

Somalia Humanitarian Fund (SHF) | Central Emergency Response Fund (CERF)

Integrated Approach to CERF-2017-UFE and SHF-2017-SA1 Allocations

1. Introduction

This document lays out the integrated approach to allocating funds from the CERF Underfunded Emergencies window for Somalia (CERF-2017-UFE, US\$18 million) and the Somalia Humanitarian Fund (SHF) 2017 First Standard Allocation (SHF-2017-SA1, \$27 million) in response to the worsening drought conditions in Somalia.¹

2. Current humanitarian situation in Somalia

Severe drought continues to worsen across Somalia, due to the failure of three consecutive rainy seasons during 2015-2016, followed by a prolonged dry season Hagege (July-September 2016) and significantly below-average Deyr rainfall (October-December 2016). At the end of 2016, drought conditions exacerbated in Puntland and Somaliland, but also expanded to other regions in southern and central Somalia, including Gedo, Hiraaan, Galgaduud, and Lower Juba regions. On 12 November 2016, the President of the Federal Government of Somalia issued an appeal to all Somalis and the international community to provide support to the drought-affected communities country-wide.

Over the past six months, the food security and nutrition situation in the country has worsened and malnutrition rates remain high, with 320,000 children under age 5 acutely malnourished, of which 50,000 are severely acutely malnourished and at the risk of death. In addition, the deepening drought and acute water shortages have led to an increased incidence of acute watery diarrhoea (AWD)/cholera outbreaks, which have already been reported in many regions across the country. This is further worsened by the lack of already existing basic health services in most regions that are affected by the drought. The lack of water and pasture has deteriorated livestock body conditions, access to livelihoods and increased the number of internally displaced.

Worsening drought conditions have increased displacement and put additional pressure on limited services and family structures, leading to family separation, intimate partner violence and an increase in harmful social norms such as child marriage and child labour. Displacement, inward migration and negative coping strategies also increase the risk of 90,000 children dropping out of school. Further, the number of displaced people to urban centres will increase during 2017.

The ongoing drought continues to be the main driver of humanitarian needs in Somalia, and the analysis suggests that the current crisis is likely to intensify during the coming months and due to the projected below-average Gu rainfall. The likelihood of a famine remains real should the 2017 *Gu* season is very poor, household purchasing power declines to 2010/2011 levels and delivery of humanitarian assistance is hampered to people in need is hampered².

3. Strategic focus and scope of the Integrated Approach

The combined deterioration of the humanitarian situation and the intensity of the drought in the last quarter of 2016 required reprogramming of the response activities, additional funds and continued strengthened

¹ The initially available \$14 million was topped up by \$13 million of additional donor contributions on a rolling basis throughout February/March 2017.

² FEWSNET/FSNAU, January 16, 2017: Somalia Food Security Alert

coordination in Somalia. The scale of the drought, however, calls for a rapid and decisive scale-up response, focusing on drought-affected areas.

The integrated approach to allocating the combined \$32 million from CERF and SHF in response to drought is based on the premise that, in a protracted emergency setting like Somalia, drought will further exacerbate the existing humanitarian needs. In planning the response, it is thus important to consider the broader range of persistent humanitarian issues together with the cyclical seasonal events and their implication for basic humanitarian needs, as well as ensuring the centrality of protection throughout and other related concerns.

While the combined \$32 million from CERF and SHF will provide much needed impetus to the drought response early in the year, it is critical that other contributions are received to meet the overall requirements³ and immediately boost response capacity to avoid further loss of lives and livelihoods.

The core elements of the Integrated Approach are:

- *Drought*: Focus on drought, including drought related diseases such as AWD/cholera and measles;
- *Protection*: In line with the HRP, we consider protection as central across all clusters;
- *Life-saving*: Focus is on immediate life-saving response, not recovery (even if projects run for up to 9 months);
- *Rapidity of response*: Focus is on rapid response, in particular enabling the most urgent scale up by March, before the *Gu* rains;
- *Cash*: Cash as a response modality will be prioritized, where appropriate;
- *Whole-of-system approach*: An integrated approach across clusters is encouraged, with schools playing a particularly critical role, as already during the 2016; and support for response enablers also being considered;
- *Complementarity of funding mechanisms*: CERF and SHF will be used jointly in a way to ensure complementarity and the best value-for-money.

