

# HUMANITARIAN COORDINATION MECHANISMS IN SOMALIA



UNITED NATIONS OFFICE FOR THE COORDINATION OF HUMANITARIAN AFFAIRS SOMALIA

## The Global Humanitarian Reform

Over the past years, international response to humanitarian emergencies has not always met the basic needs of affected populations in a timely and predictable manner. With varying responses from crisis to crisis, existing capacity levels are often insufficient to adequately meet key emergency needs. To better understand and correct such deficiencies, the UN Emergency Relief Coordinator, Jan Egeland, commissioned in 2005 an independent Humanitarian Response Review (HRR) of the global humanitarian system. The HRR identified a three-pronged reform programme to improve the predictability, timeliness, and effectiveness of humanitarian response:

1) **Strengthen humanitarian response capacity** through the adoption of a cluster approach which encourages the effective use of expertise and technical know-how of mandated organizations in their particular sectors to fill identified response gaps, ensure accountability with strengthened leadership and clearly defined roles and responsibilities, and bolster coordination of efforts. Somalia is now one of four pilot countries to implement the cluster leadership (together with DRC, Liberia and Uganda).

2) **Strengthen the Humanitarian Coordinator System** through the establishment of an Inter Agency Standing Committee (IASC) at the field level, engaging the broader humanitarian community, and making proactive use of the Common Humanitarian Action Plan as a strategic planning instrument.

3) **Ensure predictable funding** by strengthening the existing Central Emergency Response Fund (CERF) to allow for an immediate response to an emergency. Approved by the UN General Assembly in December 2005 and launched in March 2006, the modernized CERF targets US\$ 500 million to be made available from additional voluntary contributions. OCHA administers the disbursement of CERF grants.

## The Humanitarian Context in Somalia in 2006

Somalis experience one disaster after another. By early 2006, Somalia was experiencing an aggravated humanitarian emergency brought on by the worst drought in over a decade. Around 2.1 million Somalis country-wide were in need of critical assistance, including up to 400,000 IDPs. Central and Southern Somalia in particular felt the brunt of the drought, with around 1.5 million experiencing an Acute Food and Livelihood Crisis or Humanitarian Emergency.

Following the *Gu* season (March-May), around 1.8 million people were identified in need of assistance. Though this marked some improvement, the regional variations in post-*Gu* outcomes were significant and in several regions the food and livelihood situation security continued to deteriorate. Recently, the *Deyr* seasonal rains (October to December) began early and with greater than normal intensity in southern Somalia. In some parts, rainfall has measured six times the average for this time of year, and as a result regions in southern Somalia are experiencing large-scale flooding. As of 1 December, around 340,000 Somalis in the Shabelle and Juba riverine areas have been affected. Due to a moderate El Nino, a longer than usual *Deyr* season is projected and the situation is expected to deteriorate.

Against this backdrop, the situation in Somalia is of particular concern. The country has endured sixteen years of armed conflict and generalized violence, resulting in widespread human rights abuses, destruction of public infrastructure, and disintegration of basic health and social services. Within this ongoing complex emergency, the drought followed by the flooding have further debilitated livelihoods and aggravated already difficult living conditions. The current risk of war further compounds the gravity of the context. Up to 400,000 people are displaced in Somalia living in settlements and public buildings - more than five percent of the population. They are extremely vulnerable having lost all their assets and often do not enjoy protection through clan affiliation. Most of the displaced from southern minority groups continue to suffer political and economic discrimination. Malnutrition rates remain exceedingly high in some areas of southern Somalia, and access to basic social services such as health, education and potable water is minimal. Limited humanitarian access and presence, particularly in south and central Somalia, remains an overriding constraint on humanitarian assistance.

## Coordination Mechanisms in Somalia

Since the onset of the drought in late 2005, and now the flooding, coordination mechanisms have been adapted and strengthened to respond in an effective and timely manner to the unraveling humanitarian situation.

**Inter-Agency Standing Committee (IASC):** In consultation with partners and in compliance with the Global Humanitarian Reform, the Somalia IASC (or Humanitarian Country Team) was established in January 2006 and meets on a monthly basis. The IASC membership includes OCHA, UNDP, UNICEF, WFP, FAO, WHO, UNHCR, CARE, Gedo Health Consortium, Danish Refugee Council, OXFAM/NOVIB, Concern, Save the Children (UK) and ASEP. ICRC is an observer, while FAO/FSAU and FEWS/NET are technical advisors. On a needs basis, the Somalia IASC meets with donors.

**Clusters:** As a result of the Reform, nine clusters have been established in Somalia together with respective cluster leads and co-leads from UN Agencies and NGOs: i) food aid; ii) agriculture and livelihood; iii) water and sanitation; iv) health; v) nutrition; vi) protection; vii) education viii) logistics, and recently ix) shelter. Cluster leads are accountable for and expected to prepare sectoral response plans, including identifying key partners, planning, standard-setting, and coordination of programme implementation. Cluster co-leads provide support to the cluster lead. Recently a decision was taken to embed, where appropriate, IASC clusters within Somalia Support Secretariat sectoral committees to minimize duplication and ensure better harmonization of coordination structures.

