

Report of the mid-term evaluation of the

SRCS/IFRC RESPONSE TO THE 2010/11 SOMALIA DROUGHT



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Acronyms and Abbreviations

BERT	Branch emergency Response Teams
CBHFA	Community Based Health and First Aid
CHF	Swiss Francs
DMIS	Disaster Management Information System
DRR	Disaster Risk Reduction
HADMA	Humanitarian Affairs and Disaster Management Agency (HADMA) (Somalia Puntland)
IFRC	International Federation of Red Cross and Red Crescent Societies
ICRC	International Committee of the Red Cross
LLIN	Long Lasting Insecticide Treated Net
MCH	Mother and Child Health
MCHN	Mother and Child Health & Nutrition
NFI	Non Food Item(s)
O&M	Operation and Maintenance
OPD	Outpatient Department
PMER	Planning, Monitoring, Evaluation and Reporting
SRCS	Somali Red Cross Society
ToT	Training of Trainers
USD	United States Dollars
VCA	Vulnerability and Capacity Assessment
WFP	World Food Program

1 Executive summary

This report presents the evaluation of the 2011 Somali Red Crescent Society drought relief operation in Somaliland and Puntland in response to the humanitarian crisis that unfolded starting late 2010 and continues to affect large number of the population in Somalia as well as the wider Horn of Africa. While this evaluation was undertaken in March 2012, humanitarian actions supported by IFRC and implemented by the Somali Red Crescent Society (SRCS) are still on-going. This evaluation is therefore intended to inform the evolution of the response.

The main components of the intervention were health services, distribution of non-food items, food rations to schools and orphanages and support to water supplies.

Methodology, scope and purpose

The evaluation was conducted to establish the relevance, impact, efficiency and effectiveness of the intervention to the drought and provide a guide continuing assistance and planning for the many communities that remain vulnerable. The evaluation also provides part of the accountability process for the national society's humanitarian work in Somalia.

The evaluation is based on field visits to intervention areas, interviews with beneficiaries, the national society staff and volunteers, partners and government officials and review of project documents.

Context of the operation

The evaluation finds that the services and goods delivered are valid responses to the needs of the affected communities and address some underlying vulnerabilities that made the disaster's impact so severe. The intervention addressed some drivers of the chronic vulnerability affecting the target populations but the number of affected people and their vulnerability is so acute that assistance is still needed.

Delivery of the intervention

Broadly the services to the beneficiaries were well delivered; however, the overall performance also reflects weaknesses in the national society's capacity in some areas, particularly water and sanitation. This weakness largely limited to the SRCS branches in Puntland.

The components of the operation addressed some of the most acute needs resulting from the drought and the wider complex crisis of Somalia. The targeting of assistance was largely sound and accurate. The quality and content of goods and services delivered was generally good but some criticisms from the beneficiaries and the evaluator are noted;

- i. The design and works quality of water supply infrastructure in Puntland had many shortcomings. These are discussed in sections 3.2.2 and 7.5
- ii. The provision of tarpaulins was severally criticized by beneficiaries who noted that it only provides temporary shelter while they are in all probability going to need semi-permanent shelter in the IDP camps.
- iii. SRCS officials noted that in the Somali context the NFIs while having a humanitarian dividend are secondary in priority to provision of water supplies for domestic and productive uses. As such they ventured some of the funds used to deliver NFIs should have been used for water supply development which can mitigate the impact of the drought.

1.1 CONCLUSIONS VIA EVALUATION CRITERIA

Based on the relationship between the needs of the drought affected communities and the services and goods provided the intervention demonstrated **highly satisfactory relevance**;

- i. Support to perennial water supplies through borehole rehabilitation and fuel subsidies to run the boreholes at the height of the drought ensured continued accessibility to water supplies , this was critical limiting the extent of livestock losses and hence supportive of recovery. The contribution of these supplies to household supplies was also critical.

- ii. Expansion of the health services to reach the underserved communities through the mobile health clinics provided access to health care services such as mother and child health, child nutrition and immunisation. These services are vital to the health and survival of mothers, children and communities at large weakened by food insecurity and exposed to heightened risk of water borne disease due to use of unsafe water supplies.
- iii. The school and orphanage feeding programs were relevant by virtue of the fact that children faced greater risks to health and survival from overstretched coping mechanisms at the community and household level. Keeping orphaned and vulnerable children in school also offers them an opportunity to a better future.
- iv. Distribution of non-food items had clear welfare benefits but these are secondary to other needs like water and food.

The intervention achieved **satisfactory effectiveness** in reducing the impacts of the drought by responding effectively to the increasing humanitarian needs.

- i. Support to water supplies provided access to drinking water to affected households, reducing the severe stress on domestic supplies and saving livestock which is the backbone of the nomadic livelihoods.
- ii. Feeding of vulnerable children in schools and orphanages proved effective in sustaining them in these institutions where they are protected and provided with the means for a better future.
- iii. The rapid scaling up of the health services improved access to health services for underserved communities whose health status was undermined by the effects of the drought. Focus on Out Patient Department (OPD), and Mother and Child Health (MCH), immunisation, nutrition and growth monitoring combined with Outpatient Therapeutic Feeding Programme was an effective response to the health needs of drought affected communities. Health education has also improved the health status of the community through control of communicable diseases.
- iv. The control of moderate malnutrition through Mother Child Health & Nutrition (MCHN) has also been very effective and has also helped reduce the number of severe malnutrition cases. The effectiveness of this component is only tempered by the limitations to treatment services caused by the long intervals between visits to communities on account of the large number of communities the mobile clinics have to serve before completing a mobile circuit.
- v. Distribution of non-food items was indeterminate in terms of its effectiveness in addressing drought related impacts, specifically that loss of household items was not a direct consequence of the drought and their lack is a reflection of poverty in general.

The intervention had a **highly satisfactory level of efficiency** in the utilisation of the available resources to meet the humanitarian needs of the affected populations;

- i. Provision of fuel subsidies to run the boreholes at the height of the drought was a rapid impact measure that alleviated water stress in communities which had exhausted their capacity to pay for water. By this measure the intervention reduced water stress and contributed to saving herds and thereby protected livelihoods from the most severe drought impacts.
- ii. Development of new water supply points whether through Berkeds (water pans) construction or rehabilitation and extension of water supply networks to new kiosks also addressed not only some of the water stress in the beneficiary communities but also responded to underinvestment in water supplies.
- iii. The mobile clinics reached a many communities and households and their rapid deployment delivered curative and preventive services when they were most needed without the delay that would be imputed by construction of facilities. The mobile teams also deliver these services with a very small contingent of staff.
Through provision of preventive services their impact on health has been expanded far beyond the number of clients they have served and in so doing addressed issues of maternal and child health as

well as communicable diseases which account for a large part of the burden of disease among the beneficiary communities.

- iv. The school feeding programme by targeting vulnerable children was effective on account of the fact that it helped the children without other sources of support to remain in school, reduce absenteeism as well as keeping the children in a secured environment.

Whereas there was no baseline data for the intervention some components, particularly the development and rehabilitation of water infrastructure have a long term impact. Similarly the sustainability of the intervention cannot be addressed as it sought to deliver relief from a specific disaster incidence, and future shocks cannot be predicted. What can be noted at this point is that by strengthening the community resilience through provision of goods and services, particularly health services and water infrastructure, communities are better prepared to cope with future shocks. This future dividend can be better secured by addressing some weaknesses in design, monitoring the quality of works and operation and maintenance weaknesses related to water as well as securing long term funding to sustain the mobile clinics.

While outside the remit of the evaluation and indeed of the drought operation, the issue of rehabilitating disaster affected populations needs to be examined in depth; as the number of destitute households increases the overall vulnerability of the population as social safety nets are eroded.

1.2 Recommendations

The first four of the recommendations relate to actions that are needed immediately while the rest relate to longer term and strategic issues for the national society.

- **Improvements to the design of water supplies** particularly Berkeds (water pans) and Shallow wells in Puntland are needed, including but not limited to drainage around shallow wells and proper inlets for Berkeds. Where old generator sets can be repaired the option of doing this should be pursued to provide redundant power supply to run the boreholes during peak demand.
- **Training on operation and maintenance** of water supplies should also be implemented.
- **Support to post drought recovery** should be considered including supporting vocational training for drought affected households so as to adapt new livelihoods.
- **National society capacity building** in disaster management should be scaled up through the development of a community based early warning system and a comprehensive program of training in Disaster management skills for staff and volunteers. **Disaster management should be mainstreamed** into all national society branch activities particularly those in Puntland need support in the technical areas relevant to disaster management such as water supply development.
- More attention to **livelihood protection** is needed with emphasis on protecting and ensuring access to livelihood support such as water and livestock production and marketing, where actions are needed outside the scope of national society mandate, the society should advocate for these actions from other actors. There is also need for **stronger coordination of humanitarian and development aid** by the government authorities where applicable for more effective and efficient delivery of protection services.
- Water supply planning must cater for all sources of water demand in the community. Specifically provision must always be made for livestock watering needs. More boreholes for permanent water supplies are needed and these should be located with due reference to grazing and settlement patterns so that water supplies are available in both wet and dry season grazing areas.

2 BACKGROUND

2.1 The 2011 Somalia drought crisis – origins and evolution

The drought that affected Somalia in late 2010 and most of 2011 had the characteristics of a complex emergency. Its impact reflected the history of war, insecurity and forced migration. Response to the crisis was hampered by lack of humanitarian access to the southern parts of Somalia which accelerated migration northwards into Puntland and Somaliland as victims sought relief from agencies operating there as well as reprieve from insecurity.

