

Annual report



International Federation
of Red Cross and Red Crescent Societies

Somalia

Appeal No. MAASO001

29 April 2011

This report covers the period
01/01/2010 to 31/12/2010.



An SRCS Berbera branch mobile clinic nurse attending to a patient from Raribul nomadic community. Photo by Finnish Red Cross

In brief

Programme outcome: In line with the aims of Strategy 2020, the Somali Red Crescent Society (SRCS) programmes contribute to saving lives, protecting livelihoods and strengthening recovery from disasters and crises, while enabling healthy and safe living and promoting social inclusion and a culture of non-violence and peace.

Through its network of 71 clinics covering all 19 regions of Somalia, the Integrated Health Care Programme (IHCP) contributed to the improvement of the health status of the most vulnerable communities through provision of maternal and child health outpatient services, health education, hygiene promotion, Community Based Health and First Aid (CBHFA) as well as HIV and AIDS awareness. The services provided adopted an integrated programming approach linking Health Care interventions with Disaster Management (DM), improving organizational effectiveness and promoting humanitarian principles and values.

Programme summary: With the support of the international Federation of Red Cross and Red Crescent Societies (IFRC), SRCS branches were enabled to implement the planned IHCP activities in 2010. These supported essential health and care services to the vulnerable communities throughout the country through 71 maternal and child health outpatient departments (MCH/OPD), as well as through four mobile clinics. The Federation supports 30 static clinics and four mobile health units in Somaliland and Puntland in the north, while the International Committee of the Red Cross (ICRC) supports 37 clinics and health posts in south and central Somalia.

The IHCP services include treatment of common diseases, antenatal care (ANC) and postnatal care (PNC); immunization for children under five and women of child bearing age; growth

monitoring for children under 5 years; CBHFA; HIV and AIDS awareness; general health education; hygiene promotion as well as raising awareness to reduce harmful traditional practices such as Female Genital Mutilation/Cutting (FGM/C).

The disaster management programme focuses on disaster risk reduction (DRR), enhancing community resilience and strengthening the human resource capacity of SRCS branches to respond to disasters, such as cyclical drought, seasonal floods, storms, fires and disease outbreak. Disaster Management units were established in 11 SRCS branches (six in Somaliland, three in Puntland and two in central Somalia) where SRCS staff and volunteers were trained in disaster response through Branch Emergency Response Team (BERT) drills. During the reporting period, SRCS branches of Hargeisa, Burao and Las Anood in Somaliland and Garowe, Bosaso and Galkayo in Puntland responded effectively to Acute Watery Diarrhoea (AWD) outbreaks, floods and fire outbreaks in internally displaced persons (IDPs) camps and in rural areas. The SRCS branches in Belet Weyne in Hiran Region and Jowhar in Middle Shabelle Region conducted BERT exercises.

The organizational development (OD) programme focuses on governance support and provision of technical and managerial support to SRCS coordination offices in order to improve managerial effectiveness at branch level. The branches in Garowe and Bosaso, along with the coordination office in Mogadishu received financial support to upgrade their internet connectivity, improving communication and access to information in the spirit of 'bridging the digital divide.' The SRCS strategic development plan for 2010 – 2014 was adopted by the SRCS all-inclusive meeting (General Assembly) in February 2010, and was published on the SRCS website <http://www.bishacas-sracs.org> during the first quarter of 2010. The SRCS youth and volunteer activities were supported through the youth clubs established in the branches of Berbera, Burao and Boorama in Somaliland and Garowe, Bosaso and Galkayo in Puntland. The Federation Somali Representation hosted and organized the SRCS partnership meeting held in Nairobi in December 2010.

The principles and values activities focus on reducing the stigma and discrimination against people living with HIV and AIDS, while promoting tolerance and a culture of non-violence. These have been integrated in all SRCS programmes, especially the IHCP, where awareness sessions on HIV and AIDS, anti-discrimination and reducing harmful practices have been regularly addressed as part of the CBHFA activities implemented at community level.

Financial situation: The original country plan budget for 2010 was CHF 3,386,819, of which CHF 1,765,384 (52% coverage) was available in the year, including the opening balance. The overall expenditure during the reporting period was CHF 1,789,652 (53% of original budget and 101% of the total funding received). In June 2010, the country plan was reviewed and the budget revised downward to CHF 2,542,171.

