

SOMALIA CRISIS

REGIONAL HUMANITARIAN CRISES ANALYSIS 2016

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 organisations 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 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 also 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 Somalia.

For 2016 the Somalia Crisis (including Kenya) is allocated an initial 100 MSEK in January 2016. Close monitoring by the embassy in Nairobi on the Somalia Crisis follows throughout the year for potential allocation of additional funds.

1. CRISIS OVERVIEW

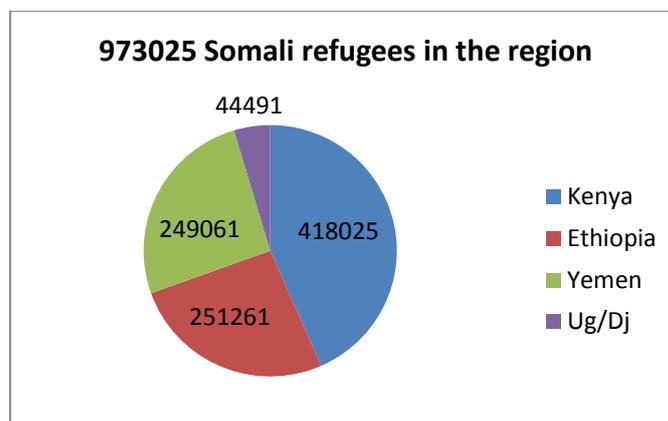
The Somalia Crisis regional humanitarian analysis focuses on the humanitarian situation in Somalia and its effects on neighboring countries, mainly Kenya. The response to Somali refugees coming to Ethiopia and Djibouti are analyzed in separate HCAs but should be understood together with the Somalia Crisis analysis. This analysis aims at defining how Sida can best support the population affected by the Somalia crisis, the coordination of the response, including inter-linkages and synergies between the different countries.

The Somalia crisis should be understood as a complex and protracted crisis which includes both conflict and cyclical natural disasters which impact tends to become aggravated due to difficult access for humanitarian actors. Somalia suffers from a chronic fragility of 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 with 22,126 staff (this includes both troops and police) 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 protracted fighting as well as recurrent natural hazards, Somalia, with a population of 12,3 million now has 1.1 million internally displaced persons (IDPs), gathered in informal settlements mainly in the urban areas, and another million which has fled to other countries, mainly to Kenya (420,000), Ethiopia (250,000) and Yemen (250,000). The current conflict in Yemen has further complicated the situation with returning Somalis and Yemeni refugees entering Somalia from the north. The conflict and its implications can be expected to increase in 2016 with an ongoing AMISOM offensive and elections being organized.

Furthermore, localized armed disputes between regions and ethnic groups create temporary pockets of insecurity and limited access. These outbursts of violence are either inter-clan conflicts over grazing lands or other natural resources, or political disputes due to the uncertainty of political borders in the federal state formation process which shows how fragile and volatile the current political situation is.

Natural hazards such as flooding and drought are part of everyday life in Somalia and because of high levels of vulnerability the hazards often turn into 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. Droughts and floods are common. In 2011 a severe drought hit the Horn of Africa and famine was declared in parts of Somalia for the first time since 1991. In late 2015 the cyclical weather phenomena El Niño hit the region, exacerbating the existing drought in Somaliland and parts of Kenya and Ethiopia, followed by heavy rains and flooding in Somalia and Kenya with further displacement and water-borne diseases as a result. The resilience and coping mechanisms of the agro pastoralist populations are constantly under strain and the 2011 crisis killed 260,000 people and a large percentage of the livestock and crops, which has yet to be restocked to pre-famine levels. The weak institutional capacity in Somalia and difficult access for humanitarian actors force people to flee or migrate to neighboring countries.

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 for 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.



