

Allocation Details	
Allocation Title	Early lifesaving response to communities projected to be most affected by El Nino induced riverine flooding in Hirshabelle (Jowhar, Beletweyne, Balcad) and Gedo (Baardheere, Luuq and Dollow)
Allocation Type and Round	SHF Reserve Allocation 5 - 2023
Allocation Amount	US\$ 15 million
Emergency Type	Natural Disaster
Emergency Sub-types	Flood
Allocation Launch Date	22 September 2023
Proposal Submission Deadline	28 September 2023
Section 1: Strategic Statement	
In view of a greater than 90 per cent chance that El Nino will continue through the end of the year leaving 1.2 million people at high risk of flooding, the Somalia Humanitarian Fund launches a Reserve Allocation of \$15 million for an early response to save lives and reduce the projected disastrous impact on communities at greatest risk in Hirshabelle (Middle Shabelle and Hiraan regions) and Jubaland (Gedo region). Funding will provide safe drinking water and sanitation services (including hygiene kits for women and girls), enable distribution of relevant NFIs and support emergency health and reproductive health services, including cholera case management. The allocation further aims to prevent acute food insecurity through access to cash and voucher assistance along with emergency livelihood support and protective services for most vulnerable people.	
Section 2: Humanitarian Context	
The humanitarian needs in Somalia continue to be high, with 8.25 million people in urgent need of immediate life-saving humanitarian and protection assistance. About 3.8 million people have been displaced from their homes due to insecurity, conflict, forced evictions, drought and floods. According to FEWSNET, Gu (April to June) rains brought relief and was beneficial for cropping activities however in some parts of Somalia, it caused riverine flooding. The Gu seasonal floods (April to June) have affected over 468,000 people with about 30 dead, displaced at least 247,000 from their homes, damaged infrastructure and inundating thousands of hectares of land across Somalia. From October, an anticipated El Nino coupled with an expected positive Indian Ocean Dipole (IOD), is expected to result in an above-average rainfall for the upcoming Deyr rains, October- December. According to the latest predictions from the World Meteorological Organisation, there is a 90 per cent probability of El Nino persisting. El Nino will cause flooding, loss of lives, livelihoods and property, population displacement and destruction of infrastructure and crops. This would result in an increase in acute food insecurity and disease outbreak. FAO reports show that the impact is likely to be greatest in riverine livelihoods (along Shabelle and Juba rivers). The agency has warned that up to 1.2 million people could be affected and 1.5 million hectares of land is at high risk of inundation. Disease outbreaks due to contaminated and stagnant water would also occur, exacerbating health issues. Reports show that since January 2023, a total of 11,704 AWD/cholera cases along with 30 associated deaths across twenty-eight districts have been recorded. More than 50 per cent were children under five years of age. A total of 11 Repeated cholera outbreaks have been reported in districts, especially those located in the basin of rivers Juba and Shabelle. The current cholera outbreak is taking place in the context of other ongoing outbreaks, i.e., measles, high rates of malnutrition and increased climate shocks such as droughts and floods, all of which are exacerbating the fragility of Somalia's humanitarian situation and have led to large displacement of people. A total of 1,465,893 people are displaced, with conflict and floods being the main drivers in 2023. Increased displacements and disease outbreaks are placing additional pressure on an already overburdened and	

underperforming healthcare system. Increased provision of clean water and improved sanitation and hygiene practices are essential to contain and help prevent waterborne diseases such as AWD/cholera.

According to FAO without early action ahead of *Deyr* rains and a high likelihood of a very high magnitude (1 in 100-year return period), many lives and livelihoods could be lost and humanitarian needs would rise exponentially.

Section 3. Allocation Priorities

This allocation is linked to the prioritization plan aimed at establishing funding priorities and supporting HCT advocacy and resource mobilization efforts. The prioritization is linked with the Emergency Preparedness and response Plan (EPRP), also a subset of the Humanitarian Response Plan.