[Click here to go directly to the attached financial report](#)

Number of people reached: The IHCP consultations services provided by the MCH/OPD and mobile clinics reached 350,738 people. Out of these, children under five years were 94,352 (50,589 males, 43,763 females), those over five years were 176,698 (56,653 males, 120,045 females). Antenatal/Postnatal consultation reached 79,015, children aged under five years were vaccinated against the six preventable diseases, 33,310 and 100,684 children were screened for growth monitoring, while 58,352 women received tetanus toxoid vaccine

The health education sessions conducted at clinic and community levels reached 369,364 people. These included health education and hygiene promotion sessions, HIV and AIDS awareness and distribution of SRCS-developed information, education and communication (IEC) materials.

The disaster response activities benefited people affected by seasonal floods, storms, fire and

disease outbreaks in rural and urban settlements, especially among IDP camps in Bosaso, Qardo, and Garowe in Puntland and Burao in Toghddeer Region and Hargeisa in Galbeed Region of Somaliland. The rural and nomadic communities affected by inter- clan fighting over resources and the escalation of violence ignited by the border dispute between Somaliland and Puntland in Sool Region were assisted by the SRCS branches in Burao and Las Anood by providing non-food items and First Aid services to the injured. An estimated number of 26,700 people in IDP camps together with their host rural and urban communities affected by floods, fire outbreak and inter-clan fighting have been assisted.

Our partners: The SRCS/IFRC Somalia Country Representation worked closely with the health authorities in Somaliland and Puntland, strengthened partnership with the United Nations Children's Fund (UNICEF), the World Health Organization (WHO), the World Food Programme (WFP), the United Nations Office for Coordination of Humanitarian Affairs (OCHA) and Somalia Food Security and Nutrition Analysis Unit (FSNAU). The Movement partners include the ICRC, the British, Finnish, German, Japanese, Norwegian and the Swedish Red Cross. The INGOs include World Vision in Somaliland and Médecins Sans Frontiers (MSF), Norwegian Refugee Council and Danish Refugee Council in Puntland.

The SRCS and IFRC would like to thank all partners and contributors for their response to this appeal.

Context

The political and security environment in Somalia remain fluid and fragile. Fighting between the Transitional Federal Government (TFG) forces supported by the peacekeeping force of the African Union Mission in Somalia (AMISOM) and the opposition groups continue to occur in and around the capital (Mogadishu) causing loss of lives, destruction and massive internal displacement of civilian population. The situation in south and central Somalia remain volatile with sporadic fighting between TFG forces and its allies and opposition groups causing massive population movements and disruption of livelihoods.

The general security situation in Puntland in the North East continued to be stable. However, during the month of May 2010, fighting flared up between Puntland security forces and opposition groups in the strategic mountainous area of Galgala, 75 km west of Bosaso, the main port town of Puntland. The fighting subsided towards the end of the year but the situation remains tense.

In the North East and North West, border dispute between Somaliland and Puntland in Sool and Sanag regions continued to generate tension leading to confrontation between the security forces of the two regions. Inter-clan fighting over resources at the border area of Buuhoodle has also continued to cause tension between Somaliland and Puntland.

The Somaliland presidential elections were concluded peacefully on 26 June 2010. The opposition party (KULMIYE) presidential candidate Mr. Ahmed Mohamed Mahmud (Silanyao) won the elections and sworn in as Somaliland's third democratically elected president. The democratic space, success in conflict resolution, peace building and creation of governance structures in Somaliland created a conducive environment for a sustainable humanitarian action and long-term development initiatives.

Somalia Pirates activities along the Somali coast continue to be a major threat to the commercial and fishing vessels in the Gulf of Aden, Arabian Sea and the Indian Ocean as far as Seychelles. The pirates became more sophisticated with high capacity to strike using hijacked merchant vessels as mother ships from where they launch their attacks against target vessels. Despite growing presence of International navies in the area, the pirates' attacks have increased.

The intractable conflict coupled with climatic induced calamities continued to cause massive population movement. According to OCHA -Inter-Agency Standing Committee Population Movement Tracking (IASC-PMT) information, an estimated 137,600 people were displaced during the period

July- December 2010. The September 2010 United Nations Humanitarian Commission for Refugees (UNHCR) reports estimate the IDPs in Somalia to be 1.46 million. The IDPs continue to be the largest single population group in crisis representing 44 percent of the total 3.2 million people in need of humanitarian assistance and livelihoods support. The most vulnerable group among these populations are women and children with 50 percent of all women, 30 percent of all schoolchildren and 60 percent of children under five years that are anaemic. The FSNAU assessment results indicate a sustained nutritional crisis both in the IDP settlements and rural populations in general.