4. Ensuring complementarity and the best value-for-money

The integrated approach to the two allocations (CERF and SHF) will ensure the complementary use of limited funds channelled through SHF and CERF by:

- Ensuring that the most immediate needs are addressed by funding the top priority activities in the most affected areas.
- Taking into consideration other funding sources and reprogrammed activities.
- Ensuring timely response through an integrated and simultaneous strategic prioritization of CERF and SHF, which will shorten the time required to identify priority activities and areas of implementation.
- Ensure the greatest value-for-money for limited funds available through decreasing overheads and costs of subcontracting.
- Ensuring the use of accountability measures available to the two funding mechanisms.

To determine what portion of the integrated response will be covered from which source, the comparative advantages of each mechanism will be taken into consideration:

- CERF: Only UN agencies, funds and programmes can be the direct recipient of CERF funds. It is suggested that CERF UFE 2017 funds are used *primarily* to cover UN direct operational costs; procurement of bulk

³ The 2017 Humanitarian Response Plan (HRP) for Somalia is appealing for some US\$864 million to target 3.9 million people out of 5 million people in need of humanitarian assistance in Somalia. Humanitarian partners are estimating that roughly \$300 million is required for a sufficient scale-up of response to the current drought in Somalia in the first quarter of 2017.

supplies for life-saving response (to be channelled through SHF-funded and other partners) in order to benefit from the economies of scale; and, logistical support. The primary responsibility to ensure the accountable and efficient use of CERF funds will remain with the recipients of funds (UN agencies, funds and programmes).

- SHF: Funds can be channelled [to 66 local and international NGOs currently eligible to receive SHF funds](#), as well as participating UN agencies, funds and programmes. SHF allocation will prioritize channelling funds directly to the non-governmental implementing partners to ensure the best value-for-money. While the primary responsibility to ensure the accountable and efficient use of SHF remains with the implementing partners, SHF will maintain the oversight through the application of its accountability tools.

5. Cluster strategies to support the Integrated Approach*

* *A more detailed cluster-specific strategies are available on demand*

EDUCATION

Approach

Education will prioritize time-critical needs to ensure retention of drought affected children in schools. The focus will be on existing schools in drought-affected geographical areas in Puntland, South-Central Somalia and parts of Somaliland. The famine in 2011 took a huge toll on children. Providing life-saving assistance through an existing community structures like the school ensure not only that children will be able to continue their education, but they will also stay in a protected environment with access to the most critical services. An increasing number of families are furthermore moving with their livestock leaving children behind in the worst affected areas and further exacerbating the vulnerability of this particular group.

Priority activities (RR)

- Provision of safe drinking water in schools
- Hygiene promotion in schools for AWD/cholera prevention
- Provision of school grants for drought mitigating initiatives incl. food provision
- Provision of school supplies
- Support to Community Education Committees on school water management to ensure broader lifesaving impacts of education-related intervention

Geographical areas

- Puntland: Bari, Nugaal, Muduug, Karkar
- South-Central Somalia: Muduug (Galkacyo), Hiraan (Beletwyne), Middle Shabelle (Jowhar), Bay, Gedo (Elwaq & Bardere), Bakool (Xuduur, BurHakaba), Hiraan, Afgooye corridor, Banadir IDPs, Kismayo
- Somaliland: Sool, Sanaag, Toghdeer, Sahil

CERF focus

- Amount / agency: \$600,000 (UNICEF)
- CERF-funded activities
 - Procurement of water, school grants and education supplies (for school children)
 - Implementation (lead agency)
 - Support community-based facility management (lead agency)

SHF complementarity

- Amount: \$1,400,000 (batch 1) + \$1,700,000 (batch 2)
- SHF-funded activities
 - Implementation (provision of water, food and education supplies to school children)
 - Support community-based facility management (SHF-funded IPs)

FOOD SECURITY

Approach

Focus on life-saving, core emergencies and time critical response to address growing level and scale of acute food insecurity as a result of extensive drought.

