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# Emergency Plan of Action operation update

## Somalia: Drought

 International Federation  
of Red Cross and Red Crescent Societies

<b>Emergency appeal</b> MDRSO005	<b>GLIDE n°</b> <a href="#">DR-2015-000134-SOM</a>
<b>EPoA update n°</b> 3 <b>Date of issue:</b> 08 September 2016	<b>Timeframe covered by this update:</b> 6 Months
<b>Operation start date:</b> 21 March 2016	<b>Operation timeframe:</b> 6 months and end date 21 September 2016 <b>New end date:</b> 21 December 2016.
<b>Overall operation budget:</b> CHF 1,290,936	<b>If Emergency Appeal operation, DREF amount initially allocated:</b> CHF 129,394
<b>N° of people being assisted:</b> 78,990	
<b>Host National Society presence (n° of volunteers, staff, branches):</b> The Somali Red Crescent Society (Somaliland and Puntland).	
<b>Red Cross Red Crescent Movement partners currently actively involved in the operation:</b> German Red Cross, 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).	
<b>Other partner organizations actively involved in the operation:</b> 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 and 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 for the first 6 months of the operation. This Operations Update is requesting an extension to the timeframe of the by 3 months (New end date: 21 December 2016) to enable the National society finalised its planned activities. Appeal coverage at the time of writing is 43%, donors are encouraged to support the appeal to enable SRCS provide assistance to the targeted beneficiaries through the planned activities as detailed in the Emergency Plan of Action (EPoA). A DREF loan of 129,394 Swiss francs was processed at the beginning of the APPEAL to support the startup of activities by SRCS

## A. Situation analysis

### Description of the disaster

#### August 2015:

Poor post-GU (long rains) exacerbated drought conditions leading to reduced pasture land, water shortages, and deaths of livestock. This 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 indicated that 4.7 million people were 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 would have deteriorated.

**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. IFRC's Disaster Emergency Relief Fund (DREF) of 129,394 Swiss francs allocated to support the start of assistance. The 1<sup>st</sup> Operation update was published on 11 April 2016, while the 2<sup>nd</sup> on the 25<sup>th</sup> April 2016 with only a few of the Health and Care activities under the Mobile clinics implemented. Please refer to <http://www.ifrc.org/> for more information.

This update provides information regarding the 6 months of the operation since the launch of the APPEAL. The Somali Drought Emergency APPEAL seeks an additional extension of 3 months to enable the completion of the pending activities as it seeks additional funding in view for the extent of activities on the ground.

## Summary of current response

### Overview of Host National Society

The Somali Red Crescent Society SRCS is currently providing Health and Care services through its Mobile and Static Clinics through 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 clinics and 6 mobiles in Somaliland, and 20 static clinics and 4 mobile clinics in Puntland through multilateral support from Partner National Societies (PNS) 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 is reaching 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 t3 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 GRC is leading a consortium with the Finnish Red Cross to support the response to the drought in 2 regions affected by the drought in Somaliland with funding from ECHO.

### 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	Accomplishments	Remarks
UNICEF	Plans to rehabilitate 10 boreholes	On going	
Concern Worldwide	Wells construction, borehole drilling and cash for work activities	Ongoing	Only Cash for work done
Save the Children	Emergency Health interventions through Mobile Clinics, water trucking and distribution of NFIs and of Berkeds	Ongoing such as mobile health clinics, and maintenance of barkedes	water trucking and distribution of NFIs conducted
Care International	Borehole rehabilitation	Done	

Islamic Organization	Water trucking and Food Assistance	Done	
WFP	General Food Distribution	Done	
World Vision	Supplementary feeding for the malnourished	Done	
Gurmad Foundation (Arab Diaspora)	Water trucking and food distribution	Done	
Norwegian Refugee Council	Cash for food	Done	
Danish Refugee Council	Cash Transfer	done	

## Needs analysis and scenario planning

### Risk Analysis

Please refer to the Original Plan of Action (MDRSO005) for information on the risk analysis.