The general food security and nutrition situation in all livelihoods of Somalia remains critical. According to FSNAU post *Gu* 2010 analysis report of August 2010, the rainy season which started in early March 2010 in most parts of the country recorded normal to above normal rainfall leading to a bumper harvest, as well as improved pasture and water levels for livestock grazing. This has resulted in a general improvement in food security. However, the above normal rainfall was followed by dry weather conditions associated with the predicted La Nina phenomena in East Africa. The poor performance of *Deyr* short rains (October-December) in Somalia compounded by the ongoing conflict has negatively affected the food security situation. Currently, 2.4 million Somalis or 32 percent of the people of Somalia are in urgent need of humanitarian assistance and livelihoods support.

The FSNAU November 2010 assessment reports showed that the malnutrition rates have increased significantly, particularly in southern Somalia where one in four children are acutely malnourished. In the North West IDP settlements of Hargeisa, Burao and Berbera in Somaliland, the Global Acute Malnutrition (GAM) was 10.8%, 12.1% and 14.2% respectively indicating a serious situation. While in North East IDP camps of Garowe, Galkayo and Bosaso, the GAM rates reported were 13.3%, 16.3% and 15.6% respectively indicating a sustained serious situation in Garowe and critical situations in Galkayo and Bosaso.

Due to the La Nina phenomena and the failure of the *Deyr* rainy season (October-December, 2010) and subsequent deteriorating food security situation, both Governments in Somaliland and Puntland declared a state of emergency and appealed to the humanitarian agencies for assistance.

Progress towards outcomes

Disaster Management

The disaster management programme has for the last five years been funded primarily from the Tsunami recovery programme that ended in March 2010. The IFRC, in consultation with the American Red Cross, commissioned an external evaluation to evaluate the American Red Cross-supported component of the disaster preparedness of the tsunami recovery programme in Puntland and Somaliland, which was completed in July 2010. The final evaluation report is available upon request.

During 2010, the Somalia Disaster Management programme has not attracted adequate funds leading to significant scale down of activities. Despite the funding gap, IFRC/SRCS managed to mobilize limited resources internally from the Movement partners to enable SRCS branches to respond to the emergencies that occurred in the reporting period.

Programme purpose: To reduce the number of death, injuries and impact from disasters

Programme Component 1: Disaster Preparedness and Response
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Component Outcome: Improved capacity of SRCS and the target communities to prepare for and respond to disasters.

Achievements:

Despite the funding constraints, the SRCS branches continued to implement the planned activities hence contributing to enhancing the resilience of the most vulnerable communities.

Seasonal watery diarrhoea and fire outbreaks are common phenomenon in the IDP camps in Somalia, especially in the coastal town of Bosaso, Bari Region in Puntland. In March 2010, a fire broke out in one of the IDP camps leaving thousands IDPs homeless. The IFRC and the German Red Cross mobilized limited resources to support local branch volunteers to respond to the emergency where they distributed sanitation tools and provided logistical support as well as allowances to the volunteers. On 13 June 2010, another fire broke out in Shebelle and Girible IDPs camps in Bosaso leaving one person dead and five others injured. The SRCS Bosaso Branch volunteers provided First Aid, evacuation assistances, shelter and psychological support to 3,000 people affected by the disaster.

In Sool Region, SRCS Las Anood branch volunteers and the clinic health staff provided First Aid to people affected by the inter-clan fighting and the confrontation between the security forces of Somaliland and Puntland. SRCS volunteers evacuated the injured to Las Anood General Hospital and mobilized health staff from Ainabo Clinic to support the hospital to cope with the emergency. The SRCS Burao Branch in Toghdeer Region in Somaliland responded to the inter-clan clashes in Buuhoodle at the border with Ethiopia, which displaced an estimated 1,800 families. The branch distributed 100 pieces of tarpaulins, clothing materials and provided First Aid to the injured people.

Heavy rains, strong winds and hailstorm caused wide flooding and destruction in Wajaale, Alleybaday and Sheikh Districts in Somaliland and Bari Region in Puntland. In Somaliland, 415 houses in Hargeisa Town and in the IDP camps were destroyed. It also resulted in the death of 11 persons due to flooding and electrical shocks. The SRCS Hargeisa Branch responded to the disaster by distributing 150 pieces of plastic sheeting and 800 pieces of soap and other hygiene materials. The mobile health teams provided First Aid and treated the injured. SRCS was tasked by the Ministry of Health and Labour to lead the chlorination of water sources to prevent outbreak of diarrhoeal diseases. The National Society coordination office in Hargeisa deployed three teams to the affected areas to prevent disease outbreak and distributed 1,100 water ceramic filters and aqua tabs to make the water fit for human consumption..

