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Emergency Plan of Action operation update

Somalia: Drought



Emergency appeal n° MDRSO005		GLIDE n° DR-2015-000134-SOM
EPoA update: n° 2 Date of issue: 25/04/2016		Timeframe covered by this update: 21 March to 21 April 2016
Operation start date: 21 March 2016		Operation timeframe: 6 months End date: 21 September 2016
Overall operation budget: CHF 1,290,936	Appeal coverage: 20%	If Emergency Appeal operation, DREF amount initially allocated: CHF 129,394
N° of people being assisted: 78,990		N° of people being affected: 4.7 million
Host National Society presence (n° of volunteers, staff, branches): The Somali Red Crescent Society (Somaliland and Puntland)		
Red Cross Red Crescent Movement partners currently actively involved in the operation: German Red Cross, Japanese Red Cross, Canadian Redcross, Swedish Red Cross, British Red Cross, Finnish Red Cross, Qatar Red Crescent, International Committee of the Red Cross(ICRC) and International Federation of the Red Cross and Red Crescent Societies(IFRC).		
Other partner organizations actively involved in the operation: Ministry of Health, Ministry of Agriculture, National Environmental Research and Disaster Authority (NERAD), Humanitarian Affairs and Disaster Management Agency (HADMA), World Vision International, Global, UNICEF, Save the Children, World Health Organisation, Food and Agriculture Organisation , Food Security and Nutrition, Analysis Unit (FSNAU), UN-OCHA.		

Summary of major revisions made to emergency plan of action:

This update provides a brief overview on Somali Red Crescent Society actions to date in the preparations for the start of their drought response activities to be covered by the Emergency Appeal (in anticipation of pledges). Appeal coverage at the time of writing is 20%, donors are encouraged to support the appeal to enable Somalia Red Crescent Society (SRCS) provide assistance to the targeted beneficiaries through the planned activities as detailed in the Emergency Plan of Action (EPoA). A DREF loan of CHF 129,394 has been processed to SRCS.

A. Situation analysis

Description of the disaster

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 < 5 years of age acutely malnourished. Reports indicate that 4.7 million people are food insecure with an estimated 930,000 already in Integrated Phase classification (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 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. IFRC's Disaster Emergency Relief Fund (DREF) of 129,394 Swiss francs allocated to support the start of assistance. Some reasonable rains have since the launch of this Appeal occurred in most parts of Somaliland and Puntland, particularly the western part of Somaliland that was severely affected by the drought. The Eastern parts of Somaliland, including the intervention areas under the Appeal have however not received such heavy rains.

11 April 2016: Operations Update 1 published covering the first 2 weeks of the operations

This update covers information for 1 month since the launch of the operation.

Summary of current response

Overview of Host National Society

The Somali Red Crescent Society is currently providing Health and Care services through its Mobile and Static Clinics through its Integrated Health Care Programme (IHCP). The mobile and static clinics provide immunization (mother and child), treatment of common illnesses, Nutrition screening, Out Patient Therapeutic Feeding Programme (OTP), Therapeutic Supplementary Feeding Programme (TFSP), Maternal Child Health Nutrition (MCHN), Reproductive Health (ante-natal, post-natal, delivery services) and health education in some of the areas that are currently affected by the drought. The National Society is operating a total of 12 static and 6 mobile clinics in Somaliland and 20 static and 4 mobile clinics in Puntland through multilateral support from Partner National Societies (PNS) and in collaboration with the sector Ministry, UNICEF, WHO and WFP.

The SRCS, with the support of the German Red Cross is implementing an ECHO funded operation supporting communities in Maroodijeeh and Awdal Regions as part of the drought response. Through the ECHO project the SRCS has reached an estimated 28,810 households with clean water for household consumption as well as food security support through cash grants for alternative livelihoods and health interventions in the above named areas.

The National Society is also implementing a number of projects including Youth Development, CBHFA, HIV programme, Restoring Family Links and a Community Resilience programme with 3 main components; WATSAN, Livelihoods, Drought Resilience and Climate Change Adaptation. This is through the support of Red Cross/Red Crescent Movement Partner National Societies (PNS) both multilaterally through IFRC or bilaterally.