Further to this, the Security advisor has recommended the IFRC Somalia Country Office Disaster Management Programme Officer and an SRCS Programme staff for the Security HIT Training taking place in Denmark in September 2016. The SRCS staff as well as volunteers working directly with the operation have undertaken the `Safer Access` and `Do no Harm` security training.

## B. Operational strategy and plan

### Overall Objective

The overall strategy is based on the need to improve Health, Nutrition, Livelihoods and access to safe water for the drought affected population in 4 regions of Somaliland (Hargeisa, Sahel, Sool and Sanaag), and 2 regions of Puntland (Bari and Nugal). The immediate food needs of the target population will be met through provision of food assistance for about 3 months using Cash Transfers based on availability of funds. Access to health services is being provided through mobile clinics. Safe and clean water will be enabled through rehabilitation of water points available in the proximity of the beneficiaries.

The proposed activities address the priority needs and areas of interventions identified by the both the IFRC and the Joint Rapid Assessment as follows:

1. Meet immediate household food needs through cash transfer programming.
2. Reduce the risks to the health of affected populations.
3. Prevent risk of waterborne and water related diseases in targeted communities as per the proposed interventions below.

### Proposed strategy

The proposed strategy aims to support an initial 57,500 beneficiaries in Somaliland and 21,490 beneficiaries in Puntland with immediate interventions (household food needs, access basic health services and clean and safe water for household consumption). As per the agreed strategy, the following activities were prioritized within this Emergency APPEAL operation

#### Proposed Interventions:

- Food assistance through mobile money transfers to 900 Households for over 3 months
- Provision of health services to 78,990 people through the deployment of mobile clinics
- Nutrition screening for 15,798 children under five, treatment and referrals of complicated cases.
- Provision of clean and safe water for consumption through rehabilitation of 12 boreholes and 12 berkeds (both Somaliland and Puntland)
- Provision of fuel subsidy for 10 boreholes and 6000 ceramic water filters.
- Health and hygiene promotion through training 120 volunteers for both Somaliland and Puntland.

### **Cancellation of activities**

- Provision of health services to 78,990 people through the deployment of mobile clinics
- Nutrition screening for 15,798 children under 5 years, treatment and referrals of complicated cases.

### **Revision of activities**

- Food assistance through mobile money transfers to 900 Households for over 2 months depending on the available funds.
- Provision of clean and safe water for consumption through rehabilitation of identified water points within the budget limit (both Somaliland and Puntland)
- Provision of ceramic water filters depending on the available funds.
- Provision of water treatment (aqua tabs) depending on the available funds.

### **Additional activities**

- Purchase mobile phones for the targeted beneficiaries based on the available funds.

**Exit strategy:** Please note that the Emergency APPEAL operation is scheduled to end on 31 December 2016, subject to timely implementation and availability of funds for implementation. Sustainable options will be identified and explored should as a long term measure for the drought response. It will be agreed with the various partners under the Drought task force working group that the role of the SRCS in collaboration with the partners is to meet the immediate needs and fill gaps while going through the process of receiving funds for more sustainable support to the drought affected communities.

## **Operational support services**

### **Human resources**

Please refer to the Original Plan of Action (MDRSO005) for information on the Human Resources, including on the operational strategy and plan, and operational support needs. However, the running of the mobile clinics is scheduled to end by September 2016, as per the initial plan but the Eid bonus will be considered and factored in during the current revision. The operation has had 3 SRCS Disaster Management National Staff (1 for Somaliland and 2 for Puntland considering the coverage) and an IFRC Somalia Country Office Disaster Management technical staff and will continue supporting the National Society with the implementation of the operation.

### **Logistics and supply chain**

The logistics responsibilities included 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 has been provided for the purchase of OPD kits and has ensured quality of the kits that have been procured shipped to the targeted branches in Puntland and Somaliland. All other procurement including procurement process for the aqua tabs, water filters and water points for rehabilitation are being carried out locally in accordance with the IFRC standard procurement procedures. Technical surge capacity support during procurement has been provided remotely by the IFRC Country Office. Due to the remoteness of the affected areas, and the rough terrain, there was need to budget for both fuel for transportation of items and rental of vehicles (activation of mobile clinics) for the 6 months' duration of the operation.

