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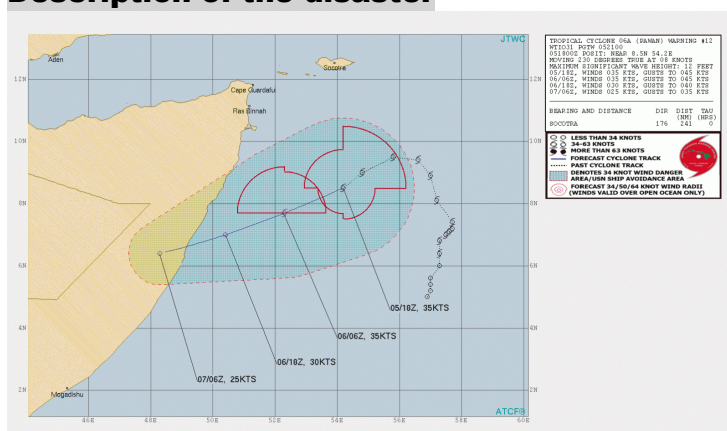
Emergency Plan of Action (EPoA) Somalia: Tropical Cyclone Pawan

 International Federation
of Red Cross and Red Crescent Societies

DREF Operation: MDRSO008	Glide n°: TC-2019-000165-SOM
Date of issue: 20 December 2019	Expected timeframe: 2 months Expected end date: 18 February/02/2019
Category allocated to the of the disaster or crisis: Yellow	
DREF allocated: CHF 141,072	
Total number of people affected: 213,600	Number of people to be assisted: 31,500
Province affected: Puntland	Provinces/Regions targeted: Nugaal and Bari, Puntland
Host National Society presence: Somali Red Crescent Society (SRCS) has a Liaison Office in Nairobi where the National Society President sits with a small team. In addition, SRCS has two Coordination Offices in-country, one in Mogadishu and one in Hargeisa, which are managed by two respective Executive Directors. Puntland, and its 13 branches, comes under the Coordination office in Mogadishu.	
Red Cross Red Crescent Movement partners actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC), International Committee of the Red Cross (ICRC), German Red Cross, Canadian Red Cross, Iceland Red Cross, Finnish Red Cross, Norwegian Red Cross, Swedish Red Cross and British Red Cross.	
Other partner organizations actively involved in the operation: Humanitarian Affairs and Disaster Management Agency (HADMA), UNOCHA, UNHCR, UNDP, WHO, UNICEF, WFP, FAO DRC, TASS, IRC, NRC, CARE International, Concern Worldwide, Islamic Relief, ADRA, ACF, ECHO, MSF, OIC, and EAP.	

A. Situation analysis

Description of the disaster



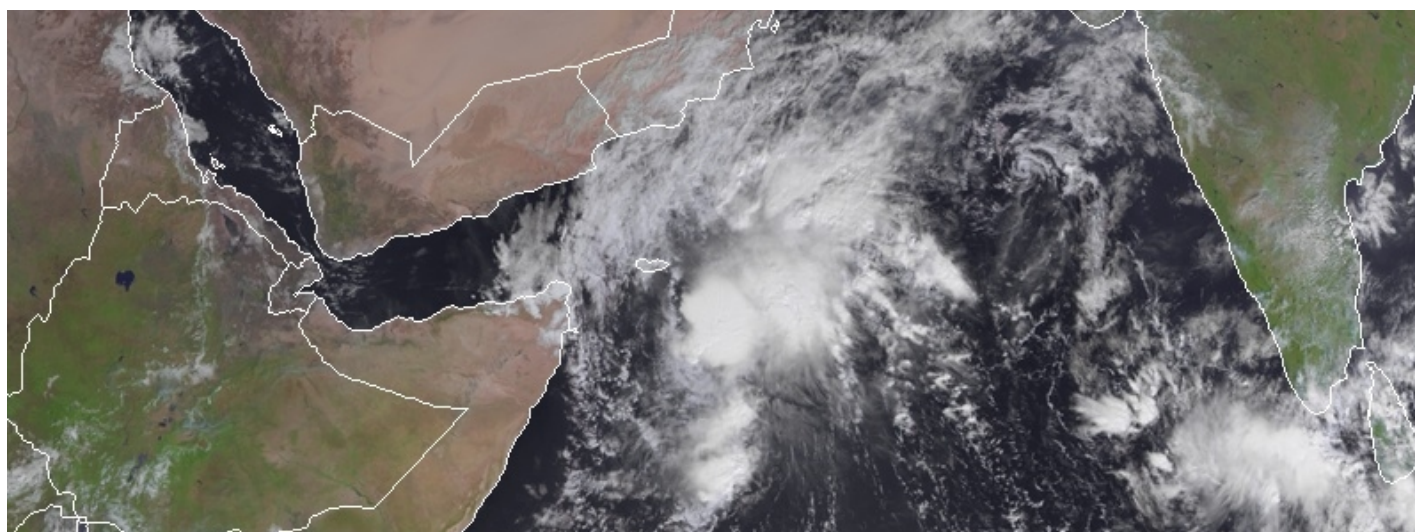
TC Pawan's trajectory on 6 December 2019. Source: JTWC