In Puntland, Bosaso branch dispatched an assessment team to Aluula District North East of Bosaso Town, which was affected most by the wind, and rainstorm that hit the area in May 2010. As a result of this disaster, two people died and scores were injured; 725 households were destroyed (houses, farms and water facilities were damaged, livestock washed out). The Federation's Somalia Representation provided financial support to the branch to mobilize 150 volunteers who were dispatched to assist UNHCR in registration and support in the distribution of shelter materials provided by the Danish Refugee Council, Norwegian Refugee Council and WFP. The branch also provided First Aid and psychosocial support to the affected population and distributed sanitation tools to the IDP camps in Bosaso Town and Qardho District.

In March 2010, an Acute Watery Diarrhoea (AWD) outbreak was reported in Togwajaale area in Galbeed Region in Somaliland, which caused death of two people. The SRCS outreach team from Alleybade Clinic treated 175 cases, distributed chlorine tablets to households in the area and disseminated health messages on water hygiene and diarrhoea prevention. The SRCS Somaliland coordination office was tasked by the Ministry of Health and Labour to lead AWD preparedness and prevention. The Federation's Somalia Representation dispatched four cholera kits to Somaliland and Puntland, which were used to respond to the outbreak.

Programme Component 2: Community Preparedness
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Component Outcome: Improved community resilience to reduce vulnerabilities and enhance capacities to respond to disasters.

Achievements:

To enhance the response capacity of SRCS branches in central Somalia, the Federation supported the SRCS Coordination office, Disaster Management Unit in Mogadishu to conduct Branch Emergency Response Team training for SRCS branches in Jowhar in Middle Shabelle Region and Belet Weyne in Hiran Region. In Jowhar, 21 SRCS volunteers and staff from 5 sub-branches of

Bal'ad, Mahaday, Adale, Warshiekh, and Maquudale attended a 7-day practical drill on how to respond to emergencies. In Belet Weyne, 20 SRCS volunteers and staff from the sub-branches of Bulo-burde, Mataban, Mahas, Jalalqsi and Buqda-Aqable attended a 7-day practical drill on emergency response. The training was a hands on practical exercise adapted from the National Disaster Response Team (NDRT) training modules.



Trained SRCS Garowe branch volunteers assisting in food distribution to IDPs in Garowe town, Photo by SRCS

Recruitment and training of volunteers in First Aid linked to disaster response is a core activity in SRCS branches. During the reporting period, Garowe Branch in Puntland trained 340 volunteers who were provided with First Aid kits after the completion of the training. In Somaliland, Boorama Branch trained 322 volunteers (179 males, 143, females) and formed 16 action teams with 138 membership (99 males, 39 females) ready for mobilization in case of emergency.

To enhance the communication capacity of SRCS branches, the Federation's Somalia Representation dispatched the Regional IT

Manager. With the SRCS Disaster Management Coordinator in South and Central Somalia and the Disaster

Management officers in Puntland, they reviewed the VHF and HF radio communication networks at SRCS branches in Hargeisa and Berbera in Somaliland and Garowe, Galkayo and Bosaso in Puntland. The three-week mission saw the installation of HF Radios in field vehicles of Berbera, Bosaso, Garowe and Galkayo branches and VHF repeater stations in Berbera, Bosaso, Garowe, Galkayo branch offices and Hargeisa Coordination office. In addition to the installation of the radio communications equipment, the Regional IT Manager checked and repaired the computers in these branches and upgraded the internet connections.

Health and Care

Programme Purpose: Develop, promote and strengthen community based health and care programmes focusing on preventive, promotive and curative aspects

Programme Component 1: Maternal and Child Health/Out Patient Department (MCH/OPD)
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Component Outcome: Improved health services are provided to the target communities through the network of MCH/OPDs, outreach and mobile clinics.

Achievements:

Through the IHCP, the SRCS continued providing health services to the Somali community focusing on maternal and child health. The overall service utilization in both the static and mobile clinics has reached 350,738 beneficiaries in Somaliland and Puntland.

The Expanded Programme on Immunisation (EPI) reached 33,310 children who were vaccinated against the six preventable diseases, while 58,352 mothers of childbearing age received tetanus toxoid vaccine.

