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Final Report

Somalia: Population Movement from Laascaanood

 International Federation
of Red Cross and Red Crescent Societies

DREF n° MDRSO012	Operation n°
Date of Issue: 22 September 2022	Glide number: CE-2021-000162-SOM
Operation start date: 23 October 2021	Operation end date: 30 April 2022
Host National Society: Somalia Red Crescent Society	Operation budget: CHF 270,619
Number of people affected: 7,250	Number of people assisted: 2,964
Red Cross Red Crescent Movement partners currently actively involved in the operation: Somali Red Crescent Society (SRCS), International Federation of Red Cross and Red Crescent Societies (IFRC), International Committee of the Red Cross (ICRC).	
Other partner organizations actively involved in the operation: The office of the Gaalkacyo mayor, the Humanitarian Affairs and Disaster Management Agency (HADMA), OCHA, UNHCR, the Ministry of Women Development and Family Affairs (MOWDFA), the Ministry of Interior (MoI), the Puntland Water Development Authority, the Ministry of Health (MoH), UNICEF, Danish Refugee Council, Norwegian Refugee Council, Save the Children International, KAALO, Gaalkacyo Education Centre (GECPD), Kulmiye Aid Foundation, IOM.	

The major donors and partners of the Disaster Relief Emergency Fund (DREF) include the Red Cross Societies and governments of Belgium, Britain, Canada, Denmark, Germany, Ireland, Italy, Japan, Luxembourg, New Zealand, Norway, Republic of Korea, Spain, Sweden, and Switzerland, as well as DG ECHO and Blizzard Entertainment, Mondelez International Foundation, Fortive Corporation and other corporate and private donors. DG ECHO and the Government of Canada replenished the DREF on the occasion of his allocation. On behalf of the Somali Red Crescent Society (SRCS), the IFRC would like to extend gratitude to all for their generous contributions.

A. SITUATION ANALYSIS

Description of the disaster

On 2nd and 3rd October 2021, hundreds of families were displaced from Laascaanood in the Sool Region of Somaliland, after being arrested and evicted from Somaliland soil by the Somaliland Government. Most of the evicted people are originally from the Southwest State (SWS), Hirshabelle, and Banadir regions, and a few are from Ethiopia.

While there were initially concerns that more than 10,000 people potentially would be displaced, the total number of people reported to be displaced, from Laascaanood was over 7,250 according to UNHCR's Protection and Return Monitoring Network (PRM), as cited by OCHA in the [flash update #3 from 14 October](#). According to the Puntland Ministry of Interior (MoI), approximately 3,800 of the people evicted arrived in Gaalkacyo and Harfo in the Mudug Region of Puntland between the 3rd and 5th of October 2021. Of these 3,800 people, approximately 1,000 people were supported by the Puntland and SWS authorities with onward transportation, mainly to their place of origin in SWS, Hirshabelle and Banadir. Some individuals moonwardards on their own accord or settled with relatives in Gaalkacyo.



Figure 1: SRCS team, local government officials, community leaders and the contractor meeting at the handover ceremony

Many IDPs initially arrived in Dumdada, on the outskirts of northern Gaalkacyo before being relocated elsewhere. The Puntland Government allocated an area near the village of Jehdin to the east of Gaalkacyo for the remaining 2,800 IDPs to settle in. Jehdin is located approximately 16 kilometres from the city of Gaalkacyo, and the land allocated had no shelter or water, sanitation, and hygiene (WASH) facilities at the time of the IDPs' arrival. The SRCS, the Puntland Government

and other humanitarian partners responded to the needs of the IDPs in the Jehdin settlement, including protection services, water, shelter, food, health, and other necessities.

On 23rd October 2021, Somalia Red Crescent Society (SRCS) launched a [DREF operation](#) to provide assistance to the identified 2,800 people affected by the forceful expulsion who had settled in Jehdin outside Gaalkacyo, by providing the needed assistance such as emergency shelter, essential household items, basic health services all integrated with Protection, Gender and Integration (PGI) services.

Summary of response

Overview of Operating National Society

SRCS was among the first humanitarian partners who responded to the displaced communities' humanitarian needs. Together with other humanitarian actors, SRCS carried out a rapid need assessment as soon as the IDPs arrived at the Jehdin IDP site. Following the joint rapid assessment, SRCS arranged an ad-hoc meeting with the Red Cross and Red Crescent (RCRC) Movement partners to advocate for the IDPs who were stranded on Galkthe acyo outskirts. The International Federation of the Red Cross and Red Crescent Societies (IFRC) responded to the call for support the development of this DREF, and the International Committee of the Red Cross (ICRC) responded by supporting a free phone call program for restoring family links.

The [DREF EPOA](#) was launched on 23rd October 2021. On 17th February 2022, an [Operations Update](#) was published to update stakeholders on the progress of the DREF operation, as well as to request a no-cost extension of the timeframe from 4 months to 6 months, ending on 30 April 22 instead of the originally planned 28 February 2022. At the time, most of the planned results of the operation had already been carried out, and thus many of the results presented in the operation update remain unchanged in this final report. However, the extension was needed due to delays in the procurement process of WASH items, particularly the water treatment chemicals which needed international procurement. Following the procurement, adequate time was needed for distribution, sensitization of communities, and post-distribution monitoring. Furthermore, the Emergency Mobile Health Clinic (EMHC) was funded to operate for four full months under this operation, but was not operational until December 2021, and the no-cost extension helped ensure that the EMHC could be operational for the entire planned period.

Throughout this DREF operation, SRCS coordinated efforts with other actors present. Taking the advantage of the already existing FAPHEC (First Aid and Pre-hospital Emergency Care) run by the branch, SRCS provided first aid and trauma management, referral of medical cases to Galkacyo, which was integrated with DREF supported EMHC services and the Restoring Family Links (RFL) phone call services, which was also integrated with other sectors. SRCS was the sole humanitarian partner with such comprehensive and integrated services on the ground.