The SRCS has built a wealth of capacity and experience in responding to emergencies. Since 2011, DREF and Emergency Appeal operations have been carried out in response to the 2010/2011 drought which affected Puntland and Somaliland (MDRSO001 Emergency APPEAL) and Population Movement (MDRSO002 DREF) into Puntland and Somaliland following the Yemeni crisis since March 2015. The National Society (NS) will build on the experience and lessons learned from these operations (as relevant) in the response to the current emergency. Recommendations from the Drought Evaluation Report MDRSO001, Drought 2011, will be incorporated in implementing the current drought response activities as a lessons learnt.

Overview of Red Cross Red Crescent Movement in country

The German Red Cross (GRC) has bilateral resilience and other programmes/projects with the National Society in selected communities in Somaliland and Puntland. The GRC is also leading a consortium with the Finnish Red Cross to support response to the drought in 2 regions badly affected by the drought in Somaliland with funding from ECHO.

The Federation is supporting health and organizational development interventions in both Puntland and Somaliland through multilateral support. The Norwegian Red Cross equally provides bilateral support to the SRCS in the running of Rehabilitation Centres in all the 3 zones of the country – Puntland, Somaliland and South/Central Somalia. The Qatar Red Crescent also provides bilateral support to 2 static health clinics managed by the SRCS in Somaliland.

The ICRC supports National Society health interventions, water and sanitation as well as food security interventions in South/Central Somalia in particular and to some extent in Somaliland and Puntland.

Overview of non-RCRC actors in country

The Government Disaster Response arms, such as the National Environment Research and Disaster Preparedness and Management Authority (NERAD) in Somaliland and the Humanitarian Affairs and Disaster Management Agency (HADMA) in Puntland, have overall coordination of all responses to disasters and emergencies in the respective zones. The UNOCHA plays the coordination role through mapping of what different agencies are or plan to intervene in most regions affected by the drought.

Below are the names and activities of organizations with relevant response interventions in Somaliland:

Organization	Type of Response
UNICEF	Plans to rehabilitate 10 boreholes
Concern Worldwide	Well construction, borehole drilling and cash for work activities
Save the Children	Emergency Health interventions through Mobile Clinics, water trucking and distribution of NFIs and maintenance of Berkeds
Care International	Borehole rehabilitation
Islamic Organisation	Water trucking and Food Assistance
WFP	General Food Distribution
World Vision	Supplementary feeding for the malnourished
Gurmad Foundation (Arab Diaspora)	Water trucking and food distribution
Norwegian Refugee Council	Cash for food
Danish Refugee Council	Cash Transfer

Needs analysis and scenario planning

Please refer to the [Original Plan of Action \(MDRSO005\)](#) for information on the operation, including on the operational strategy and plan, and operational support needs.

B. Detailed Operational Plan

Health & care

Needs analysis: SRCS seeks to re-activate 6 mobile clinics as well as stocking up the operational mobile clinics in 6 regions to ensure adequate coverage of health services in the hard to reach areas affected by the drought.

Population to be assisted: 78,990 drought affected communities supported for 6 months.

Health & care			
Outcome 1: The immediate risks to the health of affected populations are reduced	Outputs		% of achievement
		Output 1.1 Community-based disease prevention and health promotion measures provided Output 1.2 Severe Acute Malnutrition is addressed in the target population Output 1.3 Increased access to primary health care services through the mobile clinics	
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	
Output 1.1			1%

<ul style="list-style-type: none"> 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. 	X		
Output 1.2 <ul style="list-style-type: none"> 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 	X	X X X	1%
Output 1.3 <ul style="list-style-type: none"> 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. Procurement of medical supplies and nutrition supplements 	X	X X X X X X	1%
Progress towards outcomes			
<ul style="list-style-type: none"> Currently the community health promotions with house to house sessions and community gatherings are ongoing. Screening for children < 5 years is taking place at the moment. The locations for the mobile clinic operations were identified and the process of activating the mobile clinics was done during the first two weeks of the operation. Recruitment of staff to support the clinics was finalized. Procurement of minor equipment and servicing of vehicles for the mobile services are on-going. Procurement of OPD kits is currently being carried out through the IFRC Global Logistics Service in accordance with the IFRC standard procurement procedures. A banner was produced for the startup meeting as part of the visibility for the response. 			