To ensure an integrated response, the allocation has been informed by the cluster's prioritization of geographical areas and interventions and the EPRP. As such, the locations targeted are those with the highest number of people projected to be affected by riverine flooding, areas historically severely affected by floods and are classified as high priority convergence at the intersectoral level. Additionally, SWALIMs Flood Risk and Response Information management systems shows clear indication of flood potentiality due to several signs including embankment weaknesses along parts of the Shabelle river including in Jowhar, Afgooye and Balcad. The system also alerts on the open breakage points in Gedo, particularly in Dollow, Luuq and Baardheere along the Juba River. Backed by data on the potential number of floods affected people as per the EPRP and latest information from SWALIM, the clusters prioritised Hirshabelle (Jowhar, Beletweyne, Balcad) and Jubaland, Gedo (Baardheere, Luuq and Dollow).

This allocation will promote an area based integrated response strategy in key locations to facilitate joined inter-sectoral approaches while adapting a coordinated early response to riverine floods and save lives and livelihoods. This strategy will combine sectoral early interventions to respond to and mitigate the impact of the floods, while improving humanitarian outcomes and associated impact on people and infrastructure. It will involve the provision of safe drinking water and sanitation services, distribution of plastic sheets and Non-Food Items, emergency health and reproductive health services, provision of access to food through cash and voucher assistance and emergency livelihood support and ensuring a protective environment converging on the same beneficiaries within the target district to leverage efforts and maximize impact.

The type of integrated inter-sectoral services will be determined at the point of targeting, with convergence occurring at either individual, household, or community levels in the prioritized districts. The Cluster coordinators, with support from sub-national cluster focal points, will take the lead in facilitating convergence at prioritized locations. Through using 4W response, monitoring and gap analysis tool the selected clusters will ensure full coordination of project activities with existing emergency and recovery interventions and across actors to maximize efficiencies, minimize duplication and enhance humanitarian impact of the flood interventions. Sub national level and location level coordination among various actors will ensure a holistic and effective action to save lives and livelihoods and to accelerate recovery for the flood affected population. With support from the national level, state level coordinators and focal points in Hirshabelle and Jubaland will hold a coordination meeting with the SHF partners once the allocation process has been finalized and ensure close monitoring of all project activities. Through joint targeting and close coordination, the clusters and partners will, to the extent possible, provide a package of sequenced life-saving services to the same households within the same timeframe. The protection partners will closely work with other clusters in ensuring protection mainstreaming e.g., CP/GBV partners proposed for this allocation are already considered by other clusters. Explosive Hazards AoR will also integrate with other Clusters / AOR activities including food security cluster at food distribution sites or IDP receiving sites, GBV and child protection, coordination with camp coordination and camp management cluster (CCCM) to identify community focal points for explosive ordnance (EO) training during arrival and return since they pass through contaminated passage during both trips.

Community engagement and enactment of appropriate feedback mechanisms will be key to further ensure efficient delivery of interventions and promote transparency and accountability. Enactment of a functional complaints feedback mechanism will serve as the backbone of the joint intervention's accountability framework ensuring that beneficiaries have regular access to filing complaints or information requests based on service provision, exclusion risk, and/or response gaps.

To promote inclusive response, efforts will be made to engage and target key high-risk groups at risk of exclusion, including marginalized communities and persons with disabilities in different stages of the project cycle. The prioritized interventions will be implemented, to the extent possible, utilizing the Integrated Response Framework and anchored within the Emergency Preparedness and Response plan.

