Each year, Sida conducts a humanitarian allocation exercise in which a large part of its humanitarian budget is allocated to emergencies worldwide. This allocation takes place in the beginning of the year as to ensure predictability for humanitarian organizations and to allow for best possible operational planning. In an effort to truly adhere to the humanitarian principles, Sida bases its allocation decisions on a number of objective indicators and parameters of which the most important are related to the number of affected people, vulnerability of affected people and level of funding in previous years. One of the indicators is also related to forgotten crises in order to ensure sufficient funding to low profile crises. Besides this initial allocation, another part of the humanitarian budget is set aside as an emergency reserve for sudden onset emergencies and deteriorating humanitarian situations. This reserve allows Sida to quickly allocate funding to any humanitarian situation throughout the year, including additional funding to (name of Country/Crisis).

For 2017, the Somali crisis is allocated an initial 94 million SEK in January 2017. Close monitoring of the situation in Somalia, Kenya and Djibouti will continue throughout the year to determine whether additional funds should be allocated.

1. CRISIS OVERVIEW

The Somalia humanitarian crisis analysis focuses on the humanitarian situation in Somalia and its effects on neighboring countries, mainly Kenya. The humanitarian response to Somali refugees in Ethiopia is analyzed in a separate HCA but should be understood together with the Somalia crisis analysis. This analysis aims at defining how Sida can best support the population affected by the Somalia crisis.

Somalia is currently suffering a slow onset drought created by several failed or under-performing rainy seasons which has hit the northern parts of the country the hardest. Approximately 1.14 million people are classified as in humanitarian emergency, and a total of 5 million are in need of humanitarian assistance. The next rainy season has been expected to be low yielding which will put further strain on the people who are not receiving life-saving assistance. The drought has also long lasting negative effects on livelihoods (large number of livestock deaths, over one third schoold drop-out rate etc). The trend in Somalia is similar to the 2011 famine-scenario. Coping mechanisms include clan based redistribution systems and financial remittances from foreign diaspora. Three consecutive periods of low yielding rains, and heading into a fourth, have eroded household resilience and many are now adopting negative coping mechanisms such as cutting food rations or migrating.

Sida considers the Somalia crisis as a complex and protracted crisis. The impact of conflict and cyclical natural disasters tends to become aggravated due to difficult access for humanitarian actors. Somalia has fragile state institutions as a result of two decades of civil war and large parts of the south-central areas are controlled by the islamist Al-Shabaab group further complicating humanitarian access.

An African Union peace-support force (AMISOM)¹ is presently fighting Al-Shabaab together with the National Security Forces of Somalia. AMISOM consists of soldiers both from neighboring countries (Ethiopia, Kenya, Djibouti) and other African nations (Burundi, Uganda and others), and operates under a mandate (UNSC resolution 2182/2014) to protect the Somali Federal Government, but also take offensive action against Al Shabaab.

As a result of the armed conflict (in addition to recurring natural hazards), Somalia, with a population of 12.3 million, has 1.1 million internally displaced persons (2016) that are gathered in informal settlements mainly in the urban areas. An additional one million persons have fled to other countries, mainly to Kenya (420 000), Ethiopia (250 000) and Yemen (250 000). The political and security situation remains extremely volatile and

¹ The African Union Mission in Somalia is an active regional peace support mission set up by the Peace and Security Council of the African Union with the full support of the United Nations. The principal aim is to provide support to the Federal Government of Somalia in its efforts to stabilize the country and foster political dialogue and reconciliation. AMISOM is also mandated to facilitate the delivery of humanitarian aid and create necessary conditions for the reconstruction and sustainable development of Somalia.
armed clashes between clans and/or armed forces may produce peaks of displacement at any given moment. For instance, armed conflict in Gaalkacyo, Mudug region, caused the displacement of an estimated 85 000 people in 2016. Evictions from households are also a reason to forced displacement in Somalia.