consecutive heavy rains which accompanied the tropical cyclone. This resulted in damage to shelters, including collapsed houses and the loss of domestic household items, which have been washed away by the flash floods and reduces households' capacities to access basic shelter. In Eyl town, one of the main telecommunication towers was destroyed by

The Tropical Storm (TS) initially named SIX that developed in the northern Indian Ocean, subsequently developed into a Tropical Cyclone (TC) named Pawan after sustaining speeds of more than 39 miles made landfall on 7 December on the coastal side Puntland (Bosaso, Garowe). The influence of Pawan was felt in the coastal areas of Bari and Mudug regions where moderate to heavy rains have fallen and strong winds were sustained on 7 and 8 December. The storm impacted the shipping lane that links Somalia and Gulf states. TC Pawan caused widespread destruction of property and infrastructure including roads, buildings and boats due to the strong winds.

According to the Humanitarian Affairs and Disaster Management Agency (HADMA), some 35,600 people in Puntland have been affected by TC Pawan and the

the storms but there is another telecom company operating there and the affected areas are reachable through mobile phones.



TC Pawan is the eight named storm of the 2019 North Indian Ocean cyclone season, it made landfall on 7 December in Puntland, Somalia. Photo credit: METEOSAT-8

Between 6 to 8 December 2019, TC Pawan caused flash floods and Pawan-related storms in the Puntland. TC Pawan has displaced communities, impacting access to basic health services, which has left affected communities exposed to diseases. The most affected households need urgent humanitarian assistance as they are currently in dire living conditions. Damage was also sustained to IDP settlements, infrastructure and social services such as roads, schools, as well as telecommunication towers and electrical installations. The worst hit areas include Nugaal Region (Eyl and Dangorayo Districts), Karkaar (Qardho District) and Bari Region (Alula, Iskushuban, and Baargaal). Other areas affected include the coastal villages in Bari Region including Hafun, Iskushuban, Baargaal, Quandala and Alula districts.

Summary of the current response

Overview of Host National Society Response Action

In response to TC Pawan, from 5 till 12 December, the affected branches, Garowe and Bosaso, carried out need assessments with technical support of SRCS coordination office and IFRC to identify the impact of TC Pawan on the affected areas. These assessments were reinforced by a multi-sectoral assessment that were conducted under the coordination of HADMA. According to the HADMA needs assessment, TC Pawan has resulted in 7 deaths, 11 people seriously injured, 168 houses destroyed and 65 damaged houses and displaced 450 households. The operational plan was prepared based on the findings on the assessment in the affected areas. However, the support expected from the local authorities and other actors are very limited as compared to the magnitude of the cyclone impact on the population, the loss of livestock, livelihoods and other properties.

