

# OPERATION UPDATE

## Somalia, East Africa | Hunger Crisis 2021-2023

Appeal MDRSO011	№: n°	Operations Update n° 12 month Date of issue: <b>26/10/2022</b>	Timeframe covered by this update: 17/07/2021 – 17/09/2022
		Operation start date: 18/07/2021	Operation timeframe: 24 months End date: 31/07/2023
Glide DR-2021-000054-SOM	№:	IFRC Funding requirements: 9 million Swiss francs Federation-wide Funding requirements: CHF 14 million	DREF amount initially allocated: CHF 451,800

**Red Cross Red Crescent Movement partners currently actively involved in the operation:** Somalia Red Crescent Society (SRCS), International Federation of Red Cross and Red Crescent Societies (IFRC), International Committee of the Red Cross (ICRC), German Red Cross, Canadian Red Cross, and Norwegian Red Cross. **The IFRC and SRCS would like to thank the following for their financial contributions to the Emergency Appeal: Canadian Red Cross / Canadian Government, Japanese Red Cross / Japanese Government, Netherlands Red Cross / Netherlands Government, Swedish Red Cross, Monaco Red Cross, Finnish Red Cross, Kuwait Red Cross, Danish Red Cross, Icelandic Red Cross, Hong Kong Red Cross, Irish Red Cross, and American Red Cross.**

**Other partner organizations actively involved in the operation:** Humanitarian Affairs and Disaster Management Agency (HADMA), National Disaster Preparedness & Food Reserve Authority (NADFOR), Japanese Government, UN (OCHA, UNICEF, FAO, WFP, HCR, FPA), INGOs (SC, CARE, WVI, Islamic Relief, NRC), NGOs (KAALO, PDO, PSA).

## A. THE DISASTER AND THE RED CROSS RED CRESCENT RESPONSE TO DATE



**May 2021:** The Government of Somalia declared a National Emergency due to the Drought situation and called for support in responding to the **humanitarian crisis**

**May 2021:** IFRC issues DREF for CHF451,800 for 120,936 people for 4 months in Puntland and Somaliland.

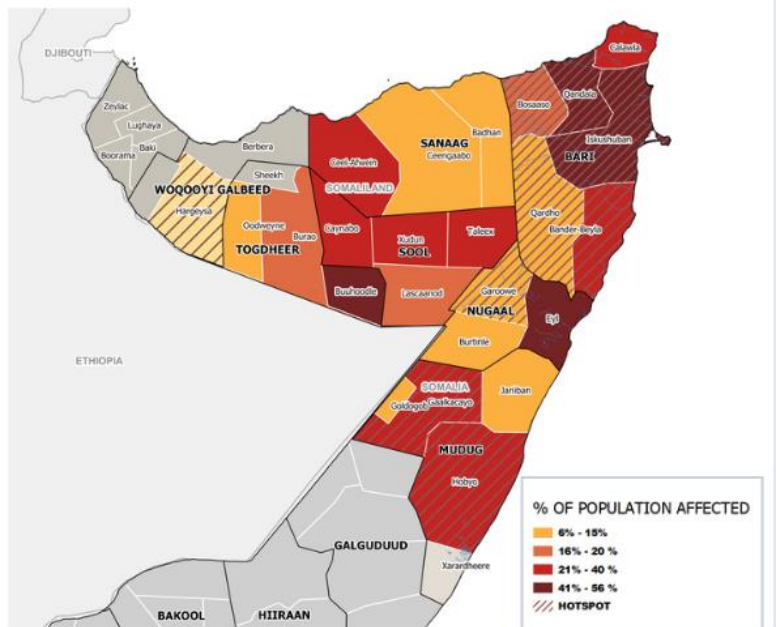
**July 2021:** IFRC issues Emergency Appeal for 8.7m CHF for 563,808 people for 18 months in Puntland and Somaliland.

**23 November 2021:** The Federal Government of Somalia declares the drought a state of emergency

**13 January 2022:** The Somaliland Vice President's Office declares the drought a national emergency in Somaliland

**January 2022:** The October-December rains have largely failed across the country, and projections are looking critical for mid-to-late 2022.

**April 2022:** IFRC revised Emergency Appeal for 14m CHF (9m from federation requirement funding and 5m from PNs) for 560,000 people for 24 months in Puntland and Somaliland.



### IFRC FUNDING REQUIREMENTS

CHF 9 Million

### FUNDING COVERAGE

3 Million  
Covered 34.05%

## Situation overview

Somalia continues to experience the third consecutive failed rainy season and, in some areas, a fourth consecutive failed rainy season, driving widespread food insecurity across the country. Despite the scale-up of humanitarian assistance throughout 2021 and 2022 and continued efforts to mitigate the impacts of the drought, the situation remains critical. Acute food insecurity has continued to worsen across Somalia, with an estimated 5.2 million people (or 33% of the total population) already experiencing Crisis or worse (**IPC Phase 3 or higher**) outcomes, including 38 000 people likely in Catastrophe (**IPC Phase 5**), as of May 2022, despite the ongoing delivery of humanitarian food assistance. Food assistance reached an average of 2.4 million people per month between February and April 2022 and has likely prevented the worsening of food security and nutrition outcomes in many areas.



*Drought assessment in Ijaara village by SRCS Hargeisa branch DRM officer with head of village  
Seen Animal death August 6,2022*

However, humanitarian assistance delivery is far short of the rising level of need, and insufficient funding is expected to lead to pipeline breaks in food assistance delivery after June. Food insecurity and malnutrition are expected to deteriorate further and faster between June and September 2022, and if humanitarian food assistance is not scaled up and sustained, then approximately 7.1 million people (or 45% of the total population) are expected to face Crisis or worse (**IPC Phase 3 or higher**) outcomes. This figure includes 2.1 million people that will likely be in Emergency (**IPC Phase 4**) and at least 213 000 people that will likely be in Catastrophe (IPC Phase 5). In addition to the population groups that face an increased risk of famine, other areas of concern include the Northern Inland Pastoral of Northwest, Hawd Pastoral of Northwest, Southern Agropastoral, Southern Rain-fed Agropastoral of Middle and Lower Juba, and Togdheer Agropastoral livelihood zones as well as IDP settlements in Burao, Lasaanod, Garoowe, Belet Weyne, Doolow and Kismaayo, all which face **Emergency (IPC Phase 4)** between June and September 2022.

Based on the results from 11 integrated food security, nutrition, and mortality surveys conducted between late April and early May 2022, the total acute malnutrition burden estimates for Somalia for 2022 have been revised and updated. Accordingly, as of May 2022, an estimated 1.5 million children under the age of five years (total acute malnutrition burden), representing 45 percent of the total population of children, face acute malnutrition through the end of the year, including 386,400 who are likely to be severely malnourished.

**There is an urgent and critical need for additional resources to be able to appropriately and timely respond to critical needs and mitigate the impacts of the expected prolonged drought conditions. To date, the Emergency Appeal, which seeks CHF 9 million, is only 34.5% funded. Further funding contributions are very urgently needed to enable the Somalia Red Crescent Society, with the support of the partners, to respond quickly to the increasing humanitarian needs in Somalia.**

Overall, the 2022 Gu season cereal harvest will likely be 40-60 percent below average, making it the fifth consecutive below-average harvest on record. Poor households who rely on income from agricultural employment opportunities continue to be adversely affected by the decline in crop cultivation and poor harvest prospects during the current Gu season. Reduced demand for agricultural labor has also driven down wages by as much as 25-35 percent for poor households who typically rely on this income source. The low supply of domestic cereals, the reduction of cross-border staple food imports from neighbouring countries due to the regional nature of the drought across the eastern Horn of Africa, and the record-high increase in global food prices have all driven staple food prices out of the reach of most poor rural, urban and displaced families, who must purchase most of their food. In April, staple cereal and cooking oil prices were 25-160 percent above normal levels in most markets across Somalia.

In the coming months, the production and supply chain impacts of the conflict in Ukraine are expected to place further upward pressure on food prices, thereby threatening the food security of millions across Somalia. Rising food prices not only affect rural households, but also IDPs and the urban poor, who already spend a disproportionately large

amount of their income on food (60-80%), have few opportunities to expand their incomes, and have an extremely limited scope to absorb the impact of further increases in food prices.

As a result of these compounding shocks, many rural households face widening food consumption gaps, and the erosion of their livelihoods limits their coping capacity. Social support systems are increasingly overstretched in many parts of the country. These factors have driven a surge in population displacement from rural areas to IDP settlements and towns and cities. Data from UNHCR indicates that more than 700,000 people have been internally displaced due to drought since October 2021.

New IDP settlements are popping up in the most affected areas. New IDPs arrive in desperate conditions and often face numerous challenges accessing humanitarian assistance after their arrival. Due to anticipated, worsening drought conditions and persistent insecurity, an increase in population displacement from rural to urban areas and IDP settlements is expected to continue. As a result, a significant proportion of IDPs face moderate to large food consumption gaps through September 2022. Most of the main IDP settlements across Somalia are classified as Emergency (**IPC Phase 4**) between June and September 2022. These include IDP settlements in Burco, Lasanod, Garowe, Galkacyo, Dhusamareb, Beletweyne, Mogadishu, Baidoa, Dollow, Dhobley (Afmadow), and Kismayo.