The current conflict in Yemen has further complicated the situation with returning Somalis and Yemeni refugees entering Somalia from the north. An additional strain for the current period are the returnees coming from the Dadaab camp in Kenya which is due to close before mid-2017. The real number of these returnees remains to be seen (between 30 000-150 000), but since they conglomerate in the urban centers of Kimsayo, Baidoa and Mogadishu, they do put further strain of already weak service delivery institutions and other response-mechanisms.

Natural hazards such as drought, flooding and cyclones are recurring in Somalia and because of the high level of vulnerability natural hazards often turn into humanitarian disasters. The main part of the Somali population is dependent on pastoralism and rain-fed agricultural activities for their survival. Climate change and deforestation due to a long term predatory use of charcoal have contributed to an environment extremely sensitive to shocks. In late 2015 the cyclical weather phenomena El Niño hit the region, exacerbating the existing drought in Somaliland and parts of Kenya and Ethiopia, and was followed by heavy rains and flooding in Somalia and Kenya that resulted in displacement and water-borne diseases. A continued cycle of lower-than-average main rains in 2016 has been continuously eroding the resilience and coping mechanisms of the agro-pastoralist populations, and a major increase in IPC 3 and 4 populations can be expected by March 2017 if not major risk reduction investments (mainly for fodder and water) are put in place.

While **Kenya's humanitarian situation** is connected to the South Sudan and Somalia crises in terms of the refugee influx, the country is also prone to other humanitarian crises, such as drought, flooding, tribal conflicts, food insecurity and outbreaks of epidemics. Structural under-development and chronic poverty put 5.5 million people living in northern Kenya, mainly livestock farmers, in a vulnerable situation. Drought conditions are also present in the arid and semi-arid lands of Kenya.

In the refugee camps of Kakuma and Dadaab, Kenya continues to host the largest number of Somali refugees in the region (approx. 420 000). A political decision to close Dadaab was taken in mid-2016, but is yet to be fully implemented. This has produced an influx of returnees to Somalia, but leaves a grave uncertainty regarding the future of the more than 100 000 refugees which never signed up to the UNHCR-led voluntary resettlement program. It can be expected that a large number of these will become undocumented informal immigrants in Kenya. In addition to the refugee camps, Kenya hosts large refugee populations in urban areas (mainly Mombasa and Nairobi).

Next to the Kakuma camp in Turkana county a new settlement named Kalobeyei (80 000 persons capacity) is being constructed to decongest the overcrowded Kakuma. The settlement is planned to be developed following an integrated and eventually self-sustaining model where both host- and refugee populations share services, markets and agriculture, but the development of the Kalobeyei-model is being delayed by the constant influx of new refugees from South Sudan and legal challenges for the rights of the refugees to integrate and engage in market activities in Kenya.

### Geographical areas and affected population

In all areas affected by natural disasters and armed conflict in the region, children (especially the youngest), women, single and female headed households, disabled and elderly as well as displaced persons are considered the most vulnerable population groups.