SRCS has a long-term record in providing life-saving assistance to people in need. SRCS' presence and local networks across the country are exceptionally well-established, which enables SRCS to also reach vulnerable populations who are not served by other humanitarian actors, for instance in highly remote areas. SRCS has vast expertise with different types of programming through multilateral projects supported by IFRC, as well as through bilateral programs with Movement partners and with ICRC. This includes youth development, disaster risk management, community-based nutrition, Community-Based Health and First Aid, HIV programmes, restoring family links, community resilience (including WASH, Livelihoods, Drought Resilience and Climate Change Adaptation), dissemination of IHL, humanitarian values & RC/RC principles, and rehabilitation for physically disabled people.

SRCS volunteers play a critical role at all stages of SRCS's programmes. This includes assessment, identification and registration of target communities, nomads and IDPs. In addition, volunteers service the Oral Rehydration Points (ORPs) and carry out hygiene promotion and community mobilisation. Branches in the targeted areas have teams of trained volunteers in epidemic control, Participatory Hygiene and Sanitation Transformation (PHAST), health and hygiene promotion.

SRCS branches of Bosaso and Garowe in Puntland have mobilised their volunteers, staff and communities in all areas affected by the cyclone in different parts of the two regions. The two branches will conduct hygiene promotion and water treatment campaigns as the water sources in all the affected areas have been destroyed by the flash floods. There is fear of outbreak of water borne diseases as there is no clean and safe drinking water. The branches are also planning to

distribute non-food items consisting of plastic tarpaulin, blankets, plastic floor mats and kitchen sets for the affected households in both regions. The branches have competent volunteers and staff but there are inadequate financial capacity and shortage of equipment and limited logistical capacity. Even so, the branches can do a lot to continue such responses despite limited resources.

Overview of Red Cross Red Crescent Movement Actions in country

Direct responsibility for the operation in Somalia sits with the Somalia Country Office based in Nairobi. The IFRC Somalia Country Office is supported by the Africa Regional Office, who provides technical and logistical support to the National Society. The IFRC Health Delegate based in Hargeisa, Somaliland, will provide remote support to the operation in terms of some of the mobile health services, while the Regional WASH and Shelter Delegates will support the respective sectors. The Country Office Logistics Officer, with the support of the Regional Logistics Unit, will equally provide technical assistance in the procurement and distribution of household items. The Planning, Monitoring, Evaluation and Reporting (PMER) Unit will equally support the monitoring, Lessons Learned and reporting activities while the Communications Unit will provide some support in documenting and disseminating the operation.

Action / planned action of partner National Societies and the ICRC

ICRC has been present throughout Somalia with particular focus on South and Central Somalia since 1982. In 2018, ICRC's main delegation was based in Nairobi, with sub-delegations in Kismayo, Baidoa and Belet Weyn (South Central Zone) and Garowe in Puntland focussing primarily on assistance (economic security, water and habitat, and health).

In Puntland, SRCS branches are mainly supported by IFRC especially health clinics in the three regions of Bari, Nugal and Bosaso. ICRC also supports the branches with relief and Water and Habitat (WatHab) projects in the three regions. The SRCS is supported by seven partner National Societies: British Red Cross, Canadian Red Cross, Finnish Red Cross, German Red Cross, Iceland Red Cross, Norwegian Red Cross and Swedish Red Cross. Only German Red Cross is present in country and is based in Somaliland. Support from partners is for longer terms development, rather than emergency response.

Overview of non-RCRC actors' actions in country

In Puntland, SRCS Garowe and Bosaso branches have good working relationships with the government and other actors, such as the World Food Programme, who is supporting with food ration and nutritional supplements for children identified with moderate acute malnutrition. UNICEF is providing protection services as well as vaccines for the immunization of children and women of childbearing age together with nutritional supplements for children diagnosed with severe acute malnutrition. NGOs such as CARE International, and Norwegian Refugees Council and ADRA are supporting with WASH, health and nutrition and shelter, among others. These are all coordinated by HADMA and UNOCHA.

Planning, Monitoring, Evaluation and Reporting

To ensure effective project implementation, continuous monitoring at the community level will be done by SRCS staff and volunteers. The branches will be supported by SRCS coordination office, who will travel to monitor the project on a monthly basis. If there is more need, the monthly monitoring visits will be revised accordingly. Post distribution monitoring will be conducted by SRCS branch coordinators and DM Director, along with the IFRC team, using focus group discussions, stakeholders' meetings and field observation. Monthly updates will be provided on progress of the planned activities and identified challenges encountered in implementation. A lessons learned workshop will also be conducted at the end of the operation.