3.1 Envelopes

Priorities	Amount allocated (US\$)
Food Security	3,000,000
Health	3,000,000
Shelter	2,800,000
WASH	4,500,000
Protection	1,700,000
<i>General protection \$ 200,000</i>	
<i>GBV & Child Protection \$ 1,280,000</i>	
<i>Explosive hazards \$ 220,000</i>	
Total	\$15,000,000

Cluster	Prioritised activities	Region	District	Target Beneficiaries	Recommended Amount (US\$)	Recommended Partner***
Food Security	• Provision of immediate life-saving emergency food assistance through unconditional cash transfers allowing severely food insecure flood affected households to meet their basic food needs. Cash for assets and Cash+ livestock activities will be ineligible for this allocation considering that the SHF disbursement will take place after the onset of floods. • Flood risk communication, enhanced community surveillance and alert system • Close coordination of activities with existing emergency and recovery interventions and across actors to maximize efficiencies, minimize duplication and enhance humanitarian impact of the flood interventions.	Middle Shabelle	Balcad	4,500	\$300,000	Access Development and Relief Organisation (ADRO)
		Hiraan	Beletweyne	12,000	\$500,000 (IRW) \$300,000(WARDI)	WARDI Relief and Development Initiatives (WARDI); Islamic Relief Worldwide (IRW)
		Middle Shabelle	Jowhar	6,000	\$400,000	Peace and Development Action (PDA)
		Gedo	Baardheere	12,000	\$300,000 (HIRDA) \$500,000 (ACTED)	Himilo Relief and Development Association (HIRDA); ACTED
		Gedo	Luuq	6,000	\$400,000	Himilo Organization for Development (HOD)
		Gedo	Dollow	4,500	\$300,000	Gedo Women Development Organization (GEWDO)
Health	• Pre-position of supplies (Emergency medical supplies and Kits i.e SRH, CMR, cholera kit, clean delivery kits).	Hiran	Beletweyne	30,000	\$400,000	Save the Children (SCI)
	• Strengthening of surveillance and alert verification system at community and facilities level			22,000	\$350,000	WARDI Relief and Development Initiatives
		Middle shabelle	Jowhar	30,000	\$400,000	IMC
			Balcad	30,000	\$400,000	ALIGHT(ALIGHT)

	- Enhanced risk communication and coordination activities through working with other clusters - Strengthening of infection prevention and control in cholera treatment center (CTC), operationalization of outbreak management centers (Cholera, measles etc) for better case management and control - Establishment of integrated mobile outreach services and temporary fixed health facilities for the provision emergency essential health care services (OPD consultation, MPHSS, CMR, Immunization). - Strengthening referral services and linkage to secondary health services.	Gedo	Baardheere	22,000	\$350,000	Human Appeal
				22,000	\$350,000	HDC
			Luuq	30,000	\$400,000	ADA (Active in Development Aid)
			Dollow	30,000	\$350,000	TROCAIRE
Shelter/ NFI	Distribution of NFI kits and plastic sheets	Hiraan/ Middle shabelle	Beletweyne	29,028	\$638,616	HINNA
			Jowhar	22,440	\$493,104	Ayuub
			Balcaad	9,726	\$213,900	Ayuub
		Gedo	Dollow	22,728	\$500,000	JF
			Luuq	27,642	\$460,730	HAPPEN (Top up)
			Baardere	29,634	\$493,650	AVORD (Top up)
WASH		Hiran	Beletweyne	60,000	\$500,000	Action Aid
	- Upgrading/repair of unprotected shallow wells at risk due to El Nino flooding (installation of hand pumps and other protection features). - Provision of temporary safe water supply to target most vulnerable communities not connected or have lost connection to water supply system. WASH Cluster partners will stop the provision of emergency water supply once the non-functional water system is restored, or new water supply system is installed. - Rehabilitate and equip of strategic water sources (pumping systems, elevated water tanks and distribution systems/networks) targeting communities affected by floods and at risk of cholera outbreaks. - Conduct treatment of unprotected water sources and provision of household water treatment and safe storage products (HWTSS), post flooding shock chlorination of wells and routine water quality monitoring - Construction of emergency flood-resilient sanitation facilities targeting vulnerable displaced people with no access to basic sanitation facilities. <u>The emergency sanitation facilities will be constructed in IDP camps and flood evacuation sites.</u>				\$500,000	Action Against Disasters Somalia (AADSOM)
					\$500,000	Humanitarian Integrity for Women Action (HIWA)
		Middle Shabelle	Jowhar	30,000	\$450,000	Somali Rehabilitation and Development Agency (SORDA)
					\$400,000	International Medical Corps (IMC)
			Balcaad	22,000	\$500,000	ALIGHT(ALIGHT)