**Somalia**

- Overall, five million people or 41% of Somalia’s total population, are in need of humanitarian assistance.
- As of the end of September 2016, the number of people who cannot meet their daily food requirements has increased by 20 per cent from six months earlier, from 935 000 to 1.14 million. Additionally, 3.9 million people will struggle to meet their daily food needs through the end of 2016.
- The protracted drought is affecting particularly the Awdal, Sool and Saanag regions in Somaliland (affecting approx. 1 million persons), Bari and Nugaal region in Puntland (approx. 162 000 persons) and the Gedo, Hiraan and Lower Juba regions of South-Central Somalia.
- Malnutrition rates remain high with 300 000 children under age five acutely malnourished, of which 50 000 are severely malnourished. Malnutrition levels among internally displaced persons have been high or critical over the past two years especially in Doolow, Garowe, Gaalkacyo, Baidoa, Bossaso, Dhebley, Dhusamareeb, Kismayo, and Mogadishu.
- Coverage and quality of basic social services in the country is low, mainly due to the absence or weakness of existing governance structures. About 3.2 million Somalis need emergency health services, while 2.8 million people require access to water. Approximately 1.7 million school-age children are out of school.
- More than 60% of people requiring multi-sectoral integrated humanitarian assistance live in urban centres and are highly vulnerable to food insecurity.
- Frequent disease outbreaks reoccur, especially AWD/Cholera.
- Violence, exacerbated by the use of improvised explosive devices, and exploitation and abuse of children remain widespread.
- Continuous influx of refugees (approx. 5 000) and returnees (approx. 30 000) from Yemen and returnees from the closing Dadaab camp in Kenya
- Between 2014 and 2016, an increase of protracted internal displacement by 180 000 persons has been reported. In 2016 alone, nearly 150 000 people have been newly displaced, while almost 75 000 have been evicted from their homes. Up to 60% of the Somali IDP are facing secondary displacement, and over 80% of the displaced are women, children and elderly.

Kenya
- In Kenya the main humanitarian needs are connected to the over 500 000 refugees in camps and integrated into the urban communities.
- Drought is expected to affect particularly the north-eastern parts of the country. The ongoing slow-onset drought is affecting Kenya as well as Somalia.

1.2 Critical Assumptions, risks and threats
- Sida expects the drought and/or drought like conditions to continue well into 2017 in Somalia and parts of Kenya. Once the rains arrive, floods and epidemiological outbreaks of water born disease are expected.
- Along with the persistency of the humanitarain crisis, long term effects on the affected population, such as loss of livelihoods, increased poverty in the region is an expected outcome.
- The geopolitical situation in the region is also expected to remain volatile and turbulent, with subsequent armed conflict and population displacement to, within and from Somalia. End of 2016 is election period in Somalia, which will spill over into 2017. An increase in terrorist attacks and electoral related violence is expected in the run-up and aftermath of the elections. Also see the HCA for South Sudan, Ethiopia and Yemen.
- The ongoing turbulence in Ethiopia has already led to the withdrawal of approximately 2 000 Ethiopian bilateral troops from Somalia, resulting in Al-Shabaab quickly retaking the territory. Further withdrawal of Ethiopian AMISOM-integrated troops has a potential to destabilize the whole military operation.
- From the Kenyan side, the push to resettle Somali refugees from the Dadaab camps is expected to continue up until a potential closure of the camp in May 2017.
- Lack of access for humanitarian actors to large parts of Somalia (both government and Al-Shabaab controlled areas) is expected to persist also in 2017 and is greatly limiting the execution and monitoring of the humanitarian response. Sida considers only the ICRC and a number of local

2 This is according to FAO’s Food Security and Nutrition Analysis Unit (FSNAU) and the Famine Early Warning Systems Network (FEWSNET) post-Gu rains food security and nutrition assessment technical release, September 2016.

3 Data provided by UNHCR’s Protection and Return Monitoring Systems implemented by the Norwegian Refugee Council (NRC), NRC’s eviction tracker, assessments and profiling by the Protection Cluster and its members, the infrastructure mappings of the Shelter Cluster as well as information provided by other Clusters and organizations.
organizations to have capacity and any substantial possibility to operate in certain Al-Shabaab controlled areas.

- The financial risks in aid contributions are high in Somalia. Corruption is embedded and systematic in Somalia (ranks 167/168 countries on Transparency International's 2015 index). There continues to be multiple cases of corruption and diversion of funds, and projects funded but never verified. The gate-keeping phenomena is present in almost all refugee/IDP settlements.