Community Engagement and Accountability

Information will be shared with affected communities on SRCS plan of action, the distribution dates, entitlement and how communities can provide feedback to the National Society. The volunteers will be trained on basics of community engagement and accountability. During distributions, a feedback desk will be put in place to allow people to provide feedback, raise any concerns or suggest ways to improve the operation. The feedback collected will feed into the monitoring data. SRCS trained volunteers will carry out feedback collection using kobo toolbox app.

Logistics Management and Procurement

All procurements will be done in line with SRCS/IFRC logistics/financial procedures and IFRC will provide procurement oversight and support, if required. The IFRC regional logistics will closely work with SRCS DM Director on local procurement process as well as provide technical guidance where needed through the process.

Communication

To help position the National Society as a leading humanitarian actor in the country, it is critical to build public awareness and visibility for their role in responding to those affected by flooding. This not only helps build the brand and credibility of the National Society, but also provides an opportunity for further funding and support. Two missions will be conducted at different times of the operations with Communications focal points in the SRCS. IFRC will support remotely the two communications mission and local photographer consultant.

The National Society will work with national media to provide updates on the response and the needs from communities as well as collect stories of impact from people who receive much-needed support. It is also a great opportunity to showcase the responders and volunteers on the frontline of the response and their important role in helping communities in the relief and recovery period of the disaster. The Communications Unit at the IFRC Africa Regional Office will provide support to the National Society in building their visibility around this response.

Security

To minimize the risks of RCRC personnel falling victim to crime or violence, active risk mitigation measures must be adopted. This includes active situation monitoring and information sharing between field and head office teams as well as the development and implementation of minimum-security measures. All Red Cross Red Crescent personnel actively involved in the operations must have completed the respective IFRC security e-learning courses (i.e. Stay Safe Personal Security, Security Management, or Volunteer Security) before deployment. As road travel also presents a considerable hazard, safe driving and ensuring vehicle road worthiness is of critical importance. Contingency plans such as medical evacuation plan, relocation plan and crisis management plan should be in place to manage emergencies adequately.

Needs analysis, targeting, scenario planning and risk assessment

Needs analysis

The Somali Red Crescent Society in collaboration of Disaster Management Department for Puntland (HADMA) have jointly conducted a rapid assessment and they have estimated the total affected population about 35,600 households or 213,600 people were affected, an estimate of between 60 to 70% of the population in Bari and Nugal Regions.

The most pressing needs for the time being is food, shelter, replacement of household items, distribution of fishing equipment, seeds, farming tools and generators for small scale farmers who lost their farms and farming tools. Finally, health and nutrition services, hygiene promotion and water treatment campaigns. Due to lack of access to clean drinking water and contaminated water sources, more diseases are expected to break out in the coming days or weeks. No preventive measures have been taken so far to reduce the effects of potential diseases. Among the most affected people are the vulnerable groups the elderly, the women and children whose livelihood depends mainly on livestock. Common diseases are common among the IDP camps in Bosaso and Garowe. The impact is very severe with limited coping mechanism except mutual support among relatives and displacement.

Somalia remains in a state of protracted crisis which increases the impact of the challenging climatic conditions, amidst inadequate coping strategies and development assistance. There is limited government and other actors support to affected communities. Due to the prevailing context, access to basic health care services is limited overall but particularly among the rural, nomadic and Internally Displaced Persons (IDPs). A large segment of the population also lacks access to potable water as well as household or communal sanitation facilities

Table 1: The number households affected by TC Pawan (Source: HADMA joint needs assessment report)

	Affected population	# of Households
1	Pastoralists	15,000 households
2	Fishing communities	7,500 households
3	Rural and urban settlements	11,600 households including IDPs
4	Farmers	1,500 households

Shelter

About 70% of the Somali population is rural and nomadic and therefore temporary housing is the most prominent. This explains why much of the shelter in the affected communities have been destroyed by the Tropical Cyclone, and hence the urgent need to provide shelter assistance in the response. According to the HADMA needs assessment, 168 houses have been destroyed and 65 houses damaged. In addition, 450 households have been displaced, as well as 130 IDP shelters destroyed or damaged. People are in urgent need of emergency shelter and household items.