### **Information technologies (IT)**

Since Cash Transfer Program is part of the intervention, the initial plan was to purchase mobile phones for the targeted beneficiaries, the activity will be revisited as there was an oversight during the initial budget preparation. However please note that the purchase of mobile phones costs was not factored in the budget, but will be considered during revision of the Emergency APPEAL. Selection will be based on a basic mobile phone that is mobile money transfer operational. Airtime costs for staff and volunteers will be budgeted for to ensure they are able to communicate while in the areas of implementation carrying out the interventions. The Cash Transfer training was conducted in the month of May 2016.

### **Communications**

The Somali Red Crescent Society, in collaboration with the IFRC Somalia country representation, and with support from IFRC Africa Regional communications, has coordinated and supported awareness and publicity activities on the IFRC website especially with recent joint Monitoring and Communication mission conducted in August 2016, to sensitize the

public, media and donors on the situation on the ground and the humanitarian response. A recent story from the joint mission can be found in the following link: <http://www.ifrc.org/en/news-and-media/news-stories/africa/somalia/the-fragile-balance-between-life-and-death-during-somali-drought-72464/>

### 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, ICRC and other movement partners for use on various communications channels including the IFRC Africa web page, [www.ifrc.org/africa](http://www.ifrc.org/africa)
- Build the communications capacity of the NS communication team through training and appropriate equipment, if needed (photo and video camera)
- As security might reduce the possibility of doing a field visit, security 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 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 need may arise for National Society staff and volunteers, to have armed escort during interventions. The IFRC Somalia Country Office will continue to 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 has a Security Advisor who has been supporting and working closely with the IFRC Somalia Country Office through the monitoring of the security situation and guidance on how the operation is being implemented. The IFRC Staff will continue to seek security clearance from the IFRC Security Advisor before undertaking any field missions to Somaliland or Puntland. Further to this, the IFRC Security advisor has recommended the IFRC Disaster Management Programme Officer and an SRCS Programme staff for the Security HIT Training taking place in Denmark in September 2016. The staff as well as volunteers working directly with the operation have undertaken `Safer Access` and the `Do no Harm` concept training when the operation was initiated.

### Planning, Monitoring, Evaluation, & Reporting (PMER)

Continuous monitoring has been carried out through the SRCS staff members in the areas of implementation (within the 6 months and will continue in the additional months during revision) 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) + Budget will be conducted based on the results of the monitoring report.

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 will be 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 has ensured 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 Somalia Country Office and the IFRC Regional Disaster Crisis Prevention, Response and Recovery Department together with IFRC PMER units are providing technical support, and ensure that monitoring and reporting structures are established.

A joint assessment will be carried out by SRCS, UNOCHA, UNICEF and other Humanitarian agencies in Bosaso and Garowe Puntland from the 4<sup>th</sup> to the 13<sup>th</sup> September 2016. The joint assessment will focus on the current drought affected areas of Nugal and Bari regions among others. This will include looking at the progress of livelihoods, wash, food security etc. Please note that given the expected outcome of the assessment, the expansion operation may need to be considered to target more drought-affected communities, including either an additional duration of the APPEAL depending on scale of the disaster.

**Administration and Finance**

A Memorandum of Understanding (MoU) has been signed between the IFRC Somalia Country Office and the SRCS, which outlines the parties' responsibilities to implement the activities planned within the Emergency APPEAL, and 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 has within the operation ensured the proper use of financial resources in accordance with terms of the MoU. Monthly field returns have been 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. Office costs for stationery (printing, photocopying, paper etc.) have been budgeted for in the Emergency APPEAL.

