

2019

EMERGENCY PREPAREDNESS AND RESPONSE PLAN IN QUEST OF THE 2019 GU RAINFALL FAILURE and FLOODS IN SOMALI REGION

June to August 2019

Jijiga

EXECUTIVE SUMMARY

Last year in October, the Somali Region Government led an emergency preparedness and response plan (EPRP) workshop in Jijiga, Ethiopia. The workshop discussed the sector/ clusters' prioritized activities. Discussion during the workshop focused on the EPRP plan from November 2018 to June 2019. However, in view of the gu season failure in most parts of the Region, the regional ICCG agreed to prepare a mini Emergency Drought Preparedness and Response Plan which covers a period of three months (June to August 2019). Learning from past experiences, emergency preparedness and response is key to reduce the humanitarian impact of these repetitive and predictable crises. The EPRP identified almost all Woredas of the Somali region as susceptible for failure or shortage of rainfall, but the most at risk are Doollo, Shabelle, Afder, Liban, Dawa, Erer, Nogob, Jarar, Korahey, Sitti zones and parts of Fafan zone. Some of the early warning triggers include poor performance of rains (Gu), reduced milk production, crop failure, shortage of quality and quantity of water both human and livestock, abnormal livestock movements with over-crowding on water sources and deterioration of livestock body condition followed by deaths, high prices of cereals and imported items and lower prices of livestock and reduced livestock productivity, shift to distractive coping mechanisms (e.g. firewood collection, charcoal making, family separation, consuming less preferable milks etc.), poor nutritional status, environmental degradation (deforestation), and drought-related disease outbreak. Many of these triggers have already been anecdotally observed in some zones of the region.

A total of **US\$20.7 million** is urgently required to implement the plan. Funding can be channeled through partners, cluster-lead agencies (CLAs), or via the Ethiopia Humanitarian Fund. The plan is targeting 1.27 million beneficiaries across 68 prioritised woredas. Convergence areas are areas / woredas that are targeted by multiple clusters. This response plan document identified five woredas as area 1 that are the convergence of more than 3 multiple clusters. 43 woredas are area 2 where 2-3 clusters converge in the same locations. 20 woredas are area 3 that is targeted by one cluster only. The more critical the situation in one location, the more clusters are putting priorities in the same area. Sector planning assumptions and estimated requirements are listed in the 'Sector/Cluster Requirements' section below.

BACKGROUND

According to FEWSNET, rainfall during the 2019 Gu/long rains season has been well below average across much of the greater Horn of Africa. This below-average rain performance is the second consecutive below-average season in the region, which is still recovering from the prolonged 2016/17 drought. This below-average rain is expected to result in significant crop loss, increased food prices, and poor livestock body conditions and milk availability, which will reduce poor households' access to food. The report also notes that the below-average from October to December 2018 season, has already caused many poor households to deplete their food stocks earlier. It also has stalled the recovery of livestock assets from the significant losses that was experienced during the 2016/17 drought. Cumulative rainfall in southeastern Ethiopia, during the Gu/Genna/long rains (March to May 2019) is most likely to be below average and have a delayed onset. Water and animal feed availability, including pasture and browsing land, and fodder, is expected to be below average in southeastern pastoral and agropastoral lowland areas. As a result, livestock body conditions and productivity will be below average through September 2019.

The IGAD analyses showing that rainfall levels through mid-April were likely amongst the driest on record (since 1981) in some areas. The climate outlook predicts that the situation is unlikely to significantly improve in April and May. Forecasts indicate an increased probability of below-average rainfall over some parts. Though the expected rainfall in April and May will likely improve water and pasture availability temporarily, below-average rainfall levels will not fully restore pastoral conditions, and resources will likely decline rapidly during the June – September dry season. Milk consumption will also likely decline, thereby leading to an increase in household food insecurity, which will result in the increases in child malnutrition and pregnant and lactating women.

Somali region faces humanitarian crisis triggered by inter-communal conflict along the Somali-Oromo border, which has caused displacement and protection concerns. According to the Round 15 DTM, over 1 million people have been displaced (50% of the IDPs are children) within the Somali region, which continue to experience repetitive and predictable crises including drought, and floods; disease outbreaks of measles and AWD, and acute malnutrition. Moreover, acute shortages of water are already being experienced owing to failure or shortage of rain. The water shortage will affect the lives and livelihoods of pastoralist and agro-pastoralist communities, their production, markets and sources of income and other social services.

PLANNING ASSUMPTIONS

This mini-drought/flood focused EPRP, including the activities and estimated costs, has been developed based on the poor rain performance of Deyr/Gu' seasons (Deyr-2018 and Gu' 2019), metrological forecast of the Gu' season and expected regional rivers flash floods due to highland rains. It also considered the food security situation, the current measles outbreak, the unchanged risk factors of AWD and dengue fever, the shortage of water in many zones and districts and the needs for RH/SRH services to host and IDPs communities in emergency settings. This mini-EPRP document aims to serve as an advocacy tool for lifesaving interventions bringing together the different plans that exist in the region- it will create a common document for preparedness and response efforts including resilience and recovery components. This document is intended to be used as a set of benchmarks for the government, national and international community to scale up and monitor the ongoing humanitarian responses.

DURATION OF THE EPRP

This plan initially covers a period of three months (June to August 2019). In case the drought continues to precipitate beyond the projected three months' period, the remaining needs could be incorporated into the 2019 HDRP-MYR and 2019-2020 EPRP where an update on the situation will be included.