Health

Access to basic health care services is already limited in Somalia, particularly among the rural, nomadic and Internally Displaced Persons (IDPs). The affected communities have become more vulnerable due to the effects of the Tropical Cyclone with and even exposure to the risks of diseases. The Tropical Cyclone also impacted food stocks. According to the HADMA needs assessment, 200 farms have been destroyed, 2,615 households have lost livestock and an additional 2,253 have lost their livelihood assets or source of income. This will undoubtedly affect the health and nutritional status of vulnerable groups.

WASH

Nugaal and Bari are highly vulnerable in terms of WASH because all the wells and water points have been badly destroyed by the cyclone. A combination of poor access to safe drinking water, especially in IDP settlements and poor hygienic practices, contribute to health risks. There is open defecation due to limited availability of latrines. Handwashing rates were low due to the limited access to hand washing facilities and soap. Hand washing behaviour is focused on religious rituals rather than an effective hygiene to reduce disease transmission. Poor handling and storage of cooked food has also contributed to transmission of diarrhoea. The project strategy will focus on reducing the risks of water-related morbidity and mortality, and malnutrition amongst targeted children and families as well as increasing their resilience and access to other services such as health.

Targeting

Targeting will include IDPs that are in need of immediate assistance, as well as vulnerable groups including women headed households with many children, the elderly, people with disabilities and critically sick and people injured by TC Pawan. In addition, those who have not received any support from SRCS, the government, UN agencies or any humanitarian agencies so far will be priorities for Red Crescent support.

In Puntland, the targeted areas for shelter and household items are Nugaal region (500 Households in Eyl and Dangorayo Districts), Karkaar (Qardho District) and Bari (268 Households in Alula, Iskushuban, Baargaal). In addition to the above, mobile medical clinics will provide services to other affected areas, including the coastal villages in Bari Region, such as Hafun, Iskushuban, Bargal, Qandala and Alula districts.

The targeted areas are inhabited predominantly by pastoralists, fishing communities and small-scale farmers. They depend mainly on livelihoods such as livestock, fishing and farming in small swathes of lands close to streams used for irrigation. In addition, IDPs in cities such as Garowe and Bosaso have been affected by the flash floods. Community elders and local authorities will be involved in validating the people targeted under this operation.

Scenario planning

Worst scenario	Most likely scenario	Best scenario
<p>An estimated 15,504 IDPs of which 3000 most vulnerable people affected by the cyclone are exposed to critical health risks due to lack of immediate lifesaving assistance. This is likely to include Acute Watery Diarrhoea (AWDs), malnutrition and other associated challenges due to poor hygiene and sanitation and lack of proper food nutrients respectively. These would affect all persons, but more so for the vulnerable groups such as children, pregnant and lactating women.</p> <p>In Puntland, about 35,600 people were affected. 450 households in Bari region will face homelessness while 2,600 families in Nugaal will be food insecure as they lost their livestock in the</p>	<p>An estimated 720 Households and IDPs including 4320 most vulnerable people affected by the cyclone are exposed to critical health risks due to lack of immediate basic lifesaving humanitarian assistance - this includes, but is not limited to food, water, shelter/NFIs, health services and good hygiene and sanitation. The government will support 50% of the most affected in all sectors while IFRC-SRCS will provide assistance in shelter and household items, WASH and health</p> <p>The displaced people will be exposed to climates elements such as cold and rains. They will be vulnerable to common diseases such as common cold, respiratory and skin diseases. No hygiene</p>	<p>All the affected 51,104 people in Puntland get assistance from the government and humanitarian organizations and return back to their homes to lead normal life.</p> <p>The interventions will enable the affected population to recover from the effects of the disaster and supports will build the capacities of people for better recovery and reconstruction.</p>

cyclone windstorms.	and sanitation. They will need shelter, health service and basic foods.	
Assumption: The continuity of heavy rains and tropical storms may weaken the capacity of the IDPs in s and affected families in Nugaal and Bari will be exposed to critical health risks and are in need of lifesaving assistance.	Assumption: Due to the preparation of government response and other agencies. Half of the affected population is supported by the government or humanitarian agencies however; SRCS will provide lifesaving assistance to 4,608 people in Puntland.	Assumption: The normal situation of the people will remain stable and government with humanitarian actors will reach and provide the assistance in a timely manner.