SRCS and Gaalkacyo local authority conducted WASH-Specific assessment to continuously monitor and identify the gaps in the settlement with full consideration of gender and diversity aspects. The finding of the joint assessment highlighted water, sanitation, and hygiene gaps in the settlement. Based on these findings, SRCS and the local government authority organized a meeting with other humanitarian partners to address the issues with them, since SRCS could not respond to all the emerging gaps from the settlement. SRCS also responded to construct 3 water kiosks for the IDPs as a result of the findings from the assessment findings and to enhance the accessibility of the IDPs to water, through the ongoing [Emergency Appeal](#) response for the Drought Emergency.

At the end of the implementation timeframe, activities implemented were as follows:

- Procurement and distribution of emergency shelters and shelter NFIs to 150 households in Jehdin
- 50 SRCS volunteers received construction training of the emergency shelter.
- A one-off unconditional multipurpose cash grants were distributed to the 467HHs (2,802 people) i.e \$100 per household in Jehdin.
- An Emergency Mobile Health Clinic (EMHC) was mobilized and deployed to Jehdin in December 2021, operating until 31 March 2022. The EMCH provided health and nutritional services to a total of 2,964 people during the DREF operation.
- Construction of 30 latrines in the Jehdin settlement.
- A total of 30 hand washing facilities and 450 hygiene kits with shampoo and soap were procured and distributed to 450 HHs. The plan initially was to reach 467HHs with hygiene kits. However, due to the price changes of the commodities the number was reduced.
- 403 dignity kits and water purification tabs for 467 households for 3 months were procured and distributed to IDPs.
- WASH rapid assessment carried out in January 2022 by SRCS to 60 households, to identify WASH needs. A PDM was conducted after distribution of NFIs & WASH items to establish the beneficiary satisfaction. There was 100% satisfaction of items distributed as reported by the beneficiaries. A PDM report is annexed.
- 362 volunteers were active and insured under the IFRC support in Galkacyo branch.

- A short-toll line number was set up for community feedback.
- A lesson learnt workshop was held to understand how this project performed against its original goals (time, resources/costs, and scope) and identify lessons learned and recommendations for future projects. A lessons learnt workshop report is annexed.

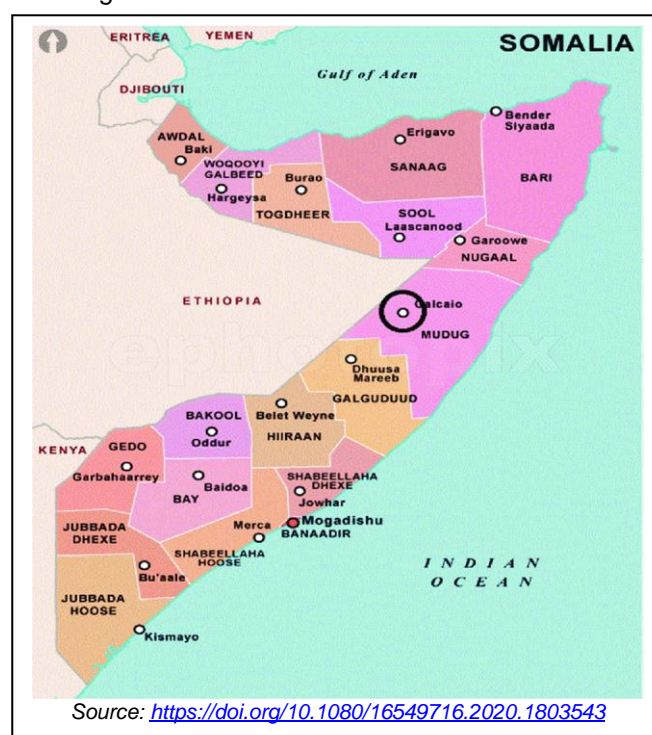
Post Distribution Monitoring was carried out following the distribution of shelter, NFIs, cash grants, and WASH items. Summary of findings was as follows:

- 99% of the respondents were satisfied with the provision of hygiene products and dignity kits.
- 100% of the beneficiaries interviewed were satisfied on the distributed Shelter NFIs, and also 100% satisfied on emergency shelter materials that received.
- 100% of the beneficiaries of the cash were fully satisfied with the cash distribution. As customary, the process of cash distribution and FSP feasibility are more reliable thereafter resulted the beneficiary to be more satisfied in the distribution process.
- 100% of the beneficiaries indicated that the CVA in the DREF project reflected their priority needs.

The reports received by SRCS from the field and the local government stated that 250 HHs (1,500 IDPs) remained with no new documentation of new arrivals from both Laascaanood and Ceerigabo in Jehdin settlement and the rest reportedly continued their journey to their origin of South Central of Somalia while a small number of the IDPs who are believed to have external support settled in Galkacyo and moved from the IDP settlement.

Although the DREF Operation is now ended, the IDPs still have below long-term needs:

- The resettled area is about 16km away from Galkacyo district, so the community will need to have a resilience based project to support them effectively because their casual labor will be more limited and they may not be able to find alternative sources of income.
- Some IDP settlers have demanded to be provided with farming tools, seeds and other appropriate resources, at the very least, to help them begin income generating activities in order to remain self-sufficient and also requested the continuation of unconditional cash assistance in order to be able to cope up with possible household income shocks due to food shortages and other essential requirements.
- Since the health service under the DREF operation ended and the current PHU (Post Health Unit) in the settlement can't meet their health demands, health service delivery from SRCS, MoH and other humanitarian partners were suggested to be continued.
- There's also a need for jerricans to fetch water from the newly SRCS constructed water kiosks in Jehdin settlement. Despite the fact that SRCS distributed WASH NFIs to 150 HHs, unfortunately the need still stands.
- SRCS provided emergency shelters to only 150 HHs in Jehdin while the remaining IDP settlers remained unsheltered. The emergency shelters provided by SRCS were destroyed and knocked down by the storms and many families were left unsheltered before the daily scorching sun rays and the cold weather at the nightfall.
- The whole settlement doesn't have solar lighting especially at the nightfall and this could jeopardize the fragile situation in the IDPs settlement including the increase of gender based violence.
- Market, waste disposal site (communal pit) and community center for hosting aid service provisions and distributions were also among the raised standing needs.