The urban poor across Somalia – who already spend a disproportionately large amount of their income on food (60-80%) – continue to struggle to feed themselves in the face of rising food prices. They have limited room to absorb the impact of further food price increases and have limited opportunities to expand their incomes. Declining labor wages and rising food prices have led to sharp declines in the terms of trade between wage labor and cereals. As a result, the urban poor face moderate to large food consumption gaps through September 2022. Most of the urban area across Somalia are classified in Crisis (**IPC Phase 3**) between June and September 2022. This includes Hargeisa city, which recently sustained a major fire that destroyed most of the businesses in the main market, which typically provided employment and sustenance for a majority of the urban poor.

Acute malnutrition is already at Critical levels in many areas of central and southern Somalia, and the number of acutely malnourished children being admitted to treatment centers is rapidly increasing, with two to four-fold increases reported in some districts. Worsening food security conditions and limited access to clean water have led to outbreaks of acute watery diarrhea (AWD) in many areas. Coupled with an increase in measles cases, disease incidence is contributing to rising levels of acute malnutrition, reflected in the rising number of moderately and severely malnourished children admitted to treatment centers. Acute malnutrition case admissions among children under age five rose by over 40 percent in January-April 2022 compared to the same period last year. Results from 11 follow-up integrated surveys conducted in late April/early May indicate worsening levels of acute malnutrition, with significant and rapid deterioration observed in Galkacyo IDPs, Beletweyne IDP/urban, Bay Agropastoral, and North Gedo Riverine livelihoods.

While humanitarian assistance is currently mitigating the severity of food insecurity, the rising numbers of the population that needs assistance will likely outpace current and planned assistance levels. A scale-up of food, water, and livelihood assistance is urgently needed to prevent rising food insecurity and alleviate drought-induced destitution and displacement.

The Federal Government of Somalia declared a state of emergency on 23 November 2021 and made urgent appeals for international assistance. While North-Western Somalia initially received more rainfall than the rest of the country, drought conditions have intensified and are severely impacting the 6 north-western regions as well. On January 13th, the Somaliland Vice President's Office declared the drought a national emergency in Somaliland, appealing for scaled-up international assistance, and highlighting the severe water shortages, rising food insecurity, and abnormal influxes in migration across the region.

For more details on the situation update, refer to the [6-month](#) and [Emergency Appeal Revision 1](#)

## Summary of Red Cross Red Crescent response to date

### Overview of Host National Society and Overview of Red Cross Red Crescent Movement in-country

There are no changes on the [6-month update 1](#).

### Overview of non-RCRC actors in-country

The SRCS continued to work with the Government, relevant stakeholders, and other agencies to ensure avoid duplication of interventions. NADFOR in Somaliland and HADMA in Puntland, are responsible for the overall coordination of all responses to disasters and emergencies in the respective regions, while SRCS coordinates closely with the Ministry of Health, Ministry of Agriculture, and the Ministry of Water Management in both Somaliland and Puntland.

The National Drought Committee (NDC) has responded with water trucking by providing **24,710** water trucks to all hotspots of drought-affected areas in the six regions of Somaliland (Sool, Sanaag, Togdheer, Sahil, Maroodijeex, Awdal). Additionally, NCD has rehabilitated **47** boreholes across all drought-affected regions of Somalia while together with NADFOR have provided food assistance to **60,496** families /HHS in the six regions of Somaliland.

The Somalia [Food Security Cluster](#) is currently activated, and the Regional Humanitarian Response Team (RHTP) led by OCHA ROSEA is following the drought emergency across the Greater Horn of Africa Region. Other humanitarian actors are also involved in cash-based initiatives, such as Concern Worldwide in Awdal, WVI in Togdheer, Care in Sanaag, NRC in Sanaag, Save the children, WHH in Awdal, Islamic relief in Maroodijeex and Awdal. Through the partners' contribution to the 3W matrix reporting it is ensured there is coordination and no duplication of interventions. There is a cash working group cluster meetings led by Care International monthly where all humanitarian cash actors attend and present updates on their interventions to avoid overlap and duplication of resources.

## B. THE OPERATIONAL STRATEGY

### Needs assessment, targeting, and risk assessment

**Food insecurity and Livelihoods:** 7.1 million people are estimated to be food insecure from May-Sept 2022 across Somalia. The table below shows an overview of current IPC level estimates, as well as projections for June Sept 2022, for the regions targeted in SRCS interventions. Livestock death (50 shoats and 30 cattle) was reported from Ijaara village (70km west of Hargeisa). A total of 249 shoats (Sheep and goats) and 17 cattle death were also reported from the Awdal region during the last four months (March-June2022). An increase in Severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) cases was reported by MOHD (from May 1337 to 7488 June 2022) in Awdal.

Recently, on Sept 3-5, 2022, a high-level delegation visit from IFRC/PNS international directors (British RC, Finnish RC, Netherland RC, Icelandic RC, Italian RC, and Danish RC) visited the field to see the impact of the drought situation in Somaliland. They practically saw the real impact of the drought especially, food insecurity and high-water shortage or lack of water in the visited areas. People were interviewed by both host communities and IDPs by the delegations. During their visit, they have seen animal death in Ijaara village under the Gabiley district Maroodijeex region and malnourished children in Higo togdheer region.

The table below shows an overview of the current IPC level estimates and projections for June- September 2022 for the regions targeted by the Emergency Appeal.

### SUMMARY OF RESPONSE ACTIVITIES



**23,988**

People reached by FSL



**346,789**

People reached by Health

- 75,965 reached by nutrition screening
- 292,698 reached by health sensitization messaging
- 32,419 reached by ANC services
- 5,742 reached by normal delivery services



**436,740**

People reached by WASH

- 436,740 people reached rehabilitated Berkads and boreholes
- 102,000 people reached by hygiene promotion
- 96,000 people were reached by PHAST and CHAST

## IPC levels estimate

Region	Population (2020/21)	Number of Acutely Food Insecure People (Rural, IDP, and Urban Combined)							
		Updated Estimates (May 2022)				Updated Projections (Jun-Sep 2022)			
		Stressed (IPC 2)	Crisis (IPC 3)	Emergency (IPC 4)	Catastrophe (IPC 5)	Stressed (IPC 2)	Crisis (IPC 3)	Emergency (IPC 4)	Catastrophe (IPC 5)
Awdal	538,209	142,880	90,060	18,030	-	152,600	115,510	18,940	-
W. Galbeed	1,224,715	342,060	299,810	45,950	-	342,370	404,730	65,910	-
Togdheer	728,224	188,470	187,340	38,230	-	172,900	223,020	67,010	-
Sool	464,487	104,740	146,110	49,210	-	98,200	169,330	76,210	-
Sanaag	362,723	62,170	101,780	39,060	-	79,060	121,190	47,450	-
Bari	1,042,591	239,770	188,320	57,750	-	279,670	247,750	70,460	-
Nugaal	534,573	156,000	153,820	52,770	-	128,850	185,560	99,330	2,340
Mudug	1,243,526	405,290	405,010	118,730	-	340,430	466,730	229,110	29,220
Galgaduud	687,573	166,220	201,300	52,190	-	147,690	229,670	116,930	22,480
Hiraan	427,124	104,790	103,980	37,200	-	100,840	122,850	77,530	1,470
M. Shabelle	855,895	209,410	199,370	69,150	-	227,420	239,990	94,380	-
L. Shabelle	1,347,934	315,780	264,580	43,500	-	362,050	331,950	110,730	2,790
Bakool	459,747	103,140	136,530	76,680	6,580	108,000	151,910	114,670	13,430
Bay <sup>1</sup>	1,055,913	250,140	332,300	192,330	31,620	199,440	325,190	308,440	96,250
Gedo	736,704	224,420	225,060	94,850	-	228,590	233,350	132,490	-
M. Juba	363,930	93,700	103,170	45,990	-	104,510	132,430	60,010	-
L. Juba	979,998	250,260	277,420	127,340	-	271,550	357,090	168,210	-
Banadir	2,683,312	627,060	538,100	90,400	-	716,030	672,260	269,770	45,200
<b>TOTAL</b>	<b>15,737,178</b>	<b>3,986,300</b>	<b>3,954,060</b>	<b>1,249,360</b>	<b>38,200</b>	<b>4,060,200</b>	<b>4,730,510</b>	<b>2,127,580</b>	<b>213,180</b>

For a detailed overview of needs, targeting, and risk assessment refer to the [Operational Strategy](#).

## DETAILED OPERATIONAL PLAN

The priority sector and locations remain unchanged. Overall priorities remain Food Security and Livelihoods, WASH, and Health. Activities will be scaled up accordingly as more income is received in the Emergency Appeal. In case of low funding coverage, the following shall be prioritized:

### Priority by sector:



- 1) FSL (food security and livelihoods) remains the most urgent priority, as the combined impacts of the drought and other disasters through 2020-2022 have rendered many communities food insecure and needs are expected to rise in the coming months. This will be done through CVA (Cash and Voucher Assistance).
- 2) WASH is increasingly becoming one of the most urgent priorities as the aridness of the land the drying of strategic water reservoirs (berkads, Shallow wells) and lack of fuel for motor-powered boreholes are driving severe water shortages across the affected regions. Furthermore, some livelihood activities are dependent on people having access to water.
- 3) Health remains a priority, particularly as increased migration and overcrowding in hotspots are driving disease outbreaks, alongside increased malnutrition across Somaliland and Puntland.

### Priority by location:

- Somaliland: Sool, Sanaag, Awdal and Togdheer. Maroodijeex, Sahil
- Puntland: The drought conditions have spread equally across all three regions, with severely affected communities in Bari, Nugal, and Mudug alike. Bari province is the largest province and also has hard-to-

reach communities, hosts most IDP settlements in Puntland. Therefore, it is a priority by location, but the response is equally needed in Mudug and Nugal.