Operation Risk Assessment

Should prolonged rainfall continue, then the situation is likely to worsen. It may mean an increase in food prices, if flooding damages or destroys crops and flood water affects roads and access to markets. The lack of food and access to safe water could see an increase risk of disease outbreaks. Flooded roads and damaged infrastructure could hamper access to health clinics, which may negatively impact on the health status of affected communities, particularly for those who are already sick, children under the age of five, pregnant women and nursing mothers.

B. Operational strategy

Overall Operational objective

This operational plan will focus on the following objectives:

- a) Ensure access to basic shelter and household items support at Household level;
- b) Ensure access to emergency health services for cyclone affected communities
- c) Improve access to clean safe water, hygiene and sanitation practices.

The immediate survival needs of 768 households in Puntland will be reached through the provision of essential relief and emergency shelter, access to health services and hygiene promotion for duration of two months.

According to the need's analysis, SRCS has opted for provision of shelter and household items and hygiene promotion as the most urgent needs. Indeed, the targeted IDP households and affected rural families have no utensils to cook food, need emergency shelter, access to emergency medical attention and access to safe water and hygiene. This operation will support affected communities with shelter, health and WASH needs, while other humanitarian agencies are expected to cover other needs for proper response.

Shelter

The operation will target 768 vulnerable households with shelter and household items. The affected population have their traditional methods of erecting their shelter and it require tarpaulins and ropes, shelter tool kit, sleeping mats, blankets and kitchen sets. The operation will train 80 volunteers in safe shelter construction techniques. Following this training, volunteers will assist target households to reconstruct shelter, using IEC material produced by this operation.

Health

Two mobile health clinics would therefore be activated and deployed to serve the communities affected by the Tropical Cyclone for two months (60 days each). An estimated population of 31,500 people (16,065 women and 15,435 men) will be reached by the mobile health services with interventions ranging from the treatment of common ailments, immunization of children against the common childhood diseases, immunization of women of childbearing age (pregnant and non-pregnant), screening of children under the age of 5 years to monitor their growth and provide those found to be malnourished with nutritional supplements. Other services that will be delivered by the mobile teams are safe motherhood (ante-natal care, delivery and post-natal care with the provision of supplements) and health education.

The National Society has nearly three decades of experience in the management and delivery of critical health care services with qualified health staff (nurses, midwives and laboratory). Medicines and other medical supplies required by the mobile medical teams will be made available from the SRCS stock from the regular health programme.

WASH

SRCS will focus its activities on the most vulnerable populations including those in hard to-reach areas; IDPs, people at risk of Acute Watery Diarrhoea and cholera, acutely malnourished children and people living in tropical storms/cyclone affected areas. As such, the operation plans to procurement and distribution of the household water treatment tablets together with jerry cans, and the provision of soap with the hygiene promotion activities by 80 trained community volunteers would contribute to stemming and diseases outbreaks or minimise any spread. These would be complimented by other actors in the response that would be providing the hardware or latrines and rehabilitation of water sources.

The below items will be distributed to support the targeted households:

Table 2: Items for distribution for 768 households - Average family size of 6 people

Item	Quantity	Quantity per Household
Plastic tarpaulin and rope	1536	2
Shelter tool kit	768	1
Blankets 220 cm x 240 cm	1536	2
Plastic floor mats	768	1
Kitchen set	768	1
Aqua tabs	46,080	1 tab per day per 768 household for 60 days
Soap	1,536	2 per household
Hygiene promotion and water treatment campaigns	80 volunteers for 7 days	In all affected regions and locations

Internal and external coordination

To ensure quality implementation, internal coordination will be led by the SRCS coordination office in Mogadishu, working closely with the regional two branches in Bari and Nugaal in Puntland. The Disaster Management Director based in Mogadishu Coordination Office will provide leadership in the response and will be supported by IFRC in providing technical support to the branch officers and volunteers.