(source: UNHCR)

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, floods, 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 position. In the large refugee camps of Kakuma and Dadaab, Kenya continues to host the largest number of Somali refugees in the region (approx. 420,000), Dadaab is the major refugee settlement hosting 346 428 refugees, with 95 % of the refugees being of Somali origin (329 811). In addition, close to 34 000 urban Somali refugees are registered and residing mainly in Nairobi and Mombasa. The other refugee complex is situated in Kakuma in Turkana County, bordering South Sudan. Kakuma is host to 183 023 refugees where Somali refugees account for 30 % of the refugee population or 55,010. The number of South Sudanese refugees in Kakuma has been steadily increasing as the conflict in South Sudan continues and is now at 95,620 people, many of which are separated children. In Kakuma, a new camp named Kalobeyei (60,000 ppl capacity) is being constructed where UNHCR is implementing a new model for camp and host community integration which is hoped to become a model camp. The design will include more permanent structures, skills training and business activities, including agricultural activities for certain self-sufficiency in terms of food – all in collaboration with the host community.

In November 2013 a Tripartite Agreement was signed between the Kenyan Government, Somali Government and UNHCR, which governs the voluntary repatriation of Somali refugees in Dadaab. A UNHCR pilot project initiated in December 2014 has to date assisted about 10,000 refugees to return to Somalia. The plan under the Tripartite Agreement establishes that 50,000 refugees should be repatriated by 2016, a further 65,000 during 2017 and an additional 75,000 in 2018. These figures clearly show the political ambition of Kenya, but are highly dependent on the security situation in Somalia and international funding to all actors engaged.

1.1 Geographical areas and affected populations:

In Somaliland and Puntland the institutional capacity is slightly greater than the rest of Somalia and the conflict not as intense. The impact of the conflict and natural hazards is therefore more severe in the south and central parts of the country. At the same time, the western part of Somaliland is affected by a protracted drought which could be expected to continue in 2016 and large parts of the coastal areas of Somaliland and Puntland were affected by cyclones under the second half of 2015. As part of the state formation process other regional administrations have recently been formed in the south and central and are showing emerging capacity to govern, but it is still far too early to rely on them for any kind of crisis response.

About 4.9 million people need life-saving and livelihoods support, and malnutrition remains high, with about 308,000 children under age 5 acutely malnourished and 56,000 children severely malnourished. About 1.1 million people are internally displaced and highly vulnerable to natural hazards, disease outbreaks and protection risks. Violence, exacerbated by the use of improvised explosive devices, and exploitation and abuse of children remain widespread. El Niño conditions have led to heavy rains, flash floods and worsened drought conditions in Somaliland and Puntland.

Poor basic services continue to undermine the resilience of vulnerable people. 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 still out of school. Moreover, Somalia continues to respond to the continued influx of returnees and refugees fleeing the conflict in Yemen, increasing the burden on already limited basic services. In 2015, over 189,000 children under age 5 were treated for acute malnutrition.

Populations of IDPs are the most vulnerable populations and in high need of protection. Critical malnutrition rates persist above 15% in five IDP settlements in Baidoa, Dhobley, Doolow, Gaalkacyo and Garowe. Mogadishu is just below the threshold at 14.9%. Recent data has shown high malnutrition rates in camps which should be more or less

accessible for humanitarian actors. IDPs are also victims of abuse and forced evictions due to uncertainty of land tenure and rapidly increasing land prices in the cities. Most of the evictions take place in Mogadishu where during 2015 alone 116,000 people were forcibly evicted. Forced evictions remain one of the key obstacles to local integration and a main contributor to family separation and destruction of humanitarian investments, such as water, sanitation and hygiene (WASH) installations.

1.2 Risks and threats

As the El Niño conditions continue well into 2016, river and lakeshore flooding is likely to intensify through December in localized areas due to on-going heavier-than-normal rains over flood-prone areas of East Africa. Flooding has already contributed to household displacements along the Shebelle River, the lowlands of central and southern Somalia, the Tana River, and Lake Victoria. The above-average rainfall, however, is expected to enhance agricultural production significantly in most non-flooded areas. In 2016, a meager response will increase risks for water borne diseases such as cholera and diarrhea in the wake of the flooding. The same phenomena is also expected to further deteriorate the drought conditions in Puntland and Somaliland, where another (4th) failed rain in spring 2016 could have disastrous consequences on farmers resilience.

The AMISOM offensive against Al Shabaab, which started in June 2015, is expected to continue during 2016. So far 40,000 has been displaced by the increased fighting and more populations will be forced to move from the new target areas of the offensive as well as areas where AMISOM are withdrawing its troops from to sustain the offensive into new areas. 2016 will also be election year. It will be an imperfect process which many actors have incentives to thwart. An increase in terrorist attacks and electoral related violence could be expected in the run-up and aftermath of the elections.