RESPONSE STRATEGY

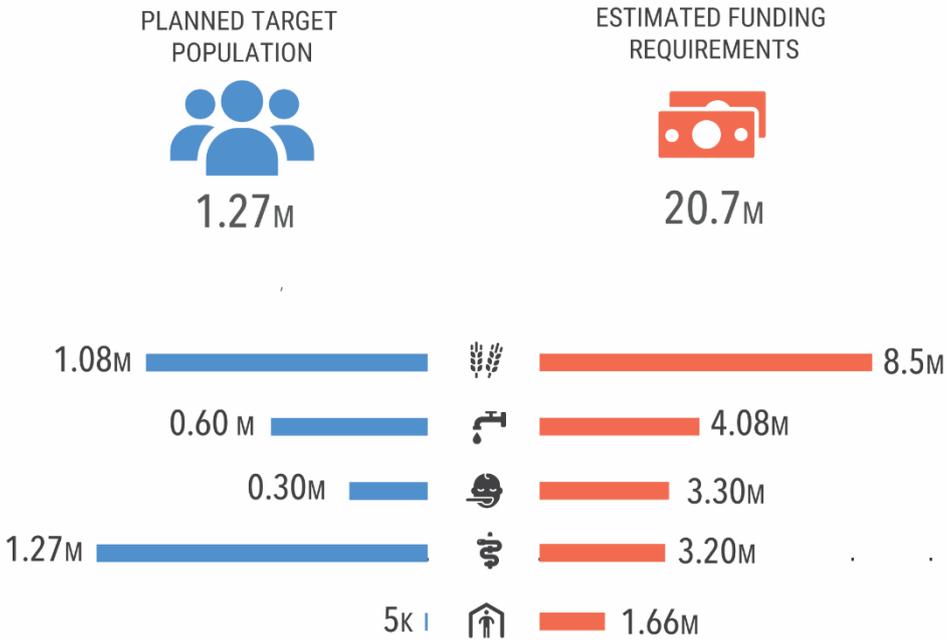
The EPRP will primarily focus on ensuring preparedness and early action. The following intervention framework will inform the overall response strategy:

1. Stakeholder engagement with Governments, NGOs and the private sector
2. Protection of core breeding animals through, targeted animal health interventions, feed provision and destocking
3. Deliver immediate life-sustaining assistance, taking protection mainstreaming considerations into account.
4. Monitoring and modelling the food security situation
5. Monitoring the livestock movement, body condition and health conditions
6. Mitigate/prepare for potential health emergencies
7. Ensure gender and protection mainstreaming across the sectors in this response plan.

A response model of humanitarian partners supporting Government-led service provision at the point of delivery will be maintained. International support will largely be channeled via NGOs and UN Agencies in the affected woredas.

Authorities and international humanitarian partners particularly seek to scale up response in the sectors of WASH, Nutrition, Health, Agriculture, and Shelter-NFI,

Key Figures



SECTOR/CLUSTER REQUIREMENTS



WASH

Priority requirements - \$4.08 million

Population targeted – 600,000

Priority activities for the Cluster are;

1. **In preparation for the imminent drought**, some key preparedness and response activities are being sought out. First, 8 water pipeline extension works from existing high yielding boreholes and/or previously drilled boreholes but not developed (due to lack of funds) will be expanded to target drought-affected kebeles in specific woredas.
2. **Water trucking intervention** is planned to be conducted in certain areas with critical water shortages and where pipeline expansion works are either not feasible and/or will take longer time to materialize. The plan will be to maximize the utilization of Government's deployed water tankers across the region before seeking to contract water tankers from private water vendors, which is very expensive.
3. **Prepositioning of fast-moving spareparts, rehabilitation and maintenance of broken water schemes/strategic non-functioning boreholes** particularly in prominent drought-risk areas, including Nogob, Ere, Liben, Shabelle and Dawa zones. This is critical because of the repaired boreholes will be used for supporting water trucking as well as planned water pipeline expansion works.
4. Where feasible, **drilling of new boreholes** have been planned particularly in recurring drought-affected areas with very limited number of deep boreholes – nothing to repair and/or no option for pipeline expansions. Given the timeframe for this plan, bearing in mind also the difficulty in timely securing of financial resources, only 2 boreholes are being planned for selected woredas in Shabelle and Erer zones.

Drought preparedness/AWD and response

5. **Procurement, transportation, prepositioning** (before actual drought happens) and distribution of WASH non-food items (to floods affected community). Soap, jerry can and water treatment chemicals for estimated 240,000 individuals.
6. In an event that certain people will be displaced to temporary highly elevated grounds as a result of floods events, the need to **provide temporary sanitation facilities** that are gender-segregated and suitable facilities for women and girls to ensure appropriate management of menstrual hygiene, and accessible by all beneficiaries including physically challenged individuals, will be critical. 300 blocks of semi-permanent latrine facilities have been planned.
7. During floods preparedness and actual response, it will crucial for health extension workers/volunteers to carry out **social mobilization and hygiene promotion messaging** that address certain barriers, correct use of installed facilities and with the general focus on the prevention of communicable diseases. In the worst-case scenario, floods, necessitating the need to deploy many hygiene promoters for a prolonged duration.