The migration of displaced persons into Southern Ethiopia and Northern Kenya created immense pressure on livelihoods and resources in those areas which also suffered from the drought and low level conflict

In Puntland and Somaliland the main impact of the crisis were drought conditions as well as the pressure brought on by the displaced persons on local resources. Displaced persons themselves faced additional pressures with their livelihoods greatly weakened or destroyed and being in need of food, shelter and essential non-food items.

Victims of the crisis faced heightened health risks on account of poor nutrition, poor water supply and sanitation, crowded living conditions in IDP camps as well as the mass population movement which in itself increases the chances of the spread of communicable disease.

The proximal trigger for the drought was the failure of the 2010 Deyr rainy season (autumn rains, September-December) which was followed by poor GU rains (spring- April to June). This contributed to famine being declared by the United Nations in some Southern regions of Somalia.

The occurrence of famine even after clear warning signs of the impending disaster were raised as early as October 2010 generated criticism on the delayed response, it also highlighted donor fatigue with the Horn of Africa and Somalia in particular. As one government official put it 'Nowadays no one believes there is ever an emergency in Somalia, they take our crises to be business as usual'.

Following the evolving deterioration of the humanitarian situation in Somalia, the IFRC provided assistance through scaling up the Somalia Country Annual Plan MAASO001 before launching the emergency appeal number MDRSO001 in September, 2011 seeking CHF 4,158,791 in cash, kind, or services to support the Somali Red Crescent Society (SRCS) assist 150,000 people affected by the drought for 12 months.

2.2 The RC/RC Movement's response to the crisis (Puntland and Somaliland)

Within the Red Cross Red Crescent Movement, the ICRC operations focused in the southern regions of Somalia on account of the complex conflict and political environment. The IFRC, in partnership with the SRCS branches in Puntland and Somaliland focused in these regions. The subject of this report is an evaluation of the SRCS response to the drought in Somaliland and Puntland.

The activities reported on here were carried out under the scaled up IFRC country plan 2011 and continued under the emergency appeal, the emergency appeal mentioned above is still ongoing and will be evaluated at its closure.

The appeal was specifically intended to support relief and early recovery actions identified by the SRCS branches during the inception workshop that took place in Hargeisa, Somaliland in January 2011 and was attended by six branches from Somaliland and three branches from Puntland. Target areas for the drought operation were:

- Health and nutrition.
- Logistical support with the procurement of 14 vehicles to replace the rented vehicles used to sustain the operations of the mobile clinics.
- Rehabilitation of water sources, including boreholes, shallow wells fitted with hand pumps; fuel subsidy to run the boreholes; water storage and distribution points at internally displaced persons' (IDP) settlements.
- Ceramic water filters distribution for rural households.
- Chlorination of water points and distribution of sanitation tools.

- Basic food rations for children and women through fixed SRCS clinics in collaboration with the World Food Program (WFP).
- Basic food rations for selected schools and orphanages.
- Non-food items for IDPs.
- Insecticide treated bed nets (LLIN) distributed through SRCS fixed clinics network for pregnant and lactating mothers and children.
- Livelihood support: protection of income sources for communities living in coastal areas.
- Capacity building support for SRCS branches through tailor-made training in Emergency Response, Community Based Health and First Aid (CBHFA). and Planning, Monitoring, Evaluation and Reporting (PMER)

2.3 Methodology

The evaluation is based on three sources of information:

- i. Review of project documents including the country plan, emergency appeal, national society policies and progress reports/updates from the emergency appeal and the country plan.
- ii. Briefing with the IFRC Somalia Country Representative and SRCS leadership.
- iii. Interviews with national society staff, local administrators and beneficiaries.
- iv. Visits to the sites of intervention. Field visits were conducted between 6 – 22 March, 2012.

The analysis of the performance of the intervention also makes reference to other programs of the SRCS and their past experiences, as well as information on the disaster patterns in Somalia and the region in the past. The evaluation benefited from the consultant's previous engagements with the national society as an external consultant on health, water and sanitation and disaster management programs.

3 PERFORMANCE OF ASSISTANCE TO DROUGHT AFFECTED POPULATIONS IN PUNTLAND AND SOMALILAND

3.1 Country plan relevance to the crisis

The response to the crisis in the two regions was based on the scaled up country plan which was in place well before the magnitude of the disaster became apparent. In addition, the specifics of the scaled up components in relation to the disaster were decided by a planning workshop organised and facilitated by IFRC and SRCS in January 2011.

As the country plan responded to the humanitarian priorities in the country which were exacerbated by the drought, it provided a good foundation for scaling up the humanitarian response to meet increased needs.

The country plan budget was weighted towards health services, an area the SRCS is quite adept at. Therefore, when the health component had to be scaled up in response to the drought, the national society had the organisational capacity to immediately rollout additional mobile health clinics.

Further, having been engaged for a long time in health services, the SRCS branches were able to quickly identify the most underserved locations for the new mobile clinics to serve. The emphasis of the country plan on preventive health services is also in line with the burden of disease profile of the communities which is dominated by communicable and immunisable diseases and deficiencies in Mother and Child Health care (MCH).

The increased mobile clinics have targeted these service areas which is the most effective approach for them to take given that they cannot provide curative services on a consistent basis as they only visit client communities once a month.

At the same time, the revised country plan 2011 provided only 6 per cent of its budget for disaster management which is quite limited given the need for developing disaster management capacity in the branches, and implementing appropriate disaster information systems among others. This was later enhanced by a substantial increase in the disaster management budget to over one million Swiss francs by mid-June, 2011 which represented over 50 percent of the annual country plan budget for 2011. It must also be appreciated that other components of the country plan contribute to community resilience; health services stand out in this respect.

Still the country plan makes limited provision for improved water services and, as it became very clear in the drought, these are critical humanitarian priorities. This reflects the traditional competency of the National Society in health education. The impact and relevance of the water supplies developed under the operation highlight the need for water supplies in addition to health education.

As detailed in this report, there is a need for consistent and targeted water supply development and enhancement of community resilience measures.

3.2 Performance of project components

3.2.1 Health and nutrition



A mother having her blood pressure monitored at a mobile clinic ; such simple services can provide early warning to risks to mother and un born child such as preeclampsia which is a major maternal health problem in Somalia

The Somali Red Crescent Society runs a number of MCH/OPD clinics with the objective of delivering primary health care services. Previous assessments of this programme have found that the fixed MCH/OPD clinics provide high quality preventive and curatives services for the targeted communities. Further, mobile clinics running prior to the drought operation were also providing a critical service for remote and mobile communities.

The objectives of the mobile health clinics in the drought operation derive from the Somalia Country plan 2011. These are stated as the reduction of morbidity and mortality through treatment of common diseases, immunisation, health promotion, mother and child health as well as raising awareness on HIV and AIDS prevention.

The main distinction observed in the operation of the mobile clinics implemented under the scaling up of the country plan for the drought response is a different pattern of service offering; on account of the large areas served by the mobile clinics there is a lower frequency of contact with client communities among the new mobile clinics.

Fatuma Hirsi, a resident of Dhudhub village in Bari region, Puntland expressed her satisfaction in accessing the services of the SRCS mobile health team by reaching her in her remote village. She said, "Nowadays, most of our health problems were solved by the SRCS mobile clinic. Before, our children are dying, because we are unable to reach the health centres in the main towns"

The new mobile clinics cover many villages and therefore take longer time to return to each. Typically the mobile clinics visit each location once a month. This imposes limitations to the efficacy of treatment of common diseases. In the interval between visits, client communities either go untreated or have to travel long distances to other facilities.

The main priority of the SRCS in health services, Mother and Child Health which is well served by the mobile clinics as immunisations are scheduled for the monthly visits and growth monitoring undertaken. Combined with health education, the clinics act to reduce communicable and immunisable diseases that are a major source

of burden of disease. Additionally, antenatal and postnatal care during monthly visits helps promote safe motherhood and flag potentially risky deliveries to fixed health facilities for safe delivery. In this way the mobile clinics have contributed to improved health in remote and underserved communities.

The mobile clinics have also contributed to reducing one of the most severe effects of the drought - child malnutrition. Whereas cases of severe malnutrition were common at the start of operations in April 2011, a large drop in the number of cases has been observed despite the clinics not offering therapeutic feeding for severe malnutrition cases as this would require weekly contact with the clients which is not currently possible¹ Through growth monitoring the clinics identified and intervened in cases of moderate malnutrition, drastically reducing the number of cases that could have progressed into severe malnutrition². The main intervention for moderate malnutrition is the distribution of Plumpynut®.



A girl undergoing growth monitoring at a mobile clinic. Controlling severe child malnutrition has been one of the outstanding successes of the intervention

However, many displaced and drought affected households continue to suffer severe food shortages and malnutrition persists in the population at large and more so among children.

The evaluation also observed several operational challenges to the mobile clinics, particularly in field equipment and facilities;

- Assuring privacy for consultations is a challenge in some locations as there is no privacy screens provided to the clinics. This means consultations are held in the hearing of other patients; examinations are also difficult for the same reason.
- The clinic staff also observed they have to serve water-scarce villages which have no clean water for use in the clinic. The vehicle used by the clinic does not have room for carrying water supplies.

¹ Severe malnourished cases are referred to therapeutic feeding centres run by other agencies such as MSF.

² Plumpynut is obtained from the WFP and UNICEF and is distributed through the SRCS fixed clinics

3.2.2 Water and sanitation services

Water scarcity is chronic in Somalia but the drought exacerbated this to levels not seen in recent times. Interventions in the water sector contributed to increasing supplies.

The approach taken by the intervention addressed two objectives: To rapidly restore availability of water through refurbishment of existing water sources and supporting their operational costs, and increasing water supply through construction of new water facilities, primarily water pans (*Berkeds*) and shallow wells.

Refurbishment of boreholes provided a critical relief to the communities as it ensured the availability of water at a time when most surface and sub-surface supplies such as wells and *Berkeds* had dried up. In any case the production of surface and sub-surface water supplies is inadequate even in 'normal' dry periods. By this measure the intervention ensured access to water for domestic and livestock use, the latter enabling the salvaging of drought decimated herds.