### 1.3 Strategic objectives identified in the Humanitarian Response Plan

Under the umbrella of the overarching humanitarian strategy for Somalia for 2016-2018, the humanitarian community has developed a prioritized response plan in 2017 to save lives, ensure protection of the most vulnerable, strengthen resilience, support the provision of basic services and enable durable solutions through a coordinated, comprehensive and multi-sectoral approach. The HRP for Somalia 2017 appeals for 864 million USD to target 3.9 million people out of the 5 million in need. These figures can be expected to change should the drought continue to intensify. The humanitarian response plan only covers humanitarian needs identified in Somalia, and no plan has been provided for Kenya. Sida's humanitarian contributions will consider the HRP as the basis for the needs assessment for Somalia and rely on other sources for the needs assessment in Kenya.

The humanitarian community has imbedded protection of the most vulnerable persons throughout the humanitarian response. Four strategic priorities are identified:

1. Provide life-saving and life-sustaining integrated multi-sectoral assistance to reduce acute humanitarian needs among the most vulnerable people.
2. Reduce acute malnutrition levels in settlements for internally displaced and host communities through integrated multi-sectoral emergency response.
3. Reinforce the protection of the displaced, and other vulnerable groups at risk.
4. Support the restoration of livelihoods, promote basic services to build resilience to recurrent shocks, and catalyze more sustainable solutions.

The main gaps to the humanitarian response relate to access in Al-Shabaab controlled areas. When drought or conflict forces people to move, it is the individuals with some financial capacity left which manages the move. The most vulnerable are the ones left behind, and an estimated 1.4 million people in need live in these hard-to-access areas.

### 2. IN COUNTRY HUMANITARIAN CAPACITIES

#### 2.1 National and local capacities and constraints

**The Somali government’s capacity** to respond to emergencies is generally weak, in particular in southern and central Somalia and persons in need of humanitarian assistance rely entirely upon humanitarian relief organizations. The relevant government institutions are the Ministry of Interior and Federalism, Ministry of Planning and International Cooperation and the Disaster Management Agency, which is the nominal Federal-level interlocutor for humanitarian partners. Limited resources and funding for Government institutions continues to affect their ability to carry out their constitutional mandates. As part of the state formation process other regional administrations have recently been formed in the south and central Somalia and are showing emerging capacity to govern. In many areas local administrators have assigned humanitarian focal points as main counterparts for humanitarian partners. These are positive developments and demonstrate the Government’s increased commitment to lead humanitarian response efforts, but it is still far too early to these institutions for a crisis response. Disaster management agencies are set up at the federal level and in both Somaliland and Puntland, but little harmonization and communication exists between them.

In 2016, over 280 humanitarian partners including UN agencies, national and international NGOs has been actively in Somalia. This is a significant expansion from 2015, where a total of 182 partners were operational delivering assistance.

- In southern and central Somalia, there are 7 UN agencies and 191 NGOs delivering assistance. Humanitarian access is still constrained in large parts of southern and central Somalia due to insecurity.
- In Puntland, there are close to 70 humanitarian agencies with operational presence. However,
humanitarian partners continue to operate with minimal funding and frequent turnover of implementing and field staff. Funding constraints have been the main challenge to timely and appropriate response. With the support of OCHA and humanitarian partners, the Puntland Humanitarian Affairs and Disaster Management Agency (HADMA) mobilises humanitarian partners, coordinates assessments, advocates for prioritization of response and ensures timely information sharing. Humanitarian action is coordinated through thematic areas or clusters (education, food security, health, nutrition, shelter/non-food-items and WASH). HADMA as a government agency coordinates the humanitarian forum and disaster management meetings with partners but does have its own resources for response. It reports directly to Office of the President and Ministry of Planning. OCHA regional hubs and offices also provide leadership and coordination through Regional Inter-Cluster Coordinating Groups (RICCG) to identify emerging cluster specific needs, gaps and recommend priority actions.