**C. Detailed Operational Plan****Programming / Areas Common to all Sectors**

Areas common to all sectors			
<b>Outcome 1:</b> Continuous and detailed assessment and analysis is used to inform the design and implementation of the operation	Outputs		% of achievement
	<b>Output 1.1:</b> Initial needs assessment are updated following consultation with beneficiaries.		60%
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	
<ul style="list-style-type: none"> <li>In Mobilization of staff and volunteers to carry out rapid needs assessment.</li> </ul>	X		100%
<ul style="list-style-type: none"> <li>Analyze and consolidate assessment data from the field and maintain constant liaison with SRCS staff and volunteers in the field. Continuous needs assessment.</li> </ul>	X		50%
<ul style="list-style-type: none"> <li>Revise Emergency Plan of Action based on ongoing implementation and ongoing assessment.</li> </ul>		X	0%
<ul style="list-style-type: none"> <li>Start-up meeting.</li> </ul>	X		100%
<ul style="list-style-type: none"> <li>Coordination with relevant departments of the SRCS and IFRC.</li> </ul>	X		50%
Progress towards outcomes			
<ul style="list-style-type: none"> <li>IFRC together with SRSC Staff and volunteers were mobilized for a rapid assessment 23<sup>rd</sup> February 2016- 28<sup>th</sup> February 2016. Continuous needs assessment is ongoing and data from the field is being consolidated. A planned Joint Assessment by the SRCS, UNOCHA and other humanitarian agencies has been scheduled from the 4<sup>th</sup> to 13<sup>th</sup> September 2016, in both Bosaso and Garowe Puntland, this activity will be captured during the revision of the budget. The IFRC Somalia Country Office supported a startup meeting which took place between 10 - 11 April 2016 in Hargeisa, Somaliland. A banner was produced for the startup meeting. 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 will 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.</li> <li>A revision of the Emergency APPEAL is being requested through this Operations Update so as to complete the implementation of the activities.</li> </ul>			
<b>Outcome 2:</b> The management of the operation is informed by a comprehensive monitoring and evaluation system	Outputs		% of achievement
	<b>Output 2.1:</b> Monitoring information informs revisions of plan of action where appropriate <b>Output 2.2:</b> The findings of evaluations lead to adjustments in on-going plans and future planning as appropriate		50%
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	

<b>Output 2.1</b>			
<ul style="list-style-type: none"> <li>Continuous monitoring of the activities implementation by SRCS.</li> </ul>	X		50%
<ul style="list-style-type: none"> <li>Periodic monitoring by IFRC technical support team.</li> </ul>	X		50%
<ul style="list-style-type: none"> <li>Train 6 SRCS staff and 120 volunteers on safer access and do no harm</li> </ul>	X		100%
<b>Output 2.2</b>			
<ul style="list-style-type: none"> <li>Evaluation or review.</li> </ul>		X	0%
Progress towards outcomes			
<ul style="list-style-type: none"> <li>The monitoring framework for the interventions was discussed during start up meeting. Currently SRSC is carrying out continuous periodic monitoring of activities. A joint Monitoring and Communication visit was carried out by the IFRC from the 4<sup>th</sup> to 9<sup>th</sup> August 2016 in Somaliland, the outcome of the report will be used for the extension process of the Emergency APPEAL. A similar planned mission for Puntland is scheduled for the 21<sup>st</sup> - 28<sup>th</sup> October 2016.</li> <li>One hundred and twenty (120) Volunteers were trained on safer access and do no harm. An evaluation review has not been conducted yet.</li> </ul>			

**Note: do not forget to revise the budget for each sector if activities have been revised**

## 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 3: The immediate risks to the health of affected populations are reduced.	Outputs		% of achievement
		<b>Output 3.1</b> Community-based disease prevention and health promotion measures provided <b>Output 3.2</b> Severe Acute Malnutrition is addressed in the target population <b>Output 3.3</b> Increased access to primary health care services through the mobile clinics	
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	