From the Kenyan side, the push to resettle Somali refugees from the Dadaab camps will continue based on the five year plan of the tripartite commission which aims to resettle 350,000 Somalis over the first three years. As the fighting in Yemen continues, the influx of returnees and refugees from that country will also continue. To this influx of people should be added the informal return from Kenya which is calculated to be around 30-50,000 per year. These arrivals put further strain on already weak and fragile institutions, and if not properly received, supported and integrated, the effect is likely to be an increase in the number of internally displaced persons in Somalia.

1.3 Strategic objectives identified in the Somalia Humanitarian Response Plan

The HRP for Somalia 2016 has three strategic objectives:

1. Address humanitarian needs by providing life-saving and life-sustaining assistance to people in need, prioritizing the most vulnerable.

The response will prioritise those identified as most vulnerable and consist of delivery of integrated life-saving assistance to the 1 million people in emergency and crisis, hereof 308,000 malnourished children who are unable to meet their minimum food and nutritional needs. This will be done by improving immediate access to food, through cash and food vouchers, vital nutrition and health and WASH support to reduce morbidity and mortality among vulnerable girls, pregnant and lactating women, boys and men, and vital protection services.

2. Restore and strengthen livelihoods and basic service delivery to build resilience to recurrent shocks.

Response will prioritise the provision of basic services and livelihood opportunities to vulnerable people, including reliable access to food and nutrition, education, shelter and water, hygiene and sanitation to ensure that basic needs are met. For individuals and households at risk, the provision of targeted and predictable safety nets will help them mitigate the effects of seasonal risks and prevent them from slipping into acute insecurity.

3. Strengthen the protection of the displaced and other vulnerable groups, and catalyze durable solutions.

The objective is to improve the protective environment, prevention of protection risks, response and access to community-based protection services to improve protection structures in hard to reach areas; provide support to internally displaced persons to achieve durable solution through technical advice, analysis, strategy development, advocacy and direct interventions.

The 2016 response plan is premised on the three-year humanitarian strategy that extends from 2016 to 2018. The strategy **aims to save lives, strengthen community livelihood systems to withstand shocks and manage disasters, improve access to basic services, while concurrently prioritizing protection of vulnerable groups, including seeking durable solutions for internally displaced persons.** By pursuing these overriding objectives, this strategy seeks to utilize life-saving humanitarian assistance as a platform for vulnerable people to withstand and build resistance to shocks, while at the same time linking to development activities to address the root causes of vulnerability, solve cyclical displacement and catalyse durable solutions. A three-year approach to humanitarian response in Somalia will make it easier for partners to set benchmarks for year-on-year monitoring frameworks and adjust annual response plans in line with emerging needs, ultimately leading to increased accountability to affected

people and better linkages with development efforts, such as durable solutions for internal displacement and returning refugees.

While entirely humanitarian in scope, the strategy will link with state-building and development-focused activities in order to help ensure that many of the underlying causes of recurrent humanitarian crises in Somalia are addressed and to strengthen the resilience of Somali people and communities to prepare, respond and recover from future crises. The response will be prioritized to those identified as most vulnerable, namely; acutely food insecure, malnourished children, conflict and natural disaster impacted and displaced, refugees and returnees. Efforts will be stepped up to support partners to establish and expand activities in hard to reach areas in southern and central regions.

Based on existing capacities, the humanitarian community aims to provide assistance to 2.5 million people out of the identified approximately 4.9 million people that are in need of some form of humanitarian assistance. Key humanitarian needs vary across clusters and geographic areas. The following response parameters have been set up to guide the prioritisation of need in order to identify and address the most acute needs first, identify relevant lifesaving assistance and inform the allocation of the limited funds appropriately:

1. Provision of life-saving assistance to people in 'emergency' and 'crisis'
2. Addressing acute malnutrition through an integrated multi-sector approach, prioritizing the 308,000 acutely malnourished, including the 56,000 severely malnourished.
3. Support reduction of malnutrition rates, specifically in and around the five internally displaced persons settlements with thresholds around and above emergency levels Baidoa (Bay), Dhobley (Lower Juba), Doolow (Gedo), Garowe (Nugaal) and Gaalkacyo (Mudug).
4. Provide life-saving assistance to the most vulnerable internally displaced persons and returnees, particularly those displaced multiple times, with protection, shelter/NFI and basic services
5. Implement life-saving interventions in regions most affected by flooding and drought as a result of El Niño.