## STRATEGIC AREAS OF FOCUS

	<p><b>Livelihoods and basic needs</b>  <b>People Reached: 23,988</b>  Male: 11,754  Female: 12,234</p>	
<b>Outcome 1: Communities, especially in disaster and crisis-affected areas, restore, and strengthen their livelihoods</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
% of people assisted who have basic needs met, restored, and strengthened their livelihoods	80%	T.B.C.
<b>Output 1.1: Skills development and/or productive assets and/or financial inclusion to improve income sources are provided to target population (off-farm livelihoods).</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
# of households reached with cash transfers for agricultural input and fishing gear	2000 HHs (revised)	Pending funding
# of households supported in small business initiatives for drought-displaced women	500 HHs (revised)	60 HHs/women (SL)
# of small businesses, farmers, and agro/pastoralists trained in the diversification of income sources	2,500 (new)	Pending funding
# of communities affected by locusts supported with surveillance, tools, and spraying (Somaliland 6, Puntland 3)	9	Pending funding
<b>Output 1.2: Basic needs assistance for livelihoods security, including food is provided to the most affected communities</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
# of households reached with awareness sessions on safe cash transfer (Somaliland 4,200hhs, Puntland 2,100hhs)	6300 HHs	3,998 (1040 SL and 2958HHs PL)
# of persons trained in entrepreneurial skills, financial literacy, and management (Somaliland 200hhs, Puntland 100hhs)	300 HHs	Pending funding
# of schoolteachers and farmers trained in climate-smart activities (Somaliland 240hhs, Puntland 180hhs)	420	Pending funding
<b>Output 1.3: Households are provided with unconditional multi-purpose cash grants to address their basic needs</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
# of households reached with multipurpose cash for basic needs	15,000 HHs (revised)	3,998 HHs (SL: 1040, PL: 2958HHs)
# of communities with market assessments and regular updates (per community)	9 (revised)	With FSL cluster
<b>Progress towards Outcome</b>		
<p>Most of the activities remained unfunded and activities are planned in the coming months. After the revision of the Emergency Appeal, some indicators were suspended, and new ones were included as reflected in the table above.</p>		
<p>Most activities focused on multipurpose cash for basic needs to meet the urgent needs of food-insecure families across the 9 regions, specifically to the most vulnerable and drought-affected households. The cash transfer values were based on the latest regionally disaggregated transfer value rates presented by the Somalia Cash Working Group dashboard in September 2022. The table below is an overview of the multi-purpose cash grant disbursements. A total of</p>	<p><i>Women receiving cash assistance</i></p>	

**23,988 people** have been reached with livelihoods- and basic needs support. Cash transfers were all done through mobile money, through the financial service provider agreement with Telesom in Somaliland and Golis in Puntland. Mobile money is deemed the most appropriate method for CVA, as approximately two-thirds of households own mobile phones, and even 59% of nomadic households. Mobile money has been confirmed as the preferred modality by targeted communities through community surveys with affected people in the form of community gatherings, individual interviews, and in consultation with other stakeholders, such as the Somalia Cash Working group.

Other activities planned under the Emergency Appeal are pending new income, and livelihoods and resilience-building activities will be prioritized alongside the life-saving cash response in the upcoming months.

### Market assessments

SRCS currently bases its CVA activities on market assessments carried out by the Food Security and Livelihoods Cluster (FSL) to inform CVA priorities. Additionally, SRCS took part in an interagency drought rapid assessment, which was led by the SRCS in the Awdal region.

### Households reached with multipurpose cash for basic needs

#### Mogadishu Coordination Office – Puntland

SRCS responded with unconditional cash distribution targeting **17,748 people (2,958HHs)** in Puntland. Training/orientation of volunteers on assessment and registration of eligible beneficiaries was carried out in each of the three branches:

- **Galkayo branch**, Mudug Region - 761HHs
- **Garowe branch**, Nugal Region – 1,310HHs
- **Bosaso branch**, Bari Region - 887HHs

Each of the three branches procured the essential PPE for volunteers to use during assessments. Unconditional cash distributions were conducted as part of a 2-month installation of cash grants, with a 3<sup>rd</sup>-month installation being planned for upcoming activities. One community is yet to receive the second disbursement of cash, due to the limited funding, but this community will be targeted with a 2<sup>nd</sup> distribution with incoming funding. Targeted households have been identified for eligible cash grants based on criteria that consider the PGI minimum standards in emergencies. The table shows a summary of the multi-purpose cash grant disbursements in Puntland.

There're also some additional pledges from the Danish Red Cross and Finnish Red Cross to contribute to the responses to the hunger crises.

Region	District	1st month HHs	2nd month HHs
Bosaso	Bari-Adizone, Wardheer, Jurile & Qormo burcad	200	200
	Bader Bayla	430	430
	Adizone, Jidad & Qormo burcad	257	Planned in Oct
Galkayo	Mudug- Jarriban & Harfo districts	256	256
	Furat IDPs, Roh, Kheyrdoon IDP	150	150
	Mudug – Elgardii	155	
	Mudug – Darresalam, Lanmadow and Kalabeyr	200	Planned in Oct
Garowe	Nugal - Cuun, Falfalax & Bendersalam	150	150
	Nugal - Dangoroyo, Yombeys, Cambare, Kalabeyr, Koryal, Bendersalam, Biyocade, Sunnijiif and Falfalax	400	400
	Nugal - Kurbarwaqo, Garowe IDP, Dalsan & Tuur	240	240
	Nugal - Dangoroyo, Burtinle & Garowe IDPs	520	Planned in Oct
<b>TOTAL HOUSEHOLDS REACHED</b>		<b>2,958</b>	<b>1,826</b>
<b>TOTAL PEOPLE REACHED</b>		<b>17,748</b>	<b>10,956</b>

Bari is one of the three regions of Puntland and Bosaso is its capital city. The region is currently experiencing intolerably hot weather conditions which have forced many residents to move to other places like Gardho and Garowe, especially women and children. At the same time, the country is going through exceptionally severe drought conditions which have caused a lot of people from the rural villages and pastorals to move to the main towns in search of assistance.

An assessment conducted by the SRCS branch and local authorities showed that Jurile is among the villages worst hit by the drought and the existence of burden from the people who had fled from the rural areas. For that reason, it has been identified that people from this region are in urgent need of humanitarian assistance including health, shelter, and food assistance.

In this regard, the Bosaso branch distributed in-kind food to 152 HHs which were among the most vulnerable Households in Jurile through the donation of Kuwait Red Crescent Society.



*Lactating mother received multi-purpose cash grants buying food from shop*

The PMER and operations team conducted post-distribution Monitoring (PDM) assessments in December and January. The PDMs mostly reflected that the assistance was suitable and complemented community needs. PDM data was collected via KoBo collect to standardize the data collection process.

The PDM findings indicated that the beneficiaries' overall level of satisfaction was 100% and that 100% of respondents indicated that the selection procedure was transparent and fair. It was essential to determine if the DREF represented beneficiaries' top priorities. Thus, 75% strongly agreed that PDM distributions focused on beneficiary needs. The positive feedback has made it easier to continue using the same intervention strategy that the beneficiaries are happy with.



*In-kind distribution by Bosaso Branch*

### **Challenges and lessons learnt.**

- SRCS is receiving support from the Netherlands RC 510 group on data management and IM for CVA. Data collection resources, particularly hardware for data collection, have been inadequate, leading to the use of volunteers' phones during data collection, compromising data protection. Available data analysis software is also limited, and there is a need for capacity building by using advanced software. The issue has been highlighted and will be prioritized in future budget allocations.
- The collection of community feedback and complaints in some areas took a very long time since there were no systematic community feedback mechanisms at the time of implementation. Following this challenge, a strong community feedback mechanism was established in the areas where it was lacking. This mechanism includes several modes: a toll-free hotline, community-based surveillance (CBS) through trained community volunteers, regular monitoring visits by the programme staff, and referral systems operated by mobile and community clinics operated by SRCS. The biggest issue identified was the limited resources to support the CVA component, as the targeted population, according to the feedback, shall be expanded to include those who were excluded but are now on the brink of being destitute because of the continuing crisis.
- There's no CEA strategy for the national society and all CEA activities are not harmonized resulting in each sector having a parallel CFM in place. Furthermore, the national society doesn't have a dedicated staff for the

CEA. This triggers the additional technical support to be provided by the IFRC to SRCS on harmonising CEA channels currently in use.

### Hargeisa Coordination Office - Somaliland

Community mobilization on cash transfer was done which engaged communities in the identification and selection of beneficiaries by ensuring inclusion. The process involved women, elders, youth, and community leaders who openly discussed the criteria for beneficiary selection set, and ensured that all vulnerable groups were included such as women household headed, pregnant and lactating mothers, families with <5 malnourished children, also paying attention to disabled people (physically and chronically ill), orphaned, elderly people/aged with no source of income, etc. Identification of beneficiaries was done through community leaders and local authorities, and 20% of the beneficiaries were verified. Inception meetings were held in all four branches, and 32 volunteers and staff were trained on cash transfer programs (8 per region). From December 2021-February 2022, 540 households received cash assistance for three months (three installments) in targeted locations.