The branches will supported through the deployment of Branch Emergency Response Teams, who will support Community Emergency Response Teams in terms of distribution of relief items, targeting and verification, as well as monitoring of the evolution of the humanitarian situation, while the Coordination office staff will ensure coordination of the operation and liaise with IFRC office in Nairobi.

The IFRC Somalia Country Office in Nairobi will ensure that all Movement partners are informed of the response, with regular progress reports. Externally, the entire Tropical Cyclone Pawan will be coordinated by HADMA, with support from UNOCHA. The HADMA was responsible for organising the multi-sectoral assessment team and the subsequent report. HADMA are responsible for assigning tasks through the respective clusters; ensuring geographical and sectoral coverage. Clusters are meeting on an ad hoc basis, monitoring who does what where. A matrix has been drawn by each cluster to minimise or eliminate and overlaps in the response operation and ensure that the affected community members are the actual recipients of the planned interventions. SRCS will take the lead in attending coordination meetings at the national and district levels. Feedback from these meeting will be included in SRCS' monthly reports.

D. Budget

DREF OPERATION

MDRS0008- SOMALIA - TROPICAL CYCLONE PAWAN

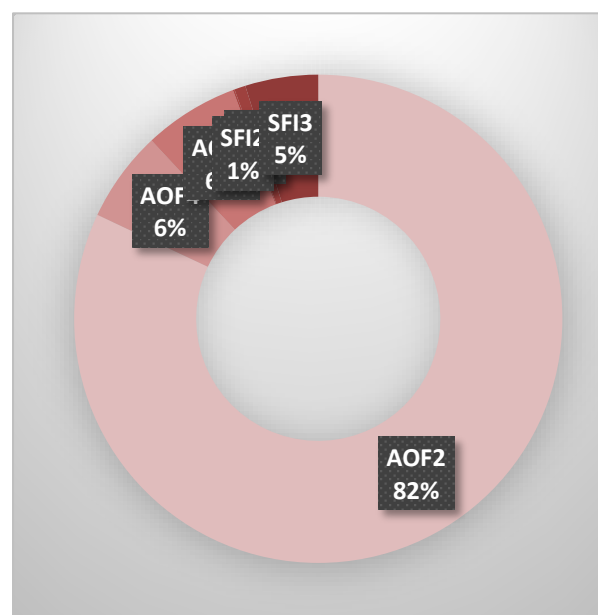
19/12/2019

Budget by Resource

Budget Group	Budget
Shelter - Relief	34,032
Clothing & Textiles	27,982
Water, Sanitation & Hygiene	6,353
Utensils & Tools	30,251
Relief items, Construction, Supplies	98,619
Transport & Vehicles Costs	6,105
Logistics, Transport & Storage	6,105
National Society Staff	5,623
Volunteers	5,111
Personnel	10,734
Workshops & Training	12,802
Workshops & Training	12,802
Travel	985
Information & Public Relations	756
Communications	2,462
General Expenditure	4,203
DIRECT COSTS	132,462
INDIRECT COSTS	8,610
TOTAL BUDGET	141,072

Budget by Area of Intervention

AOF1	Disaster Risk Reduction	
AOF2	Shelter	115,681
AOF3	Livelihoods and Basic Needs	
AOF4	Health	8,505
AOF5	Water, Sanitation and Hygiene	8,863
AOF6	Protection, Gender and Inclusion	
AOF7	Migration	
SFI1	Strengthen National Societies	157
	Effective International Disaster	
SFI2	Management	1,049
	Influence others as leading strategic	
SFI3	partners	6,817
SFI4	Ensure a strong IFRC	
TOTAL		141,072



Reference documents



Click here for:

- Previous Appeals and updates
- Emergency Plan of Action (EPoA)

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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**.



Somalia Cyclone Pawan Disaster Relief Emergency Fund