Improve access to food and safety net (IASN) response and livelihoods protection through:

- Emergency assistance (food / cash / vouchers) to area categorized as “crisis” as per FEWS NET projected food security outcomes map of Feb-May 2017 to address acute food insecurity needs. The population in IPC phases 3 and 4 will be targeted for three to six months (Feb-July2017).
- Emergency veterinary care and water for animals to survive the dry season such as emergency supportive treatment, water supply for livestock (collapsible water bladders and water trucking)
- Supporting restoration of household and community productive assets through conditional transfer of cash or food e.g. construction of contour bunds, water catchments, and shallow well excavation
- Livelihoods input to agro-pastoralist (agricultural input for *Gu* 2017) and fishermen (riverine fishing equipment)

Geographical areas

- Woqooyi Galbeed (Berbera) , Sanaag (Las Qoray, Ceerigabo, El Afweyne), Sool (Taleex), Bari (Qardho, Banda Bayla, Badhan, Ishukbalan), Nugaal (Garowe, Eyl), Mudug (Hobyo, Jariiban, Xarardheere), Hiran (Jalalaqsi, Bulo Burti, Belet Weyne), Middle Shabelle (Jowhar, Balcad), Lower Shabelle (Wanle Weyne, Afgoi, Kurton Warne, Qoroye), Bakool (Hudur, Tayeglow, Wajid, Rab Dhuure), Bay (Buur Hakaba, Dinsoor and Baidoa), Gedo (Dolo, Gabareey, Luuq and Baardhere), Middle Juba (Sakow, Bu’aale and Jilib), Lower Juba (Kismayo, Badhadhe, Jamamme).
- The applicant partners will also prioritize / target vulnerable population in IPC 3&4 in the prioritized area for their response taking into consideration the scale of on-going and planned response by other cluster partners

CERF focus

- Amount: \$7,500,000 (FAO, WFP)
- CERF-funded activities
 - Emergency assistance (food / cash / vouchers) for three months for drought affected populations in “crisis” as per FEWS NET projected food security outcomes map of Feb-May 2017 to address acute food insecurity needs.
 - Procurement of livelihoods inputs to agro-pastoralist and fishing folks
 - Emergency veterinary care and complementary water for livestock at high risks area (UN agencies)
 - Support the restoration of household and community productive assets through conditional transfer of cash (Cash-for-work) and unconditional cash to families without income and food

SHF focus

- Amount: \$2,900,000 (batch 1) + \$3,100,000 (batch 2)
- SHF-funded activities
 - Direct implementation of FS and livelihoods programs (use of CERF-funded inputs):
 - Emergency veterinary care and water for livestock at high risks area (SHF IPs)

HEALTH

Approach

Provision of essential lifesaving health services in drought affected areas with active AWD/Cholera outbreaks and with no access to basic health services.

Geographical areas:

- Priority locations include Bari, Sanaag, Lower Jubba, Gedo, Sool, Mudug, Hiran, Lower Shebelle, Middle Shebelle, Bay and Lower Jubba.

CERF focus

- Amount / agency: \$1,500,000 (WHO, UNICEF, IOM)
- CERF-funded activities
 - Provision of life-saving emergency primary health services including maternal, neonatal and child health through both static and mobile health clinics in drought affected areas. (UN)
 - Procure emergency health supplies in strategic areas of the country.
 - Scale up of disease outbreak surveillance system for early cases detection and timely responses.
 - Enhance the capacity of health workers including regional rapid response teams for effective emergency responses.
 - Dissemination of health information on the prevention and control of AWD/cholera outbreak

SHF focus

- Amount: \$2,000,000 (batch 1) + \$1,700,000 (batch 2)
- SHF-funded activities
 - Provision of life-saving emergency health services including maternal, neonatal and child health through both static and mobile health clinics in drought affected areas. (SHF-IPs)

LOGISTICS

Approach

Provision of scheduled passenger Air transport services for humanitarian personnel responding in the drought affected areas along with readily available medical and security evacuation services.