Region	District	1st mth HHs	2nd mth HHs	3rd mth HHs
Sool	Lasanod	90	90	90
	Hudun	125	125	
Sanaag	Erigavo	90	90	90
	Elafweine	125	125	
Togdheer	Odweine	151	151	90
	Ainabo	64	64	
Awdal	Zeila	215	215	90
Sahil	Sheikh	90	90	90
Maroodijeex	Cadaadley	40	40	40
	Allaybaday	50	50	50
<b>TOTAL HOUSEHOLDS</b>		<b>1,040</b>	<b>1,040</b>	<b>540</b>
<b>TOTAL PEOPLE</b>		<b>6,240</b>	<b>6,240</b>	<b>3,240</b>

To date, **6,240 people (1,040 HHs)** have received 2<sup>nd</sup>-month cash assistance as summarized in the table. Communities in Sool, Sanaag, Togdheer, Awdal, Sahil, and Maroodijeex have received multi-purpose cash grants planned for 3-month disbursements. Some communities are yet to receive the third disbursement of cash, due to the limited funding, but these communities will be targeted with a 3<sup>rd</sup> distribution with incoming funding.

*Community mobilization, inception meetings, verification of beneficiaries, and post-distribution monitoring (PDM) were done using Kobo Collect data platforms. Registration of beneficiaries was also completed in six regions. Once the disbursement was done, the mobile company provided a distribution report for reconciliation.*

**Lesson learnt workshops** were conducted on September 30<sup>th</sup> in Burao (Togdheer), Lasanod (Sool), Erigavo (Sanaag), and Borama (Awdal) branches. Participants were representatives from the targeted population, community leaders/local authorities, volunteers involved with the cash-based project, representatives from the NADFOR Cash Working Group, and branch coordinators to see the overall impact of the operation as well as identify gaps for future resource mobilization.



*CVA Beneficiary registration/fingerprint in Awdal*

### Support for small business initiatives for drought-affected women


There were no additional beneficiaries of the small business initiatives. 60 displaced drought-affected women were given one-off cash grants (250 USD per woman) in the six branches as livelihood support/income-generating activities. 10 women in each of the following districts: Lasanod (Sool Region), Erigavo (Sanaag), Odweine (Togdheer), Zeila (Awdal), Sheikh (Sahil), Hargeisa (Marodijeex)

### Challenges and lessons learnt

Limited resources and funding income coupled with increasing needs have been the greatest impediment to implementation. The compounding impacts of the drought, desert locusts, and increased displacement from both other regions of Somalia as well as from Ethiopia have further strained the resources and increased the population in need in Somaliland. The current challenge is the severity of the drought situation in Somaliland/Somalia where high food

insecurity, water scarcity, and health-related problems are reported especially pastoral and agro-pastoral communities are highly affected by both livelihood of the people and livestock lost. Communities continue to advance their expectations of SRCS.

The planned activities under the [Emergency Appeal Revision 1](#), are dependent on the receipt of further financial contributions to the Emergency Appeal, which are very urgently needed, as the drought situation intensifies and needs across Somaliland and Puntland are projected to increase.

	<b>Health</b> <b>People Reached: 346,789</b> Male: 169,926 Female: 176,863	
<b>Outcome 1: The immediate risks to the health of affected populations are reduced</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
# of people whose immediate health risks are reduced	560,000 (revised)	292,698 (SL: 147,581, PL 145,117)
<b>Output 1.1: The health situation and immediate risks are assessed using agreed guidelines</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
# of assessments conducted to identify health needs, condition of health facilities, and/or medical service gaps in target communities	9	1
<b>Outcome 2: The immediate risks to the health of the affected populations are reduced through improved access to medical treatment</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
# of affected populations with improved access to medical treatment.	560,000 (revised)	346,789
<b>Output 2.1: Improved access to health care and emergency health care for the targeted population and communities.</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
# of mobile health clinics deployed	15 (revised)	8 (SL 6, PL 2)
# of days the mobile health clinics deployed	120	400 PI
<b>Output 4.4: Transmission is limited through early identification and referral of suspected cases using community-based surveillance, active case finding, and/or contact tracing</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
# of people reached through CBS programme (Somaliland 8,000 ppl, Puntland 4,000 ppl)	12,000	Pending funding
<b>Outcome 5: Less severe cases of disease or malnutrition are treated in the community, with referral pathways for severe cases established</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
% of people reached with Nutrition Screening Services through mobile clinics 20% of the total target population	112,000 (revised)-20%	75,965 (SL: 51044, PL 24,921)
<b>Output 5.2: Acute malnutrition cases are managed in the community, with referrals established for severe cases.</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
# of nutritional education sessions (Somaliland 60 ppl, Puntland 30 ppl)	90	Pending funding
# of people reached with nutritional supplements (Somaliland 8,000 ppl, Puntland 4,000 ppl)	12,000	Pending funding
<b>Outcome 6: The psychosocial impacts of the emergency are lessened</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
% of people in need provided with PSS	100% (revised)	On going
<b>Output 6.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
# of volunteers trained in PSS (Somaliland 60 ppl, Puntland 30 ppl)	90	Ongoing
# of staff and volunteers provided with PSS	Needs-based	Ongoing
<b>Progress towards Outcome</b>		

Most of the activities remained unfunded and activities are planned in the coming months. After the revision of the Emergency Appeal, some indicators were suspended, and new ones were included as reflected in the table above. To date **75,965** have been reached through nutrition screening services while **346,789** have been reached through medical treatment services.

#### Assessment of health needs and health facilities

No new assessments have been conducted. In 2019 Norcross supported SRCS to conduct a baseline assessment of the 7 health facilities in the Galkayo branch to establish needs and gaps of the health facilities and in 2021, conducted an endline evaluation of the Primary Health care program. The findings of the assessment informed the activities carried out under the Emergency Appeal.

Regular monitoring of the static and mobile health clinics continued including supervision of the status of the physical infrastructure of the clinics, the quality-of-service provision, and patient satisfaction level through interviews of the clients, monitoring of disease outbreaks, and among areas.

Some of the challenges that have been identified through these assessments include a dysfunctional E-warn system due to gaps in funding, lack of incinerators and placenta pits in all clinics in Bosaso and Garowe branches and some in Galkacyo branch, poor physical appearance in some of the clinics, limited water facilities in some of the clinics, and limited staff in some of the clinics. Both branches also identified that a lack of funding for the static health clinics would be critical, as the clinics will not be able to continue operating.

#### Emergency Mobile Health Clinics

The mobilization and deployment of Emergency Mobile Health Clinics (EMHC) remain critical in reaching remote, nomadic areas, and hard-to-reach communities with health services. The EMHCs remained the same:

- Routine immunization of children under the age of 5 years against the childhood vaccine-preventable diseases
- Immunization of women of childbearing age (pregnant and non-pregnant) against tetanus
- Screening of children less than 5 years to monitor their growth, provision of nutritional supplements for those assessed to be malnourished, and referral of complicated cases for enhanced management.
- Safe motherhood (Ante-Natal Care, Delivery, and Post-Natal Care) with the provision of supplements and referral of complicated cases to the hospitals.
- Treatment of common ailments and referral of complicated cases for further management at the next level of care.
- Management of diarrhoea through the Oral Re-Hydration Corner.

#### Mobile health clinics deployed - Puntland:

The needs remain high and exceed the capacities of the two clinics in Puntland. The branches have deployed two emergency health mobile clinics in the Galkacyo branch and Bosaso branch respectively. The mobile clinic under the Galkayo Branch has been operating in the Galdogob district to deliver health and nutrition interventions to the people affected by the drought, though the mobile clinic's operational period has come to an end. The branch has re-established the emergency mobile clinic to work in the Jarriban district and its surrounding areas which are among the severe drought-hit areas. The Bosaso Branch has deployed an emergency mobile clinic operating in the area of Iskushuban district to deliver health and nutrition interventions from June until September.

SRCS held a meeting with the Ministry of Health for Puntland and HADMA, regarding concern about the influx of nomadic communities from the most severely hit provinces (Mudug, Nugal, Sool, and Gardafu) moving to Kakar and Hayland in the Qardo district in search of water and pasture. HADMA and MoH reported that overcrowding was leading to disease outbreaks including measles, water-borne diseases, flu-like symptoms, and malnutrition cases, leading to an urgent need for increased mobile health clinic support. SRCS relocated the 2 mobile health clinics under the Bosaso branch to the Qardho and Jarriban districts.

The activities carried out under the two mobile clinics and two static clinics supported through the hunger crises in Bosaso branch are:

- A total of **145,117** people were treated
- **6,031** reached with Ante-Natal Care services
- **3,429** normal deliveries assisted
- **24,921** children were screened to monitor growth



SRCS Emergency mobile clinic in Bosaso branch providing Ready-to-use therapeutic feeding sachets to severely malnourished children in Dharoor village

#### Overall health responses to the hunger crises

- The table below captures the health data from SRCS clinics and emergency mobile clinics in Puntland from July 2021- Sep 2022. The intensity of the drought has had severe impacts on the health of the affected populations in Somalia. The operational areas of the health services both the static and the emergency mobile clinics were the most affected areas in Puntland as such the continuation of health services supported the improve the health status of the affected people.