Planning ahead with these needs, SRCS recruited community volunteers in the IDPs settlement to continue raising awareness and working with a relocated SRCS mobile health clinic which will continue the provision of health service. The community in the settlement will benefit from the SRCS's pre-hospital emergency care program funded by ICRC which will assist them in medical and non-medical emergency referrals.

Other humanitarian partners carried out a number of activities however, the plans documented under the latest inter agency coordination meeting include the extension of the IDP school building and continuation of the education service by NRC. NRC is also planning to have the community pit constructed.

UNHCR is also planning to assist the refugees in the IDP settlement with education, health, protection and FSL if they get integrated with the host community in Gaalkacyo.

Overview of Red Cross Red Crescent Movement in country

The SRCS in Puntland Regional State is supported by the Norwegian Red Cross (NorCross), IFRC and ICRC.

- IFRC and the SRCS have an ongoing [Emergency Appeal](#), which also operates in the Mudug region, in response to the ongoing drought and hunger crisis. The Appeal supports Food Security and Livelihoods (FSL), WASH and health interventions, with an integrated PGI and DRR approach.
- ICRC is supporting FAPHEC (First Aid and Pre-hospital Emergency Care), Restoring Family Links, and some relief and livelihood as part of long-term development rather than emergency response.
- NorCross is supporting 7 fixed health clinics and 2 mobile health clinics under the Primary Health Care project. They are also supporting a community health project targeting 47 villages and IDP settlements.

As an immediate response to the displacement crisis, SRCS, IFRC, ICRC and Arab RC/RC Organizations conducted a discussion to address how Movement partners could support SRCS to respond and support the families displaced from Laascaanood. The participating partners including, IFRC and ICRC engaged to support SRCS in the response. IFRC and SRCS agreed to develop the DREF emergency plan of action, to ensure that the SRCS would be able to support the affected communities with different sectors including WASH, Shelter/household items, livelihood, and health. SRCS and ICRC implemented a free phone call program, targeting the people displaced from Laascaanood and Ceerigaabo, to help them communicate with relatives. SRCS volunteers visited the site three times a week for two months to provide the phone call service. SRCS also provided FAPHEC services with the support of ICRC to the IDPs which provides them the first aid services and referral of medical cases.

Overview of other actors' actions in country

In Puntland Regional State, humanitarian actors and response are coordinated by the Humanitarian Affairs and Disaster Management Agency (HADMA). SRCS works closely with HADMA and the Government.

Regular monitoring and planning meetings for the response planning and resource mobilization was held, with representatives from the office of the Gaalkacyo mayor, the Humanitarian Affairs Disaster Management Agency (HADMA), the Ministry of Women Development and Family Affairs (MOWDFA), the Ministry of Interior, UN agencies, cluster focal points in Gaalkacyo, and other humanitarian partners.

The Humanitarian Affairs and Disaster Management Agency (HADMA) which is now upgraded into a full ministry of **(Ministry of Humanitarian Affairs and Disaster Management)** coordinated and ensured a harmonisation of efforts among the agencies and organisations responding to the situation. The SRCS is participating in ongoing cluster meetings with humanitarian partners to streamline activities.

Among others, the following actors have taken part in the organised response to the situation: The office of the Gaalkacyo mayor, the Humanitarian Affairs and Disaster Management Agency (HADMA), OCHA, UNHCR, the Ministry of Women Development and Family Affairs (MOWDFA), the Ministry of Interior (MoI), the Puntland Water Development Authority, the Ministry of Health (MoH), UNICEF, Danish Refugee Council, Norwegian Refugee Council, Save the Children International, KAALO, Gaalkacyo Education Centre (GECPD), Kulmiye Aid Foundation, IOM.

The following responses were carried out by non-RCRC actors in response to the displacement. It should be noted, as described in the situation overview, that most IDPs first arrived in Dusmada, north of Gaalkacyo, before 2,800 of these were resettled at the established IDP site near Jehdin Village east of Gaalkacyo. As such, much of the response was initially implemented in Dusmada. Others were settled in the Canadian Village, an IDP site. Finally the government managed to relocate all evicted IDPs from Canadian village and Dusmada to the Jehdin settlement which hosted all humanitarian responses.

- Puntland authorities, the diaspora and the host community have provided US\$100 each to families, particularly for those relocating to Baidoa and provided land in Jehdin settlement for local integration of those who wish to remain in Gaalkacyo, as part of durable solutions response.
- Puntland authorities provided wet meals, water, sleeping materials (mats) and space to the new arrivals from Laascaanood. Authorities further facilitated transportation to Garowe of 40 businessmen who requested assistance to go back to Laascaanood to claim their assets.
- Local communities in Gaalkacyo delivered food assistance to some families in Dusmada.
- Danish Refugee council assisted 400 households with 1 month cash grant of 70USD, in Guryaha Talyaaniga and Dusmada.
- Save the Children and the Ministry of Health has supported the Dusmada settlement with a health and nutrition mobile team, screening under 5 children 3 days a week. Save the Children further delivered NFIs (blankets, mats, mattresses) to 150 households in Gaalkacyo, and distributed food to 150 households in the Canadian Village, and

provided child protection kits for 450 people in Dismada. In addition to that SCI also provided cash grants to 150 HHs after they were relocated to Jehdin settlement.

- GECPD delivered NFIs (assorted utensils) and dry food items to 150 households in Dismada. They further offered case management and material assistance to 5 unaccompanied children in Dismada.
- Kulmiye Aid Foundation distributed NFIs to 20 households in the Canadian Village and distributed unconditional cash transfers of \$20 to 100 households with persons with special needs in the Canadian Village.
- UNICEF and the Ministry of Health mobilised a health and nutrition mobile team and the distribution of PPEs and medical supplies for 3 months in Dismada.

UNICEF and MOWDFA provided interim care, family tracing and reunification support to unaccompanied and separated children (10 boys and 8 girls), as well as deployment of 15 social workers to provide individual and family-based psychosocial support, child protection and GBV services including safe shelter (213 mothers and 426 children) in Galkacyo. They also established a child protection desk and child friendly spaces in Jehdin, reaching 300 children.