The SRCS health staff at clinic level participated in the EPI acceleration campaign organized by UNICEF in collaboration with WHO and ministries of Health in Somaliland and Puntland adopting the Reach Every District (RED) approach by administering immunization in three successive rounds of outreach. Due to the RED approach and the SRCS mobile health units outreach activities, immunization coverage countrywide has increased from 31% to 51% in 2010. (UNICEF Somalia updates 2010)

The SRCS clinics routinely carry out nutritional screening for children aged under five years whenever they visited the facilities. A total of 100,684 children were screened during the reporting period. Out of the number screened, 246 were diagnosed with oedema, 4,142 with severe malnutrition and 5,080 with moderate malnutrition, while 91,216 recorded normal weights. Consequently, 44,691 children age between 6 – 60 months received vitamin A supplementation.



The severely malnourished children without complication were enrolled in the Outpatient Therapeutic Programme (OTP) run at the 12 SRCS clinics in Somaliland and 18 clinics in Puntland for the provision of Plumpy'nut supplied by UNICEF. Those with complications were referred to therapeutic feeding centres or the nearest hospitals for further management. During the reporting period, 3,411 children were admitted to the therapeutic feeding programme where 3,139 recovered 200 defaulted, 41 died and 31 were referred for further management. The defaulter cases were a result of population movements due to the effects of the drought and conflict.

“My name is Halima Al. I live in Boon village, Awadal Region. Today I brought my 11-month child to the SRCS clinic for vaccination. I would like to thank SRCS for reaching us in this remote village and for providing life saving services to our children. Without these services, my child could not have received appropriate treatment and immunization and I would have paid more money and spent more time to take my child to Boorama Town 40 km from here.”

Safe motherhood services recorded a total of 79,015 ANC/PNC consultations. Out of these, 31,452 women received iron prophylaxis to reduce anaemia during pregnancy and pauperism and 18,417 mothers received vitamin A supplementation. The midwives and traditional birth attendants (TBAs) assisted 8,287 deliveries (2,381 by midwives and 5,906 by TBAs) while 408 mothers with pregnancy related complications were referred to hospitals for further management.

Medical supplies and consumables were procured and delivered to the clinics through the SRCS branches in various locations, ensuring quarterly regular supplies. Minor medical equipments such as thermometers, blood pressure machines and stethoscopes were replaced on an annual basis or when required. During the reporting period, the Federation's Somalia Representation managed to procure and deliver 360 OPD kits and 4 cholera kits to Somaliland and Puntland clinics. The European Commission Humanitarian Office (ECHO) facilitated accessibility to Somalia through their humanitarian flights thus, no commercial flights were used to deliver medical supplies to Somaliland and Puntland.

Training to enhance the capacity of the SRCS staff at clinic, branch and national levels is conducted regularly. In the reporting period, 7 clinic nurses and 28 midwives received training on case management and maternal child health interventions. Twenty-eight (28) auxiliary nurses and four midwives participated in raising awareness to discourage the harmful effect of FGM practices seminar organized by the Ministry of Women Affairs in Puntland. Two auxiliary nurses participated in the OTP training organized by UNICEF. Two national health officers from Somaliland and Puntland participated in the Health Emergencies in Large Populations (HELP) course in Nairobi organized by the ICRC and Kenya Red Cross Society.

In November 2010, the SRCS national health officer from Somaliland, IFRC Somalia programme manager and the Senior Health officer participated in the training of trainers (ToT) workshop on Epidemic Control for volunteers manual organized by IFRC Africa Zone and the Health Department at IFRC Geneva Secretariat. The trained staff will roll out country training workshops during 2011.

Through the SRCS volunteers' network, community health committees (CHCs) and clinic health staff, the health education and hygiene promotion programme reached an estimated 369,364 community members comprising of women, men and youth. Areas addressed included diarrhoeal diseases, malaria, personal hygiene and sanitation, importance of immunization for both children and women, antenatal and postnatal services, importance of vitamin A supplementation, nutrition education, exclusive breastfeeding, proper weaning practices, discouraging FGM/C, physical and psychological effects of FGM, early identification of high risk pregnant mothers, referral of cases, as well as HIV and AIDS prevention and control.