<p><b>Output 3.1</b></p> <ul style="list-style-type: none"> <li>Community health promotion sessions (house to house, schools &amp; community gatherings)</li> <li>Production of IEC materials</li> <li>Conduct Community education on behavior change integrated with hygiene promotion activities.</li> <li>Community mortality surveillance is carried out and reported in the Health Information system.</li> </ul>	<p>X</p> <p>X</p> <p>X</p> <p>X</p>		<p>100%</p>
<p><b>Output 1.2</b></p> <ul style="list-style-type: none"> <li>Screening children (&lt;5 years) for malnutrition</li> <li>OTP services for the malnourished children</li> <li>Conduct defaulter tracing</li> <li>Hospital referrals to children with severe malnutrition complications.</li> <li>Conduct sessions for exclusive breastfeeding and nutrition counselling with involvement of mother to mother support groups</li> </ul>	<p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p>		<p>100%</p>
<p><b>Output 3.3</b></p> <ul style="list-style-type: none"> <li>Provide immunization services to children (&lt;5 years)</li> <li>Provide children (&lt;5 years) with Vitamin A, Zinc and de-worming.</li> <li>Provide anti-natal services including tetanus toxoid vaccine to pregnant and women of child bearing age</li> <li>Provide micronutrients to pregnant and lactating mothers</li> <li>Offer post-natal services to mothers</li> <li>Treatment of minor illnesses to the target community</li> <li>SRCS volunteers conduct community health promotion sessions.</li> <li>Procurement of medical supplies and nutrition supplements</li> </ul>	<p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p>		<p>100%</p>
<p>Progress towards outcomes</p>			
<ul style="list-style-type: none"> <li>Major services provided by the mobile clinic teams are curative, preventive and health promotion as per the detailed EA implementation plan. The locations for the mobile clinic operations were identified and the process of activating the mobile clinics was done during the first 2 weeks of the operation. Recruitment of staff to support the clinics was finalized concurrently. Procurement of minor equipment and servicing of vehicles for the mobile services was completed. The procurement of OPD kits was finalized through the IFRC Global Logistics Service in accordance with the IFRC standard procurement procedures.</li> <li>In Somaliland, Community health promotion sessions (house to house, schools &amp; community gatherings) were carried out. 2580 people (538 male and 2042 female) attended health promotions sessions conducted in Sool and Sanaag targeted villages in April-July 2016. Regular community educations on BCC have been conducted in sool and sanaag regions on weekly basis. Community mortality surveillance has been carried out and reported in the Health Information system. Screening of nutritional status of under 5 children for malnutrition 3758 children (2321Sool and 3527 Sanaag) was conducted. Under the OTP services for the malnourished children, 127 children were severely malnourished and provided with supplementary feeding such plumpy nut. 376 mothers attended and received counseling sessions and 50 of them mothers provided exclusive</li> </ul>			



<ul style="list-style-type: none"> <li>Distribution of ceramic water filters.</li> <li>Conduct one-on-one communication targeting 57,500 people for improved hygiene awareness activity.</li> </ul>		X	
<i>Progress towards outcomes</i>			
Water points (Boreholes and Berkeds) have been identified and selected for rehabilitation the procurement process is ongoing. Volunteers were trained on WASH and the procurement process for water filters as well as aqua tabs is underway.			

**Note: do not forget to revise the budget for each sector if activities have been revised**

## 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 2100 k cal per day.

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

Food security, Nutrition, and Livelihoods			
Outcome 5: Immediate food needs of the disaster affected population are met.  Outcome 5.2: Critical nutritional status of the targeted community is improved	Outputs		% of achievement
		<b>Outcome 5</b> <b>Output 5.1:</b> Cash transfers are provided to 900 households (5,400 beneficiaries) to purchase food <b>Outcome 5.2:</b> <b>Output 5.2.1:</b> Sufficient nutritious food accessed by children under 5 in vulnerable households/communities <b>Output 5.2.2:</b> Screening and referrals for acute malnutrition carried out for children under age 5	
Activities	Is implementation on time?		% progress (estimate)
	Yes (x)	No (x)	
<b>Outcome 5</b> <b>Output 5.1</b> <ul style="list-style-type: none"> <li>Design beneficiary selection tools.</li> <li>Source for mobile money service providers through tendering</li> <li>Sign MoU and contracts with mobile phone service provider.</li> <li>Train volunteers on beneficiary selection</li> <li>Cash Transfer Training for 15 National Society staff and volunteers Beneficiary selection and registration</li> <li>Beneficiary training on the use of mobile money transfer system Prepare monthly mobile phone cash transfer.</li> <li>Inform community on cash distribution</li> <li>Cash transfers of CHF 105 to 900 households for 3 months</li> </ul>		X X X X X X X X	0%