- UNHCR and Norwegian Refugee Council distributed NFI kits to 800 households in IDP settlements in North Galkacyo.
- KAALO distributed unconditional cash transfers for 1 month to 480 people in Dismada.
- IOM sent 500 NFI kits to displaced families.
- Gaalkacyo Medical Foundation delivered 20 housing tents in Dismada
- Care International rehabilitated the Jehdin borehole and constructed 3 water kiosks for the drought displaced IDPs In Jehdin settlement, however the Laascaanood IDPs in Jehdin settlement only benefited from the borehole rehabilitation out of those responses.
- South West State of Somalia, Puntland state of Somalia and the Somali diaspora originally from SWS facilitated the safe return of about 3,500 evicted IDPs to their origin in Southwest State region through planes and in land transportations.

Needs analysis, scenario planning and risk analysis

In total, approximately 7,250 people were displaced from Laascaanood in the Sool Region of Somaliland¹. Together with other humanitarian actors, SRCS carried out a rapid need assessment as soon as the IDPs arrived at the outskirts of Galkacyo. The assessment found that the most urgent basic needs were as follows: WASH, Shelter, FSL, Health, Protection, Psychosocial support, and Restoring Family Links (RFL). SRCS Galkacyo branch management organized a meeting with the local humanitarian actors and government institutions to update and inform them about SRCS plans and the resources at their disposal to avoid duplication of interventions and enhance coordination.

Humanitarian partners continuously monitored the situation. In the initial response period, UNOCHA published three flash updates on these assessments and findings: [Flash update #1 on displacement from Laascaanood](#) on 5th October, [Flash Update #2](#) on 11th October, and [Flash Update #3](#) on 14th October.

On 19 October 2021, Puntland authorities² recorded that 3,800 out of the 7,250 displaced people had arrived in Gaalkacyo, of which approximately 1,000 have proceeded to move to their places of origin, Southwest State, Hirshabelle and Banadir. The displacement of families from Laas Caanood raised shelter, Health, Wash, livelihood and protection concerns, with reports of separation of families, child abandonment and loss of property. Protection Cluster partners in Gaalkacyo reported that seven separated minors were reunited with their families. Six unaccompanied minors are living with IDPs in Jehdin Gaalkacyo, according to Puntland authorities and efforts made by SRCS RFL free phone call service to link them with their relatives didn't work well.

Based on the latest assessment from PRMN,³ some 24 households reportedly moved to nearby villages in Buhoodle district. In Ceerigaabo town, Sanaag region, 75 people reportedly left for Gaalkacyo and Baidoa towns after authorities issued a notice asking people from southern areas to leave by 21 October 2021. Another 32 families (75 people) arrived in Margaga settlement in the outskirts of Ba'adweyn town, 50km northeast of Gaalkacyo. On 14 October, they were airlifted to Baidoa. Since 10 October 2021, 561 displaced families (3,366 people) have arrived in Baidoa.

The approximately 2,800 displaced persons that were stranded in Gaalkacyo, were given an open area to settle in Jehdin Village, approximately 16 kilometres from Gaalkacyo. At the time of arrival, the area had no shelters or water, sanitation, and hygiene (WASH) facilities. As of April 2022 about 1,500 IDPs still live in Jehdin settlement with a number of challenges still needs to be solved even though humanitarian partners have responded with the provision of emergency shelters, construction of water kiosks, CVA and a number of WASH facilities as justified in the above description of the disaster. Please refer to the [Emergency Plan of Action \(EPoA\)](#) for details of the **Needs Analysis** and **Operations Risk Assessment**, as they remain unchanged.

¹ OCHA, [Flash update #3 from 14 October](#)

² [FLASHUPDATE1.pdf \(reliefweb.int\)](#)

³ <https://reliefweb.int/report/somalia/somalia-internal-displacements-monitored-protection-return-monitoring-network-prmn-26>

B. OPERATIONAL STRATEGY


The overall objective of this operation was to assist the 2,800 displaced persons in the Jehdin area by providing the needed assistance such as emergency shelter, essential household items, basic health services all integrated with Protection, Gender and Integration (PGI) services.

Being an auxiliary to the regional and national government, SRCS worked in close collaboration with Government to ensure harmonization of the efforts carried out by governmental and humanitarian partners. This happens through the government appeals for coordination meetings where the humanitarian partners are invited to participate and share updates with the support of UNOCHA. Usually this coordination meeting is held on a monthly basis except adhoc meetings which are organized accordingly.

SRCS applied IFRC's [minimum standards for PGI in emergencies](#) during targeting, mobilization and implementation of all activities. This was achieved through the involvement of the SRCS PGI focal point who ensures that the minimum PGI emergency standards are met and applied in all the phases of the project cycle. Also, the PMERL department fully engaged to ensure the development of working tools were considered and that PGI indicators were included.

SRCS fully engaged with community committees through SRCS volunteers in the field, SRCS community health committees and SRCS staff members were trained on the area of the community engagement and accountability (CEA) before the kick-off of the operations. This ensured consultations with community leaders, women associations, business people, elders, youth and religious leaders on the operations to be implemented, the criterion to be used, the resources at the disposal and the period of the operation.

C. DETAILED OPERATIONAL PLAN

	<p>Shelter</p> <p>People reached: 900 (150 households)</p> <p>Male: 450</p> <p>Female: 450</p>	
Outcome 1: Communities in disaster and crisis-affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions		
Indicators:	Target	Actual
% of affected people provided with access to emergency shelter support and HH items for their basic needs	32% or 150 HH	150 HH
Output 1.1: Shelter and settlements and basic household items assistance are provided to the affected families.		
Indicators:	Target	Actual
# of affected people provided with access to emergency shelter support and HH items for their basic needs	900	900
% of people who during PDM reports being satisfied with the distribution process	80%	100%
Output 1.2: Technical support, guidance and awareness-raising in safe shelter design and settlement planning and improved building techniques are provided to affected households		
Indicators:	Target	Actual
# of volunteers trained on safe shelter design	50	50
# of targeted families provided with technical support for shelter construction	150 HH	150 HH
Narrative description of achievements		
<p>The tender process for the procurement of NFIs and shelter toolkits were finalized in early December 2021, and the items were distributed to 150 displaced households in Jehdin in late December. A total of 50 SRCS volunteers received training in emergency shelter construction by SRCS field engineer, and assisted in the construction of 150 emergency shelter houses for the beneficiaries in 7 days on 30 December 2021.</p> <p>Forty (40) SRCS volunteers, community committees and local authority were part of the distribution process with the supervision of SRCS national and branch staffs.</p>		

Though the number of people relocated to Jehdin settlement was about 467 HHs, the emergency shelter materials were enough for 150 HHs as per the initial plans. SRCS using its volunteers and PMERL department developed a selection criteria targeting the most vulnerable and needy households, especially households with elderly people, disabilities, orphans, women and children headed households and etc.