Fuel subsidies also provided critical relief by sustaining access to ground water that otherwise would have been too costly for herders facing an almost total collapse of livestock sales. Without this facility many vulnerable households would have lost the last of their stocks as they could not have afforded the cost of water supplies from private sources or vendors.



Fuel subsidies ensured stable and affordable supplies for many communities such as this woman.

The evaluation also notes the productive collaboration between the National Society and private borehole operators who own most operational boreholes. Branch secretaries negotiated reduced or even cost free water for beneficiaries in the period the fuel subsidy was made available for the operation of the boreholes. This cooperation is noteworthy as in its absence there would have been few boreholes to work with.

It was also observed that no operation and maintenance training was provided to communities that were beneficiaries of the refurbished boreholes. Some of the previous damage was clearly linked to poor maintenance and operation practices

A similar situation was observed at Jidad borehole in Bari Region and Sinujif borehole in Nugal Region.

Omission of operation and maintenance training imperils the sustainability of new boreholes. Similarly, the omission of cost recovery training especially after the provision of fuel subsidies which have desensitised communities to the need to pay for their water supply costs, poses

considerable risks to the sustainable resumption of market based water supply systems.

The evaluation observed that few of the boreholes supplied with new generators and submersible pumps such as KM22 near Garowe town do not seem to serve a large number of households or livestock and can be considered as instances of inefficient targeting of funds.

Rehabilitation and construction of water supplies addressed some of the underinvestment in water services and contributed to the reduction of the chronic water shortages.

Selection of beneficiary communities was well conducted with virtually all rehabilitation and construction of water facilities allotted for very deserving communities. At the same time the evaluation observed that some of the physical works were undertaken to unsatisfactory quality in reference to ensuring safe drinking water supplies.

The performance of the *Berkeds* (water pans) reflects the chronic water scarcity affecting community resilience. Some of the *Berkeds* visited during the evaluation were dry, having run out of water about three months after the rain. This happens because the overall water harvesting capacity is grossly deficient compared to demand and are therefore quickly depleted.



Children at a new well with hand pump at the new IDP camp in Garowe town. Water supplies in such crowded communities need extra care to keep them safe

As a result communities dependent on rain water harvesting suffer water shortages towards the end of the dry season and have to seek alternate supplies, often far away. For instance the community around Garabis under the Hargeisa branch now have to travel about 20 kilometres for drinking water even after the rehabilitation of the Berkad under the drought operation.

The unreliability of surface water supplies also underlines the need for the development of additional permanent water sources which in the context of Somalia means more boreholes. However aid agencies are averse to the high cost and probability of dry boreholes but the cost of such risk pales rapidly when compared to the cost of launching relief and rehabilitation interventions.

Some generators to refurbish boreholes were installed quite late, particularly in Garowe in Puntland. The rehabilitation of KM22 and Sinujif boreholes under Garowe branch were carried out in early 2012 and therefore made no contribution in availing water to drought affected communities at the height of the drought.

Delayed delivery of borehole equipment reduced effectiveness of drought intervention at these particular locations as communities continued to bear the brunt of drought while awaiting these interventions.

3.2.3 Non-food item distribution

The distribution of non-food items (NFI) was well received by the beneficiaries with much appreciation for the quality and type of items delivered. At the same time, the amounts of NFIs available versus the households in need presented challenges in selecting the beneficiaries.

At the same time, there is a widespread opinion within the SRCS that distribution of non-food items is not the most appropriate response to the drought in Somaliland. Branch secretaries and the Somaliland coordination office were of the opinion that these items provide only a transient benefit³ to beneficiaries – including IDPs-and do not address the sustenance needs of people nor strengthen/ restore livelihoods.

The feeling was that more attention should have been paid to helping destitute households recover their livelihoods or develop new ones. The costs of procurement, shipping and distribution of these items were too high relevant to their humanitarian impact. That said recovery is an exercise for a latter phase of the crisis response and should not be cited as a deficiency of the relief phase.

The selection criteria for the distribution of NFIs in the IDPs camps targeted the most vulnerable. This was well implemented but the process got dragged into the wider problems of long term displacement and poverty as many of those who benefited while being truly needy were not victims of the 2011/12 drought.



Non-food item distribution at an IDP camp in Burao town

³ For instance, in Bosaso the tarpaulins provided may not last long in the hot coastal weather while being buffeted by strong winds.

Mohammed Abdillahi, father of four from Adisone village in Karkar region of Puntland thanked the SRCS and IFRC for providing food to the school children. He said "It is hard work for my family to keep the children learning since we cannot afford to feed them, now my children come home with food for lunch"

3.2.4 Food distribution to vulnerable and school children

By providing food for schools the intervention contributed to the objective of stopping school dropouts in these places. In interviews with the administrators of these schools it was clear that the rations were an important motivation for children to stay in school and for their parents to keep them there.

For example, the school/orphanage at Bursalah (Galkayo branch) provides breakfast and lunch to all day pupils with boarders and all orphans receiving dinner in addition. The Hargeisa orphanage provides three meals per day for all

children and by providing them with boarding facilities stop them from becoming delinquent. The institutions that received the food rations have erratic food supplies relying on donations by well-wishers and occasionally by agencies such as WFP.

Schools targeted by this component that have no boarding facilities distributed daily rations to students, offering a motivation for the children to keep coming to school and also for their parents to keep sending them. That said, the rations provide food supplies only for a limited time (the intent was to provide food for six months for children in each school) after which the institutions have to seek other sources of supply. Still the rations provided have helped the institutions shore over a difficult period for food supplies.

As school retention for vulnerable children, was the objective of this component other facilities necessary for this goal are still needed. These include boarding facilities such as dormitories, beddings, hygiene supplies as well as academic materials. Some schools such as the Bursalah academy do not offer boarding facilities for girls as they do not have separate dormitories, this is in spite of the very poor schooling rates for girls.

As such to increase the relevance and effectiveness of the objective of school retention, the construction of dormitories and provision of other amenities to schools is necessary.



Orphans such as this one at the Hargeisa children's home are in great need of all the food supplies they can get. The distribution of food to the home enabled keep them and others fed and protected

4 ORGANISATIONAL CAPACITY FOR DELIVERING THE EMERGENCY RESPONSE

4.1 Technical capacity to undertake the intervention

4.1.1 Water and sanitation

As detailed below the branches and volunteers have organisational capacity deficiencies particularly in the area of implementing water supplies projects among the SRCS branches in Puntland

The Four branches in Somaliland have implemented a number of water and sanitation projects over the past 8 years and in doing so have built capacity in the delivery of water and sanitation services. The designs and quality of the work implemented under the drought programme has been to the same high quality as under previous projects.

On the other hand, the SRCS branches in Puntland have much weaker capacity in water and sanitation and struggled with quality and approach to implement the water component of the drought response. Consequently, some flaws in design were observed in water points' rehabilitation in Puntland.

- Most of the roofs over Berkeds (water pans) were not ventilated; this is necessary as wind discourages bat nestling in the roof. For the same reason all openings into the roof and reservoir needs to be secured with mesh to stop entry of animals.
- The intake channels of rehabilitated *Berkeds* were not lined and in most cases were filled with debris and even animal droppings which will surely be washed into the reservoir when the rains come. Further, silt traps and sieves were not installed.
- Shallow wells dug in IDP camps made poor provision for waste water drainage; this was observed in the new IDP camp in the outskirts of Garowe town.
- No provision was made for training on operation and maintenance of water pumps.

In addition a number of shortcomings were observed at several of the visited water points in Puntland

- The installation of an overhead tank on one of three Berkeds at Adinsone in Bari region is inefficient considering that the same village also had two other Berkeds rehabilitated by the National Society and that many other communities are in dire need of water supplies. Further, the tank contributes nothing to drinking water safety as most contamination will have occurred by the time the water enters the Berkad. In addition, the overhead tank will require a pump which adds cost and unnecessary complexity to the system.

Considering that all this is for the added utility of bringing water a couple of hundred metres closer to the village with no improvement to quality, this must be seen as an inefficient investment.

- The Berkad at Waciye village was a poor site choice for rehabilitation. The Berkad is right in the middle of the village meaning that the runoff washes in with all contaminants from an urban environment and it is impossible to designate a contamination free catchment.



The Berkad at Burtinle showing poor design the resultant heavy silting

- The shallow wells at the new IDP camp in Garowe are poorly designed. The platforms are not fitted with a rim at the edge nor a drainage channel such that splash water flows in all

directions, is collecting close to the platform and may easily contaminate the well. The evaluation also observed that one pump fitted only a few days prior was showing signs of poor installation with limited discharge and a 'kickback' in the handle action – indicative of a faulty pump.

- The Berkad at Burtinle is also poorly designed with the lip of the reservoir below ground level such that water flows in from all directions carrying silt, this will lead to very turbid water being collected and the reservoir silting up very quickly. The lack of a sedimentation pit will add to the risk of turbid water and siltation even if the problem with the reservoir lip was addressed.

Not surprisingly an IFRC field mission has previously observed that water flowing into the Berkad was very turbid and this concern truncated its rehabilitation so that the roof was not installed. Nevertheless the Berkad has a huge capacity and should be completed with appropriate design elements to improve the quality of water collected.

4.1.2 Disaster management

The SRCS has experienced a high attrition of human resource capacity in this area and the resulting weaknesses are showing.

Between 2007 and 2010, SRCS implemented a Disaster Risk Reduction project in the aftermath of the 2004 Indian Ocean Tsunami. This was part of the drive to strengthen the national society in disaster management. Under this project important capacity was built in the following branches: Berbera, Bosaso, Galkayo and Garowe. This included vulnerability and capacity assessment activities and the training of Branch Emergency Response Teams (BERT).