Geographical areas:

- South-Central:
 - Lower Jubba (Kismayo)
 - Bakool (Hudur and Wajid)
 - Bay (Baidoa)
 - Hiiran (Beletweyn)
 - Galmudug (Galkayo,)
 - Gedo (Dolow, Luuq, Garboharey)
- Puntland (Bosaso, Garowe)
- Somaliland (Hargeisa)

CERF focus

- Amount / agency: \$750,000 (WFP/UNHAS)
- CERF-funded activities
 - Provision of predictable access to drought affected areas in order to enable humanitarian staff to implement and monitor the projects;
 - Delivering of light cargo such as medical supplies, office supplies and ICT equipment to drought affected areas;
 - Provision of an essential mechanism for timely response to medical and security evacuation requirements.

NUTRITION

Approach

Scaling up lifesaving treatment and prevention of excess morbidity and mortality among severely and moderately malnourished children under five years and pregnant and lactating women in drought affected areas.

Geographical areas:

- South-Central:
 - Middle Shabelle (Jowhar, Balad and Mahaday)
 - Lower Shabelle (Afgooye corridor (between km 13 and km 50), Marka, Kurtunwarey, Qoryoley and Janaale)
 - Lower Jubba (Kismayo, Badhadhe and Afmadow)
 - Bakool (Tieglow, Rabdhure (Yeed and Ato), Elberde and Wajid)
 - Bay (Buurhakaba, Diinsoor, Qansaxdheere and Baidoa IDPs)
 - Hiiran (Beletweyn, Buloburte and Jalalaqsi)
 - Galmudug (Hobyo, Galkayo, Dhusamareb, Adado, Abduwak, Elbeur and Harardheere)
 - Gedo (Dolow, Elwak, Bardhere, Luuq, Belethawa and Garboharey)
- Puntland (Bandarbayla, Bosaso, Burtinle, Eyl, Galgodob, Garowe, Godobjiran, Haradhere, Hobyo, Iskushuban, Jariiban, Qardho)
- Somaliland (Cainabo, Baki, Beribera, Borama, Borao, Buuhoodle, Ceel Afweine, Ceerigabo, Garisa, Garbodadar, Gebiley, Hargeisa, Hudun, Laas Caanod, Lughaye, Odweine, Sabawenag, Sahil, Sheikh, Zeilac)

CERF focus

- Amount / agencies: \$3,300,000 (UNICEF, WFP)
- CERF-funded activities:
 - Procurement, distribution and prepositioning of critical lifesaving nutrition supplies to prevent a catastrophic pipeline break
 - Scaling up of treatment for SAM and MAM through screening and referral in fixed, mobile and outreach clinics (agency IPs)
 - Blanket supplementary feeding (BSFP)
 - Delivery of the Basic Nutrition Services Package (BNSP) linked to WASH, Health and C4D to drought affected communities

SHF focus

- Amount: \$2,000,000 (batch 1) + \$1,900,000 (batch 2)
- SHF-funded activities:
 - Scaling up of treatment for SAM and MAM through screening and referral (SHF IPs)
 - Blanket supplementary feeding (SHF IPs)
 - Delivery of the Basic Nutrition Services Package (BNSP) linked to WASH, Health and C4D to drought affected communities (SHF IPs)

PROTECTION

Approach

Broad focus:

- Supporting of safe passage of movement by affected populations, particularly in South-Central, that are stuck in conflict and drought-affected regions (Gedo, Galgaduud, Lower Juba, Middle and, Lower Shabelle)
- Advocating for freedom of movement with all armed stakeholders.
- Clearance of unconventional routes that pastoralists are having to use as a consequence of drought and evading the conflict.
- Social cohesion of affected communities, IDP settlements, where pastoral dropouts settle.
- Advocacy targeted at armed actors engaged in border securitization and enacting policies aimed at sedentarising pastoral communities.
- Scaling up of GBV and Child Protection services in areas of displacement. With a focus on emergency services and early recovery to enable local integration.
- Increased resourcing of Explosive Hazard partners in MRE and mine and UXO clearance on frequented routes.
- Expansion of HLP services, with a focus on response to forced evictions, capacity building, HLP advocacy and coordination capacity in emerging strategic locations.