Shelter kits distributed to beneficiaries, SRCS

After the beneficiaries were selected and registered, a distribution of the emergency shelter tools were conducted, during which the beneficiaries were given a brief sessions on how to construct and erect the tents using the shelter tools kits provided. The training was facilitated by SRCS field engineer and shelter-trained volunteers in the field. A PDM was carried out, showing that 100% of the interviewed respondents selected from the emergency shelter beneficiaries knew how to use the shelter materials received.

The PDM assessment was carried out in April 2022 and the summary of findings shows that 100% of beneficiaries reported being very satisfied by the emergency shelter distribution process. Despite the challenges encountered later in 2022 which reported that the storm knocked-down of the emergency shelters and its poor protection from exposure to sun in the day and the cold from the night, which was a point of dissatisfaction for some of the community when asked about the quality of the items emergency shelter materials distributed. The PDM was carried out right after the distribution by SRCS PMER manager, even though some of the recent reported challenges were identified physically during staff field visit and in the lesson learned workshop.

Challenges

- High expectation from beneficiaries – the relocated IDPs were initially almost 467 HHs and SRCS had to provide emergency shelters to 150 HHs, the rest of the IDPs were expecting the same from SRCS.
- The emergency shelter provision was based on emergency not durable solution or development, this resulted in the beneficiaries to continuously raise concerns about the harsh weather in the day and cold weather in the nightfall, from which they are not protected by the provided shelter.
- The 150 HHs which benefited from the shelter used their blankets and mats to build shelter along with the tarpaulin in order to prevent it from the excessive heat of the day and the cold weather in the nightfall. Currently, they do not have much mats and blankets left at all.
- The provided shelters were knocked down by the recent storms ahead of the below normal rains received in Jehdin and its surrounding. This means almost 70 HHs lost their emergency shelter by the hit storm.
- Through the PDM finding, the beneficiaries complained about the distant distribution site from their settlement which forced them to walk long distances to collect the heavy distributed items all the way to their homes. The reason for the distant distribution site was because of the un-tarmacked sandy road which could stuck the loaded trucks in the settlement and a weak plan towards the distribution site from SRCS.

Lessons learnt

Latrines versus shelter – emergency shelter provided to the IDPs was destroyed and knocked down by the storms which left many families unsheltered before the daily scorching sun rays and the cold weather at the nightfall. SRCS constructed stony latrines and this raised a concern of the quality of the shelter given to them and the quality of the latrines given to them. SRCS could opt to build semi permanent shelters instead of emergency shelters which can not endure the harsh climate and storms.



Livelihoods and basic needs

People reached: 2,802 (467 households)

Male: 1,120

Female: 1,682

Outcome 1: Communities, especially in disaster and crisis affected areas, restore, and strengthen their livelihoods

Indicators:	Target	Actual
% of households who have their basic household needs covered through cash transfers	100% (467 HH)	467 HH

Output 1.2: Basic needs assistance for livelihoods security including food is provided to the most affected communities

Indicators:	Target	Actual
% of targeted people who during PDM report being satisfied with distribution process	80%	100%

Narrative description of achievements

SRCS PMER department used all the necessary tools in place for beneficiary registration and collection of data. 30 SRCS volunteers were trained on these tools.

In early December 2021, SRCS with its volunteers registered all the of the 467 HH evacuees who had been newly relocated to the settlement of Jehdin, as part of the evacuees from Laascaanood. Following verification of the registered households, the one-off cash grants released to the 467HHs (2,802 people) was \$100 per household. The amount of 100 USD was based on the latest Minimum Expenditure Basket (MEB) market assessment provided by the Food Security and Nutrition Analysis Unit (FSNAU) from September 2021. The MEB represents the minimum set of basic food items such as sorghum, vegetable oil and sugar, comprising 2,100 kilocalories/person/day basic energy requirement for a household of 6–7 and household items such as water, kerosene, firewood, soap and cereal grinding costs. The cash disbursement was unrestricted but was mainly intended for food and cooking items, as other essential household items and shelter items were supplied through in-kind distribution. Cash disbursements were distributed following the identification of most vulnerable households (based on initial assessments), registration and verification of targeted households. A Post Distribution Monitoring was done in January 2022 and the report is annexed.



SRCS Galkayo branch volunteers registering physically disables beneficiary evacuated from Laascaanood at Jehdin IDP camp

Challenges

The IDP settlement in Jehdin is far from the Galkacyo district, meaning that IDPs had to travel 12-15 kms to purchase food, and could not afford the transport fare. This increased food insecurity in the settlement.

The one-off cash grants could not help them much, as they need more than one month support. The registration tools used in the DREF operation were not fully updated for instance, they did not capture the actual family disaggregated data and gender per household.

Lessons learnt

- The resettled area is around 15km away from Galkacyo district, the community will need to have a resilience based project to support them effectively once this emergency project ends, since their casual labor will be more limited and they may not be able to find alternative sources of income.
- During the PDM assessment, it was reported the existence of the need to be provided with farming tools and other appropriate resources, at the very least, to help them begin income generating activities in order to remain self-sufficient.
- There is need to continue to promote unconditional cash assistance in order to be able to cope up with possible household income shocks due to food shortages and other essential requirements.
- Registration tools should align to the DREF operations reporting requirements especially on data disaggregation.