As of the time of this evaluation, many benefits of this past project have been greatly diluted and risk being lost altogether. The Disaster Management officers in all the four branches have left the national society's employment on account of funding shortfalls for these positions.

The Vulnerability and Capacity Assessments (VCA) identified prevalent hazards and risks but the action point to reduce risks were not acted upon; some of those risks are evident in the nature and magnitude of the 2011/12 drought. While it would have been difficult to address all the risks identified in the VCA, preparedness activities in relation to high probability- high impact hazards such as water scarcity would certainly have reduced the impact of the drought.

Most branches have no standard operating procedures for the collection of risk and hazard data from their catchment areas they depend largely on pleas and delegations from affected communities. This means information is only received when a risk is already being realised and the community is feeling the effects. This approach also risks being blinded to the plight of remote communities.

There is need for a comprehensive vulnerability information collection and early warning system that gathers and collates information on a regular basis from all communities, the VCA exercises referred to above seek to address this need but the cost and approach is not compatible with the need for regular updates.

4.1.3 Volunteer networks

Volunteers have played a central role in the drought response, particularly in the targeting and distribution of non-food items. Volunteers attached to the mobile clinics, one at each service site, have played an important role in supporting the mobile health team to provide the services, particularly in mobilising communities in new service areas of the mobile clinics. Volunteers are also central to the implementation of the CBHFA component such as clean-up campaigns, hygiene promotion and health education. Their role has clearly been critical in the response elements.

Engagement of volunteers in other elements of disaster management such as Disaster Management Information System (DMIS) is inadequate. There is need to train the DM officers in DMIS system that build on the large number of volunteers as data collection agents for early warning and monitoring purposes

5 BENEFICIARY ACCOUNTABILITY AND COMMUNICATION

This section details the extent to which the intervention implemented beneficiary participation, specifically through communication and transparency to ensure fair access to services offered, build trust and maintain the legitimacy.

5.1 Facilitating program design aspects

The SRCS is well established in the country and has gained respect from its activities in the areas of health, water and sanitation as well as disaster management. The large volunteer network also provides it with presence in all communities. These factors aided the selection of beneficiary communities and households.

- The Primary Health Care program has provided knowledge of the health dynamics among the communities. This knowledge includes under-served and at risk populations. Using this knowledge the branches developed itineraries for the mobile clinic to reach such communities.
- Distribution of NFIs also benefited from the skills of CBHFA volunteers whose knowledge in assessing vulnerability was used to vet beneficiaries through methods such as household visits.
- The WASH program of the SRCS in Somaliland provided branches there with knowledge on underserved communities based on which beneficiary communities for water supply development and fuel subsidies were selected.

Still there is a general lack of consistency in the selection of beneficiaries particularly at the community level; decisions were based on expositing knowledge, community appeals and observations with reference also being made to assessments from local authorities and other humanitarian actors. While the method is sound for judging the relative merit of communities on which information is available, it carries the risk of excluding communities on which the branches do not have information.

On this note, the scale of the drought requires a comprehensive assessment to gauge the impact of the drought on the livelihoods of the communities in the affected areas. Such an assessment needs to be undertaken by a multi-disciplinary team from different agencies and should form the basis for recovery interventions.

5.2 Beneficiary selection mechanisms

In the selection of beneficiaries the branches relied heavily on their understanding of the context of the regions in which they work, and their partnerships with other agencies. Drawing on local knowledge, they selected vulnerable communities and households for assistance under the response. The evaluation found that all selected beneficiaries 'qualified' for assistance based on objective criteria. Some illustrations of the characteristics of selected beneficiaries are given in the table below:

NFI distribution	These were distributed at the various camps for displaced people who are generally in great need as evaluated by local authorities and the national society.
Food rations for schools and orphanages	Food was in all cases distributed to schools that have an element of community service and enrol vulnerable children. By this means the selection met the objective of school retention for vulnerable children and also demonstrated clear prioritisation for vulnerable children.
Distribution of fuel subsidies	Boreholes are few and far between in the intervention area and serve a critical role in water supply particularly during the dry season. Provision of diesel fuel to all operational boreholes provided low cost or free water at the boreholes serving an important relief function for severely water stressed communities. However the delivery of equal amounts to all boreholes without reference to their operating needs resulted in some boreholes receiving too much fuel relative to needs; For instance the Jidad Borehole in Karkar region under Bosaso Branch will ultimately receive 6,000 litres of fuel the engine hour counter on their new generator, indicates 357 hours in over six months of operation. Clearly the site does not need that much fuel.
Hygiene kits distribution	These were distributed to IDPs communities as well as to schools, especially girls, thus meeting the criteria above on serving vulnerable children.
Development of water supplies	All the water supplies sources visited were observed to be in areas suffering from chronic water scarcity this had grown to critical levels during the drought. Rehabilitated, new and supported water supplies are providing much needed water for the selected communities and the surrounding areas; At the Balley Berkad rehabilitated by the Garowe branch the evaluation observed herders who had travelled two days to water their camels and carry water home for their households. For them this is the nearest water point. Rehabilitation of boreholes revived previously defunct boreholes, but in some cases the boreholes could have been revived by repairs saving the cost of a new generator. For instance the old generator at Jidad – Karkar Region, Puntland had run only 1214 hours and had stopped working, seemingly owing to an injection pump failure. This could have been replaced at far less cost than the cost of a new generator. The evaluation is sceptical about the priority of some selected borehole sites in Nugal region (Garowe branch) where generators were allocated to the KM 22 and Sinujif boreholes; these sites do not seem to have many users; several months after rehabilitation there are few signs of livestock watering such as animal droppings and tracks at the watering troughs and there were no livestock watering at the time of the evaluation visit. There also several boreholes in close vicinity to the Sinujif borehole so it was by no means the neediest location, more deserving locations could have been identified.
Distribution of water filters	The ceramic water filters were distributed mainly within IDP camps, with the selection of individual households undertaken by beneficiary representatives and verified by SRCS volunteers. Spot checks by the evaluation ascertained the recipient households were indeed the more vulnerable ones such as those with young children. SRCS staff however expressed fears that with the filters worth in excess of 20 USD, poor households may sell them for food and other household needs.

Communication to selected beneficiaries observed to be transparent and responsive and facilitated by the good standing of SRCS branches with the local authorities and beneficiaries; by working through legitimate

representatives of the beneficiary communities also enhanced communication and transparency. The beneficiary representatives engaged were vetted for legitimacy primarily through prior engagement with the SRCS or other aid agencies as well as vouching by local administrators. Some observations on beneficiary representative legitimacy are;

- At the Burao branch, Togdheer region, Somaliland, the branch is working through village committees recognised by the municipality. This is prudent because Burao town has numerous IDP camps and contested political space within IDP camps as the composition of the populations is constantly changing. The branch also lists all selected beneficiaries on its gate and the list is available to beneficiary representatives as a transparency measure.
- At Hargeisa branch, distribution of NFIs is done through camp committees in the two camps where these items have been distributed. In the State House IDP camp the committee has existed for over 10 years (with changing membership) and has retained its legitimacy despite changing and growing camp population. The Sheikh IDP camp committee has been an effective intercessor with the various agencies that work there thus retained its legitimacy among residents.
- In Berbera, Garowe and Galkayo branches approaches similar to that in Hargeisa are applied with the branches using beneficiary representatives and local authorities as their interlocutors
- The selection of schools to benefit from NFI and food distribution was done in conjunction with the local authorities. Local education officials were also present during distribution of food rations.

Overall, the evaluation is of the opinion that to a larger extent the selection of beneficiaries was transparent and merit based and, that both selected and excluded vulnerable households and communities had access to information of the selection process and how it was implemented.

However, because of the lack of a comprehensive pre intervention assessment, some needy communities may have been overlooked as the selection criteria was based on communities the branches were already aware of; communities whose needs were unknown to the branches could therefore have been left out.

This risk was highlighted by the Director of the Humanitarian Affairs and Disaster Management Agency (HADMA) (Puntland) who noted that many interventions are clustered around the big towns and IDPs camps and other vulnerable communities away from the main transport corridors are often left out. At the same time local government agencies such as HADMA have a responsibility to identify and highlight needy communities. However on account of weak capacity they are reliant on assessments carried out by other humanitarian agencies and hardly carry out independent assessments.

5.3 Beneficiary perception of program relevance and performance

Overall, beneficiaries were satisfied in the manner in which the relief intervention was carried out; they felt involved in the process and appreciated the transparency in the process.

In these interviews with the beneficiaries it was clear that the SRCS has listened and responded to their concerns and priorities even if all their needs were not met.

- The mobile clinics are highly appreciated; communities served by the clinics noted that the clinics were the first health service providers in their communities for decades and the impact of their services on health and welfare have been clear.
- Communities that received fuel subsidies noted that this allowed them to tide their livestock over a very critical phase of the drought; as the drought advanced livestock had to rely exclusively on water from boreholes for which they have to pay. With greatly diminished incomes herders had no money and many livestock would have died even if water from boreholes was available. The fuel subsidy delivered reductions in the prices for water and in some cases made it available for free thereby making it accessible to all herders and enabling more livestock to survive the drought.
- Generators for boreholes were considered a lifesaving facility; boreholes are few and far between and surviving a drought without them would have been very difficult with greater livestock losses.