Priority activities	Priority locations (zones/woredas)	Planned target population	Estimated funding requirements	Partners on ground
Expansion of water pipeline network - using newly drilled/existing high yielding boreholes/previously drilled & capped boreholes	Fafan, Erer, Jarar, Sitti and Dollo (Tuliguled, Gursum, Fik, Babile, Geladi, Bokh, Maeso, Daror, Afdem, Gablalu)	40,000	\$1,470,000	Somali Regional Water Bureau, DRC, IOM, IRC, LWF, Oxfam, NRC, GOAL
Water trucking intervention to hotspot kebeles/IDP sites with acute water shortages for 3 months	Shabele, Liben, Afder, Dawa and Nogob	500,000	\$450,000	Somali Regional Water Bureau, AAH, ADRA, SCI, OWDA, CARE, Concern Worldwide, IRE, NRC, ZOA, IOM. No other partner in

Priority activities	Priority locations (zones/woredas)	Planned target population	Estimated funding requirements	Partners on ground
				Nogob except UNICEF (through RWB)
Rehabilitation and maintenance of broken water points/non-functioning boreholes	Nogob, Erer, Liben, Shabelle, Dawa, Fafan (Garbo, Fik, Lagahida, Salahad, Filtu, Deka Seftu, Dolo Ado, Danan, Cherati, Moyale, Mubarak)	175,000	\$700,000	Somali Regional Water Bureau, CARE, NRC, Concern Worldwide, IRE, NRC, ZOA, AAH, ADRA, SCI, OWDA, NCA, DRC, IOM, IRC, LWX, Oxfam
Drilling of new boreholes in areas without any nearby climate-resilience water source	Shabele and Erer (Adadle, Elele, Mayamulko, Fik, Godgod and Kohle)	350,000	\$700,000	Somali Regional Water Bureau, AAH, ADRA, SCI, OWDA, NRC
Procurement, transportation and preposition/distribution of water treatment chemicals and essential wash NFIs (soap, jerry cans, buckets)	Liben, Dawa, Faafan, Sitti, Erer, Nogob, Dollo, Afder, Shabele, Korahey	240,000	\$300,000	Somali Regional Water Bureau, CARE, Concern Worldwide, IRE, NRC, ZOA, SCI, NCA, DRC, IOM, IRC, LWF, Oxfam, GOAL, ADRA, AAH, OWDA
Installation of emergency sanitation facilities for flood-affected people at temporary resettlement sites	Liben, Dawa, Faafan, Sitti, Erer, Nogob, Dollo, Afder, Shabele, Korahey, Jarar	45,000	\$360,000	Somali Regional Water Bureau, CARE, Concern Worldwide, IRE, NRC, ZOA, SCI, NCA, DRC, IOM, IRC, LWF, Oxfam, GOAL, ADRA, AAH, OWDA
Social mobilization and hygiene promotion campaigns focusing on prevention of communicable diseases		600,000	\$100,000	Somali Regional Water Bureau, UNICEF



NUTRITION

Priority requirements - \$3.3million

Total Population at Risk: 300,411

- i. 230 411 children under the age of 5
- ii. 70,000 Pregnant and Lactating women

Population in Need

- iii. 14000 SAM cases
- iv. 33 600 MAM Cases
- v. 70 000 PLW and (10 000 Malnourished PLW)

Priority activities

1. The occurrence of drought in the Somali region will result in an increase in food insecurity and an increased levels of acute malnutrition. Nutrition Cluster will support treatment of acute malnutrition across 31 woredas in 9 zones that are likely to be heavily impacted by the delayed Gu rains of 2019. It is anticipated that 14 000 cases of children with Severe Acute Malnutrition (under the age of 5) as well as 33 600 Moderate Acute Malnutrition cases will be treated through the support of 6 Implementing partners.
2. In addition, 69,750 Pregnant and Lactating Women will be treated for MAM over the three months' support. Through the partners, Nutrition Cluster will conduct routine nutrition screening on a monthly basis and the second bi-annual nutrition screening exercise across 88 woredas in order to identify individuals or population groups at risk, including but not limited to the PLW with disabilities, of becoming malnourished and refer for treatment those that are already malnourished. During the screening, where separated and unaccompanied children (including orphans) are identified, these will be referred to the Bureau of Women and Children's Affairs (BoWCA) for further services (eg. Family tracing and reunification or alternative care). Should BoWCA not be present in the location, then the cluster partner should take the details of the children and send to BoWCA at Jijiga.
3. The cluster will also oversee training of 500 Health workers and Health Extension workers on the Management of SAM and MAM as well as provision of Infant and young child feeding services towards mothers from the affected communities. As part of scaling up at the initial stages of the response, the nutrition cluster will distribute high energy biscuits to most affected areas while the response mechanism is being scaled up. Infant and Young Child Feeding in Emergencies will be scaled up in order to protect and promote safe and appropriate infant and young child feeding practices.
4. As part of improving the sub-regional level coordination, 9 Nutrition coordinators will be deployed at the zonal level to support the zonal and woreda level coordination mechanisms. This team will also be supported by 18 CMAM monitors that will undertake supportive supervision and provide mentorship to Health Workers across the affected woredas.

Priority activities	Priority locations (zones/ woredas)	Planned target population	Estimated funding requirements	Partners on ground
Full CMAM support through partners	Afder, Fafan< Jarar, Korahe, Liban, Nogob, Shabelle and Sitti(Bare, Charati, Elkare, Kohle ,Harshin, Koran, Aware, Daror, Degahamed, Dig, Gunagudo, Yoale Higloley, Bokolmayo, Goro Bekeksa, Guradamole, Dihun, Elwayne, Gerbo, Hararey, Horshagah Abakorow, Adadle, Danan, East Imi, Elale, Ferfer, Gode, Mustahil Hadigala,Mulo, (Ma'iso)	14,000 SAM cases 33,600 MAM cases 70,000 Pregnant and Lactating women	\$1,488,000	Somali Regional Health Bureau, Regional ENCU, Concern, Mercy Corps, Save the Children International, Action Against Hunger, Islamic Relief Ethiopia, OWDA, RHB, DPPB, WHO, WFP, UNICEF
Integrated SAM training for 300 HWs and 500 hews in the hotspot woredas	Afder, Fafan< Jarar, Korahe, Liban, Nogob, Shabelle and Sitti(Bare, Charati, Elkare, Kohle ,Harshin, Koran, Aware, Daror, Degahamed, Dig, Gunagudo, Yoale Higloley, Bokolmayo, Goro Bekeksa, Guradamole, Dihun, Elwayne, Gerbo, Hararey, Horshagah Abakorow, Adadle, Danan, East Imi, Elale, Ferfer, Gode, Mustahil Hadigala,Mulo, (Ma'iso)	800	\$250,000	Somali Regional Health Bureau, Regional ENCU,Concern, Mercy Corps, Save the Children International, Action Against Hunger, Islamic Relief Ethiopia, OWDA, RHB, DPPB, WHO, WFP, UNICEF