Health education session at community level, photo by SRCS

Training of volunteers on basic First Aid is a routine activity in all SRCS branches. Active volunteers receive further advanced training on Community Based Health and First Aid (CBHFA). Garowe and Galkayo branches trained 178 volunteers on CBHFA including 45 volunteers from the IDP camps. The volunteers drawn from the IDP camps carried out health education activities focusing on personal hygiene (hand washing: before preparing foods, eating, handling baby and after visiting the latrine). They have reached 400 families through this programme.

SRCS volunteers in Garowe, Galkayo and Somaliland branches mobilized their communities to participate in the chlorination of water sources and environmental clean up campaigns. Garowe and Galkayo branches mobilized 70 volunteers to carry out water chlorination activities targeting households' water storage, water points and water trucks. An estimated 4,000 community members benefited from the service, majority of them from IDP camps. The water chlorination statistics from Garowe Branch reported that 1,007 water trucks, 4,344 reservoirs, 701 shallow wells and 1,271 water containers were chlorinated. Hygiene promotion sessions relating to environmental sanitation and good hygiene practices were conducted during the campaign.

The SRCS branches of Puntland supported the IDP communities in Garowe, Galkayo and Bosaso towns with sanitation tools to be used by the volunteers during the hygiene and sanitation campaigns. Bosaso Branch mobilized 50 volunteers during the clean-up campaign following the fire outbreak in the IDP camps. An estimated 15,000 IDPs benefited from this campaign.

The SRCS branches in Somaliland and Puntland commemorated the World AIDS Day through organizing street processions, football matches and public gathering. Awareness messages were aired by the local Radio stations to sensitize the communities about the pandemic and its prevention and the reduction of stigma and discrimination. Community leaders, elders, women groups, youth and local authorities were invited to take part in the commemoration activities

The SRCS HIV and AIDS activities are integrated in the overall health programme throughout the country. The clinic staffs, volunteers and community-own resource persons disseminate information on HIV and AIDS to their respective communities through health education sessions. Awareness campaigns include meetings, media, and focus group discussions, distribution of posters, brochures and leaflets at branch, clinic and community level. An estimated 200,000 people benefited from these campaigns.

The SRCS continued discouraging harmful practices such as FGM through weekly health education sessions both at clinic and at community level. The topics discussed include basic facts on FGM, immediate and long-term health complications of FGM, relationship between FGM, reproductive health, HIV/AIDS and sexually transmittable diseases, Islam and FGM practice. This would enhance

awareness and influence community behavioural change in the long term. Approximately 13,850 people including women, men and youth benefited from the campaigns. Borama Branch in Somaliland trained 33 volunteers (19 males, 14 females) on FGM sensitization to enable them conduct awareness campaigns to educate the community about the harmful effects of FGM.

In February 2010, the SRCS in collaboration with the Ministry of Health and Labour in Somaliland and associated partners organized a public gathering to sensitize the community about the harmful effects of FGM. A Debate on FGM/C practices was organized in Hargeisa and Borama where 66 youth from SRCS branches participated in the debate. Prior to the debate, Gynaecology and Obstetric doctors and Religious leaders were invited to give comprehensive information on FGM/C and its harmful effects on the health of women.

Organizational Development

Programme purpose: To increase local community, civil society and Red Cross/Red Crescent capacity to address the most urgent situations of vulnerability.

Programme Component 1: Support National Society OD Process

Component Outcome: SRCS governance and management ability to effectively lead the NS and its service delivery improved.
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Achievements.

The SRCS 2010-2014 strategic development plan process was concluded in January 2010 and adopted by the SRCS all-inclusive meeting (General Assembly) convened in Garowe, Puntland on the 23 and 24 February 2010. The meeting which was attended by over sixty members from all the 19 branches of SRCS also elected new members to the Executive Committee to fill the vacancies in its membership. The strategic plan was subsequently published and posted to the SRCS website and hard copies were distributed internally to the branches and the partners

The Federation Somalia Representation hosted and facilitated the SRCS partnership meeting convened on 10 December 2010 at the Federation East Africa Regional Representation premises in Nairobi. The meeting shared with partners the SRCS strategic plan and priorities and the action plan to achieve the objectives of the strategy. The partners shared their comments on the proposed plan of action and appreciated the achievements of the SRCS considering the complex context of Somalia.