Region	Donor	year/quarter	Beneficiary reached	Total OPD under 5	Total OPD over 5	Growth monitoring			Safer motherhood		
						Normal	SAM	MAM	ANC	PNC	Normal delivery
Puntland	IFRC	Q3 -2021	35597	8039	12522	6509	182	897	4261	1925	1262
		Q4 -2021	36802	8629	12676	6400	279	795	4668	2081	1274
		Q1-2022	37110	6461	8090	7902	262	2301	6224	4860	1010
		Q2-2022	60390	13275	23341	8008	340	2032	7931	4007	1456
		Q3 -2022	2565	742	802	405	15	193	133	136	139
	NorCross	Q3 -2021	42201	8820	13995	8920	224	617	5576	2817	1232
		Q4 -2021	45958	9970	15134	9970	409	999	5897	2383	1196
		Q1-2022	47354	10278	15861	10278	396	969	5570	2785	1217
		Q2-2022	48601	10736	16037	10736	505	1252	5311	2713	1311
		Q3 -2022	29718	6038	10007	6015	373	549	3628	2155	953

#### Challenges and lessons learnt

The funding for 4 static health clinics in Garowe and Bosaso in Puntland ended on February 28th, 2022. Despite 2 of them under Bosaso branch getting supported under the hunger crises appeal and the temporary support from the Ministry of health respectively, they remain a gap. SRCS and IFRC continue to mobilize for funding from the PNS' to ensure the continuity of the mobile and static clinics.

**Mobile health clinics deployed - Somaliland:**


Six MHCs have been deployed in Togdheer (2 clinics), Sool (2), Eilafweine (1), and Awdal (1) with a primary focus on reaching infants and young children, children under 5 years, pregnant and lactating women, immunization of women of childbearing age (15-49 years, pregnant and non-pregnant), and ante-natal, delivery, and post-natal care, with health services. The five top diseases observed in the clinic are Acute Respiratory Infections, Urinary tract infections, Skin infections, watery diarrhoea, and eye infections.

The activities done in the six mobile clinics are:

- A total of 255,223 people were treated
- 26,388 reached with Ante-Natal Care services
- 2,313 normal deliveries assisted
- 51,044 children screened to monitor growth



*Mobile Health Clinics providing nutrition services to remote and nomad communities in Somaliland*

	<p><b>Water, sanitation, and hygiene</b>  <b>People Reached: 436,740</b>  Male: 214,002  Female: 222,738</p>	
<p><b>Outcome 2: Sustainable reduction in risk of waterborne and water-related diseases in targeted communities in the recovery phase</b></p>		
<p><b>Indicators</b></p>	<p><b>Target</b></p>	<p><b>Actual</b></p>
<p># of people supported through the WASH programme (Somaliland 120,000 ppl, Puntland 60,000 ppl)</p>	<p>180,000</p>	<p>436,740 (SL: 11,520 PL: 425,220 ppl)</p>
<p><b>Output 2.1: Continuous monitoring and evaluation of water, sanitation, and hygiene situation is carried out in targeted communities</b></p>		
<p><b>Indicators</b></p>	<p><b>Target</b></p>	<p><b>Actual</b></p>
<p># of assessments carried out</p>	<p>9</p>	<p>Pending funding</p>
<p># of volunteers and staff supporting the WASH programme monitoring (Somaliland 60 ppl, Puntland 30ppl)</p>	<p>90</p>	<p>PL- 32</p>
<p><b>Output 2.2: Community managed water sources giving access to safe water is provided to the target population</b></p>		
<p><b>Indicators</b></p>	<p><b>Target</b></p>	<p><b>Actual</b></p>
<p># of people accessing safe water</p>	<p>560,000 (revised)</p>	<p>16,383 (SL) 98,383ppl (PL)</p>
<p># of community water points rehabilitated and maintained (Somaliland 20, Puntland 10)</p>	<p>30</p>	<p>28 (SL: 16 PL: 12)</p>
<p># of water systems in SRCS clinics rehabilitated (Somaliland 6, Puntland 3)</p>	<p>9</p>	<p>Pending funding</p>
<p># of households supported with ceramic filters (Somaliland 2,000 hhs, Puntland 1,000 hhs)</p>	<p>3,000</p>	<p>Pending funding</p>
<p># of households supported with WASH NFI's (Somaliland 2,000 hhs, Puntland 1,000 hhs)</p>	<p>3,000</p>	<p>Pending funding</p>
<p># of schools supported through disinfection of water, by SRCS volunteers with technical supervision of Ministry of Water Resources (Somaliland 6, Puntland 3)</p>	<p>9</p>	<p>Pending funding</p>
<p># of people supported with water trucking (Somaliland 1,600 ppl, Puntland 800ppl)</p>	<p>2,400</p>	<p>PL: 2,713 ppl</p>
<p><b>Output 2.3: Improved access to and use of adequate sanitation by the target population. is provided to target population</b></p>		
<p><b>Indicators</b></p>	<p><b>Target</b></p>	<p><b>Actual</b></p>
<p># of people who have access to adequate sanitation (Somaliland 8,000 ppl, Puntland 4,000 ppl)- of households supported with WASH NFI's</p>	<p>12,000</p>	<p>PL: 96,000 ppl</p>
<p># of latrines constructed in affected IDP settlements (Somaliland 6, Puntland 3)</p>	<p>9 IDP camps</p>	<p>Pending funding</p>
<p># of latrines in SRCS clinics (Somaliland 6, Puntland 3)</p>	<p>9</p>	<p>Pending funding</p>
<p># of households trained in solid waste management (Somaliland 1,300 HHs, Puntland 700 hhs)</p>	<p>2,000</p>	<p>Pending funding</p>

<b>Output 2.4: Hygiene promotion activities are provided to the entire affected population.</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
# of people reached with hygiene promotion (Somaliland 120,000 ppl, Puntland 60,000 ppl)	560,000 (revised)	PL: 12,487
# of volunteers trained in PHAST and CHAST (Somaliland 60 ppl, Puntland 30 ppl)	90	62 (SL: 48, PL: 14)
# of schools supported through CHAST (Somaliland 6, Puntland 3)	9	Pending funding

#### **Progress towards outcome**

Some activities remained unfunded, and activities are planned in the coming months. After the revision of the Emergency Appeal, some indicators were suspended and targets revised as reflected in the table above.

The drought situation has contributed to severe water shortage and complete or almost complete drying of water points. SRCS has prioritized the provision of emergency WASH services to communities in late 2021/2022. As a result, WASH activities have reached **436,740** people, *particularly through hygiene- and sanitation promotion campaigns which have a large reach, as well as fuel subsidies and a larger number of people targeted with water trucking due to acute needs.*

Priority was considered to meet acute needs in terms of emergency water provision and sanitation. In addition, the low funding has led to delays in some activities including latrine construction, solid waste, management training, CHAST training in schools, and distribution of ceramic water filters and NFIs. These activities are important to ensure sustainable WASH outcomes for communities, and thus further funding is highly needed.

#### **WASH activities - Puntland**

**It is estimated a total of 70,870 HHs (425,220ppl) people were reached through WASH activities.**

**Garowe Branch** delivered fuel subsidies to the motors of 6 strategic boreholes in Garowe Burtinle, Eyl, and Dangoroyo districts reaching a total population of 18,000 HHs (at 3000 HHs per borehole<sup>1</sup>). The procurement process for the rehabilitation of 2 additional boreholes is about to be finalized, and implementation is underway in the mid of October 2022. A total of 12 water points were rehabilitated in Puntland (5 boreholes and 7 berkedes).



*SRCS handing over 3 water storage tanks to Kheyrdon IDP community chair*

**Galkayo Branch** has rehabilitated 3 boreholes (Gobsho, Fardaharis, and Agoonta boreholes) reaching 6,270 households (approx. 37,620 ppl) and around 10,000 animals including camels, goats, and sheep. The first phase of fuel subsidization to the most strategic boreholes has been distributed in Bubi, Balanbal, Barwago, and Balibusle reaching a total of 12,000 households and 20.000 animals including camels, goats, and sheep.

Water trucking services reached **2,713 HHs** as shown below:

- Shakaal (11 water trucks to 470HHs),
- Labilamane (11 water trucks to 500HHs),
- Tulo xabibo (11 water trucks to 300HHs),
- Kheyrdon IDP (10 water trucks and distribution of water storage tanks to 393HHs),
- Ceelgocosaale (11 water trucks to 600 HHs)
- Ceel xagar (11 water trucks to 450 HHs).

PHAST and CHAST training was conducted for 14 community volunteers (7 male, 7 female) in Gacnafale village, a strategic village that accommodates two strategic boreholes and serves two communities from Puntland and Galmudug.

Planned activities:

<sup>1</sup> 3000 HHs per borehole is the estimated number of households benefitting from boreholes provided by the WASH cluster and used by Somali authorities. The number includes households using boreholes for drinking water, as well as households that use boreholes for livestock. (NB: A standardized figure of 3,000HHs per borehole has been agreed within the WASH cluster)

- Rehabilitation of 1 borehole for the Cagaran community which targets 3000HHs as the standard for the WASH Cluster in Puntland.
- Distribution of fuel subsidy to 6 motor run boreholes reaching 18,000 HHs (Water trucking is also planned to target drought-affected communities in Afgub, Ina Xuuraan, Laandheere, and Daressalam).



*Rehabilitated berkad in Tuli village*



*Bosaso volunteers handing over fuel subsidies to Jidad community*

**Bosaso branch** distributed sanitation tools to 16,000HHs while through hygiene promotion, 2,000HHs were reached in Benderbeyla. Hygiene promotions covered the same beneficiaries who received sanitation tools. The branch recently rehabilitated 5 Barkedes for Jidad, Qormoburcad, Adizone, Alhamdulillah, and Gabanti communities and decommissioned them all to the affected communities while further planning for the rehabilitation of 2 strategic berkads (Guudcad and Jidad) communities is planned in the coming month.