Priority activities	Priority locations (zones/ woredas)	Planned target population	Estimated funding requirements	Partners on ground
IYCF-E training for 300 HWs and 500 hews	Afder, Fafan< Jarar, Korahe, Liban, Nogob, Shabelle and Sitti(Bare, Charati, Elkare, Kohle ,Harshin, Koran, Aware, Daror, Degahamed, Dig, Gunagudo, Yoale Higloley, Bokolmayo, Goro Bekeksa, Guradamole, Dihun, Elwayne, Gerbo, Hararey, Horshagah Abakorow, Adadle, Danan, East Imi, Elale, Ferfer, Gode, Mustahil Hadigala,Mulo, (Ma'iso)	800	\$250,000	Somali Regional Health Bureau, Regional ENCU,Concern, Mercy Corps, Save the Children International, Action Against Hunger, Islamic Relief Ethiopia, OWDA, RHB, DPPB, WHO, WFP, UNICEF
MAM training for 300 FDAs	Afder, Fafan< Jarar, Korahe, Liban, Nogob, Shabelle and Sitti(Bare, Charati, Elkare, Kohle ,Harshin, Koran, Aware, Daror, Degahamed, Dig, Gunagudo, Yoale Higloley, Bokolmayo, Goro Bekeksa, Guradamole, Dihun, Elwayne, Gerbo, Hararey, Horshagah Abakorow, Adadle, Danan, East Imi, Elale, Ferfer, Gode, Mustahil Hadigala,Mulo, (Ma'iso)	300	\$250,000	Somali Regional Health Bureau, Regional ENCU,Concern, Mercy Corps, Save the Children International, Action Against Hunger, Islamic Relief Ethiopia, OWDA, RHB, DPPB, WHO, WFP, UNICEF
Procurement of high energy BP5 biscuits for drought affected areas	Afder, Fafan< Jarar, Korahe, Liban, Nogob, Shabelle and Sitti(Bare, Charati, Elkare, Kohle ,Harshin, Koran, Aware, Daror, Degahamed, Dig, Gunagudo, Yoale Higloley, Bokolmayo, Goro Bekeksa, Guradamole, Dihun, Elwayne, Gerbo, Hararey, Horshagah Abakorow, Adadle, Danan, East Imi, Elale, Ferfer, Gode, Mustahil Hadigala,Mulo, (Ma'iso)	8,000	\$200,000	Somali Regional Health Bureau, Regional ENCU,Concern, Mercy Corps, Save the Children International, Action Against Hunger, Islamic Relief Ethiopia, OWDA, RHB, DPPB, WHO, WFP, UNICEF
Sub regional nutrition coordination	Afder, Fafan< Jarar, Korahe, Liban, Nogob, Shabelle and Sitti(Bare, Charati, Elkare, Kohle ,Harshin, Koran, Aware, Daror, Degahamed, Dig, Gunagudo, Yoale Higloley, Bokolmayo, Goro Bekeksa, Guradamole, Dihun, Elwayne, Gerbo, Hararey, Horshagah Abakorow, Adadle, Danan, East Imi, Elale, Ferfer, Gode, Mustahil Hadigala,Mulo, (Ma'iso)	9	\$54,000	Somali Regional Health Bureau, Regional ENCU,Concern, Mercy Corps, Save the Children International, Action Against Hunger, Islamic Relief Ethiopia, OWDA, RHB, DPPB, WHO, WFP, UNICEF,
CMAM monitoring across the hotspot	Afder, Fafan< Jarar, Korahe, Liban, Nogob, Shabelle and Sitti(Bare, Charati, Elkare, Kohle ,Harshin, Koran, Aware, Daror, Degahamed, Dig, Gunagudo, Yoale Higloley, Bokolmayo, Goro Bekeksa, Guradamole, Dihun, Elwayne, Gerbo, Hararey, Horshagah Abakorow, Adadle, Danan, East Imi, Elale, Ferfer, Gode, Mustahil Hadigala,Mulo, (Ma'iso)	18	\$324,000	Somali Regional Health Bureau, Regional ENCU,Concern, Mercy Corps, Save the Children International, Action Against Hunger, Islamic Relief Ethiopia, OWDA, RHB, DPPB, WHO, WFP, UNICEF
Enhanced outreach strategy (EOS)	88 P1 woredas	684 851 Under 5s and 207 101 PLW	\$352,000	Somali Regional Health Bureau, Regional ENCU,Concern, Mercy Corps, Save the Children International, Action Against Hunger, Islamic Relief Ethiopia, OWDA, RHB, DPPB, WHO, WFP, UNICEF, CARE, IRC,
IYCF-E materials and campaigns	Afder, Fafan< Jarar, Korahe, Liban, Nogob, Shabelle and Sitti(Bare, Charati, Elkare, Kohle ,Harshin, Koran, Aware, Daror, Degahamed, Dig, Gunagudo, Yoale Higloley, Bokolmayo, Goro Bekeksa, Guradamole, Dihun, Elwayne, Gerbo, Hararey, Horshagah Abakorow, Adadle, Danan, East Imi, Elale, Ferfer, Gode, Mustahil Hadigala,Mulo, (Ma'iso)	70 000 PLW	\$108,500	Somali Regional Health Bureau, Regional ENCU, Concern, Mercy Corps, Save the Children International, Action Against Hunger, Islamic Relief Ethiopia, OWDA, RHB, DPPB, WHO, WFP, UNICEF



HEALTH

Overall requirements - \$3.5 million (\$290,000 in pipeline)

Priority requirements - \$3.2 million

Population targeted - 1,272,767

Overall Objective:

To reduce avoidable mortality and morbidity caused by outbreaks and increased illnesses, through the provision of life-saving health services to communities (IDPs and host) living in specified districts and zones affected by drought and floods in Somali Region of Ethiopia from June - August 2019. Provide guidance for rapid health assessment and emergency response in the region.