2. IN COUNTRY HUMANITARIAN CAPACITIES

2.1 National and local capacities and constraints

While there have been high expectations in Somalia on the initiation and implementation of development programmes in 2015, these have not been met in terms of availability of resources and coherence across the development spectrum. Although there have been more donors looking to increase support to development programmes, this has not yet translated into the massive delivery of results hoped for within the development agenda. This is impacting the ability to build the capacity of core institutions of the state and provide basic services. With the Multi-Partner Trust Fund (MPTF) only funded just under 200 million USD, and the World Bank Trust Fund funded with 180 million USD, this will not be sufficient for the UN to effectively address all of the underlying causes of vulnerability and build resilience of communities to cope with shocks and stresses in the short term.

The three-year humanitarian strategy for 2013 to 2015 was developed on the premise that Somalia was in a period of transition and humanitarian programming should go beyond life-saving programmes and serve as a bridge to longer-term development activities within a humanitarian context. In that vein, it aimed to support Somali communities to build capacities to withstand shocks and adapt to new situations by identifying the most vulnerable populations, understanding the causes of vulnerability, and addressing them through innovative programming. In essence, there was a strong longer-term resilience component imbedded into the last humanitarian plan for Somalia, with activities timed and sequenced to sustainably enhance household and community capacities to cope with shocks and seasonal vulnerabilities. However, sustained funding was not provided to enhance resilience and link to longer-term development projects that delivered a significant impact and during spikes in emergency levels, humanitarian organisations were frequently required to divert funding from resilience building efforts to life-saving priorities.

The strategic objectives of the current three-year strategy, the New Deal, especially PSGs 4 (Economic Foundations) and 5 (Revenue and Services) and the future National Development Plan, developed by the government during early 2016, which will contain a chapter on resilience and humanitarian response, will be the main nexus for fostering enhanced complementarity between humanitarian and development programming in pursuit of durable solutions to displacement, recurrent protection violations and to addressing the underlying causes of hunger, malnutrition, disease, and suffering throughout Somalia.

The Somalia Disaster Management Agency (DMA) in Mogadishu, the Humanitarian Affairs and Disaster Management Agency (HDMA) in Puntland, and the National Environmental Research and Disaster Preparedness Agency (NERAD) in Somaliland are the nominal interlocutors for humanitarian partners and support disaster preparedness and response efforts. Their capacities remain limited, however, and continue to impede their disaster preparedness and response capacities. Similarly, local government structures also have limited capacities. Capacity building and resource gaps continue to feature as a major constraint. Capacity building of these institutions has been

prioritised by cluster lead agencies and is embedded within the cluster operational plans.

Kenya has some fairly strong institutions and safety nets 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. 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.

2.2 International operational capacities and constraints

Leadership and Coordination: With the long term international humanitarian engagement in Somalia, leadership and coordination is run by the resident humanitarian coordinator of the UN. The Cluster System, the Humanitarian Country Team and Advisory Boards exist but different clusters vary widely in terms of functionality. Sweden is engaged in the CHF advisory board, co-chair of the Informal Humanitarian donor group and member of the HCT. A part from representing the donor group as a co-chair, Sweden has been vocal on the issues of enhanced coordination between humanitarian and development programs, as well in the debates around migration, cash based interventions, displacement and health.

Humanitarian Agencies: Twenty four UN agencies and over 104 national and international NGOs continue to operate in Somalia. Due to the high security risk in southern and central Somalia, most humanitarian partners employ national staff to monitor and deliver assistance. It is also common that the assistance is implemented through Somali national partner organizations. The lack of sustained access to most of the affected areas makes assessing needs and monitoring response extremely difficult. Attacks and threats against humanitarian staff have further affected the ability of humanitarian agencies to provide assistance. ICRC has a large presence in the south and central parts and is for the time being the only international organization able to operate in Al-Shabaab controlled areas.