	•Installation of standalone handwashing stations in schools and healthcare facilities to maintain the required level of hygiene practices. •Provide sanitation tools to the communities at risk or affected by El Nino flooding to support clearing waterways and cleanup campaigns for maintaining hygiene of the affected communities' environment •Procurement and distribution of hygiene kits to prevent spread of waterborne disease outbreaks associated with forecasted El Nino event during the 2023 Deyr season. The hygiene items will enable the affected families in adopting adequate hygiene practices. •Mitigate AWD/Cholera outbreak through intensive hygiene promotion including <u>house to house visit</u> to disseminate hygiene and sanitation messages, hygiene promotion in WASH Institution and training of religious leaders and other community owned resource persons, hygiene and sanitation promotion social events, radio talk shows, television, and radio sports.	Gedo	Bardhere	25,000	\$550,000	Himilo Relief and Development Association (HIRDA)
			Luuq	22,000	\$600,000	ADA (Active in Development Aid)
			Dollow	21,000	\$500,000	Nomadic Assistance for Peace and Development (NAPAD)
Protection (General) \$200,000	•Identification of persons with specific needs (PSN) among displaced population, notably persons with disabilities, older people, minorities and marginalized groups at risk of exclusion. UNHCR tri cluster approach collaboration (CCCM, Shelter) together with WASH, Health and FS.	Hirshabelle	Beletweyne	3,000	50,000	Marginalized Communities Advocacy Network (MCAN)
			Jowhar	10,000	150,000	
Integrated GBV & Child Protection \$1.28 million	•Provision of CP and GBV case management, referrals and Psychosocial support services including Psychological First Aid through community protection desks, one stop centres, women and girl's friendly spaces and child friendly spaces •Clinical management of Rape services •Support Identification, tracing, re-unification, provision of alternative care to Unaccompanied and Separated Children •Strengthen existing service delivery points including safe spaces for children and women (Child Friendly Spaces (CFS), women and girl's friendly spaces, One stop centre, protection desks)	Middle Shabelle	Jowhar	6,866	330,000	AMARD
			Belet Weyne	9,000	323,000	HIWA
		Gedo	Bardhere	5,100	308,000	NoFYL
			Dollow	7,400	319,000	SEDHURO

	•Procurement and distribution of community emergency PSS kits •Deployment of social workers/ mobile teams •Support for cash and voucher assistance integrated through case management systems, livelihoods activities and conditional cash transfers (within the standard GBV criteria) to individual vulnerable women and girls •Updating service mappings, development and management of protection referral mechanisms; Note: • <i>There will be no establishment of new GBV or Safe Spaces for GBV and CP early action activities but only strengthening the existing facilities to avoid overstretch of services.</i> • <i>Majority of the services should be delivered through mobile service provision.</i>					
Explosive Hazards \$220,000	In close inter-cluster collaboration, provision of life saving Risk education Radio messages and digital platforms for the hard-to-reach population at risk (boys, girls, men and women) displaced by floods who don't have prior knowledge on EO recognition. This would prevent them from passing through dangerous paths to access shelter and other life-saving services in urban areas.	Hirshabelle	Beletweyne	10,000	72,000	MAG
			Jowhar	10,000	150,000	
		Jubaland	Bardhere	4,000	40,000	
			Dollow	4,000	40,000	
		Grand Total			\$15,000,000	