Specific Objectives:

- Ensure access to essential and lifesaving emergency health services to host communities and IDPs, including but not limited to the vulnerable groups (eg pregnant and lactating women, persons with disabilities, separated and unaccompanied children including orphans, street children and IDPs lacking appropriate documents).
- Increase the coverage and regularity for surveillance, response, monitoring and reporting for diseases i.e. AWD, AFI (Measles, Dengue, Meningitis, malaria, AJS) and other public health emergencies.
- Ensure minimum preparedness measures to contain further spread of notifiable diseases, cross border impacts, IDPs of flooding and drought.
- Ensure advocacy, social mobilization, behavioural change and risk communication on prevention of disease outbreaks and the common emergency health issues.

Health Sector Priorities from June - August 2019:

1. Strengthen access to essential and lifesaving PHC for affected host and IDPs communities and where possible reactivation of disrupted health facilities.
2. Timely and effectively identify, investigate and respond to notifiable communicable disease epidemics, including community-level interventions.
3. Strengthen the emergency health preparedness and response capacities at all levels through capacity development of frontline health workers, pre-positioning of available supplies and strengthened emergency coordination among health sector actors/partners.
4. Strengthen the joint supportive supervision, monitoring and evaluation of the overall implementation of humanitarian health the interventions.

Health Sector Targets:

- The estimated target beneficiaries for June - August 2019, are 1,272,767 individuals of IDPs and Host communities from 17 districts (Bokh, Galadi, Ferfer, Mustahil, Dekasuftu, Korebakagsa, Danan, Harshin, Kabribayah, W/Imey, Hamaro, Fik, Garbo, Mayemuluqo, Erer, E/Imey and Kebridahar).

These districts have the following risks: -

- Received no rain or they get Shower rain.
- The risk for flash/River flood.
- Risk of notifiable diseases outbreaks like AWD and AFI (Dengue, Meningitis, Malaria, Measles, AJS, etc.).

The host population served through fixed health facilities and MHNTs (interventions: IMNCI, EPI, MNCH, RH/SRH, health C4D & risk communication). Targeted health personnel of SRHB and health partners expected to receive technical assistance for capacity building and assistance for prepositioning of medicines and medical supplies/logistics.

Priority activities	Priority zones (woredas)	Planned target population	Estimated funding requirements	Partners on ground
Strengthen early warning and surveillance system	Zones: 9 Dolo (Bokh, Galadi). Shabele (Ferfer, Mustahil, Danan, East Imey).	1,272,767	\$163,636	Somali Regional Health Bureau, WHO, UNICEF, Save the Children, Mercy Corps, Islamic Relief,

Priority activities	Priority zones (woredas)	Planned target population	Estimated funding requirements	Partners on ground
	Liban (Dekasuftu, Korobagagsa). Afder (West Imey). Fafan (Harshin, Kabribayah). Erer (Hamaro, Fik, Mayemuluqo). Siti (Erer) Korahey (Kabridahar) Nogob (Garbo)			GOAL, MSF-Holland, MSF-Spain, OWDA, and AAH.
Develop and produce IEC/BCC materials to support behavior change communication and social mobilization on prevention of notifiable disease outbreaks and emergency health issues + risk communication.	The same zones and Districts as above	1,272,767	\$110,000	Somali Regional Health Bureau, WHO, UNICEF, Save the Children, Mercy Corps, Islamic Relief, GOAL, MSF-Holland, MSF-Spain, OWDA, and AAH.
Provide assistance to SRHB for planning and implementation of immunization for age group of 6 months to <30 yrs. On measles campaign	The same zones and Districts as above	1,272,767	\$500,000	Somali Regional Health Bureau, WHO, UNICEF, Save the Children, Mercy Corps, Islamic Relief, GOAL, MSF-Holland, MSF-Spain, OWDA, and AAH.
Mobile health and nutrition teams (MHNTs) supporting rural communities	The same zones and Districts as above	1,272,767	\$741,000	SRHB/UNICEF
Integration of emergency reproductive health/MISP into emergency health responses IDPs and host communities through prepositioning of RH kits	The same zones and Districts as above	1,272,767	\$22,267	UNFPA
Procurement, dispatch and prepositioning of medicines and medical supplies including AWD CTC kits at health facilities	The same zones and Districts as above	1,272,767	\$900,000	SRHB, WHO, UNICEF
Support to investigations and training of RRTs)	The same zones and Districts as above	1,272,767	\$75,000	SRHB, WHO, UNICEF
Conduct indoor residual house spray(IRS)operation	The same zones and Districts as above	1,272,767	\$146,199	SRHB
Deployment of emergency logistics/surge staff to respond to outbreaks and public health emergencies.	The same zones and Districts as above	1,272,767	\$80,000	SRHB, WHO, UNICEF
Emergency health information gathering systems and improved	The same zones and Districts as above	1,272,767	\$30,000	SRHB, WHO