Water, Sanitation and Hygiene Promotion

Needs analysis: One of the biggest challenges that the communities in Somaliland and Puntland are facing is access to safe and clean water for household and livestock consumption. SRCS seeks to provide access to safe and clean water for consumption, through the rehabilitation of boreholes and berkedes (earth dams), provision of fuel subsidies and distribution of water filters and aqua tabs. Behaviour change and hygiene promotion activities will be strengthened by volunteers trained on the PHAST methodology.

Population to be assisted: 78,990 drought affected communities supported for 6 months.

Water, sanitation, and hygiene promotion			
Outcome 2: immediate reductions in risk of waterborne and water related diseases in targeted communities.	Outputs		% of achievement
		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. 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	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	
Output 2.1 <ul style="list-style-type: none"> 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 berkedes. 		X X X X	0%
Output 2.2 <ul style="list-style-type: none"> Train 120 volunteers on PHAST methodology. Distribution of ceramic water filters. Conduct one-on-one communication targeting 57,500 people for improved hygiene awareness activity. 		X X X	0%
Progress towards outcomes			
Identification of boreholes and berkedes to be rehabilitated and volunteers to be trained is on-going in anticipation of funding availability for these activities. Training plan for volunteers in progress.			

Food security, Nutrition, and Livelihoods

Needs analysis: FSNAU reports that 4.7 million people are in dire need of food assistance. SRCS through this operation will provide cash through mobile money transfers to enable 900 households to meet their monthly food needs. The transfer value has been calculated based on the average cost of the food basket for a household of 6 which meets the 2100kcal per day.

Population to be assisted: 900 households (5,400 beneficiaries) supported with cash transfers for 3 months.

Food security, Nutrition, and Livelihoods			
Outcome 3: Immediate food needs of the disaster affected population are met. Outcome 3.2: Critical nutritional status of the targeted community is improved	Outputs		% of achievement
	Outcome 3 Output 3.1 Cash transfers are provided to 900 households (5,400 beneficiaries) to purchase food Outcome 3.2 Output 3.1 Sufficient nutritious food accessed by children under 5 in vulnerable households/communities Output 3.2 Screening and referrals for acute malnutrition carried out for children under age 5		4%
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	
Outcome 3 Output 3.1 <ul style="list-style-type: none"> 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 	X	X X X X X X X X	1%
Outcome 3.2 Output 3.1 <ul style="list-style-type: none"> 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 	X	X X X X	1%
Outcome 3.2 Output 3.2 <ul style="list-style-type: none"> Nutrition screening Referral of severely malnourished children for therapeutic feeding. 	X X		2%

Progress towards outcomes

Nutritional, screening is ongoing and referrals for severely malnourished for therapeutic feeding is being done.

Beneficiary selection tools were designed.

Discussion between SRCS/IFRC Somalia Country Office ongoing with UNICEF for the supply of the plumpy 'Nuts and BP5 biscuits for the treatment and prevention of malnutrition in the response.

Training plan for volunteers in progress.

Cash transfer training has been proposed for the 2nd May 2016 to 5th May 2016

Programming / Areas Common to all Sectors

Insert programming area			
Outcome 4: Continuous and detailed assessment and analysis is used to inform the design and implementation of the operation	Outputs		% of achievement
		Output 4.1 Initial needs assessment are updated following consultation with beneficiaries	
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	
Output 4.1 <ul style="list-style-type: none"> 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. 	X X X X	X	4%
Progress towards outcomes			
IFRC together with SRSC Staff and volunteers were mobilized for a rapid assessment 23 rd February 2016 to 28 th February 2016.			
Continuous needs assessment is ongoing and data from the field is being consolidated.			
The IFRC Somalia Country Office supported a startup meeting which took place between 10 and 11 April 2016 in			

Hargeisa, Somaliland. This workshop included IFRC and SRCS technical staff directly involved in the implementation of the planned interventions. This meeting discussed the entire content of the response and how the activities are going to be implemented within the 6-month period of the appeal as per availability of funding.