- Building and rehabilitation of Berkeds (water pans) increased rain water harvesting capacity thereby increasing the time in which water is easily available and correspondingly reducing water stressed periods. However communities emphasised that development of Berkeds and other water supplies must also factor in the water needs for livestock without which they cannot survive. It was also noted that much more rain water harvesting and water supply capacity needs to be developed to decrease or eliminate the severe water shortages experienced towards the end of the dry season or during the drought.
- Recipients of ceramic water filters noted the filters greatly reduced diarrhoea among young children and with it the medical and welfare costs of ill health. This has created demand for more filters and beneficiaries asked for more to be distributed in their communities.
- The distribution of NFIs was greatly appreciated among displaced persons, particularly those who fled conflict and drought in the South and with no household goods. The tarpaulins were appreciated for the temporary shelter they provided but it was also emphasised that more durable housing is needed. Other housing materials were also requested; IDPs in Galkayo noted that, the host community have imposed ban on tree cutting by IDPs therefore making it very difficult to get saplings for house frames. This severely limits the ability of IDPs to construct shelter using materials such as tarpaulin. Semi-permanent corrugated iron sheet housing as has been provided by other agencies was repeatedly requested for.
- Beneficiaries in Bosaso noted that their camps are on windy coastal plains with a high fire outbreak risk making tarpaulins an inappropriate shelter material as it is also degraded by the high temperatures and wind.
- It was also observed that food and water supplies for displaced communities are very uncertain and assistance in this respect should be provided as a matter of urgency with consideration also being given for livelihoods rehabilitation.
- Schools and orphanages that received food rations are dependent on contributions from well-wishers, to serve vulnerable children in the community. They expressed appreciation for the food delivered which provided some level of certainty in food supplies. This contributed to enhance these institutions capacity to provide care and protection to children who would otherwise be destitute.

Food rations were lauded for helping keep children in school, improving performance and in some cases increasing enrolment. A unique and innovative use of the food was made by the Kenadid technical training institute in Garowe that is running programs for IDP women to equip them with business and livelihood skills – by giving the food to the women, they enabled them to spend more time in class as they do not have to look for food for their families-at least as long as the rations last.



Immunisation at a mobile clinic stop in an IDP camp , such services were highly appreciated by the beneficiaries , many of whom have had very limited access to health care

At the same time most beneficiaries highlighted the need for continued assistance along the lines carried out so far but called for additional components of assistance to rehabilitate and protect livelihoods and also to help communities cope with the new realities such as indefinite displacement, adapting to urban livelihoods and coping with changing climate. These factors are discussed in the section on continuing needs.

5.4 Constraints to beneficiary communication

The sheer numbers of vulnerable people in the country and the widespread poverty means that not all communities can receive the assistance they need. Selection of beneficiaries is also compounded by poverty which means some poverty struck households will be even more vulnerable than drought victims presenting a challenge on whom to assist.

Often genuinely needy households do not receive assistance as there are not enough supplies for all; this creates tension among those left out who often feel unfairly treated. For instance the distribution of goods is overseen by the local authorities, in part to offer security for the exercise. The evaluation observed tense moments during NFI distribution in Burao as beneficiaries not on the distribution list insisted on being allocated NFIs. Sharing the targeting criteria with beneficiaries however makes it clear suspicions of discrimination.

6 SUPPORT SERVICES -LOGISTICS AND PROCUREMENT

There were some delays in the procurement of NFI which were procured through the IFRC Dubai Logistics Centre delivered to Berbera and Bosaso ports and transported inland to branches to be distributed to affected communities. At the same time prepositioning is not a feasible option for Somalia because with so many vulnerable people it would be very hard to maintain pre-positioned stocks on account of pressure to disburse them.

Drought is a slow onset disaster and there is fairly good time for preparedness actions such as procurement but donor fatigue towards Somalia means action is never taken until the worst effects are being experienced (A dangerous Delay: the cost of late response to early warnings in the 2011 drought in the Horn of Africa, A report by Save the Children, & OXFAM, 2012).



A joint IFRC /SRCS team visiting a water point in Ufeyn village targeted for rehabilitation.



A joint IFRC /SRCS team visiting the site of the above water point after the intervention improved the troughs for the livestock watering at Ufeyn village, Bari region. Monitoring and support from the IFRC was instrumental in achieving the intervention's targets.

7 LESSONS LEARNT

7.1 The need for livelihood protection

The impact of the 2011 drought highlighted the need for a change in approach in disaster management in Somalia to give more attention to livelihood protection and rehabilitation. This is underlined by several factors;

Link recovery to building community resilience on key livelihood assets; the recurrence and frequency of droughts and other disasters has weakened the resilience of the majority of Somali people and eroded their livelihoods to the extent that without purposeful action they will accelerate into a downward spiral. Relief pauses or slows down this process but the definite trend in livelihoods has definitely been a deteriorating one as livelihoods hardly ever recover to the level before the previous disaster, primarily drought. One reason why the latest drought was so severe was because it followed on closely to earlier ones from which communities hadn't recovered.

Delays in early warning and relief actions means assistance delivered is often delivered late, by which time a lot of damage has been done. This is particularly relevant for livestock; decimated herds take very long to recover and households that lose their herds difficult to rehabilitate on because of the cost of restocking.

Utilize early warning information to inform early action rather than providing reactive interventions; the need to protect households from the impacts of drought as opposed to offering them relief is highlighted by the plight of displaced households in terms of place of origin, cause of displacement and settlement.

Persons displaced from Southern and Central regions of Somalia are unlikely to return until the security has improved. On the other hand people displaced from within Puntland and Somaliland have the possibility of rebuilding their livelihoods contingent on the availability of assistance to this end but few agencies are offering rehabilitation services partly because of the costs involved⁴. With the strains on traditional restocking and social security arrangements households displaced by the drought are very unlikely to be rehabilitated and will very likely become destitute. Many IDPs will and are already being subsumed among the ranks of urban poor where they become 'hidden' from humanitarian assistance. This includes those who are taken in by their relatives.

Deliver livelihood protection services for pastoral and vulnerable households; Over time the proportion of destitute and poor persons will increase and this will make the community at large more vulnerable. Stopping this requires reducing as much as possible the destitution of pastoral households and enabling those who are so affected to either recover their pastoral households or to adapt urban livelihoods. This calls for livelihoods protection and livelihood assistance respectively.

Components of livelihoods protection programs must be decided based on the understanding of each scenario but are likely to include livelihoods asset protection and development initiatives such as water supplies development, livestock health and marketing on the protection side and education, skills training, shelter and small scale business development on the assistance side.

Applying a livelihoods support approach also includes consideration for environmental protection, factoring in grazing patterns in the selection of water supply development locations so that there are supplies in both dry and wet season grazing areas to stop overgrazing around water points etc.

Livelihoods assistance also faces some challenges including the fact that not all persons are entrepreneurial and therefore small scale business development is not a universal solution, skills take time to develop and there are no assurances of employment.

Overall, livelihoods support and assistance are effective and efficient ways to deal with recurrent disasters and to cope with new risks.

⁴ The benchmark figure for a viable, household supporting herd given by most respondents is around 40-60 goats plus 2-3 camels, by prevailing market prices this package would cost around 2,800 USD per household.

7.2 National society capacity on disaster management

Build volunteer and branch capacity in livelihoods protection and disaster management; stronger branches are in a better position to mobilise communities during disasters. The capacity of the national society depends on several factors including staffing, resources, systems, procedures and volunteers. Within the RC/RC movement, capacity is particularly dependent on the manpower of its volunteers as the core of its strength. Volunteer's skills, management and motivation therefore merit special attention in the evaluation of capacity in disaster management.

The SRCS is dependent on projects funding to provide training for volunteers, consequently training in capabilities such as vulnerability and capacity assessment, hygiene promotion, water and sanitation etcetera are dependent on the presence of projects funding with the result that capacity is uneven across branches and corresponds to the coverage of projects. Those branches without project funding earmarked for their areas were left out. There are also no procedures for skills development, maintenance and replenishment resulting in low numbers and high attrition rates of skilled volunteers.

For instance, after the December 2004 Indian Ocean Tsunami, the three branches in Puntland and the Berbera branch in Somaliland were beneficiaries of three years of project funding⁵ to build capacity in disaster preparedness and response. Under this intervention, VCAs were conducted in the various branches and volunteers trained in disaster management skills.

However, at the time of the evaluation, 2 years after that project ended, branch secretaries observed that most of those volunteers have since left and did not train their peers prior to exit, volunteer capacity in these areas had virtually disappeared.

In addition to volunteers attrition there is limited staff capacity in disaster management with few branches having disaster management officers, there is also high staff turnover in these positions. Recruits to these positions are often relatively inexperienced and operate without resources, no clear organisational direction and policy they are generally ineffective. All this has hindered the development of DM capability.

The evaluation is also of the opinion that the national society does not consider disaster risk reduction an operational priority. There is latent preference for the more visible response activities and there seems to be little appetite or understanding of risk reduction among branch secretaries. This could also be because of the long-term and 'invisible' impact of these activities versus the immediate and visible nature of response activities. Still in the course of the evaluation branch staff and managers acknowledged that response is no longer effective in the context of recurrent disasters and protracted vulnerability.

Disaster management policies and procedures are poorly understood and implementation is severely limited by funding for identified priority actions though this limitation has been recognised and addressed in the revised 2012 Somalia country plan which provides more resources for this.



Poorly constructed inlet at a Berkad in Puntland; without the technical capacity in critical areas such as water and sanitation, the performance of relief efforts by the national society will suffer.

⁵ This was funded by the American Red Cross through the IFRC. That project was evaluated by the same consultant undertaking this evaluation.

Overall while the national society has made its mark in disaster response, it risks falling behind in internal capacity in this area but creative options are available to solve this at limited cost. The Hargeisa branch in Somaliland offers insights on how to cope with limited resources and great need in the areas of Volunteer's skills development and Disaster Management Information Systems;

The branch has instituted a Training of Trainers (ToT) model for skills transmission for volunteers based on a comprehensive volunteer induction and training process. New volunteers undergo basic induction training starting with RC-RC movement fundamentals and volunteer policies and guidelines from which they proceed to comprehensive training in skills in basic First Aid , Disaster Management, Branch Emergency Response Teams (BERT) , Vulnerability and Capacity Assessment (VCA) as well as Hygiene promotion. Uniquely, this training is delivered by experienced volunteers who train new recruits thereby ensuring skills transmission and organisational learning as the experiences of older more experienced volunteers are shared with the new recruits. Further, all these cost very little as the trainers are volunteers.