Capacities and constraints in Kenya: 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. OCHA's 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 a somewhat reluctant the Ministry of Interior.

In Kenya, a coordination mechanism for refugee issues comprising of donors, major humanitarian NGOs, WFP and UNHCR has taken shape, called the Kenya Refugee Programme Team. 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 organisations involved in protection and assistance to refugees.

Key constraints: The most important constraints for humanitarian agencies in Somalia revolves around funding levels, security, access, corruption, risk mitigation measures and monitoring and evaluation and to some extent political impediments.

- The lack of access for international staff makes it increasingly difficult to carry out proper monitoring and evaluation of projects on the ground. There continues to be multiple cases of corruption and diversion of funds, and examples of projects funded but never verified. The complex political landscape provides additional issues revolving around unclear policies for taxation, operational policies and frameworks for NGOs which often differs between both regions and federal states, but even between different ministries from 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. A close collaboration between the humanitarian and international political actors is key to resolve this.
- 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.

- Secure logistics (UNDSS, armored vehicle, close protection, intelligence) is another key constraint for actors in Somalia. The availability of these resources defines the possibility for staff to visit project sites and conduct face to face dialogue with partners and beneficiaries. In sudden onset crises, this limited capacity also leads to a discussion on the use of military resources (AMISOM helicopters) for the delivery of humanitarian aid.
- 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 SRP (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.

2.3 International and Regional assistance

Key donors in Somalia's Humanitarian space are the US food for Peace and OFDA, DFID-UK, Denmark, Norway, Sweden, Finland, Ireland, Canada, Australia, ECHO, France, Japan, Swiss Development Cooperation. 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 SRP. 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 Sida's role

Earlier response and lessons learnt:

Somalia: Sida's Humanitarian funds for Somalia for the year 2015 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 enhanced coordination through OCHA. The main part of the humanitarian allocation for 2015 was channeled through the Common Humanitarian Fund for Somalia. Other partners included ICRC, NRC and SRK.

Sweden is a key supporter of resilience programming in Somalia through SOMREP, a consortium of 7 NGOs, which until 2015 was funded both through development and humanitarian funds. Our engagement with SOMREP will be re-assessed during 2016. 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 was also a key donor in coordination and the co-chair of the Informal Humanitarian Donor Group (IHDG), where a secretariat function was supported through MSB. Sweden was also part of HCT and the CHF board. During 2015, the Somalia team at the embassy in Nairobi increased their humanitarian capacity through the employment of a regional humanitarian specialist to strengthen programming in resilience as well as humanitarian coordination and analysis.

Kenya: A major part of Sida's humanitarian funding in previous years has been allocated to refugee response. However a significant part has also been allocated to other emergencies such as malnutrition in children, support to drought affected populations, IDPs and cholera outbreaks. A small share has been dedicated for resilience programming. Kenya has for the past two years been undergoing a transition with decreasing humanitarian funding - with the exception of support to the refugee operations. Kenya has the right conditions to develop initiatives that include components of humanitarian and development funding, for example through development cooperation complemented by a mechanism that can quickly be triggered to support a sudden crisis. Resilience-related support will be funded through Swedish development cooperation. The Swedish Embassy is funding a 3-year WFP resilience programme supporting the development of national and local capacity within the agriculture, natural resource and social protection sectors. In brief, Sweden's humanitarian support will now shift to an increased focus on refugee support. In this endeavor, Sida should take a gender sensitive perspective, taking in account specific needs of women, men, girls and boys.

3.2 Response Priorities 2016

Somalia: The focus of Sida's humanitarian assistance in Somalia will be to address the needs identified through the Humanitarian Needs Overview in Somalia in the three geographical areas of Somalia. Identified priorities are 4.9 million persons in need of critical Humanitarian assistance broken down as 1 million unable to meet food requirements, 3.9 million acutely food insecure, 308,000 malnourished children and 1.1 million internally displaced persons. Mainstreaming of gender is essential in all humanitarian programming in Somalia, and conflict sensitivity and do no harm are of equal importance. Sida will continue to advocate for protection, gender mainstreaming and prevention and response to SGBV.