Priority activities	Priority zones (woredas)	Planned target population	Estimated funding requirements	Partners on ground
links to development systems (setting up EOC/CP in RHB)				
Communicable disease outbreak case management (staff capacity building including medical and paramedical staffs)	The same zones and Districts as above	1,272,767	\$120,000	Somali Regional Health Bureau, WHO, UNICEF, Save the Children, Mercy Corps, Islamic Relief, GOAL, MSF-Holland, MSF-Spain, OWDA, and AAH.
Provide basic and essential life-saving health services to all disaster or emergency affected population (IDPs due conflict, drought, flood, etc) and any communities affected, paying special attention to IDPs without documentation, persons with disabilities, separated families / children, etc.	The same zones and Districts as above	1,272,767	\$200,000	Somali Regional Health Bureau, WHO, UNICEF, Save the Children, Mercy Corps, Islamic Relief, GOAL, MSF-Holland, MSF-Spain, OWDA, and AAH.
Refresher capacity building on basic supply and warehouse management. Also assist to strengthen 4 hubs prepositioned for emergency supplies to be able to respond immediately to save life in health emergencies in the region	The same zones and Districts as above	1,272,767	\$50,000	Somali Regional Health Bureau, WHO, UNICEF, Save the Children, Mercy Corps, Islamic Relief, GOAL, MSF-Holland, MSF-Spain, OWDA, and AAH.
Strengthen health system in order to provide basic health services through staff capacity building, technical support and improve health facilities preparedness to be able to respond timely to public health emergencies in order to save life and alleviate suffering	The same zones and Districts as above	1,272,767	\$300,000	Somali Regional Health Bureau, WHO, UNICEF, Save the Children, Mercy Corps, Islamic Relief, GOAL, MSF-Holland, MSF-Spain, OWDA, and AAH.
Conduct monitoring and supportive supervision of health emergency and recovery health needs and services delivered.	The same zones and Districts as above	1,272,767	\$70,464	Somali Regional Health Bureau, WHO, UNICEF, Save the Children, Mercy Corps, Islamic Relief, GOAL, MSF-Holland, MSF-Spain, OWDA, and AAH.
Total			\$3,508,566	



AGRICULTURE/LIVESTOCK

Priority requirements - \$8.5 million

Population targeted – 1,087,500

Cluster Strategy:

DRM-ATF strategy is based on lifesaving, protection of livelihood assets, rebuilding agricultural based livelihoods and building the resilience of communities to create a livelihood that withstands recurrent shocks.

Priority activities for the cluster are:

1. Emergency Livestock Treatment, Vaccination, and Veterinary equipment
2. Fodder supply and
3. Emergency slaughter destocking

Priority activities	Priority zones (woredas)	Planned target population	Estimated funding requirements	Partners on ground
Animal health intervention targeting of treatment for 725,000 heads (20% of treatment) and vaccination of 3,625,000 heads (80%)	Afder zone: Cherati, Elkare, Godgod, Kohle, Raso, Westemey, Bare and Dollobay Korahe: Shilabo and Lasdhankeyre Dobaweyn, Higlolay, Elogaden, Lasdhankayre Shabelle: Elele, Kelafo, Mustahil, Ferfer, Mustahil, Danan Sitti: Hadhagala and Gablalu Fafan: Harshin Jarar: Dagahbur Doollo: Galhamur, Bokh and Galadi Erer: Lagahida and Kubi Nogob: Elweyne and Dhuhun Dawa: Hudet	1,087,500	\$3,625,000	LPDB, FAO, VSF-Suisse, IRE, OXFAM, ADRA, NRC, SCI
Emergency veterinary equipment for treatment /vaccination	xx	Xx	\$96,000	LPDB, FAO, VSF-Suisse, IRE, OXFAM, ADRA, NRC, SCI
Emergency animal feed supply to target woredas to feed a total of 457,576 core breeding animals for three months (ATMR)	Afder zone: Cherati, Elkare, Godgod, Kohle, Raso, Westemey, Bare and Dollobay Shebelle: Danan and Elele Korahey: Lasdhankeyre, Shilabo Dawa: Hudet	91,515	\$4,085,500	LPDB, FAO, VSF-Suisse, IRE, OXFAM, ADRA, NRC, SCI
Destocking /slaughter Provide destocking support of small ruminants for 17 woredas	Korahe: Shilabo, Dobaweyn, Higlolay, Elogaden, Lasdhankayre Shabelle: Elele, Kelafo, Mustahil, Ferfer, Mustahil, Danan	20,400	\$728,571	LPDB, FAO, VSF-Suisse, IRE, OXFAM, ADRA, NRC, SCI
Total		1,087,500	\$8,569,571	



Shelter and NFI

Priority requirements - \$1.66 million

Population targeted – 4,800

Objectives:

- Contribute to the protection IDPs by providing life-saving ES/NFIs to improve their living conditions and the capacity for self-recovery
- Ensure that displaced affected people have adequate protection, safety, dignity, well-being and equitable access to shelter solutions

Priority activities:

- Increase preparedness efforts through pre-positioning of ES/ NFI stocks to support newly displaced households
- Provide safe, appropriate and critical life-saving Emergency Shelter and non-food items for displaced populations
- Distribute cash grants to vulnerable households to purchase ES/NFI whenever applicable