- In Somaliland, more than 60 humanitarian organizations are currently operational. There are sectors, led by government line ministries, which play a pivotal role in preparedness and response activities. The Somaliland administration has emergency response structures and mechanisms, which are activated in times of drought. The National Disaster Council provides overall leadership, while the focal agency for the coordination of emergency responses is the National Environmental Research and Disaster Preparedness Agency (NERAD). NERAD does not have adequate capacity to respond to emergencies and has no properly resourced disaster risk management system. The humanitarian cluster system was reactivated during the recent drought with five active clusters (food security, non-food items and shelter, nutrition, protection and WASH). The existing sector and cluster coordination mechanisms are under review to better align the two and ensure greater complementarity.

The most important constraints for humanitarian agencies in Somalia revolves around security and access funding levels, corruption and to some extent political impediments. The lack of access for international staff makes it increasingly difficult to carry out monitoring and evaluation of projects on the ground.

- The complex political landscape provides additional issues revolving around unclear policies for taxation, operational policies and frameworks for NGOs which often differs both between regions and federal states, and also between different ministries at the same national or regional administration. There have even been reports of extortion and threats from authorities and security agencies towards humanitarian actors and organizations.
- The UN risk management unit is growing more and more proficient and now manages databases of contracts and partners keeping track of incidents of corruption, double contracts etc. to help both UN and NGOs in this difficult context. Some bilaterals, notably DFID and USAID are developing their own third party monitoring and evaluation systems including call centers for clients, third party staff equipped with mobile technology in the field to verify project sites and handouts. Also the common instruments such as the CHF has third party monitoring systems and call centers in place.
- For partners relying on the UN security system, the availability of secure logistics (UNDSS, armored vehicle, close protection) is another key constraint for humanitarian actors in Somalia as it defines the possibility for staff to visit project sites. More importantly, it affects the long term delivery of humanitarian assistance, locally and globally, as the line between humanitarian and military resources are blurred. The use of military resources for the delivery of humanitarian aid is a critical limiting factor, principally and de facto, in the long term.
- Throughout Somalia, emergency preparedness and response is not sufficiently mainstreamed through the response by international and national actors. There is a critical gap in the areas of developing triggers for a response, having sufficiently trained staff and maintaining contingency plans that can be rapidly activated. While there may be adequate capacity to respond, the comprehensiveness and speed of this response when a new crisis looms, particularly a slow onset, is not clear. The ongoing experience with El Niño shows that preparedness has improved but still leaves much to desire.
- Coordination is challenging and can be a constraint to efficient response, specifically in a complex situation such as Somalia. The recent trend for humanitarian donors to channel funds outside of the HRP (for 2015, 40% of humanitarian funding to Somalia was registered as outside of the SRP – the highest since 2008) will further complicate coordination and the tracking of resources which is an
important aspect in the dialogue with the government.

**Kenya** has relatively stronger institutions and safety net programs mandated to respond to humanitarian needs, especially for drought emergencies (e.g. the National Drought Management Authority, and there is an operational drought contingency fund). The devolution process however poses challenges in terms of capacity at the county level and there is lacking leadership at the national level to take over the coordination responsibility.

Since November 2014 there is no Humanitarian Coordinator in Kenya, given that humanitarian preparedness gradually has been integrated into development plans, such as in the UN Development Assistance Framework 2014-2018. OCHA will henceforth support the Resident Coordinator in Humanitarian affairs. OCHAs Kenya office has closed and Kenya is covered by OCHA’s regional office for Eastern Africa. Kenyan Humanitarian Partnership Team (KHPT), previously coordinated by OCHA, is in the process of being handed over to the Ministry of Interior.

The Ministry of Interior and its Department of Refugee Affairs (DRA) are UNHCR’s primary government counterparts in asylum and refugee management. When the pending Disaster Management Bill is passed a new national Disaster Response Fund and a National Disaster Management Authority will be established. The Kenyan Red Cross Society (KRCS) plays an integral role in humanitarian response in Kenya and is often acting first responder. KRCS, often as the only humanitarian actor, has access to highly insecure locations such as North Eastern and Northern Region, areas that are often exposed to drought, outbreaks of epidemics and violent clashes between ethnic groups.