Section 4.1 CERF Complementarity (when applicable)			
This allocation builds on the SHF reserve allocation for flood and cholera response that was allocated in May 2023. It targeted Gedo region, a location that will be targeted by this allocation. A concept note is currently being developed to seek CERF funding specifically for El-Nino related flooding and if approved, it will complement this SHF allocation and strengthen response in flood hot spot locations			
Section 4.2 Other Complementarity			
N/A at the time of submission.			
Section 5. Selection Criteria			
Partner selection criteria: - Operational presence in the targeted geographic location. - Active member of the cluster with strong implementation capacity. - Has an ongoing project or recently implemented activities in the affected areas. - Willingness to work closely with partners and facilitate integrated response. - Good working relationship with the local administration/authorities. - Possession of current registration certificates *The above criteria were not used for exclusion purposes; it simply lists the profiles of the selected partners.			
Section 6: Process and Timeline			
6.1 Allocation Strategy Development Process The Inter Cluster Coordination Group met on 13 August to discuss on geographical targeting as well as priority clusters to be funded. Thereafter, the selected clusters provided priority interventions and corresponding budgets which were discussed and revised. On 4 September, the HC based on analysis of cluster inputs and taking into consideration the possibility of CERF funding, moved the process forward by suggesting cluster envelopes. This resulted in clusters revising their inputs to the strategy. On 11 September, the allocation strategy was finalized and thereafter submitted for review.			
6.2 Allocation Timeline(tentative)			
Reserve Allocation Workflow	Start Date	End Date	Responsible body
Step 1. Allocation Strategy development <i>Submission of inputs to strategy from clusters and/or other coordination mechanism</i>	August 21, 2023	Sept 18, 2023	OCHA/HFU
Step 2: Allocation strategy to AB for review/ endorsement	11 September 2023	15 September 2023	OCHA/HFU
Step 3. Submission of project proposal(s)	22 September 2023	28 September 2023	Partners
Step 4. Final technical and financial review	*Rolling basis	Oct 10, 2023	OCHA/HFU, technical experts, Partners, CBPF Section
Step 5. Final approval by HC and Grant Agreement	*Rolling basis	Oct 17, 2023	OCHA/HFU, HC
Step 6. Disbursement	*Rolling basis	Oct 24, 2023	OCHA/CBPF Section
Section 7: HFU Contacts and Complaints			
7.1 Key Contacts			
General Inquiries - Ms. Karen Smith, SHF Fund Manager, M: +252 (0) 612922133, smith3@un.org, - Ms. Afifa Ismail, SHF Deputy Fund Manager, M: +254(0)708515570, afifa@un.org,			

Programmatic issues

- Ms. Evalyn Lwemba, T: +254(0)207629128 | M: +254(0)733272017, lwembae@un.org, Skype: lwembae
- Ms. Eva Kiti, T: +254(0)207629127 | M: +254(0)705000720, kiti@un.org, Skype: eva.kiti

Budget and finance [keep Programmatic officers above in copy with project-specific queries]

- Mr. Martin Cheruiyot, T: +254(0)207629126 | M: +254(0)715743860, cheruiyot2@un.org
- Ms. Mary-Bernadette, M: +254(0)737903427, T: +254(0)207629117, obadha@un.org
- Mr. Peter Ngure, M: +254 (0) 708515546, T: +254 (20) 7629146, ngure@un.org
- Ms. Nafisa Mohamed, M: +252 (0)619150456; nafisa.mohamed@un.org

Accountability

- Mr. Samuel Kihara, M: +254(0)705262211, T: +254(0)207629156, kihara@un.org
- Mr. Khalif Abdihakim Noor, M: +252(0)619494889, abdihakim@un.org
- Mr. Imadi Mohamed. imadi.mohamed@un.org

Cluster coordinators/cluster support staff (cluster specific and technical questions)**Food Security**