Bosaso branch distributed fuel subsidies to two key strategic boreholes in Bari particularly Jidad and Adizone for purpose of pumping more water to the drought-affected people while 70 households among the drought-displaced people in Qardho will be reached with water bags for water conservation in October.

#### **Challenges and lessons learnt:**

- Due to the widespread and increasing critical water shortage, the government is appealing to humanitarian partners to respond rapidly, despite the procurement processes that often may take longer processes. Many water boreholes are waiting to be rehabilitated.
- The water needs in the communities continue to massively increase and funding remains insufficient to respond to these needs.
- IDP camps and host communities in Puntland do not have access to safe and clean water for household and livestock consumption. Many nomadic populations travel long distances for fodder and water hence the urgent need to ensure the water points in these remote villages are rehabilitated and protected.
- Access to sanitation facilities has been an issue in the IDP settlements for internally displaced people (IDPs) in Puntland, which are often overcrowded with limited sanitation facilities. Diseases spread easily within the IDP families because they lack both access to water and knowledge of proper hygiene practices like faecal waste handling and the proper use of latrines.

- These poor hygiene and sanitation conditions, combined with the high concentration of people living in camps, increase exposure to diarrheal diseases. Recently, it has been reported that the drought has displaced people (to various data, some 340 thousand people were displaced because of the droughts as of August 2022), leading to overcrowding in the IDP settlements, which exacerbates the poor conditions of the settlements in Galkacyo, Garowe, and Bosaso.

### WASH activities – Somaliland

A total of 16 berkads were rehabilitated in the six regions of Somaliland:

- Sool (4) – 2 in Hudun, and 2 in Ainabo
- Sanaag (3) – Both in Erigavo
- Togdheer (3) – Both in Burao
- Awdal (2) – Borama & Baki
- Sahil (2), both in Sheikh.
- Maroodijeex (2), 1 in Faraweyne, and 1 in Cadaadley.



Rehabilitated berkad in Tuli Village

The rehabilitated berkads supplied a total of **11,520 people** with access to water.

A total of 48 volunteers (8 under each branch) were trained on PHAST and Operation & Maintenance (O&M).

A total of 33 additional berkads will be rehabilitated between November –Dec 2022, as the procurement process is ongoing.

In addition, ECHO PPP partners conducted a monitoring visit to the Emergency Appeal-supported communities on WASH and CVA interventions in the Awdal region.



### Protection, Gender, and Inclusion

**People Reached: Pending funding**

Male:

Female: 330

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

Indicators	Target	Actual
# of people supported through the PGI programme (Somaliland 48,000 ppl, Puntland 24,000 ppl)	72,000	PL- 618 ppl
<b>Output 1.1: Programmes and operations ensure safe and equitable provision of basic services, considering different needs based on gender and other diversity factors.</b>		
Indicators	Target	Actual
# of staff and volunteers oriented in PSEA, PGI in emergencies, CMR, and PFA (Somaliland 160ppl, Puntland 80 ppl)	240	Implemented by PNS bilaterally: 524 staff and volunteers
<b>Output 1.2: Programmes and operations prevent and respond to sexual- and gender-based violence and other forms of violence, especially against children.</b>		
Indicators	Target	Actual
# of people reached with FGM prevention and awareness campaigns (Somaliland 72,000 ppl, Puntland 48,000ppl)	72,000	PI - 207 ppl
# of volunteers, staff, and contractors who sign, are screened for, and are briefed on child protection policy/guidelines	All	Pending funding
Minimum percentage of targeted reached with PGI/SGBV	75% (New)	Planned
% of staff and volunteers oriented on the Prevention of Sexual Exploitation and Abuse (PSEA)	100% (New)	Planned
# of dignity kits distributed (Somaliland 800 HHs, Puntland 400 HHs)	1,200	PL - 330 ppl
<b>Progress towards Outcome</b>		

Some activities remained unfunded, and activities are planned in the coming months. After the revision of the Emergency Appeal, some new indicators were added as reflected in the table above.

PGI has been integrated into the other response activities, with the application of gender analysis to the targeting and implementation of FSL, health, and WASH activities. Gender Focal Persons were identified to coordinate gender activities in the respective operational areas

Through SRCS programming, staff and volunteers followed the DAPS principles, which allow everyone to have an equal opportunity, and no one is left behind, left out, or left unsafe when targeting the vulnerable groups to be included through the implementation initial stage of projects. It also supports ensuring communities have full participation during the initial stage of the project. The volunteers' teams are balanced in terms of gender representation to avoid gender biases and strengthen gender participation and ensure women's participation in community engagement sessions.

Volunteers are trained by PMER or branch teams before engaging with communities and are accompanied by supervisors to ensure the inclusion of CEA and PGI. There is still a need for more SRCS volunteers to be trained on PGI and CEA before conducting targeting activities, as well as refresher training for those who have previously received the training.


PNS continue providing training on PSEA aspects to SRCS in Somaliland bilaterally. To date, 524 volunteers and staff were trained to make this capacity available to SRCS for further integration into its operations across the board.

CMR and SGBV referral pathways were trained PHC staff, Mobile clinic staff, BHOS staff, and community volunteers. In the Galkacyo branch, 2 female officers have been trained on CMR/PFA by the Ministry of Health, to be ToTs. The training was cascaded to the clinic staff and volunteers, reaching 75 SRCS volunteers (45 female and 30 male) and 14 clinic-based staff (12 female and 2 male) in the SRCS Galkayo branch.

#### Challenges and lessons learned:

There is a low level of understanding in the community and a lack of funding for this project to strengthen its impact on existing projects. There is a lack of PGI integration and the poor performance of patients/survivors' referral process for additional services that do not yet exist in most areas SRCS is working.


330 dignity kits have already been distributed out of the targeted 1,200. There is a need for more as the demand is huge. This support is a critical gap planned to be addressed with further available funding. There is also an urgent need to address critical water shortage and health risks connected to displacement and severe drought as prioritized by the Government. With the limited funding, it was not possible to reach the targeted people in the emergency appeal, and the need for PGI in the emergency is highly needed.

	<p><b>Disaster Risk Reduction</b>  <b>People Reached: 4,758</b>  Male: 2,331  Female: 2,427</p>	
<p><b>Outcome 1: Communities in high-risk areas are prepared for and able to respond to disaster</b></p>		
<p><b>Indicators</b></p>	<p><b>Target</b></p>	<p><b>Actual</b></p>
<p># of people reached with awareness-raising on preventable disaster risks (Somaliland 180,000 ppl, Puntland 90,000 ppl)</p>	<p>270,000</p>	<p>Pending funding</p>
<p># of people reached through DRR and Climate Change Adaptation activities</p>	<p>560,000 (New)</p>	<p>Pending funding</p>
<p><b>Output 1.1: Communities take active steps to strengthen their preparedness for timely and effective response to disasters.</b></p>		
<p><b>Indicators</b></p>	<p><b>Target</b></p>	<p><b>Actual</b></p>
<p># of people who take active steps to strengthen their preparedness for timely and effective response to disasters (Somaliland 180,000 ppl, Puntland 90,000 ppl)</p>	<p>270,000</p>	<p>PL - 4,758 ppl</p>
<p># of people supported with NFIs in the case of displacement due to drought (Somaliland 4,000 ppl, Puntland 2,000ppl)</p>	<p>6,000</p>	<p>PL: 2,400 ppl</p>
<p># of community early warning systems established</p>	<p>9 (new)</p>	<p>Pending funding</p>
<p><b>Progress towards Outcome</b></p>		
<p>There is a high number of drought-displaced communities who have settled around Ceel Gocosaale in the Mudug region in search of pasture and water resources. SRCS procured and distributed water storage bags and shelter NFIs, to reach the 400 displaced HHs (2,400ppl) and 393 HHS (2,358ppl) in Kyeyrdon IDP in Galkacyo.</p>		

The Emergency Appeal operation is planned to support disaster preparedness in communities through community-based disaster risk reduction activities such as mobilizing communities for risk assessment for prevalent risks and identifying mitigation strategies, involving community resilience committees and other community representatives in analysing risks and community preparedness action plans, training of community members in first aid, disaster preparedness and response, and establishing multi-hazard early warning systems contributed to reducing risks and enhancing their preparedness. These activities remain highly important to secure sustainable outcomes of the intervention, however at this reporting period, and due to the low funding of the appeal, life-saving interventions in FSL, WASH, and Health were prioritized.

#### Challenges and lessons learnt:

- The lack of adequate pre-position stocks e.g., NFIs makes it hard to respond immediately as needs arise with drought and displacements.
- Funding gaps have led to prioritization of life-saving responses over disaster risk reduction initiatives, which are also much needed to build the resilience of communities towards the impacts of climatic shocks.
- Lack of an Emergency warehouse to store the needed DP stocks for Puntland operations despite the government's pledge to provide land for the course.