For 2016 the Somalia team at the Embassy in Nairobi will continue to focus on better coordination, information sharing, resilience and linking humanitarian and development specifically in health and displacement. There is also a need to investigate how to strengthen the capacity in monitoring and evaluation of the humanitarian contributions as well as promote sub-regional synergies and learning. Additionally, the embassy intends to analyze how a further focus of our humanitarian portfolio could be developed.

There are synergies with Sweden's development agenda in Somalia more so in the areas of promoting resilience building, addressing gender inequity and in the provision of durable solutions. Such links will continue to be strengthened in 2016 through dialogue and increased humanitarian analysis integrated in the National Development Plan of the government of Somalia. Sida's development budget for Somalia for 2016 will prioritize programmes related to the Somalia strategy i.e. Democracy and Human Rights, Health and Gender Equality & Human security and livelihoods. This position will allow for greater regional synergies in Sweden's humanitarian support, but also contribute to strengthening linkages between humanitarian and long-term development support in the sub-region.

Sweden will continue to support the use of cash or vouchers to a larger degree where suitable and proper market analysis is done, both in social safety nets programs, direct food distribution or others. Specific focus will be given in following up experiences from the WFP support in South-Central Somalia, since their ambition is to continue increasing the share of cash and vouchers in their program.

Sweden could also assume a more strategic role in the promotion of durable solutions for IDPs and refugees, for example learning from the experiences of a more integrated approach from Kalobeyei in Kenya. A state-led partnership with relevant international partners to address protracted internal displacement in a more sustainable manner need to be promoted.

Continued support to the CHF is important to Sweden since it is seen as strengthening coordination within the humanitarian community and has the ability to handle support to local partners where access is difficult. The CHF is suffering from a reduction of international support which will jeopardize its possibilities of acting strategically, and a discussion in the advisory board is ongoing on how to best utilize existing funds.

Kenya: Apart from a 5 MSEK contribution to NRC for programs in Dadaab and Kakuma, there will be no initial allocation for Kenya but potential humanitarian needs will instead be covered through Sida's RRM where strategic partners can apply for funds for sudden upcoming humanitarian crises. Sweden will anyhow be engaged in the dialogue with UN and Kenyan authorities regarding the refugee situation and potential policy developments in this sector.

3.3 Partners

It is not foreseen to engage with new partners in Somalia for 2016. Four strategic partners have submitted an initial interest for support to programs in Somalia (ACF, IRC, NRC, SRC). To enhance dialogue and facilitate longer term planning, it is preferable to aim for longer term (3 years) agreements where feasible.

FAO continues to play a key role in the area of food security and resilience but a discussion is needed about Swedish engagement in this area. FSNAU is proposed to move to development funding from 2017. SOMREP has been removed since their funding will be completely from the country frame from 2016. NRC is proposed as the only partner in Kenya since they are engaged both in Kakuma and Dadaab as well as in the Tripartite commission.

The CHF for Somalia is under pressure and its strategic position will have to be put in relation to the overall funding it might receive.

ICRC is the only organization with access to Al-Shabaab controlled areas and a very strategic partner in health.

UNICEF and NRC are both organizations proactive in the resilience field and promoting new approaches to protracted crises.

UNHCR is coordinating the response to displaced persons and refugees and crucial in the discussions between Kenya and Somalia.

OCHA will continue to be the driving force for coordination both within UN but also in the broader HCT. They are managing the CHF and also have a crucial mandate in information gathering and dissemination.

Sida's humanitarian assistance to the Somalia crisis in 2016

Recommended partner for Sida support	Sector/focus of work (incl. integrated or multi sectorial programming)	Proposed allocation by Sida 2016
FAO	Food security/core support	5,000,000
FSNAU	Food Security and Nutrition Analysis	5,000,000
NRC	Refugees, multi sectorial	8,000,000
OCHA	Coordination	3,000,000
UNHCR	Refugees and IDPs	10,000,000
UNICEF	Multi sectorial	12,000,000
ICRC	Health including south central, protection and IHL	10,000,000
SRK	Health focus	7,000,000
CHF Somalia	Pooled fund, multi sectorial	35,000,000
NRC (Kenya)	Dadaab and Kakuma	5,000,000
		TOTAL: 100,000,000

Sources:

Humanitarian Response Plan (HRP) Somalia
Humanitarian Needs Overview (HNO) Somalia