<ul style="list-style-type: none"> <li>Monthly post distribution monitoring</li> <li>Price and market capacity monitoring</li> </ul>		X	
<b>Outcome 5.2</b> <b>Output 5.2.1</b> <ul style="list-style-type: none"> <li>Nutrition screening</li> <li>Procurement of nutritional supplements</li> <li>Supplementary feeding to moderately malnourished children under 5</li> <li>Volunteer training in food preparation and utilization</li> <li>Cascading of training on food preparation and utilization</li> <li>Monitoring of nutritional indicators</li> </ul>	X		100%
<b>Outcome 3.2</b> <b>Output 5.2.2</b> <ul style="list-style-type: none"> <li>Nutrition screening</li> <li>Referral of severely malnourished children for therapeutic feeding.</li> </ul>	X	X	100%
Progress towards outcomes			
<p>Nutritional, screening was carried out and referrals for severely malnourished for therapeutic feeding was done through the mobile clinics. Beneficiary selection tools were designed and the procurement process for CTP is underway and only one-month transfer due to limited funding is scheduled to start in September 2016, mobile money service providers have been tendered and selected for both Puntland and Somaliland. If additional funds are secured during the extension, then the 2 more round will be completed as per the initial plan of action. SRCS/IFRC Somalia Country Office worked with UNICEF on the supply of the plumpy 'nuts and BP5 biscuits for the treatment and prevention of malnutrition in the response. Cash transfer training was conducted in May 5-7, 2016. Volunteer training on food preparation and utilization was also conducted.</p>			

**Note: do not forget to revise the budget for each sector if activities have been revised**

#### **D. Budget**

See attached budget

## Contact Information

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

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**For Resource Mobilization and Pledges:**

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**Please send all pledges for funding to [zonerm.africa@ifrc.org](mailto: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.**

## Disaster Response Financial Report

## MDRSO005 - Somalia - Drought

Timeframe: 21 Mar 16 to 21 Sep 16

Appeal Launch Date: 25 Mar 16

Interim Report

## Selected Parameters

Reporting Timeframe	2016/3-7	Programme	MDRSO005
Budget Timeframe	2016/3-2016/9	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

## I. Funding

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
<b>A. Budget</b>			<b>1,290,936</b>			<b>1,290,936</b>	
<b>B. Opening Balance</b>							
<b>Income</b>							
<b>Cash contributions</b>							
<i>British Red Cross</i>			145,924			145,924	
<i>Japanese Red Cross Society</i>			42,600			42,600	
<i>Red Cross of Monaco</i>			10,903			10,903	
<i>Swedish Red Cross</i>			184,977			184,977	
<i>The Canadian Red Cross Society (from Canadian Government*)</i>			34,214			34,214	
<i>The Netherlands Red Cross (from Netherlands Government*)</i>			133,434			133,434	
<b>C1. Cash contributions</b>			<b>552,051</b>			<b>552,051</b>	
<b>C. Total Income = SUM(C1..C4)</b>			<b>552,051</b>			<b>552,051</b>	
<b>D. Total Funding = B + C</b>			<b>552,051</b>			<b>552,051</b>	

\* Funding source data based on information provided by the donor

## II. Movement of Funds

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
<b>B. Opening Balance</b>							
<b>C. Income</b>			552,051			552,051	
<b>E. Expenditure</b>			-107,751			-107,751	
<b>F. Closing Balance = (B + C + E)</b>			444,301			444,301	