To ensure transparency, accountability and organizational effectiveness, the Federation Somalia Representation staff carried regular monitoring missions to Somalia. During these missions, technical support on reporting and financial management was provided to the SRCS branch staff. The health programme team conducted two review meetings with their counterparts to take stock of the achievements, identify the gaps, harmonize health protocols across the clinics and streamline and improve reporting. As a result of the close monitoring and follow up of the reporting requirements, Somalia Representation fully achieved its reporting obligation for the Appeal and Pledges reporting falling due before the end of 2010 and emerged one of only two Representations in Africa Zone to fully fulfil this requirement in 2010. It is worth mentioning that, Somalia Representation was able to produce 12 reports in total during 2010. Likewise, the Somali Red Crescent was among the first 10 NS globally to post its 2009 Annual Report on the Federation website by May 2010.

Programme Component 2: National Society leadership and management development
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Component Outcome: Enhanced branch managerial capacity, strengthened leadership and improved organizational effectiveness.

Achievements

Regular consultation meetings between the SRCS leadership and the IFRC Country Representation were held where policy issues were discussed and progress of programme implementation reviewed. The Federation's Somalia Representation organized a meeting in February 2010 for SRCS senior management to discuss the plan of action for 2010-2011. The meeting was attended by the two SRCS coordinators from Somaliland and South and Central, a representative to Puntland branches and the SRCS OD and communication director. Two Movement partners meetings were held during the period attended by SRCS, IFRC, ICRC and the PNS based in East Africa Region. The meetings discussed progress in programme implementation, challenges and constraints facing the humanitarian action in Somalia and collective efforts needed to overcome these challenges.



Volunteers participating in computer training in Galkayo youth club. PHOTO/SRCS

To ensure stability and continuity of the services of SRCS branches, the Federation through, the Organization Development programme provided salary support to all SRCS branch secretaries in all the 19 regions of Somalia as well as the Senior Management at the Coordination Offices in Somaliland and Mogadishu.

SRCS youth/volunteers clubs in Garowe, Bosaso and Galkayo in Puntland, and Boorama, Berbera in Somaliland continued to provide various skill development training opportunities to the youth. These include computer literacy, language skills, Peer Education and First Aid. The youth also use the internet services provided by these clubs for distance learning, as most of the members are University students or just completed their University education.

During the reporting period, the Federation through funding from the German Red Cross Tsunami Recovery Project supported Bosaso Branch to complete the construction of its youth club and provide resources to equip the club with furniture, eight computers, one TV set, one refrigerator, one cooker and two split unit air-conditions. Similar support was provided to Qardho sub-branch in Bari Region, where the sub-branch office received one desktop computer and office furniture. In addition, the sub-branches of Ufayen, Iskuashuban, Waciye and Rako received financial support to construct their sub-branch offices.

Principles and Values

Programme Component 1: Promotion of Fundamental Principles and Humanitarian Values

Component Outcome: Enhanced knowledge, understanding and application of the Fundamental Principles and Humanitarian Values.
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Achievements

The principles and values component is integrated in all SRCS programmes. The wider health and disaster management activities include messages on the promotion of the Red Cross and Red Crescent principles and values and advocacy on tolerance, ant-discrimination and respect for human dignity. The SRCS branches through the youth /volunteers clubs advocate regularly for tolerance and peaceful co-existence.

The SRCS branches in Somaliland and Puntland celebrated the Red Cross and Red Crescent day on 8 May 2010. They organized public gatherings, street processions, sports competitions at schools and awareness campaigns through the local radio stations to disseminate the message of the day and the theme of the occasion. The SRCS staff and volunteers played an active role

reaching out to the general public on that day. For example, the SRCS branch secretaries and the coordinator in Somaliland addressed a public gathering in Hargeisa focusing on the theme of the Day '**our world your move**' to raise the awareness among the community about the humanitarian consequences of climate change.

Programme Component 2: Anti-discrimination and violence reduction
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Component Outcome: Vulnerable communities' ability to combat discrimination, intolerance and violence is enhanced.

Achievements

The SRCS branches in Puntland and Somaliland conducted awareness sessions focussing on HIV and AIDS prevention and stigma and discrimination reduction, encouraging the public to visit voluntary counselling and testing (VCT) centres to determine their status. The SRCS branches mobilized 60 volunteers to conduct the awareness sessions. An estimated 82,000 community members benefited from the awareness sessions including youth, women groups, and students. More than 1,000 posters and leaflets were distributed during the commemoration of the World AIDS Day.

Constraints or Challenges

The increased insecurity and shrinking humanitarian space in Somalia has restricted the movement of SRCS and Federation staff and constrained accessibility to the beneficiaries, especially in south and central Somalia and the areas of frequent tensions in Somaliland and Puntland. The escalation of violence in the south and central Somalia prevented the branches in the region to conduct the Branch Emergency Response Team (BERT) trainings.