A coordination mechanism for the refugee situation has taken shape, the Kenya Refugee Programme Team, comprising donors, major humanitarian NGO, WFP and UNHCR. In 2014, the first Kenya Comprehensive Refugee Programme was launched, presenting a coherent summary of the Kenya refugee programme being implemented by humanitarian actors including UNHCR, NGOs, UN agencies and government entities, with requirements for priority interventions. A task force has regularly been reviewing the progress of the comprehensive needs and gaps analysis, including strategies and funding. KCRP should be read in conjunction with the UNHCR Global Appeal, the Inter-Agency Appeal for South Sudan and other programme documents and appeals issued by organizations involved in protection and assistance to refugees.

### 2.2 International and Regional assistance

Key humanitarian donors in 2016 have been the US, WFP, Germany, UK, ECHO, Canada and Japan. Sweden has been the 12th largest donor (17.3 million USD). A donor mapping matrix is available for detailed understanding of current commitments and agencies with budget. The Regional organization IGAD (Intergovernmental authority on development) is engaged through initiatives such as IDRSSI – a regional resilience program – but mainly on a political and coordination level. Furthermore, the African Union is about to adopt a policy on humanitarian affairs, which aims at becoming an international framework, pushed out to member states through the RECs in Africa. For Somalia it could become an interesting standard, since a lot of debate is ongoing with government and regional administration about their role and involvement in humanitarian assistance.

Over the last couple of years, a trend has been identified for international donors to channel more and more of their humanitarian budget outside of the HRP. During 2015, approximately 40% of the total humanitarian funds for Somalia were registered outside of the HRP-instrument. An analysis of the reason for this is yet to be done, but it points towards an increasingly higher perceived relevance of NGOs as compared to UN agencies in humanitarian action in Somalia.
3. SIDA's HUMANITARIAN RESPONSE PLAN

3.1. The role of Sida

Somalia: Sida’s Humanitarian funds for Somalia for the year 2016 were used for multi sector activities as follows; Food security and Nutrition through UNICEF, FAO and resilience programmes. Water and sanitation through UNICEF, the protection of internally displaced persons through UNHCR and NRC & enhanced coordination through OCHA. The main part of the humanitarian allocation for 2016 was channeled through the Common Humanitarian Fund for Somalia. Other important partners included ICRC and SRK.

As of September 2016, partners reached 1.6 million people with food assistance and treated over 139,000 children under 5 years of age for malnutrition as of September 2016. Nearly 1 million people gained temporary access to safe water, 745,000 people received health care and 89,000 girls and boys were supplied with learning materials. Forty villages covering an area of 6 million square metres were surveyed, and over 46,000 people benefitted directly from clearance and surveys of mines and other explosive remnants of war.

Resilience and synergies with long term developmental assistance:

As an immediate response to the ongoing drought, the Somalia team at the embassy is engaging all its development partners to allow them the flexibility to use their projects to respond to mitigate the effects of the drought. Whilst humanitarian interventions focus on lifesaving, there are potential for many of our partners to respond through disaster risk reduction, local capacity strengthening, resilience, targeted infrastructure and labor and other kinds of efforts.

For longer term resilience, the Somalia team at the embassy in Nairobi has developed an action plan to strengthen resilience in the country frame portfolio. Synergies with humanitarian interventions and target groups is seen as a priority. Sweden is a key supporter of resilience programming in Somalia through SOMREP, a consortium of 7 NGOs, which until 2016 was funded both through development and humanitarian funds. Our engagement with SOMREP will be re-assessed during 2017. Sweden responded to the call for preparedness to El Niño by channeling additional development funds through the SOMREP resilience programme in Somalia, and will continue to monitor their progress in the humanitarian space even though any continuation of their program will be supported through the country frame for Somalia. Sweden has also been instrumental in supporting innovative approaches to displacement through pilot schemes together with UNHCR, NRC and LAW. These pilots will strengthen IDP’s and returnee’s possibilities to durable solutions and integration through strengthened legal agencies, livelihoods, income generating activities, rental subsidies and reduced SGBV and forced evictions. Similarly they contribute to harmonization and enhanced multisector hum-dev planning for shelter and urban integration of returnees in Kismayo. It represents developmental approaches to address a protracted humanitarian situation for some of the most vulnerable groups in Somalia. Another example is being developed in the health sector, where a high level of flexibility and innovation is being promoted in the development of a new area based health programme support through Save the Children.