Health


People reached: 2,964 (494 households)


Male: 1260

Female: 1,704

Outcome 2: The immediate risks to the health of the affected populations are reduced through improved access to medical treatment

Indicators:	Target	Actual
% of targeted people who have access to health care	100% or 2,800 people	106% or 2,964 people

Output 2.1: Improved access to health care for the targeted people		
Indicators:	Target	Actual
% of the affected population whose potential health risks are identified	60% or 1,680 people	106% or 2,964 people
Narrative description of achievements		
<p>The recruitment process of the Emergency Mobile Health Clinic (EMHC) was initiated in early December, and staff were trained on case management and LMIS on 12th Dec 2021. The EMHC began operating in Jehdin on 15th Dec 2021, providing health and nutrition services to the IDPs.</p> <p>The health service is among the first responses that were provided to the IDPs during their arrival all the way from Laascaanood. They have gone through difficulties along the road where some of them put to birth without skilled birth attendants, while others got sick and had no treatments until they arrived in Burtinle district. SRCS responded with First Aid and Pre-hospital emergency care services through the EMHCs.</p> <p>In late March 2022, the mobile clinic treated a total of 2,964 people (476 <5 females, 581 <5 males, 1228 >5 females, and 679 >5 males), these are the total beneficiaries reached through the OPD (Out-patient department) DREF health provision in Jehdin settlement. However, the other health service provided through this DREF operation include ante- and postnatal care, HIV counselling, nutrition supplements, vaccines, and growth monitoring, as well as treatments for pneumonia, skin infections, eye infections, diarrhoea, anaemia, UTI, STI, trauma, and measles.</p>		
		
<p><i>Emergency mobile clinic nurse conducting hygiene promotion while distributing soaps to beneficiaries in Jehdin IDP camp</i></p>		
Challenges		
<ul style="list-style-type: none"> - Health supplies for the EMHC in Jehdin were not funded within the DREF Operation, meaning SRCS had to coordinate with MoH to cover this gap. - The EMHC was not fully operational before mid-December 2021. Since funding for the clinic covered 4 months under the DREF, this was part of the reason for the no-cost extension. - The health provision through the DREF operation was emergency based therefore after the DREF, there's not been any exit strategy for the health provision and the IDPs need for continuous health service still stands. 		
Lessons learnt		
<p>The future health operations should fund health supplies, only human resources and other basic materials would not cover the health gap in the affected community.</p> <p>Duration of the health provision was only 4 months and exit strategy after the DREF was not addressed therefore for the future projects, both the duration and the exit strategy should be put into consideration.</p>		

	<p>Water, sanitation and hygiene (WASH) People reached: 2,802 (467 households) Male: 1,120 Female: 1,682</p>	
Outcome 1: Immediate reduction in risk of waterborne and water-related diseases in targeted communities		
Indicators:	Target	Actual
% of households who have access to improved WASH services	100% (467 HH)	100% or 467 HHs
Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities		
Indicators:	Target	Actual
# of assessments carried out	2	2

Output 1.2: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population

Indicators:	Target	Actual
% of targeted people who are found to have treated their drinking water during households' survey	70%	82
# of people benefitting from distribution of jerrycans and buckets	2,800	2,802

Output 1.3: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population

Indicators:	Target	Actual
# of latrines constructed	30	30
# of handwashing facilities provided	30	30

Output 1.5: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population

Indicators:	Target	Actual
# of hygiene kits distributed	467	450HHs
# of people trained on the usage of hygiene kits	2,800	2,700
# of women receiving dignity kits	403	403

Narrative description of achievements

The WASH rapid assessment carried out in January by SRCS revealed the following findings:

- Out of a total of 60 households that were interviewed, a majority, 41(68.3%) do not usually get water, while only 19 (31.7%) get adequate quantity of water. As per the Sphere standards, the acceptable level of water available per household is two water containers or 10-20 liter.
- The average water consumption per household was 100 liter per household translating to 16 liters per person, even though people get water from about 1.5 kilometers which is much higher than 500 meter, the acceptable distance of water source. In addition, half of the households pay for water which is a high number according to the Sphere standards with 5% or less of the households being the acceptable threshold of people to pay for water.
- The available water is not drinkable due to lack of purification and palatability and costs 0.5 USD per jerry can.
- The main source of the water for the IDPs is kiosks where most of the households 42 (70%) store water in a water containers, water-bladder, and Jerry cans. Observations on container hygiene showed that a majority (70%) of the containers were in unacceptable hygiene condition which could lead to possible diarrheal disease outbreak.
- When asked if they pay for water, half of the respondents indicated that they pay to get water.
- Households were asked the number of water storage equipment they had. An average of 5 jerry cans was available per household. The PDM findings revealed that 82% of the beneficiaries reported that they had the aqua tabs still in stock, 9% had finished in 1 month, 8% also finished in 1 week and 1% mentioned they had finished previous in 2 weeks .
- During the assessment, the general environmental sanitation and hygiene were assessed and observed where 20% of the households had visible feces around their shelters due to insufficient toilets. However, after the assessment, 30 toilets were constructed through the DREF operation.
- Hand washing with soap is an important aspect of preventing the transmission of diarrheal diseases and communicable diseases. The assessment findings show that half 31 (52%) of the households interviewed practice hand washing during necessary periods (eating, preparing food, or feeding a child) and after contact with excreta, while half of them wash their hands only by water without soap or ash due to lack of soap availability in households.
- Household heads were asked the most common diseases caused by lack of proper hygiene and sanitation. Majority indicated diarrheal disease followed by skin diseases and malnutrition.



SRCS volunteer purifying water in Jerrycan with aqua tabs and training it with the HH

Women and girls in these IDPs don't have any means to manage menstrual hygiene and the DREF operation distributed 30 hand washing facilities with shampoo and soap and 450hygiene kit products to 450HHs. The Plan initially was to reach 467HHs with hygiene kits however due to the price changes of the commodities, only 450HHs was managed to reach with hygiene kits and subsequently 2,700 people were trained on use of the hygiene kits. For the communal pits, the settlement is reportedly to have one existing but unfenced communal pit which is a bit distant from the Laascaanood IDPs location. However, Norwegian Refugee Council is planning to construct one waste disposal pit for Jehdin community.