- Dudi Gordon, Dudi, gordon.dudi@fao.org
- Chinne Homsy, chirine.homsy@wfp.org
- Nancy Koech, nancy.koech@fao.org
- Nasra Hussein, nasra.hussein@wfp.org
- Hassan Muktar, hassan.abdi@wfp.org

Health

- Ms. Erna Van Goor, rvan@who.int
- Mr. Issack Jamaa, Issack.jamaa@savethechildren.org
- Ms. Matilda Kirui, kirui@who.int

Protection +AORs**Protection**

- Boris Arising, aristing@unhcr.org
- Zahra Huseein, zahra.adan@drc.ngo
- Adan Abdullahi, ibrahada@unhcr.org

Child Protection

- Lilian Kona, lkona@unicef.org
- Mohamed Amin, amin.mohamed10@savethechildren.org

GBV

- Pusparaj Mohanty, pmohanty@unfpa.org
- Osman Muhamud, muhamud@unfpa.org

Explosive Hazards

- Hussein Ahmed, husseina@unops.org

Shelter

- Mr. Dominic David Maliro, maliro@unhcr.org
- Ms. Nurta Mohamed Adan, adan@unhcr.org

WASH

- Mr. Begna Edo, bedo@unicef.org
- Mr. Shukri, Mohamed, mohamed.shukri@pah.org.pl
- Mr. Mohamed Issak, miali@unicef.org

7.2 Complaints and Feedback Mechanism:

- Complaints regarding the SHF process or decisions can be brought to the attention of the SHF Manager.
- At any point in time, stakeholders can bring their concerns to the attention of OCHA Somalia senior management through the confidential feedback email shf-feedback@ochasomalia.org.

Section 8: Annexes**Annex 1: Process and Summary Guidance**

- The allocation round uses the *reserve allocation modality*, allowing for a fast-tracked allocation.
- The selection of individual partners will take into consideration the current SHF eligibility list, operational presence of partners in the prioritized area, partners involvement in coordination structures inclusive of Area Based Coordination mechanisms, and their capacity to mount immediate response.
 - *Target area*: The selected interventions should focus on specific and defined areas.
 - *Direct implementation* is prioritized. Sub-contracting is admissible only in exceptional cases and only when a clear added value is demonstrated.
 - As per the *SHF Guiding Principles for 2023*, 20% of the funding will be considered for SHF Eligible Partners who have never received funding.
- Programming must reflect the distinct needs of men, women, boys, and girls during the implementation period. As gender issues are manifested in different ways for each cluster, an overarching gender-sensitive approach will be ensured through prioritizing proposals that highlight their strategy towards overcoming obstacles that prevent vulnerable groups from receiving access to lifesaving services. A major focus will be placed on supporting female-headed households, as well as pregnant and lactating women who are particularly vulnerable from health-related risks. Children between the ages of six months and five years will also be a programming priority, as they face significant risks from malnutrition-related health complications.
- Protection should be prioritized and mainstreamed in all projects.
- Organisations that have an ongoing SHF project and apply for the same activities under this allocation should clearly indicate how the new funding will complement the previous SHF project. The funding decision will be subject to the value of the current IP projects, considering the SHF-assigned risk levels and the relevant thresholds.
- All projects must address immediate lifesaving needs. The proposals must be backed by credible data to demonstrate the severity of needs and activities must be interconnected across clusters. Projects should show strong coordination with on-going humanitarian interventions in the same locations.
- Cash as an implementation modality is encouraged where feasible.
- While projects should be implemented within 6 months, the nature of the activities will determine the duration of the project. The clusters/review committees will provide further guidance on this.
- Partners must participate in coordination meetings including partaking in Area Based Coordination mechanisms.
- Partners must maintain transparency and accountability throughout the response process. This includes regular communication with target communities and addressing complaints or concerns.
- **Partners to include explicit references in their project proposals as to how they are strengthening their risk management measures against aid diversion.**