Coordination by IFRC Somalia Country Office with SRCS is ongoing.

Outcome 5: The management of the operation is informed by a comprehensive monitoring and evaluation system	Outputs		% of achievement
	Output 5.1 Monitoring information informs revisions of plan of action where appropriate Output 5.2: The findings of evaluations lead to adjustments in on-going plans and future planning as appropriate		2%
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	
Output 5.1 <ul style="list-style-type: none"> 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 	X		2%
Output 5.2: <ul style="list-style-type: none"> Evaluation or review. 	X		0%
Progress towards outcomes			
The monitoring framework for the interventions was discussed during start up meeting. Currently the SRCS is carrying out continuous monitoring of activities.			
Training plan for volunteers in progress.			

C. Operational Support Services

Human resources

The recruitment of staff and volunteers to operate the 6 mobile clinics - 4 in Somaliland under the Sool and Sanaag regions and 2 in Puntland in the Nugal region was finalized and staff are currently on the job. Each mobile clinic has a core staff of 3 – a nurse, a midwife and an auxiliary nurse, together with a driver and 2 volunteer mobilizers.

SRCS finalized the recruitment of the National Society operational structure at field level. Job descriptions for the key positions were developed and the positions were filled by mid-April pending funding availability initially. The operation has 3 SRCS Disaster Management National Staff (1 for Somaliland and 2 for Puntland considering the coverage).

An IFRC Disaster Management Officer has been recruited by the IFRC Somali Country Office to support the National Society with the implementation of the operation.

Logistics and Supply Chain.

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. Standard IFRC logistics procedures will be followed and reported upon while providing technical surge capacity support during procurement, training and advice to the host National Society and Federation delegates and staff.

The IFRC Somalia Country Office has discussed the procurement and logistics component of the Appeal with the IFRC Africa Region Logistics Delegate and would follow the process through with the advice of the Logistics Delegate.

Procurement of OPD kits is currently being carried out through the IFRC Global Logistics Service in Geneva in accordance with the IFRC standard procurement procedures. Discussion between SRCS/IFRC Somalia Country Office commenced with UNICEF for the supply of the plumpy nuts and bb5 biscuits for the treatment and prevention of malnutrition.

SRCS is in the process of procuring equipment such as blood pressure machines, mats, chairs and tables, stethoscopes, etc.

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. The IFRC will discuss this with SRCS during the inception meeting.

However the purchase of mobile phones costs were not factored in the budget, but will be considered during revision of the Emergency APPEAL.

Cash transfer training has been proposed for the 2nd May 2016 to 5th May 2016

Communications

The Somali Red Crescent Society, in collaboration with the IFRC Somalia country representation, with support from IFRC 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.

Planned Activities:

- Produce monthly information bulletins, facts and figures, key messages etc. and share with relevant stakeholders, including beneficiaries and partners supporting the operation
- In collaboration with programmes, work on advocacy message to address the different issues linked to the current conflict (health, food security, GBV, etc.)
- News releases, fact sheets, videos, photographs and qualified spokesperson contacts are immediately developed and made available to media and key stakeholders. When security allows, facilitate media field trips to affected areas to create awareness
- Produce IEC materials
- Maintain a social media presence throughout the operation utilizing IFRC sites such as Facebook and Twitter
- Support the launch of this Appeal and other major milestones throughout the operation using people-centred, community level diverse content, including web stories, blogs, video footage and photos with extended captions. Share any communications material created through this appeal with IFRC and ICRC for use on various communications channels including the IFRC Africa web page, www.ifrc.org/africa
- Build the communications capacity of the NS communication team through training and provision of appropriate equipment, if needed (photo and video camera)
- As security might reduce the possibility of doing a field visit, training should be organized for the DM team or other colleagues so they can collect material (photos, quotes) as they go to the field.

Security

The IFRC Somalia Country Office is providing 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 has a Security Advisor who 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 who attended the startup meeting sought security clearance from the Security Advisor before undertaking the field mission to Somaliland on the 10th and 11th April 2016. 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 as part of the staff and volunteer training.