## Disaster Response Financial Report

## MDRSO005 - Somalia - Drought

Timeframe: 21 Mar 16 to 21 Sep 16

Appeal Launch Date: 25 Mar 16

## Interim Report

## Selected Parameters

Reporting Timeframe	2016/3-7	Programme	MDRSO005
Budget Timeframe	2016/3-2016/9	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

## III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
<b>BUDGET (C)</b>				<b>1,290,936</b>			<b>1,290,936</b>	
<b>Relief items, Construction, Supplies</b>								
Food	343,500							343,500
Water, Sanitation & Hygiene	445,500							445,500
Medical & First Aid	21,810			16,180		16,180		5,630
<b>Total Relief items, Construction, Sup</b>	<b>810,810</b>			<b>16,180</b>		<b>16,180</b>		<b>794,630</b>
<b>Logistics, Transport &amp; Storage</b>								
Storage	6,000			40		40		5,960
Transport & Vehicles Costs				1,916		1,916		-1,916
Logistics Services				2,500		2,500		-2,500
<b>Total Logistics, Transport &amp; Storage</b>	<b>6,000</b>			<b>4,456</b>		<b>4,456</b>		<b>1,544</b>
<b>Personnel</b>								
National Staff	18,000			5,277		5,277		12,723
National Society Staff	63,342			8,577		8,577		54,765
Volunteers	11,652			1,410		1,410		10,242
<b>Total Personnel</b>	<b>92,994</b>			<b>15,264</b>		<b>15,264</b>		<b>77,730</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	129,820			23,815		23,815		106,005
<b>Total Workshops &amp; Training</b>	<b>129,820</b>			<b>23,815</b>		<b>23,815</b>		<b>106,005</b>
<b>General Expenditure</b>								
Travel	6,000			3,665		3,665		2,335
Information & Public Relations	29,000			35		35		28,965
Office Costs	93,060			316		316		92,744
Communications	2,000			245		245		1,755
Financial Charges	42,462			1,013		1,013		41,449
Other General Expenses				157		157		-157
Shared Office and Services Costs				6,932		6,932		-6,932
<b>Total General Expenditure</b>	<b>172,522</b>			<b>12,364</b>		<b>12,364</b>		<b>160,159</b>
<b>Operational Provisions</b>								
Operational Provisions				28,914		28,914		-28,914
<b>Total Operational Provisions</b>				<b>28,914</b>		<b>28,914</b>		<b>-28,914</b>
<b>Indirect Costs</b>								
Programme & Services Support Recove	78,790			6,565		6,565		72,225
<b>Total Indirect Costs</b>	<b>78,790</b>			<b>6,565</b>		<b>6,565</b>		<b>72,225</b>
<b>Pledge Specific Costs</b>								
Pledge Earmarking Fee				194		194		-194
<b>Total Pledge Specific Costs</b>				<b>194</b>		<b>194</b>		<b>-194</b>
<b>TOTAL EXPENDITURE (D)</b>	<b>1,290,936</b>			<b>107,751</b>		<b>107,751</b>		<b>1,183,185</b>
<b>VARIANCE (C - D)</b>				<b>1,183,185</b>		<b>1,183,185</b>		

**Disaster Response Financial Report****MDRSO005 - Somalia - Drought**

Timeframe: 21 Mar 16 to 21 Sep 16

Appeal Launch Date: 25 Mar 16

Interim Report

**Selected Parameters**

Reporting Timeframe	2016/3-7	Programme	MDRSO005
Budget Timeframe	2016/3-2016/9	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

**IV. Breakdown by subsector**

Business Line / Sub-sector	Budget	Opening Balance	Income	Funding	Expenditure	Closing Balance	Deferred Income
<b>BL3 - Strengthen RC/RC contribution to development</b>							
Health	1,290,936		552,051	552,051	107,751	444,301	
Subtotal BL3	1,290,936		552,051	552,051	107,751	444,301	
<b>GRAND TOTAL</b>	<b>1,290,936</b>		<b>552,051</b>	<b>552,051</b>	<b>107,751</b>	<b>444,301</b>	