Volunteer motivation is maintained by placing trained volunteers within sub branches within Ghalbeed region, Somaliland with specific duties and roles with a core element of volunteer motivation.

Hargeisa branch also runs a very lean disaster management information system in which volunteers from the various sub- branches provide weekly updates on the vulnerability and any disaster incidents in their districts thereby updating the branch understanding of vulnerability in the region at little cost. It should be noted that the Disaster information system is an initiative of the branch which has not had a disaster management focused project in the recent past. This demonstrates the capacity of innovative action to solve some of the challenges around organisational capacity vis-à-vis disaster management.

7.3 Organisation learning on disaster management

Develop clear and structured organisational learning processes; The SRCS has a long history of engagement in disaster management, in the course of this; it has gained an understanding of the vulnerability profile of the communities in the country and regions and effectively transformed this into a coherent body of organisational knowledge that is reflected in policies, planning and implementation.

Previous assessments on vulnerability carried out by the national society branches have documented clearly the underlying causes of vulnerability , their evolution , increasing frequency and 'stacking' to produce complex humanitarian disasters. However, knowledge from these assessments seems weakly applied in the planning and operations partly because it is poorly documented and partly because of the high turnover of disaster management officers at the branch level as well as at the national level.

For instance, the VCA conducted under the post Tsunami Disaster Risk reduction project identified lack of water for livestock as a source of vulnerability but there has not been any purposive action to include this water demand in water supply design in non-emergency interventions, yet it is such actions that provide the opportunity for building infrastructure that increases community resilience.

Advocacy on behalf of affected communities; other sources of vulnerability identified in these VCA include poor support for education, poor access to health services and environmental degradation. Some of these issues are outside the mandate of the national society and in all cases they are at a scale the SRCS cannot address by itself. For instance, the German Red Cross funded Disaster Risk Reduction (DRR) Project in Puntland is addressing erosion which is a risk to grazing lands but the scale of tree planting ,about 100 trees per village is not up to scale of the vast spaces being eroded.

Further to this, some drivers of vulnerability and sources of resilience are outside the 'normal scope of DRR programming and therefore need input from a central coordination entity with a mandate for all aspects of development.

This highlights the need for partnership with other aid agencies but more importantly a more aggressive role in coordination with the government authorities to marshal the resources and capacities of all actors in the country to deliver the variety and scale of assistance needed. The national society cannot nor does it hold the mandate to address all drivers of vulnerability.

Donor fatigue in relation to Somalia cannot be ignored more so as it limits non disaster programs by the SRCS and other agencies which in turn have an impact on the resilience of the community. Donor fatigue also often delays disaster management actions increasing the impact of disasters that could have been avoided or minimised. Oxfam and Save the Children have documented this in an analysis of the 2011 Horn of Africa Drought (OXFAM & Save the Children , 2012). The report, A Dangerous Delay, says a culture of risk aversion caused a six month delay in the large-scale aid effort because humanitarian agencies and national governments were too slow to scale up their response to the crisis, and it seems many donors wanted proof of a humanitarian crisis before acting to prevent one.

Stronger humanitarian diplomacy can avert some incidents of this nature.

7.4 Community resilience and response capacity

Act to avert weakening coping mechanism systems; Community resilience and capacity for preparedness has been steadily worn down by repeated livelihood shocks and disasters. Indicators of increased vulnerability such as malnutrition, livestock mortality and water scarcity clearly show that communities are unable to prepare or cope even if early warning systems were functioning well.

Social coping mechanism such as relying on relatives are under great pressure from the large number of people seeking assistance from the few who have means of income. As destitution increases, the dependency ratio will only increase and this coping facility will be further weakened. The main economic coping instrument- selling of livestock is also under pressure at the critical times when vulnerability increases - sick, weak and emaciated animals fetch poor prices if they can be sold at all.

On the other hand, early warning systems are weak, reactive and have patchy coverage of the country at large and within the National Society itself.

At the same time other activities of the SRCS are quite effective in building community resilience; Community Based Health and First Aid (CBHFA), mobile and fixed clinics have contributed to better health and knowledge of preventive health care. This helps reduce vulnerability to ill health and communicable diseases in particular, which increase vulnerability to disasters. However CBHFA cannot address weaknesses in other determinants of health such as access to safe water and sanitation.

7.5 Water supplies

Apply holistic assessment of water supply seasonality and sources of demand in water supply development;

Perennial water supplies are indispensable in mitigating the drought and other disasters impact such as population movement and displacement. The hydrogeology of Somalia offers few opportunities for surface water supply development, therefore, options such as boreholes and rainwater harvesting must be scaled up to ensure stability in water supplies. Water sector development should also give reference to the livelihood and settlement patterns so that as much as possible there are water supplies in both dry and wet season grazing lands as well as around population centres to reduce disruptions to range management and the distances people have to travel to fetch water.



Camels watering from a Berkad intended for domestic use; water supply for livestock must be factored in the development of water supplies

Water for livestock should also be factored in all water supply developments, failing to do so only leads to stress on domestic water supplies as inevitably all supplies are shared between livestock and household uses.

7.6 Non-food items

Match NFI provision to the livelihoods needs of affected populations; in a society living in widespread poverty it is difficult to select beneficiaries for these items solely based on household vulnerability; many non-displaced households will be needier than the IDPs. There is also a large risk of NFI items being sold for food and other basic necessities. This risk is bigger if many agencies are distributing these items with little coordination.

NFI kits needs to respond to the basic, customary needs of the people and should not provide surplus or uncommon items which will be regarded as luxuries and possibly sold off. The evaluation observed that the hygiene kits included items such as toilet rolls and shaving kits which are not essentials considering the sanitation hygiene habits of the beneficiaries i.e. anal cleaning is done with water not toilet rolls.

NFI distribution also needs to consider the long term needs of beneficiaries especially in the area of shelter provision.

8 Conclusions

This section presents the findings of the evaluation on the interventions performance versus performance criteria. Performance is made against the following scale;

- i. Highly satisfactory (fully according to plan or better);
- ii. Satisfactory (on balance according to plan, positive aspects outweighing negative aspects);
- iii. Less than satisfactory (not sufficiently according to plan, taking account of the evolving context; a few positive aspects, but outweighed by negative aspects);
- iv. Highly unsatisfactory (seriously deficient, very few or no positive aspects).

Relevance

The intervention's relevance is **highly satisfactory**. This assessment is based on the relationship between the needs of the drought affected communities and the services and goods it provided for their benefit.

The evaluation notes that the support to water supplies addresses one of the sharpest impacts of the drought. Particular note is made to the intervention's support to permanent water supplies through borehole rehabilitation and fuel subsidies to boreholes. This measure ensured accessible and reliable water supplies at a time most other options had ran out.

Expanding health services to prior underserved communities increased critical health indicators in particular mother and child health, child nutrition, immunisation coverage and to a lesser extent curative services. The need for these services was underlined by increased health vulnerability on account of the drought.

Provision of 900 ceramic filters to vulnerable households during the first phase of the operation in 2011 provided sustainable domestic water treatment for the beneficiaries most of whom use unsafe water supplies. As all households receiving these filters had young children the need for safe drinking water was even more important.

School and orphan feeding programs helped keep children in protective environments away from the impacts of the drought.

The distribution of non-food items is perhaps the weakest point of the relevance of the intervention; the items provided have good welfare benefits but faced serious targeting challenges and coverage shortfalls had a high risk of being sold for basic needs. The shelter component was also criticised by beneficiaries and SRCS officials as they offer only temporary shelter for households who are in need of more durable housing.



An IDP family poses with their ceramic filter, these filters are helping prevent disease among IDP families many of whom depend on unsafe water supplies.

Effectiveness

The intervention's effectiveness is **satisfactory**; this assessment is based on the following considerations:

Support to boreholes had addressed the main impact of the drought and protected livelihoods from further damage from the drought. The effectiveness for the water supply component is tempered by the performance and design of Berkeds and Shallow wells in Nugal region, Puntland. Shortfalls in water production / harvesting capacity persist in all regions and while not a result of the intervention underlines the need for more investment in this area.

The small number of perennial water sources (read boreholes) and their sparse distribution combined with the lack of investment in additional (as opposed to refurbishment) has tempered the effectiveness of the intervention in reducing water shortages. The evaluation also makes note of the location of water supplies vis-à-vis dry

season pasture and the effect this has on the health of livestock from having to walk long distances to and from water points.

Food support to vulnerable children in schools and orphanages has met its objective of keeping children in school. Attainment of this objective is reinforced by the fact that the schools and institutions that benefited from this components cater for vulnerable children whether exclusively or in part and that they also have no consistent funding sources. The provision of food and hygiene items was therefore a boost to their ability to protect children and keep them in schools.

The health services were effective in improving the health status of the communities served by the scaling up of the mobile clinic operations. The effectiveness of this component is reinforced by the fact that these communities were un-served by any health services prior to the introduction of the mobile clinic services. The marginal utility on health improvement through OPD, MCH/OPD was therefore very high. Health education also increased the effectiveness of health services by increasing awareness on communicable diseases. Control of moderate malnutrition was very effective and has helped reduce the number of cases progressing to severe malnutrition status. The effectiveness of this component is only tempered by the limitations to curative services caused by the long intervals between visits to communities by the mobile clinics.