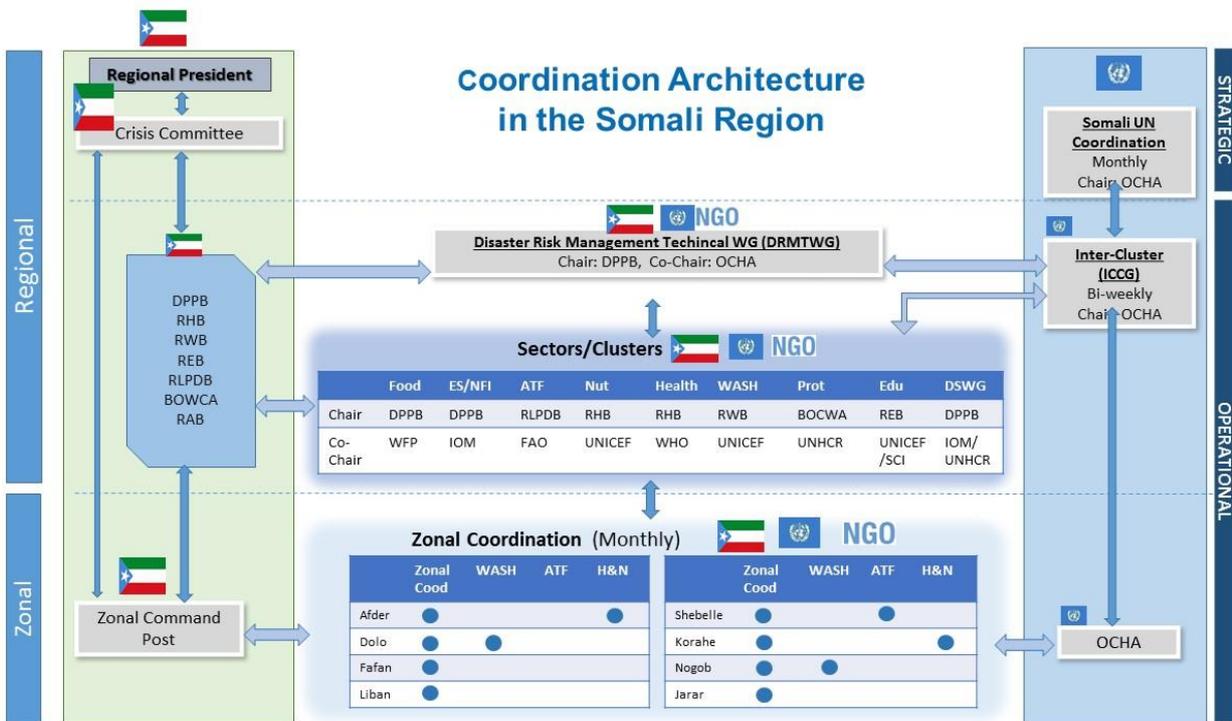
As a result of the increasing drought, the SNFI cluster response will consist primarily of the distribution of Emergency Shelter / Non-Food Items (SNFI) in-kinds kits and partial kits to 5,000 HHs through an environmentally friendly and economically sustainable method. Additionally, the response will also include the disbursement of cash for ESNFIs to 3,000 displaced HHs. This project will both respond to increasing new climate-caused (drought and flood) displacement and at the same time identify pre-existing climate-induced IDP sites that have remained particularly vulnerable. Non-food item in-kind kits may be temporarily pre-positioned. Some items in the ES/NFI kind-kits may be procured within the Somali region using a practical combination of best value and items available criteria. If some items in a standard full kit are not readily available, the in-kind distribution may move forward with partial standard kits.

Priority activities	Priority zones (woredas)	Planned target population (HHs)	Estimated funding requirements	Partners on ground
Conduct prioritization at the site or household level, identify the need of the most vulnerable climate-induced (drought or flood) sites; and respond with transport, storage (potentially temporary prepositioning), and distribution of ES/NFI in-kind kits.	Doolo, Shabelle, Afder, Siti, Jarar, Korehe, Liban or Nogob zones	5'000	\$975,000	IOM, NRC, IRC, SCI, ZOA and ERCS
Conduct prioritization at the site or household level, identify the need of the most vulnerable climate-induced (drought or flood) sites, and respond with transport, storage ES in kind and cash for NFI support.	Jarar, Doolo, Shabelle, Fafan, Siti or korehe zones	3,000	\$525,000	IOM, NRC, IRC, SCI, ZOA and ERCS
Reinforce zonal drought response mechanisms. Conduct pre-distribution rapid assessments and post-distribution end-use monitoring at sites of distribution.	Doolo, Shabelle, Afder, Siti, Jarar, Korehe, Fafan, Liban or Nogob zones	8,000	\$160,000	IOM, NRC, IRC, SCI, ZOA and ERCS

Annex –1 COORDINATION ARRANGEMENTS

Humanitarian coordination in the Somali region is divided into two levels: regional and zonal levels. At the regional level, there are several coordination platforms including the Cluster Coordination, Inter-cluster Coordination Group (ICCG), Durable Solution Working Group, the Disaster Risk Management Technical Working Group (DRMTWG), the Somali UN Coordination, and the Humanitarian NGO Forum. There are seven active clusters that are coordinating, planning and monitoring the humanitarian response regularly. These are: ES/NFI, Agriculture and Livestock, Nutrition, Health, WASH, Protection, and Education. The clusters are chaired by the relevant regional bureaus and the UN cluster coordinators. These clusters work together, through the Inter-Cluster Coordination Groups, towards the common goal to alleviate the suffering of the people under multiple crises (drought, floods, disease outbreaks, conflicts and acute malnutrition). Similarly, the Durable Solution Working Group facilitates its members to identify and initiate a durable solution for the drought-and-conflict induced IDPs. Whenever the humanitarian challenges and gaps involved multiple stakeholders from different Government, UN and NGO agencies and clusters, the issues are coordinated and addressed by the DRMTWG. At the zonal level, the operational response by the Government and humanitarian agencies are coordinated through the zonal coordination mechanism.