Geographical areas

- Puntland; Somaliland; Southern and Central Somalia (Galgaduud and Mudug, Gedo, Hiraaan, Banadir, Lower Juba, Middle and Lower Shabelle)

CERF focus

- Amount / agency: \$400,000 (UNFPA, UNICEF)
- CERF-funded
 - Procurement of supplies (emergency reproductive health kit 3 and dignity kits);
 - Scaling up the work of existing civil society partners (Somaliland, Puntland) through increasing the reach of child protection service provision, including transport costs, staff costs and incentives for community workers and facilitators, awareness campaigns and IEC materials on unaccompanied and separated children and IDTR processes.

SHF focus

- Amount \$2,250,000(batch 1) + \$1,500,000 (batch 2)
- SHF-funded activities
 - Provision of clinical, psychosocial, security and safe house services to survivors of SGBV
 - Expansion of emergency GBV and CP responses into remote affected communities in central Somalia and Middle and Lower Shabelle.
 - Establishment of tracing desks; mobilization of community based child protection structures
 - Training of community leaders; and development of community protection action plans to prevent and respond to abuses and conflict.
 - Establishment of ICLA services in both Middle and Lower Shabelle and the expansion of under resourced existing ICLA services.
 - Mobilisation of EH teams in affected regions with a focus MRE and mine and UXO clearance on frequented routes.

SHELTER & NON-FOOD ITEMS

Approach

Support emerging shelter and NFI needs of about 20,000 drought affected displaced households between November 2016 and April 2017.

Geographical areas

- Somaliland
- Sool, Sanaag, Puntland.
- Gedo (Luuq, Ceel Waaq and Belet Hawa and Doolow)
- Jubaland (Dhobley, Afmadow and Kismayo)
- Shabelles and Mogadishu displacements
- Bay and Bakool
- Hiraan and Galgaduud

CERF focus

- Amount / agencies: \$700,000 (UNHCR, IOM)
- CERF-funded activities:
 - Procurement, transportation and provision of emergency shelter kits and Non-Food Items

SHF focus

- Amount: \$450,000 (batch 1)
- SHF-funded activities:
 - Provision of locally purchased NFIs in areas where markets function (inclusion of cash/voucher modalities)

WATER, SANITATION AND HYGIENE

Approach

Scaling up WASH lifesaving interventions in response to the ongoing drought to mitigate the risk of WASH related disease outbreaks, in particular AWD/cholera, across the country. In Somaliland and Puntland, the focus will be to scale up response to drought. In Central south regions the focus will be to initiate WASH response to drought and scale up the response to the increased AWD/cholera episodes as a direct consequence of the drought.

Geographical areas

- Toghdeer, Sahil, Sool, Sanaag, Bari, Karkaar, Mudug and Nugal, Bay, Bakool, Gedo, Galgaduud, Hiraan, Lower Juba, Lower Shabelle, Middle Shabelle

CERF focus

- Amount: \$3,250,000 (UNICEF, IOM)
- CERF-funded activities:
 - Provision of WASH emergency services for an estimated 140,000 beneficiaries through following activities
 - Water trucking/water voucher for affected communities
 - Replenishment of hygiene and sanitation supplies that are currently depleted due notably to the response to the on-going AWD/cholera outbreak in several Regions
 - Emergency repair of water infrastructure including operation and maintenance support (wells, boreholes, storage tanks, pipelines)
 - Distribution of water bladders/onion tanks to increase water access at boreholes level
 - Capacity building of Community Water management committees including operators
 - Hygiene and sanitation awareness raising, focusing on household water treatment/behaviour change
 - Construction/desludging of latrines in health facilities/CTCs providing treatment to persons affected by the AWD/cholera outbreak