SRCS constructed 30 latrines for the IDPs in Jehdin which took one month and on 8th February 2022, the handover ceremony took place in the settlement that was attended by SRCS officials, local government, community leaders and the contractor.

A PDM was conducted to establish the beneficiary satisfaction. The summary of findings indicate that:

- All (100%) respondents were satisfied with hygiene products (washing powder), and 96% with toothpaste.
- Only (4%) of the respondents indicated they were highly dissatisfied.
- A majority (95%) of the respondents were satisfied with toothbrush, 3% were highly dissatisfied, 1% satisfied and 1% dissatisfied because they have been using traditional toothbrush.
- Most (96%) of the respondents were satisfied with aqua tabs distributed, while 1% were satisfied and 4% highly dissatisfied.
- A majority (97%) of the respondents were highly satisfied with body soap, 1% chose neutral and 1% showed highly satisfaction.
- Most (96%) of the beneficiaries were highly satisfied with the distributed shampoo, 1% were satisfied and 3% indicated they were highly dissatisfied.
- A majority (90%) of the respondents were highly satisfied with the distributed bath towel, 5% were satisfied, 1% were neutral and 4% reported they were highly dissatisfied.
- Most (96%) of respondents showed a high satisfaction with Sponge for washing dishes, pack, only 1% were satisfied, and 3% neutral.

Overall, majority of the respondents were satisfied with the items received and only small numbers showed less satisfaction or completely dissatisfied because of traditional facilities they use. The PDM report is annexed.

Challenges

- The procurement of the WASH items was delayed, especially for water purification tabs as these had to be procured internationally so this led to a no-cost extension of implementation timeframe.
- The IDP community struggled to fetch water from a distant area, where children and elderly women are fetching water alike. To respond to the need for a closer water source, the SRCS has undertaken construction of 3 water kiosks, funded under the [Hunger Crisis 2021 Emergency Appeal](#). However, the water shortage in the location is still a concern since the 3 constructed water kiosks can not fulfil the demand of the IDPs.

Lessons learnt

Early procurement of the internationally procured items like the water treatment items and all other relevant components in the future projects to avoid possible delays in the operations.



Protection, Gender and Inclusion (PGI)

People reached: 2,802 people

Male: 1,120

Female: 1,682

Outcome 1: Communities become more peaceful, safe and inclusive through meeting the needs and rights of the most vulnerable.

Indicators:	Target	Actual
# of individuals reached with PGI intervention	2,800	2,802

Output 1.1: Programmes and operations ensure safe and equitable provision of basic services, considering different needs based on gender and other diversity factors.

Indicators:	Target	Actual
# of assessments conducted	1	1

Output 1.2: Programmes and operations prevent and respond to sexual- and gender-based violence and other forms of violence especially against children.

Indicators:	Target	Actual
# of awareness raising sessions conducted for volunteers	1	2

Narrative description of achievements

SRCS, with other humanitarian partners and the government, carried out a joint assessment at the arrival of the IDPs from Laascaanood, and the finding was the existence of an urgent need of protection, food security, shelter, health and nutrition, Restoring family links, psychosocial support and etc.

The humanitarian partners including UN High Commission for refugees (UNHRC), Galkayo Education Center for Peace and Development (GECPD) and other international partners responded with the urgent needs of protection while SRCS ensured the unaccompanied minors are traced through the restoring family links and the family reunion needs were addressed through phone call services with the support of the ICRC. However until the end of the operation, the minors could not be linked to their displaced families.



Distribution of dignity kits in Jehdin IDP camp

SRCS also distributed dignity kits to 403 women in the IDP through the DREF operation. The dignity kit contained 1 Somali dress, 1 Hijab (the head covering worn by Muslim women), 1 torch, 1 pair of batteries (explore the possibility for solar torches), 2 packets of sanitary pads, 3 pieces of bar soap and 2 panties. SRCS branch level volunteers with the support of the staff provided awareness sessions to the beneficiaries and trained them the proper way of using the distributed dignity kits. In addition to this, SRCS volunteers provided continuous awareness sessions in terms of PGI including SGBV, child protection and all other relevant sectors through the DREF operation of which they were briefed on. The awareness sessions reached 2,802 people from the 467 HHs.

Challenges

- The construction of latrines happened relatively late as it followed the procurement procedure, which posed protection concerns particularly for women in the settlements.
- Fetching jerry cans of water from the kiosks to the IDP homes is still a concern for the women and the minors despite SRCS's construction of water kiosks closer to their homes but there is still a number of households who are still distant from the newly constructed water kiosks.
- The water points do not have solar lighting at the nightfall and this could promote gender based violence in the night.

Lessons learnt

Procurements for the dignity kits and all other PGI components should be carried out and distributed at the earliest possible during the emergency responses and this should be considered in future projects.

Strategies for Implementation

S1.1.4: National Societies have effective and motivated volunteers who are protected

Indicators:	Target	Actual
% of volunteers insured	100%	100%

S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved

Indicators:	Target	Actual
Community feedback mechanism set up and operational	1 minimum	1

Narrative description of achievements

A total 362 volunteers are active and insured under the IFRC support in Galkacyo branch and 50 volunteers out of the total number were operational during this DREF operation in Jehdin.

To ensure community feedback was addressed, a complaint and feedback short-toll number was established where the beneficiaries could freely call to deliver their feedback and complaints. To make sure that the data and caller information were protected, the SRCS PMER manager developed a checklist for the complaints and a specific officer assigned to operate it. The holder was trained to effectively manage the data and maintain the confidentiality of the callers.

SRCS has the checklist that can be uploaded to the Kobo Collect tool to easily register the community feedbacks and complaints. The PMERL manager trained the holder of the short-toll number on this.

SRCS provided a standing billboard in the project location with clear information of the short toll number written in the local language; and the volunteers in the field also disseminated the number among the beneficiaries.