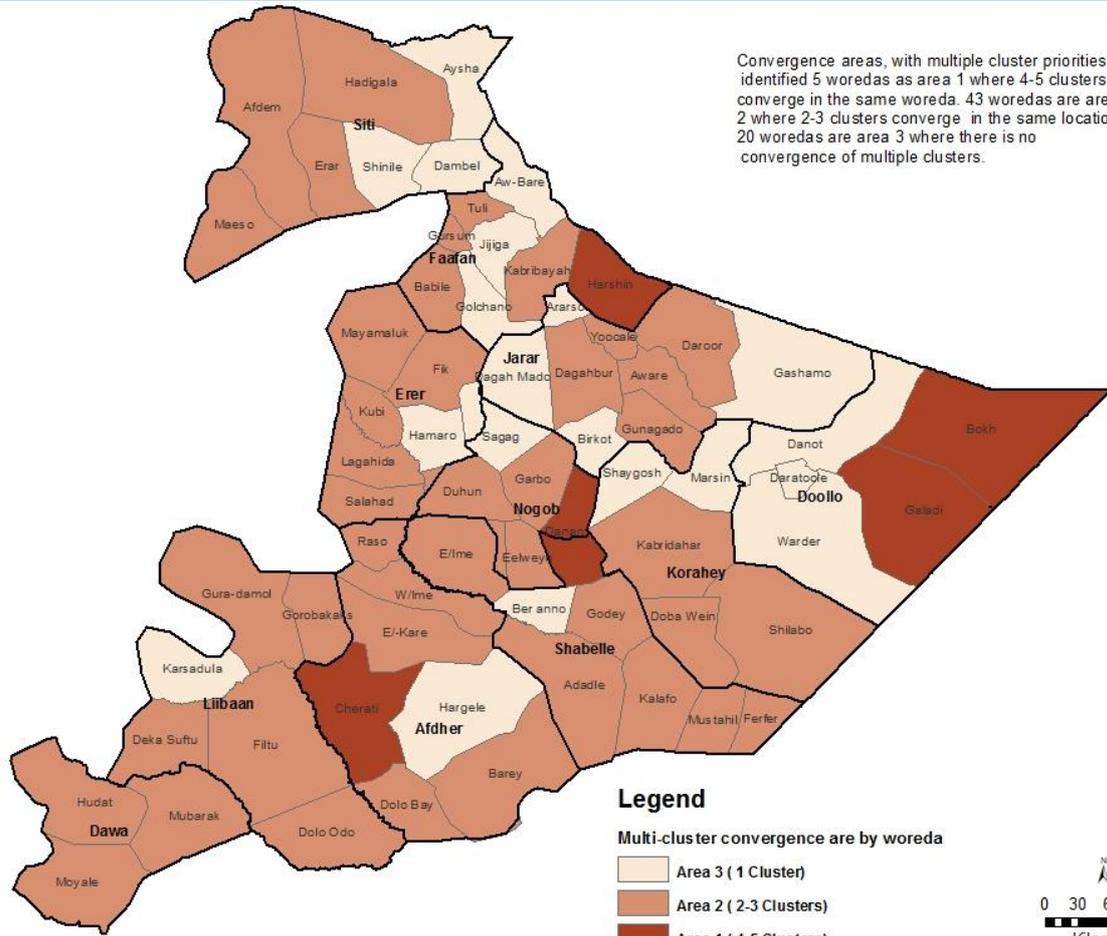
The Somali Region Coordination Architecture



Annex –2

CONVERGENCE AREAS OF MULTIPLE CLUSTERS PRIORITIES

Somali Region Drought-Focused Convergence Areas (as of 16 May 219) DRAFT



Annex -4

Preliminary Comparative Analysis of DTM 14 and 15

DTM round 14 (389 sites)

Food: Access to food

- 70 sites reported with no access to food

The main source for obtaining food for IDPs

- 4 sites reported have no main source for obtaining food and
- 20% of the sites reported rely on host community donation

Nutrition- Supplementary feeding availability

- 31%of the sites reported that supplementary feeding was available for pregnant and lactating women and for children

Nutrition – Site was being screened for malnutrition

- 63%of the sites reported that the site population was being screened for malnutrition

Health – Most Women Delivering Sites

- 81 percent of the sites reported women delivering at home or at the site level

WASH – Avg. Amount of Water Obtained per Day/Person

- 74 sites reported obtained avg. less than 5 liters per day/person

WASH – Condition of Most of the Latrines

- 62%of the sites reported having no toilet

ESNFI – Need for Temporary Shelter Repair Materials

- 95%of the sites reported there a need for temporary shelter repair materials

Protection – Percentage of persons with disabilities

- 0.4% of the IDPs have disabilities' problem,
- 243 sites have the problem of severe/critical disabilities persons and intervention needed immediately

Protection – Percentage of vulnerable elderly persons

- 9% of the elderly persons without care givers,
- 109 sites are severely vulnerable with critical elderly problem and intervention needed immediately

DTM round 15 (409 sites)

Food: Access to food

- 100 sites reported with no access to food

The main source for obtaining food for IDPs

- 7 sites reported have no main source for obtaining food and
- 32% of the sites reported rely on host community donation

Nutrition- Supplementary feeding availability

- 38%of the sites reported that supplementary feeding was available for pregnant and lactating women and for children

Nutrition – Site was being screened for malnutrition

- 70%of the sites reported that the site population was being screened for malnutrition

Health – Most Women Delivering Sites

- 74 percent of the sites reported women delivering at home or at the site level

WASH – Avg. Amount of Water Obtained per Day/Person

- 113 sites reported obtained avg. less than 5 liters per day/person

WASH – Condition of Most of the Latrines

- 64%of the sites reported having no toilet

ESNFI – Need for Temporary Shelter Repair Materials

- 96%of the sites reported there a need for temporary shelter repair materials

Protection – Percentage of persons with disabilities

- 0.4% of the IDPs have disabilities' problem,
- 289 sites have problem severe/critical disabilities persons and intervention needed immediately

Protection – Percentage of vulnerable elderly persons

- 11% of the elderly persons without care givers,
- 95 sites are severely vulnerable with critical elderly problem and intervention needed immediately