The distribution of non-food items is indeterminate in terms of its effectiveness in addressing drought related impacts, specifically that loss of household items was not a direct consequence of the drought and their lack is possibly a reflection of poverty and displacement. Challenges in targeting means that they were not necessarily distributed to victims of the 2010/11 drought but as they were disbursed to the most vulnerable they served a valid humanitarian need.



Tarpaulin roofed housing at an IDP camp in Berbera ; more robust housing is needed for households living in such hot and windy coastal environments

Tarpaulins, while effective for temporary and immediate shelter do not fully respond to the need for semi-permanent housing as would be appropriate for the protracted displacement most drought victims and IDPs face. Still the tarpaulins provide shelter and shade for IDPs who would otherwise have to use much poorer shelter.

Delays in delivery of assistance also weigh in on the effectiveness of the intervention; these delays allow for negative impacts to continue deepening the humanitarian impact of the disaster.

Efficiency

The efficiency of the intervention is found to have been **highly satisfactory** considering how the available resources were maximised by working methods and their relevance to the needs of the affected population.

The water supply component was very efficient in addressing the priority needs of drought affected communities; selected sites for water point development and rehabilitation had very limited supply options prior to these investments and therefore faced severe water shortages. This demonstrates the efficiency of targeting methods. Construction of new water points also addressed part of the water production capacity deficit that underlies the water supply problem in Somalia.

Fuel subsidies rapidly ensured stable and affordable water supplies and also limited damage to livelihoods through livestock deaths. Lack of proportionality in the distribution of fuel subsidies however clouds this component as some locations received fuel way in excess of their immediate needs.

The health component of the intervention served communities that previously had no access to curative and preventive services; the impact of preventive services stands out as most health problems affecting the community are preventable through behaviour change and immunisation. Mobile clinics were particularly appropriate for this kind of intervention as preventive services can be properly delivered through periodic visits to client communities.

The school children feeding component was well targeted at vulnerable children through the selected schools and orphanages which by default cater for this category. Keeping vulnerable children in school also offers them perhaps the only chance of escaping intergenerational poverty.

Impact

The impact of the intervention is found to have been **satisfactory**, this is based on the prospects of the long term investment made, in particular support to water services and the health components which will benefit the communities for a long period to come.

The relief delivered by this intervention has a definite impact on protecting livelihoods from the worst effects of the drought, enabling a better starting point for households after the drought. This is the largest impact of the operation.

9 Recommendations

The recommendations below are grouped into two; actions which need to be taken immediately and action points for strategy development and planning.

9.1 Operational actions

Remediation of shortcomings in water supply components

Several interventions are needed to realise the full potential of this component, in particular the following actions are needed

Improvements to water supply designs: to strengthen the sustainability

- i. **Training on Administration, Operation and Maintenance** of all water points needs to be undertaken with emphasis on administration, operation and maintenance of boreholes which received new generators and pumps. This will contribute to prolonged operation of the equipment and hence ensure continued availability of water.

- ii. **Improvements to the design of water points** particularly Berkeds (water pans) and Shallow Wells in Puntland are needed; all Berkeds must be fitted with sedimentation ponds on the inlet channels and the channels themselves must be lined and fitted with debris traps. Further, all covered Berkeds must be fitted with ventilation on the roofs to prevent nesting. Additionally, all openings into the Berkeds must be fitted with fine mesh to prevent animals entering or falling in.

The rehabilitation and roofing of the Burtinle Berked should also be completed with works above and in this particular case raising the lip of the reservoir above ground so that water can only enter via the sedimentation pit. As the current catchment for the Berked includes a dust pan, an alternate catchment in the outskirts of the town with less debris and contamination potential should be considered so as to reduce the amount of silt and other contamination.

Proper drainage must be provided at all shallow wells to prevent well contamination; the national society should also work with IDP leaders and local authorities to ensure that no pit latrines are constructed within 30 metres of the wells. Arrangements should also be made for frequent chlorination.

All new generators should also be properly anchored by bolting their chassis to the floor and by fixing the switchgear firmly into the wall and away from potential water/fuel damage. The exhaust pipes should be extended outside the generator houses to limit the amount of exhaust drawn in by the engine.

At installations such as at Jidad borehole in Karkar region where the previous generators can be repaired the option of doing this should be pursued to provide tandem power plant to help cope with peak demand times when the pumps are run for up to 18 hours a day. At installations such as at Sinujif where renewable energy power plants were previously installed, the possibility of restoring this should be considered more so for the purpose of reducing water supply costs.

Support to rehabilitation / adaptation for drought affected communities

While longer term support to rehabilitation and livelihood reconstruction is considered in detail below there are some opportunities that need to be seized:

- iii. The SRCS should procure vocational training equipment and materials for the vocational schools working with IDPs and drought affected households to help them increase the coverage and quality of assistance; this include Kenadid vocational training school and Nasar School in Garowe. Supporting the income generation capacity of women is effective in enabling them to adapt to livelihoods in urban areas. Items needed by these institutions include sewing machines, work desks and handcraft supplies

Strengthening the operations of the mobile clinics

- iv. The needs in this respect are minor, relating to procurement of amenities for the staff and clinics. Particular needs observed include small tents for privacy of consultation and examination.

9.2 Strategic and planning actions

The 2010/11 drought calls for a rethink of working methods and strategy in disaster management within the society, the country and region.

Delays and shortfalls in aid and deficiencies in disaster management capacity need to be addressed as well as the lack of essential services that would build resilience. Increased frequency of disasters, growing numbers of disaster victims, poverty and climate change are steadily weakening the community. Arresting this trend requires efficient, low cost and effective methods to disaster management as well as attention to essential services.

To this end the following recommendations are made:

Building the SRCS' disaster management capabilities

Weaknesses in the SRCS' disaster management capabilities need to be addressed. To this end,

- v. The IFRC/SRCS must adapt a programmatic approach to disaster management and increase its capacity in this area. To this end, supported by IFRC, the national society must develop policies and operating procedures for all stages of disaster management corresponding to various types of disasters to which the population is vulnerable.

These should be cascaded to all levels of the national society through the development of manuals and ToT methods. This will be supported by capable and motivated DM officers at all branches.

Capacity building should focus on the following areas; water and sanitation (particularly in Puntland), environmental protection, health, and disaster management.

- vi. The national society should implement a lean disaster management system based on regular collection of vulnerability and capacity data through community based volunteers and the collation of these at the branch and national level. The purpose of this system shall be to establish a robust community based early warning system.

A shift towards more livelihood protection

- vii. The SRCS should consider engaging in livelihood protection activities and where this is not an option, advocating for other agencies to do so; protection and prevention are demonstrably much cheaper and effective than relief and rehabilitation.

Priority measures here include investment in development of more permanent water supplies, livestock production, and support to agricultural activities, environmental protection and vocational training for disaster victims

Funding for this can be obtained from funding sources that acknowledge the need for preparedness as well as the role of climate change in disaster pattern. Some sources include ECHO's recent facilities for prevention and preparedness ⁶ or climate change adaptation funds.

Health services for the most vulnerable

- viii. The national society should review its health strategy to maximise the efficiency of the health services provision. Mobile clinics are more efficient in serving the most vulnerable and their operations should be sustained and expanded.

Water and sanitation programming for resilience

- ix. Livestock related water demand must be factored in water supply development and must stop being treated as peripheral to the needs of the communities.

More investment must be made in perennial water supplies development to ensure communities have water supplies no matter the rainfall patterns, this means drilling additional boreholes and paying heed to pasture management patterns so that boreholes do not cause overgrazing but are also located reasonably close to dry season range land.

⁶ See http://ec.europa.eu/echo/news/2012/20120411_en.htm

Annex I

Consultation schedule

Organisation	Person / role	Purpose
SRCS	Bakal Ahmed , Coordinator, SRCS Somaliland	<ul style="list-style-type: none"> ▪ Discussion on overall performance of operation, challenges, constrains and continuing needs. ▪ Lessons learnt ▪ Procurement and logistical issues ▪ Effect of drought on livelihoods and continuing protection and rehabilitation needs ▪ Options for continued assistance to displaced and non-displaced populations ▪ Effect of drought on medium term country strategy
SRCS	In charge of nutrition within SRCS Puntland coordination office	<ul style="list-style-type: none"> ▪ Discussion on nutrition coverage, targeting, challenges and constraints.
SRCS	<ul style="list-style-type: none"> - SRCS Somaliland officer in charge of health - SRCS Puntland – officer in charge of health 	<ul style="list-style-type: none"> ▪ Discussion on health coverage in the context of the operation , mobile outreach , disease patterns among affected population , effect of nutrition and displacement on health ▪ Effect of drought on capacity/ needs of existing and scaled up health service provision points (mobile and clinic) with focus on displaced and nomadic populations.
SRCS	<ul style="list-style-type: none"> - Hargeisa branch chairman - Garowe branch chairman - Bosaso Branch chairman - Galkayo branch chairman - Berbera branch 	<ul style="list-style-type: none"> ▪ Discussion on needs assessment , capacity of branch for operation and other services ▪ Continuing need of communities in branch area ▪ Constraints and opportunities form the operation ▪ Communication with beneficiaries ▪ Effect of drought on branch strategy ▪ Targeting of distribution of water filters and other NFI ▪ Communication and accountability to

	Chairman	beneficiaries
SRCS	Volunteer coordinator: - Bosaso - Garowe - Berbera - Galkayo - Hargeisa - Galkayo	<ul style="list-style-type: none"> ▪ Volunteer capacity and needs in context of country plan and specifically in relation to emergency operations
SRCS	Officer in charge of water services - Somaliland - Puntland	<ul style="list-style-type: none"> ▪ Selection criteria for beneficiaries of water services ▪ Link of drought related water interventions to other prior works by SRCS and other agencies ▪ Selection criteria for household beneficiaries of water filters ▪ Coordination with the actors in water services ▪ Integration of hygiene services in drought intervention (Opportunities and gaps)