Sweden is also a key donor in coordination through the informal humanitarian donor group and its role in the CHF board, where a priority is to better plan for resilience and linkages with development actors.

Kenya: After several years of decline, the only Swedish humanitarian funding left for Kenya has been directed to support to the refugee camps. However, resilience planning has been supported through WFP through the country frame and strategic future support to durable solutions to the refugees in Kenya could be considered, such as the plans for the new settlement in Kakuma called Kalobeyei.

3.2. Response Priorities 2017

- **Humanitarian Focus:** The focus for 2017 is to respond to life-saving needs in the areas of drought, related displacement and food security, as well as epidemics as a result of the before mentioned factors. Sweden could be instrumental in promoting early response to early warning – such as for the upcoming drought in March 2017 and be a frontrunner in attracting developmental actors and funding to address humanitarian root causes. Area based planning and response, as well as cash based assistance should be the preferred modalities when possible. Examples here can be displacement...
response in Kismayo, Baidoa and Mogadishu. The risk of corruption must be managed as far as possible and increased use of instruments such as third party monitoring solutions, call centers, grievance redress mechanisms and closer relations with The UN Risk Management Unit (RMU) should be promoted in the Swedish support.

- The objective of Sida’s humanitarian contributions is to improve the lives and alleviate suffering of the most vulnerable population persons: children, women and female-headed households, displaced persons and marginalized ethnic groups. Focus to these groups will be given when designing interventions to internally displaced and drought affected populations. Geographic focus will be to the most severely affected areas of the country, both by conflict (Sol, Sanaag, Galcayo), and by drought (Bay, Bakol, North Eastern parts), as well as so called hard-to-reach populations and areas.

### 3.3. Partners

Based on the priorities described in 3.2. Sida has decided to allocate the initial funding for 2017 to the partners listed below. Sida monitors each partner’s adherence to gender marker codes, conflict sensitivity and resilience. Sida reviews project proposals for 2017 to ensure that supported projects are coordinated within the broader humanitarian response to the crisis.

**ICRC** priorities for 2017 response are in line with the Sida objectives of its contributions. ICRC focus on protection among populations displaced by violence or natural disasters. Through the national societies of the Red Cross, ICRC will be able to assist drought affected populations in Kenya. In Somalia focus on protection, health, water and food of violence affected populations, especially women and children and SGBV survivors. The assistance also include community resilience building against violence and natural disasters (drought).

**ACF** is one of the main nutrition and food security actors to Sida. Supported programs in 2017 are in the following areas:
- Northern Kenya (Marsabit, Samburu, Mandera, Isiolo): nutrition
- Balkool region in Somalia (Hudur, Yeed, Elbarde): nutrition, emergency food security/livelihoods, WASH. Focus on IDP in Somalia.

**NRC** is one of Sida’s main partners for support to displaced communities. Sida supports the refugee response in:
- Djibouti (Obock and Ali Sabieh camps) for improved shelter, food security and WASH. Target populations includes refugees and host community.
- Refugee/IDP response in Kenya (Dadaab, Kakuma, Mandera) focus on food security, WASH, education, shelter, legal support (ICLA). Displaced populations, new and protracted.
- Refugee, returnee and IDP response in Somalia (Baidoa, Dollow, Dhooley, Kismayo, Banadir), Somaliland (Sanaag, Awdal, Hargeisa) and Puntland (Garowe, Galkacyo, Bossaso) focus on food security, education, WASH and ICLA.