Despite the existence of notice billboard and the volunteers awareness raising toward the short-toll number, the reported callers in the assigned number were about 100 people and only 40 of them were valid while the remaining 60 calls were aborted due to the irrelevant purposes.

The majority of the valid calls were appreciations, complaints about the emergency shelter destructions by the storms and suggestions about the continuation of cash grants.



Billboard with Toll free number for complaints and feedback

Challenges

During the implementation of the DREF project, the volunteers worked over time in many circumstances due to the increased work load including the distribution times.

Lessons learnt

SRCS did not have community volunteers in the settlement before the DREF operation, fortunately with the DREF support, SRCS recruited 3 volunteers and now planning to have more at the community level who can handle any SRCS operation in the locality and avoid deployment of branch level volunteers into the settlement.

D. Financial Report

The overall amount allocated for implementation of this operation is CHF 270,619 of which CHF 250,198 (92%) were spent as detailed per cost category available in the final financial report summary. A balance of CHF 20,421 will be returned to the DREF pot.

Below explanation of variances is based on report in section III Expenditure by budget category and group:

- Underspend
 - Travel – travel by internationals was restricted due to security requirements.
 - ForeX – an allowance was made for exchange rate loss which did not materialize.
 - WASH – a saving was made in the procurement of aqua tabs and subsequent travel.
- Overspend
 - Personnel – increased number of NS staff and volunteers than first expected were needed to be mobilized to provide the community mobilization and support implementation.

Contact information

Reference documents



Click here for:

- [Emergency Plan of Action \(EPoA\)](#)
- [Operations Update 1](#)

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

In the Somali Red Crescent Society

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

In the IFRC Cluster Delegation

- **Head of Delegation**, Mohamed Babiker, phone: +254 1108043974, e-mail: Mohamed.babiker@ifrc.org
- **Roving Operations Manager**, Patrick Elliott, phone: +254 733620770, e-mail: Patrick.elliott@ifrc.org

IFRC Africa Region Office

- Rui Alberto Oliveira, Acting Head of Disaster Crisis Prevention, Response and Recovery Department, Nairobi, Kenya; phone +351914758832; email: Rui.OLIVEIRA@ifrc.org

IFRC in Geneva

- Rena IGARASHI, Operations Coordination, Senior Officer, DCPRR Unit Geneva; email: Rena.IGARASHI@ifrc.org ,
- Eszter MATYEKA, Senior DREF Officer, DCPRR Geneva Unit; email: eszter.matyeka@ifrc.org

For IFRC Resource Mobilization and Pledges support:

- Louise DAINTREY, Head of Partnership and Resource Development, Nairobi, email: Louise.DAINTREY@ifrc.org

For In-Kind donations and Mobilization table support:

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

For Performance and Accountability support (planning, monitoring, evaluation and reporting enquiries)

- **IFRC Africa Regional Office:** Philip Komo Kahuho, Regional Head, PMER and Quality Assurance, email: Philip.KAHUHO@ifrc.org

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**.

DREF Operation

Selected Parameters			
Reporting Timeframe	2021/10-2022/7	Operation	MDRSO012
Budget Timeframe	2021/1-2022/12	Budget	APPROVED

FINAL FINANCIAL REPORT

Prepared on 19/Aug/2022

All figures are in Swiss Francs (CHF)

MDRSO012 - Somalia - Population Movement from Laascaanood

Operating Timeframe: 23 Oct 2021 to 30 Apr 2022

I. Summary

Opening Balance	0
Funds & Other Income	270,619
DREF Allocations	270,619
Expenditure	-250,198
Closing Balance	20,421

II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items	60,375	37,281	23,094
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash	47,812	77,645	-29,832
PO04 - Health	17,741	21,589	-3,848
PO05 - Water, Sanitation & Hygiene	110,513	102,585	7,928
PO06 - Protection, Gender and Inclusion			0
PO07 - Education			0
PO08 - Migration			0
PO09 - Risk Reduction, Climate Adaptation and Recovery			0
PO10 - Community Engagement and Accountability	981	194	787
PO11 - Environmental Sustainability			0
Planned Operations Total	237,422	239,293	-1,871
EA01 - Coordination and Partnerships	18,153		18,153
EA02 - Secretariat Services			0
EA03 - National Society Strengthening	15,044	10,905	4,140
Enabling Approaches Total	33,197	10,905	22,293
Grand Total	270,619	250,198	20,422

DREF Operation

Selected Parameters			
Reporting Timeframe	2021/10-2022/7	Operation	MDRSO012
Budget Timeframe	2021/1-2022/12	Budget	APPROVED

FINAL FINANCIAL REPORT

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MDRSO012 - Somalia - Population Movement from Laascaanood

Operating Timeframe: 23 Oct 2021 to 30 Apr 2022

III. Expenditure by budget category & group

Description	Budget	Expenditure	Variance
Relief items, Construction, Supplies	190,282	183,444	6,838
Shelter - Relief	29,437	29,571	-134
Clothing & Textiles	10,780	10,803	-24
Water, Sanitation & Hygiene	99,162	90,231	8,930
Medical & First Aid	691	2,333	-1,642
Utensils & Tools	4,146	4,146	0
Other Supplies & Services	3,040	3,073	-32
Cash Disbursement	43,027	43,287	-261
Logistics, Transport & Storage	13,028	11,858	1,170
Distribution & Monitoring	3,225	1,387	1,837
Transport & Vehicles Costs	9,803	10,471	-668
Personnel	20,465	23,972	-3,507
National Society Staff	13,877	15,299	-1,421
Volunteers	6,588	8,673	-2,085
Consultants & Professional Fees	921	702	220
Professional Fees	921	702	220
Workshops & Training	9,536	9,549	-13
Workshops & Training	9,536	9,549	-13
General Expenditure	19,871	5,402	14,468
Travel	9,674	463	9,211
Information & Public Relations	737	631	106
Office Costs		931	-931
Communications	737	736	1
Financial Charges	7,801	2,640	5,161
Other General Expenses	921		921
Indirect Costs	16,517	15,270	1,246
Programme & Services Support Recover	16,517	15,270	1,246
Grand Total	270,619	250,198	20,422