	<p><b>Community Engagement and Accountability</b>  <b>People Reached: 2,400</b>  Male: 1,176  Female: 1,224</p>	
<p><b>Outcome 1: Develop and deploy standardized approaches for community engagement, collection and use of qualitative community feedback data to better understand community perspectives</b></p>		
<p><b>Indicators</b></p>	<p><b>Target</b></p>	<p><b>Actual</b></p>
<p>% of staff and volunteers working on the operation who have been trained on community engagement and accountability</p>	<p>90% (New)</p>	<p>26%</p>
<p>% of queries/feedbacks received through the feedback mechanisms established that were responded to</p>	<p>80% (New)</p>	<p>83%</p>
<p>% of operational decisions made based on community feedback</p>	<p>100% (New)</p>	<p>100%</p>
<p><b>Progress towards Outcome</b></p>		
<p>Community feedback systems have been established, and so far, all feedback has been responded to. <i>Operational</i> staff and volunteers have been trained on community engagement and accountability.</p>		
<p><b>Challenges and lessons learnt:</b></p>		
<ul style="list-style-type: none"> <li>• The collection of community feedback and complaints in some areas took a very long time since there were no systematic community feedback mechanisms at the time of implementation. Following this challenge, a strong community feedback mechanism was established in the areas where this was lacking.</li> <li>• There's no CEA strategy for the national society and all CEA activities are not harmonized, resulting in each sector having a parallel CFM in place. The operation will address this gap. The current community feedback mechanism in place charges the beneficiaries for their calls which discourages many beneficiaries without airtime from calling and raising their complaints through the CFM as such, one unified hotline toll-free for the whole of Puntland operations is needed.</li> </ul>		

## ENABLING ACTIONS

<p><b>Influencing others as strategic partners</b></p>		
<p><b>Output: NS compliance with Principles and Rules for Humanitarian Assistance is improved</b></p>		
<p><b>Indicators</b></p>	<p><b>Target</b></p>	<p><b>Actual</b></p>
<p># of workshops conducted for governance and management</p>	<p>2</p>	<p>Pending funding</p>
<p><b>Output: Coordinating role of the IFRC within the international humanitarian system is enhanced</b></p>		
<p><b>Indicators</b></p>	<p><b>Target</b></p>	<p><b>Actual</b></p>
<p>Work in coordination with movement partners and organizations</p>	<p>3 partners engaged</p>	<p>3 partners engaged</p>
<p><b>Output: In the context of large-scale emergencies the IFRC, ICRC and NS enhance their operational reach and effectiveness through new means of coordination</b></p>		

Indicators	Target	Actual
SMCC and movement coordination (monthly)	18 months	5
<b>Output: IFRC and NS are visible, trusted, and effective advocates on humanitarian issues</b>		
Indicators	Target	Actual
Information on the EA published	3	1
<b>Progress towards Outcome</b>		

**Movement coordination:** IFRC and SRCS are observers in the Humanitarian Country Team (HCT) and a member of the Inter-Cluster Coordination Team (ICCT), and relevant IASC Clusters and inter-agency working group meetings/forums, including the Food Security Cluster. Cluster and working group members include NGOs, UN agencies, and public authorities. SRCS attends all active country clusters and presented planned and ongoing interventions. These clusters included Food security, cash working group, WASH, Health and nutrition, Protection, etc.

The IFRC Nairobi Cluster delegation, which covers Somalia and Kenya, conducts weekly staff meetings to review operation progress and take stock of implementation according to the plans and allocated resources as well as discuss the challenges and the suitable solutions to address them in time. Moreover, the cluster initiates in-country monthly partners' meetings. These meetings are organized virtually not only because of COVID-19 restriction measures but also because some partners are represented either from their HQs or positioned in other countries in Africa, not in Kenya.



*IFRC Head of Nairobi Cluster Delegation during the Partnership meeting in Hargeisa Somaliland*

Annual partnership meeting held in Hargeisa Somaliland Sept 6-7, 2022, attended by all PNs, ICRC, IFRC, and SRCS to share information on SRCS operations and priorities.

Annual partnership meeting held in Hargeisa Somaliland Sept 6-7, 2022, attended by all PNs, ICRC, IFRC, and SRCS to share information on SRCS operations and priorities.

#### **Meetings and field visits:**

- The movement partners meeting was held in Hargeisa from 6-7 September 2022. The main outcomes of the meeting included a shared understanding of the humanitarian response's context and content, the humanitarian landscape, and understanding of shared challenges in responding to humanitarian needs. Partners discussed the coherence and synergies in humanitarian response and explored new opportunities and current trends in partners' and donors' funding and areas of interest. SRCS has also provided updates on NSD aspects.
- A high-level mission on the Hunger crisis to Somaliland with the participation of partners from the Icelandic Red Cross, Finnish RC, British RC, Swedish RC, and Italian RC was organized from 4-6 September to feed into collective advocacy efforts and provided an opportunity to witness the impacts of the hunger crisis and how SRCS responds to it.
- SRCS attended PECT training as CVA surge deployment organized by IFRC held in Nairobi in July 2022.
- SRCS attended ICRC ECOSEC Quarterly Coordination meetings
- SRCS attended a Cash working group in the country.
- SRCS attended a food security cluster in the country.
- SRCS continued implementing a Forecast-based Financing (FBF) initiative supported by the



*PECT training in Nairobi July 04-9, 2022*

German Red Cross. An FbF delegate has been hired to consult for a feasibility study, which is underway.

**Communication and advocacy:** The IFRC Africa Region Communication unit is working in collaboration with the SRCS and the IFRC Somalia country representation to raise awareness and publicity, and to support resource mobilization efforts through increased visibility. Campaign awareness about food and health needs in Somalia was done by IFRC Africa regional office. Activities and outputs from the campaign were:

- On 11 August, the Communications Unit issued this [press release](#) and this [Newsroom package](#)—which resulted in media coverage from [The Guardian](#), and several other international outlets such as [AA](#), [La Prensa Latina](#), [China Daily](#), [Africa News](#), among many others, as well as radio spots by [UN News](#) and [SABC](#).
- Several tweets on IFRC Africa’s Twitter over August, using images, videos, and stories from SRCS staff and affected populations, to share visual stories about the situation.
- A 4-part series of videos on Switch TV, released in July, called Inside Somaliland – The Hidden Gem, with [episodes 1](#), [episode 2](#), [episode 3](#), and [episode 4](#).

In early February 2022, following the publication of several assessments highlighting the worsening conditions across Somalia and the Horn of Africa, the IFRC reacted promptly by making a plan of action for increased communications efforts to raise awareness and publicity on the situation.

The Emergency Appeal has been revised increasing Federation-wide funding requirements to CHF 14 million and extending the timeframe of the Appeal to 24 months. The [Operational Strategy](#) details the targets and budget allocation of the IFRC Secretariat’s support to the SRCS plan of CHF 9 million, for which the Secretariat has launched an [Emergency Appeal Revision 1](#). The balance of CHF 5 million required will be mobilized through bilateral fundraising through partner National Societies and SRCS domestic fundraising. The revised Appeal prioritizes immediate humanitarian assistance to the most vulnerable people and supports early recovery activities to enhance sustainability in line with the IFRC’s Pan Africa Zero Hunger Initiative. Funding contributions are very urgently needed to enable the Somali Red Crescent Society to continue and scale up its humanitarian assistance to those most affected by the worsening hunger *crisis*.

## Strengthening Coordination and Accountability

**Output: NS compliance with Principles and Rules for Humanitarian Assistance is improved through the integration of CEA activities**

Indicators	Target	Actual
% of complaints and feedback received are responded to by the NS	80%	100%

**Output: Strengthen planning, monitoring, evaluation, and reporting**

Indicators	Target	Actual
% of reports submitted on time	80%	0
# of assessments conducted	2	0

**Output: Supply chain and fleet services meet recognized quality and accountability standards**

Indicators	Target	Actual
Logistics plan in support of the EPoA	Needs basis	Ongoing

**Output: Financial resources are safeguarded; quality financial and administrative support is provided contributing to efficient operations and ensuring effective use of assets; timely quality financial reporting to stakeholders**

Indicators	Target	Actual
# of finance training completed	1	0

**Output: Effective and respected surge capacity mechanism is maintained.**

Indicators	Target	Actual
# of surge profiles deployed	3	0

**Output: IFRC staff shows good level of engagement and performance**

Indicators	Target	Actual
# of staff performance reviews completed	15	0

**Output: Staff security is prioritised in all IFRC activities**

Indicators	Target	Actual
# of operational areas that have an up-to-date security plan in place	3	1

### Progress towards Outcome

There were new activities due to limited funding. Pending activities are planned in the coming months upon funding commitments.

SRCS continues to get the latest updates/assessments from the branches, communities, and local authorities on the current emergency crisis. In November 2021, drought impact reports were carried out in all 9 targeted branches, confirming the increasing needs and critical need for further funding. The reports were consolidated into a report and shared with partners. SRCS presents updates using the 3W matrix on a bi-weekly basis, as well as narrative reports.

Program teams and PMER staff work together to have clear communication and information sharing, recording lesson learnings, and filling the stakeholder interests regarding the project updates through periodic reports, review meetings, and technical working group meetings to present the achievements, challenges, and way forward. Since January 2022, the IFRC PMER staff has been working bilaterally with PMER staff from SRCS to support and strengthen capacities in PDM, assessments, and PMER in general.

SRCS staff and volunteers are already putting CEA into practice every day, for example through the health committees that help SRCS with the delivery of emergency health services by mobilizing fast responders. SRCS also has toll-free hotlines at branch offices to respond to questions and complaints about the cash transfer program, and various local drama groups that raise awareness around health in communities. A hotline centre was a feedback and complaints response mechanism that existed and was used by both beneficiaries and non-beneficiaries to call to lodge complaints and feedback during the cash transfer program programmes. A community feedback mechanism has been put in place by SRCS, including community health committees and volunteers at the community level, which helps identification of gaps and community feedback on SRCS projects, which is reported back to SRCS management.

#### Challenges:

There were initial issues in setting up the hotline for feedback, which meant beneficiaries were charged for the calls, and some reported having called many times without getting through.