Planning, Monitoring, Evaluation, & Reporting (PMER)

The IFRC Somalia Country Office supported an inception workshop which took place between 10 and 11 April 2016 in Hargeisa, Somaliland. This workshop included IFRC and SRCS technical staff who are involved in the implementation of the Appeal. This meeting discussed the entire content of the response and how the activities are going to be implemented within the 6-month period of the Appeal.

Here are some points that were discussed during meeting:

Strategy of mobile clinic deployment, including:

- Numbers of stations (villages), numbers of expected visits and access for beneficiaries (distance)
- Beneficiaries mobilization strategy: how to make sure children admitted in the nutrition program are coming back for follow up visits; communication plan with communities on program, visit schedule, malnutrition sensitization.
- Admission criteria and cured criteria according to nutrition protocols
- Referral system if needed (for severely malnourished and sick children who might need in-patient capacity clinic for follow up)
- Project Indicators and reporting timelines (monitoring framework): the nutrition mobile clinic is a good way to follow up the trends of malnutrition among the population, and it will be useful to justify any required update to the strategy

On CTP:

- Tendering process
- Market survey
- CTP training (as required)

Rehabilitation of borehole/berkeds/fuel subsidy:

- Number for each region
- Location of boreholes for rehabilitation and fuel subsidy
- Number of borehole to benefit from fuel subsidy
- Quantity of fuel for each borehole

General:

- Logistic requirement (include Region Log on CTP and other international procurement (OPD kit) to respect IFRC SOPs)

- Strategy on prioritization of activities as the funding of the appeal is not guaranteed (and might be low, because of the nature of the operation, based on previous experiences)

The operation will ensure that all aspects of the implemented components are monitored and specific tools are developed/modified as necessary taking cognizance of gender and age disaggregation of data. The IFRC Regional Disaster Crisis Prevention, Response and Recovery Department and EAIOI PMER units will provide technical support, and ensure that monitoring and reporting structures are established.

Administration and Finance

A Memorandum of Understanding (MoU) has been prepared for signing between IFRC Somalia Country Office and the SRCS, and it outlines the parties' responsibilities in implementing the planned activities within the Emergency APPEAL and also ensures that the appropriate guidelines are complied with in terms of the use of the funding allocations.

The HR set up for the operations management of the EA activities by SRCS and IFRC, has been designed taking into account Lessons Learned from the 2010/2011 Drought which affected Puntland and Somaliland (MDRSO001 Emergency APPEAL) and Population Movement (MDRSO002 DREF) into Puntland and Somaliland following the Yemeni crisis since March 2015. The National Society (NS) is building on the experience and lessons learned from these operations (as relevant) in the response to the current emergency. Recommendations from the Drought Evaluation Report MDRSO001, Drought 2011 are being incorporated in implementing the current drought response activities as a lessons learnt. This has already kicked off and is evident from the rapid needs assessment conducted between 23rd to 28th February 2016 and a start-up meeting conducted on the 10th and 11th April 2016. This will ensure proper project implementation and accountability

A review of the Emergency Plan of Action will be based on the adequacy of the unpredicted "Gu" (long rains).

D. Budget and Funding Situation

The Somalia Country Office is planning with the Partnership and Resources Development Department of the IFRC Africa Region to organize donor teleconference. Meanwhile the Canadian Red Cross, the Japanese Red Cross and the Swedish Red Cross have so far contributed to the APPEAL which reflects a donor response of 20%. The British Red Cross and the Netherlands Red Cross have also declared their intention to support the Appeal.

In view of the extent of needs on the ground, IFRC is appealing partners and donors to provide urgent additional funds to enable the National Society to meet the needs of the most vulnerable and affected families.

A DREF loan of CHF 129,394 has been approved and processed for transfer from the IFRC Somalia Country Office to Somali Red Crescent Society.

Contact Information

For further information specifically related to this operation please contact:

In the National Society

- **In Nairobi, Somali Red Crescent Society coordination office:** Mr. Yusuf Hassan Mohamed., President SRCS; mobile phone +254 722 144284; email: benebene1@gmail.com;
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In Geneva

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In the Africa Region

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For Resource Mobilization and Pledges:

- **In Africa Region:** Fidelis Kangethe, Partnerships and Resource Mobilization Coordinator; Nairobi; 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)**
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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.