Government of Somaliland	Officer in charge of water services (at senior level)	<ul style="list-style-type: none"> • Effect of drought on water service provision especially in the context of the chronic water shortage • Response of partners in water provision in context of drought operation and other existing humanitarian actions • Performance of SWALIM and other coordination platforms for water and health Services • Community capacity for O&M of water services installed under drought and non-drought initiated humanitarian responses
Government of Somaliland Government of Puntland	Officer in charge of health services (at senior level)	<ul style="list-style-type: none"> • Effect of drought and displacement on provision of health services especially in the context of overstretched health services and immunisation coverage • Risks of immunisable diseases and vaccination services especially owing to displacement and influx of persons from areas with lower immunisation coverage • Performance of health services coordination platforms
UNICEF	Officer in charge of health services - Somaliland - Puntland	<ul style="list-style-type: none"> • Effect of drought on nutrition indicators especially for children and mothers • Effect of drought on health indicators especially for children and mothers • Actions of other humanitarian actors and coordination between them • Effect of drought and population movement on health indicators especially communicable and immunisable diseases • Options for increasing immunisation and health services among displaced populations • Disease and nutrition surveillance , coordination of humanitarian actors in this respect and the response from various actors
ICRC	ICRC field officer – Garowe (Abshir Jama?)	<ul style="list-style-type: none"> • Coordination with SRCS in relation to displaced persons and persons falling under ICRC lead role functions • Coordination with authorities and humanitarian in areas of origin in South-Central Somalia • Options and prospects for rehabilitation / repatriation of displaced persons • Livelihood protection for displaced persons
Government of Puntland	HAMDA	<ul style="list-style-type: none"> • Coordination of humanitarian intervention in the context of the drought – achievements , gaps

		<p>and opportunities</p> <ul style="list-style-type: none"> ▪ Humanitarian and livelihood impact of large influx of displaced persons ▪ Options for protection and rehabilitation of indigenous and displaced populations ▪ Coordination of water services provision in the context of drought and other prior humanitarian actions ▪ Capacity of water
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** The evaluation may also need to contact specific agencies whose relevance may arise from the discussions with the above parties. In case this becomes necessary, it will be organised at the field level

Travel plan

Date	Activity
6 th March	Travel Nairobi – Hargeisa Meetings with Government officials
7 th March	Meetings with Government and UNICEF officials Travel to beneficiary sites
8 th March	Travel to beneficiary sites Return to Hargeisa
9 th March	Travel to Burao
10 th March	Meetings with SRCS and partner officials
11 th March	Visits to beneficiary sites Travel to Berbera
12 th March	Visit to beneficiary sites – Berbera branch
13 th March	Visits to beneficiary sites – Berbera branch
14 th March	Travel to Hargeisa - Reporting
15 th March	Travel to Garowe – AIR Travel to Galkayo- Discussion with Galkayo branch staff and volunteers
16 th March	Visit to beneficiary sites in Galkayo
17 th March	Consultations with branch officials Travel to Garowe
18 th March	Travel to beneficiary sites in Garowe
19 th March	Consultations with partners and branch officials in Garowe
20 th March	Travel to Bosaso visits to sites en route (Garowe – Bosaso Branch)
21 st march	Visit to sites in Bosaso Branch
22 nd March	Consultations with officials and partners in Bosaso Travel to Nairobi

**International Federation of Red Cross and Red Crescent Societies
Somalia Delegation**

Terms of Reference

Evaluation of the Somali Red Crescent Drought Response Operation 2011

Background

Due to the dry weather conditions associated with the predicted La Nina phenomena in East Africa, the performance of the Deyr rainy season in Somalia (October-December 2010) was below average or poor in most parts of the country. This resulted in severe to moderate drought conditions which led to crop failure, acute shortages of water and pasture in many regions of Somalia. The La Nina phenomena continued in 2011 and the Gu rainy season (April-June) have also failed. A combination of protracted conflict and two failed rainy seasons led to widespread food insecurity, loss of livestock assets, depleted water and pasture sources. By July 2011, an estimated 4 million people were in crisis countrywide. Due to the severity of the situation the UN declared famine in three regions in southern Somalia followed by other two regions in August-September 2011.

In January 2011, following the failure of the Deyr rainy season (October-December 2010), the International Federation of Red Cross and Red Crescent Societies (IFRC) Somalia delegation revised its country plan for 2011 to support the Somali Red Crescent (SRCS) in scaling up its activities to respond to the severe drought situation in Somaliland and Puntland. According to the priorities identified by the SRCS branches and based on observations on the ground by the affected communities and SRCS staff and volunteers (rather than a structured assessment) the drought response operation focused on health and nutrition, water and sanitation and the distribution of non-food items. In addition to the scaling up its on-going health and nutrition activities, water points were repaired and the affected communities were supported with a fuel subsidy to run the boreholes, distribution of non-food items and basic food rations were given out at boarding schools.

The SRCS drought response assistance targeted 150,000 people in three regions in Puntland and six regions in Somaliland. Through the IFRC multilateral support the financial contribution received from the partner national societies enabled the SRCS to deliver vital humanitarian assistance to the population affected by the drought in Somaliland and Puntland.

This mid term evaluation is commissioned by the IFRC Somalia Delegation in accordance with the agreement with the partner national societies who supported the scaling up of SRCS country plan 2011 through IFRC multilateral support and subsequent launch of the Emergency Appeal in September, 2011.

Main Objective

To assess whether SRCS responded in a relevant, effective and coordinated way to the needs of drought affected communities in Somaliland and Puntland.

Specific objectives

1. To assess the relevance of the response, with specific consideration of:

Whether the response addressed the identified needs and priorities of the communities affected by the drought.

The extent to which the needs of different beneficiaries groups (women, men, boys, girls and people with disability) were met.

The extent to which local communities and beneficiaries played a role in the implementation of the drought response operation including monitoring of the activities.

The extent to which accountability to the beneficiaries is being addressed while implementing the drought response operation, including the documentation of complaints/satisfaction.

2. To assess the effectiveness of the response with specific consideration of:

The degree to which the implemented activities achieved their purpose.

The timeliness of the interventions.

The consultant should also comment on the effectiveness/timeliness of the supply chain from RLU Dubai and any local procurement (this should only be tackled in brief) and the cost/benefit of RLU vis-a-vis local supplies.

3. To assess to what extent the SRCS actions were coordinated with other humanitarian actors and local authorities.

When considering the above, the evaluation will also see to address the following cross cutting issues:

4. The institutional capacity of SRCS to implement the response operation, specifically considering:

Whether SRCS DM structures facilitated an effective response.

Whether SRCS was able to capitalise on its volunteer network.

Whether staff and volunteers (including but not limited to CBHFA volunteers and Community Health Committees) had the skills and knowledge needed to respond effectively.

5. The extent to which the fundamental principles of the Red Cross and Red Crescent Movement were considered in the design, implementation and monitoring of the response

6. To draw lessons learnt and document good practices.

Deliverables

1. An outline of evaluation plan to be agreed with IFRC Somalia Delegation during the first days of the consultancy

2. An inception report (while field work on-going)

3. An evaluation report in-line with the standards outlined below

Report requirements

A clearly written, evidenced-based report is required. The report should:

1. be a maximum of 25 pages (with annexes attached if required)

2. Make specific recommendations, clearly linked to report findings that take account of the mandate of the SRCS, IFRC and the wider Red Cross Red Crescent Movement

3. Include at least two case studies (to be annexed to the report) - at least one case study should be of a person/family that has benefitted from the response and at least one of a volunteer who was involved in delivering the response

Methodology

The evaluation will adopt a combination of desk review, interviews with stakeholders including local authorities and field visits to the SRCS branches in Somaliland and Puntland. The field visit will include site visits to the communities where SRCS implemented the programme to interview the beneficiaries.

Timeframe

The evaluation exercise is expected to start during the third week of February 2012, subject to negotiations with the potential consultant, and be completed within three weeks. The expected schedule is shown below:

TIME	PLACE	ACTIVITY
Day 1 - 3	Nairobi IFRC and SRCS Offices	<ul style="list-style-type: none"> • Meet SRCS management and IFRC programme staff. • Agree an evaluation plan. • Desk review of relevant documents
Day 4 - 10	Somaliland Including travel from Nairobi morning of 4th day and from Hargeisa in the afternoon the 8th day	<ul style="list-style-type: none"> • Visit the Branches of Hargeisa, Berbera, Burao and Borama • Visit communities benefited from the programme. • Debriefing with SRCS Somaliland Coordination office
Day 11 - 17	Puntland Garowe, Bosaso, Galkayo	<ul style="list-style-type: none"> • Visit the Branches of Garowe, Galkayo and Bosaso. • Visit communities benefited from the programme. • Debriefing with the branches in their respective location after the field visit
Day 18 - 21	Nairobi	<ul style="list-style-type: none"> • Compilation of report
Day 22	Nairobi- IFRC Offices	<ul style="list-style-type: none"> • Draft report to be submitted to IFRC/SRCS
	Nairobi	<ul style="list-style-type: none"> • SRCS, IFRC to review the draft report and give feedback to the author
	Nairobi	<ul style="list-style-type: none"> • The Consultant to take note of the comments of SRCS and IFRC and prepare the final evaluation report • Feedback meeting with partners

Profile of the Consultant:

- University degree or equivalent in relevant studies
- Extensive experience of conducting high quality of evaluations for Humanitarian Action in Somalia
- Knowledge of the Red Cross Red Crescent movement preferred
- Remuneration and terms of payment

The consultant will be paid in accordance with the IFRC standard contract rates applicable for regional consultants. Standard IFRC procedures for hiring external consultants will apply.

The payment schedules will be as follows:

- 25% when signing contract
- 50% after submission of first draft report
- 25% after submission of final report satisfactory to SRCS/IFRC