**Humanitarian Response Group (HRG):** The HRG meets to discuss arising humanitarian issues needing urgent attention, and to mobilise effective and timely response plans. Since the establishment of the Somalia IASC, the HRG has evolved to become an inter-sectoral working group composed of the cluster leads and co-leads, as well as UN and NGO representatives, reporting to the Somalia IASC. The HRG meets on a fortnightly basis. Since the start of the floods, the Flood Working Group has also been reactivated and meets twice a week to ensure the mobilisation of an effective flood response.

**Coordination with Local Authorities:** With the onset of the floods, the TFG in Baidoa and the Islamic Courts Union (ICU) in Mogadishu have established Flood Emergency Committees with clear focal points for humanitarian agencies to work with to ensure a coordinated approach to the response.

Information is consistently shared with the Committees as well as with local authorities wherever UN agencies have a presence on the ground, in particular to ensure safe and sustainable passage of humanitarian aid. Field coordination among local authorities, national and international organisations remains critical in the design of responses and identification of gaps and efforts are being made to increase these mechanisms wherever operational organizations are present in southern Somalia.

## The Role of OCHA

Humanitarian needs in Somalia abound and require urgent and sustained coordinated assistance. In a complex emergency, the UN Humanitarian Coordinator plays a critical role in mobilising and coordinating an effective and timely humanitarian response. OCHA's mandate is to support this role based on the premise that a coherent approach to emergency response will maximise benefits and minimise pitfalls, such as duplication. In Somalia, OCHA endeavours to improve coordination at the field level through strengthened field presence (both international and national), to better support aid partners in the delivery of assistance. OCHA facilitates the planning of common responses (including contingency planning) to identified needs and negotiates humanitarian access, supporting grass-root local reconciliation initiatives where they promote humanitarian access, in collaboration with the appropriate local structures and leaders. OCHA promotes the respect for, and compliance with humanitarian principles of impartiality, neutrality, independence and "Do no Harm", in particular for the protection of vulnerable civilian populations. Advocacy is a key element to bringing international attention and support to crises but also engagement and commitment by national and local authorities.

Specific coordinating tools available include:

**Consolidated Appeals Process (CAP)** - Created in 1991 (General Assembly Resolution 46/182), and coordinated by OCHA, the CAP is an inclusive annual programme cycle to analyse the humanitarian context, assess needs, identify strategic priorities and plan programmes for humanitarian response. In short, the CAP is a coordinating, planning, advocacy and fund-raising tool at the disposal of the aid community in close cooperation with national and local authorities.

Due to the drought in early 2006, the 2006 Somalia CAP was revised to reflect the deteriorated humanitarian situation. The Revised Appeal targeted around 2.1 million people and requested around \$US 326 million, up from the original \$US 174 million requested to target 1 million beneficiaries. As of 1 December 2006, the 2006 CAP had received around US\$188 million (58%), most toward the food sector.

Following the *Gu* rains, around 1.8 million people were identified in need of assistance. The 2007 Somalia CAP targets this identified group, particularly around 1.1 million Somalis in South/Central regions, and appeals for just over US\$ 237 million in support of 128 projects.

Given the magnitude of the flooding, however, a Flood Response Plan has been developed appealing for an additional US\$ 18 million to cover immediate life-saving activities until early in 2007. An additional US\$ 10 million has been sourced from the CERF (see below). Based on the flood response that organizations will be able to implement, the CAP 2007 will be adjusted accordingly during the course of next year.

**Humanitarian Response Fund for Somalia (HRF)** - Administered by OCHA Somalia and in existence since early 2004, the HRF aims to improve the timeliness and appropriateness of aid responses through the provision of a flexible resource that can be drawn on by aid partners. The Fund supports rapid response projects that are developed in the first phase of an emergency and before mainstream responses come into play. Since its inception, the HRF has supported 57 projects throughout the country. Around US\$ 9.4 million has been disbursed to various NGOs and UN agencies and it is estimated that about 1 million people have directly benefited from these initiatives. Two of these projects (both in Middle Juba) are in response to the floods and benefit 140,400 people. Concerted efforts are now being made to encourage local Somali NGOs to seek support for their projects through this funding mechanism.

**Central Emergency Response Fund (CERF)** - As mentioned above, the CERF at the global level has been strengthened to promote early action and enhance response to time-critical requirements, and strengthen core elements of humanitarian response in under-funded crises. During the drought, Somalia received three CERF grants totalling around US\$ 6.1 million (UNICEF, WHO, WFP and FAO) benefiting eleven programmes on supplementary feeding, polio vaccination, water trucking, restoration of water points, de-stocking, animal health, common services and logistics, school feeding, and

water quality control. Given the flooding, another allocation of around US\$ 10.3 million has been granted to the Somalia operation: US\$ 2.8 million to WFP to support pre-paid air-service cargo and passengers flights and another US\$ 3 million to cover airdrops; US\$ 0.5 million to FAO to support emergency livelihoods of the affected farmers; US\$ 2 million to replenish the HRF in support of NGOs that cannot directly access the CERF; and US\$ 2 million to UNICEF to cover emergency NFIs.

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Throughout 2005/2006, OCHA Somalia has received funding from:  
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Updated December 2006