Sida will from 2017 provide programme based support to NRC’s programme for the Somalia crisis. Sida’s decision is in line with the principles of Good Humanitarian Donorship and motivated by NRC’s past high performance in regards to delivery of humanitarian assistance, including reporting on results as well as a sound management and internal control system.

**Church of Sweden** focuses on humanitarian relief for displaced populations. Sida supports their work in:
- Dadaab, Kakuma (Kenya): child protection, livelihoods, peace building; Ali Adde and, Hol Hol (Djibouti): child protection

**The World Food Program** (WFP) is key actor for the country wide food assistance and has lately shifted significantly towards the use of cash (40%). The WFP biometric SCOPE card for delivery of digital cash is slowly becoming a joint standard for cash based assistance as organizations as UNICEF and NRC are signing on to the platform Sida encourages WFP to use the Sida-funds to focus activities on child nutrition (moderate acute malnutrition) a particularly vulnerable group. Sida will also engage in discussions with WFP
and potentially other actors for long term, sustainable risk and vulnerability reducing activities (development funds).

**UNICEF** is another key partner to support drought affected communities and has the ability to draw on synergies from programs in other sectors through a multi-sector resilience approach. Sida encourages UNICEF to use the Sida-funds for health related activities that include nutrition programs for children under 59 months old and WASH (clean water supply, access to hygienic sanitation etc.).

**OCHA** is continuing its process towards a move to Mogadishu of the main parts of its staff, which has involved a restructuring of staff and positions. It has come to play an increasingly important role in the area based joint analysis and plans for both drought and displacement response. OCHA also manages the Somalia Humanitarian Fund, which is the main instrument for channeling humanitarian funds to local NGOs. Support to the SHF also greatly enhances coordination since it strengthens the mandate of the humanitarian coordinator.

**UNHCR** has struggled with the overwhelming task of multiple displacements and the recent multisectorial response plans in combination with a low number of staff, but has a key role to play especially in the resettlement of Dadaab refugees returning from Kenya to the urban centers of Kismayo, Baidoa and Mogadishu.

**FAO** is a leader in resilience and livelihood related interventions connected to livestock and agriculture. The organization has constantly increased its presence on the ground and does even operate in some al-Shabaab controlled areas. Furthermore, the analytical unit FSNAU is housed at FAO which greatly strengthens its analytical force.

The **Somalia Humanitarian Fund (SHF)**, managed by OCHA is key to reach out to national partner organizations. It has benefited from the collaboration with the UN RMU and has since 2011 a strong due diligence and risk management system in place.

### Sida’s humanitarian assistance to the Somalia crisis in 2017

<table>
<thead>
<tr>
<th>Recommended partner for Sida support</th>
<th>Sector/focus of work (incl. integrated or multi sectorial programming ), financing modality (e.g. inkind or cash-based)</th>
<th>Proposed amount (MSEK)</th>
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<tbody>
<tr>
<td>WFP</td>
<td>Food security, nutrition, unconditional cash</td>
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</tr>
<tr>
<td>FAO</td>
<td>Livestock, resilience, early action, cash</td>
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</tr>
<tr>
<td>NRC</td>
<td>Displacement. Cash</td>
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<td>Food and nutrition analysis at FAO</td>
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<td>SHF</td>
<td>Multi donor pooled fund. Multi sector</td>
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<tr>
<td>ICRC</td>
<td>Health. Protection</td>
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<td>UNHCR Somalia</td>
<td>Displacement. Multi sectorial.</td>
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<td>ACF</td>
<td>Food security, Nutrition</td>
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<td>UNICEF</td>
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<td>OCHA</td>
<td>Coordination</td>
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<tr>
<td>Swedish Church</td>
<td>Refugees, Dadaab and Kakuma</td>
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</table>

**TOTAL: 94 MSEK**