to be carried out:

- Training of staff and volunteers on Prevention of Sexual Exploitation and Abuse (PSEA), Protection, Gender and Inclusion (PGI) in emergencies, Community Management of Rape (CMR) and Psychosocial First Aid (PFA), identify referral pathways for patients needing counselling and refer them accordingly.
- Female Genital Mutilation (FGM) prevention and awareness campaigns.
- Establishing a source of income for the GBV survivors.
- Procurement and provision of dignity kits, procuring and distributing rape management drugs to the clinics.
- Strengthening existing referral pathways.
- Conducting sensitization meetings on SGBV prevention and response. Training on male engagement on GBV prevention and response to community leaders and members. An SGBV toolkit is available with IEC materials

Disaster Risk Reduction

People targeted: 240,000 (40,000 households)
Male: 110,000
Female: 130,000
Requirements (CHF): 825,000

Proposed intervention: Communities in high-risk areas are prepared for and able to respond to disaster

The operation will contribute to disaster preparedness of communities through community-based disaster risk reduction activities that will be carried out through mobilizing communities for risk assessment for prevalent risks and identifying mitigation strategies. Involving community resilience committees and other community representatives in analysing risks and community preparedness action plans, training of community members in first aid, disaster preparedness and response, establishing multi-hazard early warning systems will contribute to reducing risks and enhancing their preparedness. Institutional preparedness of the SRCS for preparing and responding to disasters will be an essential element in reducing risks in vulnerable regions. As such, the operation will ensure that the SRCS' national and branch disaster response teams upgrade their skills as well as respective preparedness and contingency plans are in place and tested. Lessons from the previous drought response identifies the need may arise to support families migrating outside of their normal areas in need to fodder and water for livestock with emergency shelter.

Planned activities

- Identify potential disaster risk reduction measures in the target communities – this also accounts for the potential for families to be displaced due to the impact of drought.
- Conduct awareness raising sessions on preventable disaster risks in target community
- Communities will benefit from trainings and tools to address water scarcity and improve water management and safety.
- Community resilience committees will be supported to develop water harvesting and conservation techniques that will support most relevant livelihoods, including efficient irrigation systems for household or community gardens.
- Community green houses will be created that will support communities in times of droughts and in normal times as an income generation for community programs
- Community resilience Committees will develop early warning mechanisms to anticipate potential droughts.

ENABLING ACTIONS

Influencing others as strategic partners

Requirements (CHF): 169,000

Coordination with the authorities and humanitarian actors

IFRC and SRCS are observers in the Humanitarian Country Team (HCT) and a member of the Inter-Cluster Coordination Team (ICCT), and relevant IASC Clusters and inter-agency working group meetings/forums, including the Food Security Cluster. Cluster and working group members include NGOs, UN agencies and public authorities. The IFRC will support SRCS to assume a relevant advocacy role within these fora as an agency that can provide first-hand field-based information to leverage the inter-agency capacity to advocate for people in need. This will be pursued by improving data collection and visualization, following the IFRC developed FSL assessment tools and linking with the

Information Management platforms. This evidence-based advocacy will be mainstreamed through a communication strategy, including image bank, snapshots, web stories, social media, and key messages.

The IFRC and SRCS will continue to reinforce the National Society's auxiliary role, undertaking policy and legislative advocacy that will expand the RCRC operational framework and activities in country, and position SRCS as a relevant partner in the humanitarian field.

Finally, SRCS will be supported to develop a resource and partnership strategy for this and future programs, with the adoption of a resource mobilization plan of action that is realistic, rooted in evidence and features the capacity of SRCS to deliver against the proposed objectives.

Strengthening Coordination and Accountability
Requirements (CHF): 967,000

Community engagement and accountability (CEA): CEA involves enabling communities to guide programs and responding to their feedback and complaints; providing life-saving information and using participatory behaviour change communication approaches that support communities to adopt safer and healthier practices. SRCS staff and volunteers are already putting CEA into practice every day, for example through the health committees that help SRCS with the delivery of emergency health services by mobilizing fast responders. SRCS also has toll-free hotlines at branch offices to respond to questions and complaints around the CTP program, and various local drama groups that raise awareness around health in communities. With technical CEA support from IFRC, SRCS has integrated communication and participation more systematically in all its sectoral relief and early recovery activities.