In Somaliland, SRCS has established toll-free hotline centres in all six branches supported by ECHO PPP. Volunteers were engaged to record the data on computers and also the kobo toolbox. They were oriented on how to use the feedback and complaint centre. Beneficiaries who received CVA support will be calling the hotline centre and getting feedback from the trained volunteers in the branches. They were given a four-digit number of 3240" short code which beneficiaries can easily access their phone by calling. This is mainly project-based hotline centre but in the future SRCS planned to have one hotline Center for all the projects/programmes as a feedback and complaint mechanism approach.

#### Security assessment:

To address the security situation in Puntland, a Security Risk Assessment was conducted by the end of October 2021, with the main objective to provide a field security assessment of the security environment and its implications on the current and proposed IFRC/SRCS activities in Puntland. A TOR was signed by the end of September 2021. The desired outcomes of the risk assessment were to produce a general threat assessment in Puntland to provide a better understanding of the operating environment, as well as to produce a security risk assessment for IFRC staff, assets, facilities, and programmes in Puntland, to assist in mitigating security and safety-related risks. See the "risk assessment" section for the outcome of the assessment.

### Coordination and Partnerships

#### Output: Strengthen Coordination and Partnerships within the Movement and with relevant external actors

Indicators	Target	Actual
# of National Society branches supported with operational support services capacity development (New)	2	Pending funding

#### Output: National Societies have effective and motivated volunteers who are protected

Indicators	Target	Actual
% of volunteers engaged in response who are insured	100%	(PL: 71%

#### Output: National Societies have the necessary corporate infrastructure and systems in place

Indicators	Target	Actual
# of National Society branches that have the necessary corporate infrastructure and ICT systems	3	3

#### Output: NS capacity to support community based DRR, response and preparedness is strengthened

Indicators	Target	Actual
# of volunteers and staff trained in the assessment, data collection, distribution,	50	32

M&E, PGI and CEA		
<b>Output: : Resource generation and related accountability models are developed and improved</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
Resource mobilisation strategy	1	0
<b>Progress towards Outcome</b>		
<p>There are no new activities as most activities remained unfunded. After the revision of the Emergency Appeal, one new indicator was added as reflected in the table above. In June 2021, SRCS staff were on-boarded on the DCPRR structure, the Emergency Operations framework, and technical sectors including urban programming, DRR and CCA, and CVA. They further completed online learning on CVA, DRM in Africa, and National Society Preparedness. In Somaliland 32 Volunteers and staff were provided with an orientation/training on the DREF CTP operation in Awdal, Sool, Sanaag, and Togdheer branches. IFRC is supporting extra resources within PRD to support resource mobilization.</p> <p>As a part of the increasing scale of the hunger crisis in Somalia and across the Horn of Africa, PRD in collaboration with the IFRC Africa Regional Office has scaled up resource mobilization and communication efforts. A Plan of Action for a regional approach has been developed, which includes the revision of the Emergency Appeal, and proactive efforts to engage proactively with external partners and movement partners through March 2022.</p> <p>In Somaliland, the process of supporting NSD through the rehabilitation of NS facilities has been undertaken for the Burao Branch, Kulmiye, and Youth Club, as well as the Youth Club for the Hargeisa Branch.</p> <p>In Puntland, the SRCS branches were supported to purchase 12 smartphones for PMER purposes, 1 phone for the Operations Office, as well as a printer, and a photocopy machine.</p>		

<b>Secretariat Services</b>		
<b>Output: Strengthen Coordination and Partnerships within the Movement and with relevant external actors</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
# of surge deployed (sectoral 3# and operations management (New)	4	Pending funding
# of updated security assessments by region (New)	2	Pending funding
# of regions supported with logistics and supply chain, procurement services (New)	2	Pending funding
# of regions supported with Information Management services (New)	2	Pending funding
<b>Progress towards Outcome</b>		
<p>After the revision of the Emergency Appeal, new indicators were added to the <a href="#">Operational Strategy</a> as reflected in the table above. Activities are planned in the coming months upon funding commitments.</p>		

## C. Financial Report

Please find annexed the latest Financial Report. Of the total Emergency Appeal budget figure of CHF 9,000,000 to date, CHF 3,064,917 has been received from donors, with coverage of 34.05%.

## Reference



Click here for:

[IFRC Emergency landing page](#)  
[Emergency Appeal and Operation Update documents](#)

## CONTACT INFORMATION

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

### Somali Red Crescent Society

- **President**, Yusuf Hassan Mohamed, phone: +254722144284; e-mail: [yhmohameds@gmail.com](mailto:yhmohameds@gmail.com)

### In the IFRC

- **Head of Delegation**, Mohamed Babiker, phone: +254 110 804 397 4 e-mails: [mohamed.babiker@ifrc.org](mailto:mohamed.babiker@ifrc.org)

### For IFRC Resource Mobilization and Pledges support:

- **IFRC Regional Office for Africa** Louise Daintrey-Hall, Head of Partnerships and Resource Development Regional Office for Africa, Email: [louise.daintrey@ifrc.org](mailto:louise.daintrey@ifrc.org) phone: +254 110 843 978

### For In-Kind donations and Mobilization table support:

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

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

- **IFRC Regional Office for Africa** Philip Kahuho, Regional Head, PMER and Quality Assurance, [Philip.kahuho@ifrc.org](mailto:Philip.kahuho@ifrc.org), Phone: +254 732 203 081

## 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.

# Emergency Appeal

## FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2021/5-2022/7	Operation	MDRSO011
Budget Timeframe	2021-2022	Budget	APPROVED

Prepared on 30 Aug 2022

All figures are in Swiss Francs (CHF)

### MDRSO011 - Somalia - Hunger Crisis 2021-2022

Operating Timeframe: 13 May 2021 to 31 Jul 2023; appeal launch date: 18 Jul 2021

## I. Emergency Appeal Funding Requirements

Thematic Area Code	Requirements CHF
AOF1 - Disaster risk reduction	572,000
AOF2 - Shelter	0
AOF3 - Livelihoods and basic needs	5,451,000
AOF4 - Health	678,000
AOF5 - Water, sanitation and hygiene	985,000
AOF6 - Protection, Gender & Inclusion	167,000
AOF7 - Migration	0
SFI1 - Strengthen National Societies	560,000
SFI2 - Effective international disaster management	14,000
SFI3 - Influence others as leading strategic partners	11,000
SFI4 - Ensure a strong IFRC	562,000
<b>Total Funding Requirements</b>	<b>9,000,000</b>
<b>Donor Response* as per 30 Aug 2022</b>	<b>3,064,917</b>
<b>Appeal Coverage</b>	<b>34.05%</b>

## II. IFRC Operating Budget Implementation

Thematic Area Code	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction	12,620	15,243	-2,623
AOF2 - Shelter	18,586	18,760	-175
AOF3 - Livelihoods and basic needs	924,957	802,866	122,091
AOF4 - Health	263,768	181,973	81,795
AOF5 - Water, sanitation and hygiene	1,152,262	290,518	861,745
AOF6 - Protection, Gender & Inclusion	0	0	0
AOF7 - Migration	0	0	0
SFI1 - Strengthen National Societies	153,930	332,803	-178,873
SFI2 - Effective international disaster management	18,014	18,014	0
SFI3 - Influence others as leading strategic partners	8,470	482	7,988
SFI4 - Ensure a strong IFRC	333,815	35,461	298,354
<b>Grand Total</b>	<b>2,886,421</b>	<b>1,696,120</b>	<b>1,190,301</b>

## III. Operating Movement & Closing Balance per 2022/07

Opening Balance	0
Income (includes outstanding DREF Loan per IV.)	3,035,302
Expenditure	-1,696,120
<b>Closing Balance</b>	<b>1,339,182</b>
Deferred Income	0
Funds Available	1,339,182

## IV. DREF Loan

* not included in Donor Response	Loan :	451,800	Reimbursed :	0	<b>Outstanding :</b>	451,800
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# Emergency Appeal

## FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2021/5-2022/7	Operation	MDRSO011
Budget Timeframe	2021-2022	Budget	APPROVED

Prepared on 30 Aug 2022

All figures are in Swiss Francs (CHF)

### MDRSO011 - Somalia - Hunger Crisis 2021-2022

Operating Timeframe: 13 May 2021 to 31 Jul 2023; appeal launch date: 18 Jul 2021

## V. Contributions by Donor and Other Income

Opening Balance							0
Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income	
American Red Cross	598,385				598,385		
China Red Cross, Hong Kong branch	23,523				23,523		
Danish Red Cross	105,658				105,658		
DREF Allocations				451,800	451,800		
Finnish Red Cross	104,736				104,736		
Icelandic Red Cross	20,000				20,000		
Icelandic Red Cross (from Icelandic Government*)	380,000				380,000		
Irish Red Cross Society	4,495				4,495		
Japanese Red Cross Society	40,057				40,057		
Norwegian Red Cross (from Norwegian Government*)	507,525				507,525		
On Line donations	2,009				2,009		
Red Cross of Monaco	20,983				20,983		
Swedish Red Cross	306,325				306,325		
The Canadian Red Cross Society (from Canadian Gov	179,942				179,942		
The Netherlands Red Cross (from Netherlands Govern	289,864				289,864		
<b>Total Contributions and Other Income</b>	<b>2,583,502</b>	<b>0</b>	<b>0</b>	<b>451,800</b>	<b>3,035,302</b>	<b>0</b>	
<b>Total Income and Deferred Income</b>					<b>3,035,302</b>	<b>0</b>	