The increased insecurity has a double effect on the budget as all monitoring field visits in Puntland and Somaliland including in town tours have to be escorted by armed police. Hence, the cost of security services has increased the operational costs.

The precarious security situation has accelerated conflict-induced displacement and aggravated the vulnerability of people who are already weakened by successive cycles of drought and disease outbreaks. This volatile situation is not matched by increase in resources to meet the needs of the vulnerable people and preserve their dignity. With the attention of donors increasingly focussed on emerging hot spots, Somalia protracted conflict will be forgotten and humanitarian actors working in Somalia will face enormous challenges in sustaining their services.

With increased vulnerability, the demand on SRCS services has increased and there is mounting pressure from the local authorities on SRCS to do more and reach further. At the same time, there are limited opportunities to raise funds locally to fill the funding gap to meet these demands. The total dependence on external funding which has seen a steady decline over the years due to the international financial downturn will make SRCS vulnerable to the fluctuation in funding and increase challenges related to sustaining the current level of services and maintaining its good image. The Federation and SRCS will work together to scale up efforts to raise funds for the programmes including domestic resource mobilization by engaging the private sector in Somalia, especially the telecommunication sector.

Working in partnership

SRCS enjoys the confidence and full support of Movement partners based in Nairobi. The Movement partners hold regular consultation meetings with the SRCS leadership to review plans, agree on priorities and harmonize the support to the National Society.

The SRCS and IFRC Somalia Country Representation have renewed contacts with the World Bank country office following up on previous discussions to secure a new grant for Somalia health programme in 2011-2012.

The SRCS supported by the IFRC maintained and strengthened its working relationship with UN agencies such as UNICEF, WHO, UNFPA, FAO/FSNAU-Somalia and OCHA. The National Society renewed its agreement with UNICEF for 2011 to continue supplying SRCS clinics with MCH kits, vaccines, cold chain, nutrition biscuits and training of health staff.

The National Society has strengthened its working relationship with other organizations such as World Vision in support of the orphaned and vulnerable children (OVC) in Somaliland as well as Danish Refugee Council and Norwegian Refugee Council in support of IDPs in Bosaso, Galkayo and Garowe in Puntland. It has also increased cooperation with MSF in the referral of severely malnourished children to therapeutic feeding centres as well as with the Islamic Relief in providing health services to IDPs in Galkayo.

Contributing to longer-term impact

SRCS continued to be a leading health service provider in Somalia. The integrated approach of the health delivery system through the networks of MCH/OPD clinics and mobile health units contributed to improvement of the health status of communities in its areas of operation. SRCS services are well acknowledged and recognized by local authorities as well as other partners. The immunization coverage in the SRCS clinics catchment areas is reported to be among the highest in the country. The SRCS also contributed to an increase in immunization coverage countrywide from 31% to 51% through the child health days and Reach Every District (RED) approach adopted by UNICEF, thus contributing to the improvement of child health in Somalia.

The disaster management programme strengthened the response capacity of SRCS staff and volunteers and enhanced the resilience of local communities. The SRCS response to the fire outbreaks in IDP camps in Bosaso, the AWD outbreak in Garowe and Galkayo in Puntland as well as in Awadal and Galbeed regions of Somaliland is evidence of an enhanced response capacity of the National Society.

SRCS is a key partner to Somalia FSNAU. Its network of clinics is one of the main sources of information on nutrition data in the country. In May and June 2010, SRCS participated in surveys conducted by FSNAU/UNICEF, which assessed the nutrition status of IDPs and five rural livelihoods in the three zones.

Looking ahead

The IFRC Somalia Country Representation will continue supporting the National Society to develop new action plans for 2011-2012 based on the priorities identified in its strategic development plan for 2010-2014. The programme focus will be on Health and Care, as well as improvement of the managerial capacity at branch level. The disaster management programme will focus on emergency response in the areas affected by drought due to the failure of the *Dyer* rains as well as follow up contacts with ECHO for support of small-scale disaster risk reduction projects in Puntland and Somaliland.

The well acknowledged and recognized health services provided by SRCS need to be improved and sustained. The Federation will continue to work closely with Movement partners to ensure that SRCS get the necessary financial and technical support to continue sustaining and improving its humanitarian services in Somalia.

How we work

All International Federation 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 Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.

The International Federation's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The International Federation's work is guided by [Strategy 2020](#) which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

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