Planning, Monitoring, Evaluation, & Reporting (PMER): The established PMER department/unit at the National Society will be responsible for implementing a monitoring, evaluation and reporting system whereby volunteers will submit reports to respective branch coordinators monthly. The branch monthly report will then be submitted to national coordinators for consolidation.

Information Management: The PMER, CVA and CEA will engage the use of digital data collection applications and analysis platforms. IM will keep close coordination with heads of sector and partners and developed an efficient data collection system. It is vital for SRCS to ensure that the operation is strategized based on available and latest assessment and operational data. The IFRC will further support the SRCS and place priority on data collection and analysis as well as information management that will inform all programmes. SRCS will particularly seek to improve its methods of monitoring primarily health data through mobile monitoring tools. Experience from the previous appeal has shown that there needs to be a rigorous selection of volunteers who are given the responsibility to collect data not only for response information but also for situational analysis, trending and forecasting. The collection of data on malnutrition levels needs to become a standard activity in SRCS health clinics and this data used to recognize trends and plan accordingly. Data will be analysed to provide trends and forecasts to make informed decision on the operation and to advocate to government for longer-term national-level planning.

Logistics and supply chain: *Procurement*: Both local and international procurement will be carried out in accordance with the IFRC standard procurement procedures. The logistics responsibilities will include sourcing the most urgent and relevant relief items, delivered and distributed equitably to those in need, in a timely, transparent and cost-efficient manner. International procurement support will be provided by the LPSCM Units in Nairobi and Dubai.
Warehousing: Internationally procured items need to be moved to distribution sites according to the project requirements. Warehousing plays a significant role in this operation.

Finance and Administration: The SRCS has, in all branches of Somaliland permanent administrative and financial department, which will ensure within the operation the proper use of financial resources in accordance with terms of the MoU. Monthly field returns are sent to the IFRC representative Office seated in Hargeisa for checking and verification of the documents/ returns from the branches before the country office receives them as well as to ensure that the activities are reported in accordance with the IFRC Standard Financial Management procedures.

Human Resources: Based on the demand for the technical and coordination support required to deliver in this operation, the following programme support functions will be put in place to ensure an effective and efficient technical coordination: human resources, logistics and supply chain; information technology support (IT); communications; security; planning, monitoring, evaluation, and reporting (PMER); partnerships and resource development; and finance and administration. More details will be elaborated in the Emergency Plan of Action.

Communications and advocacy: The SRCS, in collaboration with the IFRC Somalia country representation, and with support from IFRC Africa Region Communications unit, aims to coordinate various awareness and publicity activities, to sensitize the public, media and donors on the situation on the ground and the humanitarian response. This includes media and PNS communications missions, Twitter and other social media, publicity videos and articles for fundraising

and visuals such as information graphics and maps created for fundraising and wider information sharing in the Regional Operations Centre.

Security: Somalia remains in a state of conflict involving the al-Shabab Islamist extremist militant group on the one hand, the African Union Mission in Somalia (AMISOM) and the Somali National Army (SNA) on the other hand. Al-Shabab has claimed responsibility for numerous mass casualty attacks in central Mogadishu, and several attacks against rural military bases. The government has been largely unable to curb the levels of violence in the country, which beyond militancy, are also fuelled by high levels of violent crime, kidnapping and tribal tensions. Due to the prevalence of militant groups, consistent insecurity and wide availability of firearms, violent crime is a serious concern. Staff involved either SRCS or IFRC present high value targets for violent crime and, potentially, kidnapping. All Red Cross Red Crescent personnel involved in the operations must have completed their respective IFRC security e-learning courses (i.e., Stay Safe Personal Security, Security Management, or Volunteer Security) before deployment. SRCS and IFRC will actively coordinate with ICRC in monitoring and mitigating the assessed security risks. Contingency plans such as medical evacuation plan, relocation plan and crisis management plan need to be in place to manage emergencies adequately.

Strengthening National Societies
Requirements (CHF): 630,000

IFRC will support the National Society and the affected branches to enhance their capacities in risk management, financial management, reporting and transparency and duty of care.

Regarding risk management, the IFRC will support the NS to increase its capacity to deliver DRR quality programs, by:

a. creating partnerships with a specialized university and the Ministry of agriculture and health to cooperate and develop join initiatives on resilience generation and anticipation for droughts and collaboration for early interventions.
b. At the level of the affected branches, IFRC will support the affected branches to further develop capabilities in:
    I. water management,
    II. food and nutrition,
    III. water harvesting,
    IV. green houses for the production of food and
    V. livestock protection techniques.

Regarding National Society capacity development, this Emergency Appeal will provide means for the National Society to:

a. improve finance policies and financial management, including all aspects of accountability, integrity and fraud & corruption, in NHQ and branches in the targeted states.
b. Strengthen its supply chain management capacity, including adequate storage, maintain stock reports, transportation and distribution of items. The National Society will also be supported to create and maintain a Disaster Preparedness stock.
c. PMER will be improved at NHQ and selected branches, ensuring adequate systems for assessments, data collection, monitoring and evaluating the development of the program.
d. Infrastructure development in Information Technology and digitalization development in NHQ and selected branches

Finally, the National Society will be supported in enhancing Disaster Response Management including disaster preparedness stocks. Reference will be made to the Preparedness for Effective Response assessment 2020-21 such as the development of Response and Contingency plans, Enhancing the Capacity of the NDRT Team.

Duty of care will be a priority (for all personnel and volunteers involved in the operation, including insurance, psychosocial support, and personal protective equipment). The National Society capacity building and organizational development objectives are facilitated to ensure they have the necessary ethical, policies and financial foundations, systems and structures, competences, and capacities to plan, perform and carry out operations with minimum support.

FUNDING REQUIREMENTS

Somalia Hunger Crisis 2021

Funding requirements - summary

Area of Intervention	Needs in CHF
LIVELIHOODS AND BASIC NEEDS	4,123,000
HEALTH	638,000
WATER, SANITATION AND HYGIENE	1,178,000
PROTECTION, GENDER AND INCLUSION	202,000
DISASTER RISK REDUCTION	825,000
INFLUENCING OTHERS AS STRATEGIC PARTNERS	169,000
STRENGTHENING COORDINATION AND ACCOUNTABILITY	967,000
STRENGTHEN NATIONAL SOCIETIES	630,000
TOTAL FUNDING REQUIREMENTS	**8,732,000**

Contact information

For further information, specifically related to this operation please contact:

Somali Red Crescent Society

- **President,** Yusuf Hassan Mohamed, phone: +254 722144284; e-mail: yhmohameds@gmail.com

IFRC Cluster Delegation

- **Head of Delegation,** Mohamed Babiker, phone: +254 1108043974 e-mail: mohamed.babiker@ifrc.org

In the IFRC

- **IFRC Regional Office for Africa:** Adesh Tripathee, Head of DCC, Nairobi, Kenya; phone +254 731067489; email: adesh.tripathee@ifrc.org

For IFRC Resource Mobilization and Pledges support

- **IFRC Regional Office for Africa:** Louise Daintrey-Hall, Head of Partnerships and Resource Development Regional Office for Africa, Email: louise.daintrey@ifrc.org phone: +254 110 843978

For In-Kind donations and Mobilisation table support

- **Logistics Coordinator:** Rishi Ramrakha, Head of Africa Regional Logistics Unit, email: rishi.ramrakha@ifrc.org; phone: +254 733 888 022

Reference documents

↘

Click here for:

- Appeals and updates

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 Organisations (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 always promote 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.

Jagan Chapagain
Secretary General