SHF focus

- Amount: \$3,000,000 (batch 1) + \$2,500,000 (batch 2)
- SHF-funded activities:
 - Water trucking/water vouchers coupled with emergency repair of water point as an exit strategy
 - Distribution of WASH emergency supplies.
 - Hygiene awareness raising focusing on household water treatment/behaviour change
 - Provision of WASH services through the use of CERF-procured supplies

6. **Rationale for the apportionment of cluster envelopes (CERF/SHF) and amounts for agency projects (CERF)****

- The following information has been taken into consideration (as per submission from clusters and lead agencies):
 - (a) Reported *requirements* (\$) for drought response requirements;
 - (b) Reported funding *coverage*, which refers to resources available that have been made available for drought response (does not include reprogramming);
 - (c) Reported *gap* is an estimated difference between the requirements and coverage;
 - (d) Requested CERF funding per cluster / agency and number of agencies applying for CERF funding.
 - (e) Information solicited (if made available) from clusters on the breakdown of activities originally prioritized under CERF per supplies/inputs vs. UN operational costs vs. implementation / subcontracting through non-governmental IPs.
 - (f) CERF 2016 RR for drought envelope breakdown per cluster (%) and the December 2016 SHF \$3.2 million drought reserve allocation breakdown per cluster (%) for reference.
- All clusters were requested to provide information on requirements, coverage and gaps, based on consultation with the lead agencies and cluster partners.
- The requested CERF funding (per cluster) was taken as a starting point. As the cumulative ask was significantly above the available CERF funds, the funds available from SHF for programming were taken into consideration to bridge the gap, given the need to urgent scale up response. In order to ensure a well-integrated and complementary use of the two funding mechanisms, the proposed response activities were analysed and, where most appropriate, offloaded to SHF. The draft envelopes were presented to the Inter-Cluster Coordination Group for feedback, and additional revision of requirement / coverage / gap and request data was requested. Further feedback was provided to OCHA from cluster coordinators who also consulted with the CERF-requesting agencies. The envelopes were shared, together with the Integrated Approach and CERF Prioritization Strategy, with the Humanitarian Country Team (HCT) and the SHF Advisory Board for endorsement and adjusted upon receiving feedback,

***The apportionment among UN agencies, funds and programmes within CERF-funded clusters is tentative and subject to finalization within clusters.*

- SHF batch 2 was allocated on a rolling basis, based on the availability of funds and the existence of already vetted projects within individual clusters. Priority was given to four critical clusters – Food Security, Health, Nutrition and WASH.

See annex 1 for cluster envelopes (CERF/SHF).

7. Guidance on the allocation process

- This Integrated Approach has been reconciled within the Inter-cluster Coordination Group (ICCG). It is to be presented to the Humanitarian Country Team (HCT) and the SHF Advisory Board (AB). The entities are requested to endorse the Integrated Approach and the cluster envelopes.
- The CERF portion of the Integrated Approach will be submitted to the CERF secretariat by 16 January 2017. Upon receiving feedback, the UN agencies will proceed with the drafting and submission of the CERF-funded projects, trying to meet the Somalia HCT internal deadline of 31 January 2017.
- Once endorsed by the SHF AB, the Integrated Approach will be circulated through the respective clusters to invite cluster partners to submit project proposals.
 - SHF eligible partners will be selected based upon their capacity to absorb the allocated funds, respond promptly in the priority areas and work closely with cluster coordinators and other partners during the project cycle.
 - The Standard Allocation modality will be applied (detailed procedural guidance from the SHF will be incorporated as an annex to this Integrated Approach document).

8. Process timeline

- The scale of the drought on top of the existing humanitarian conditions in Somalia demands a rapid and decisive decision-making and immediate scale-up of life-saving response.
- This will entail **strong commitment and enhanced efforts from all stakeholders to step up the timelines and do everything in their power to expedite the processes leading to emergency response** that will be supported through this integrated approach.
- In particular:
 - The HC, UN agencies and cluster coordinators will attempt to submit the CERF Application and project proposals ahead of 13 February deadline, ideally by the end of January.
 - Stakeholders within the SHF allocation process (OCHA/HFU, cluster coordinators, IPs, OCHA/FCS) will attempt to expedite the allocation process to the extent possible and ensure maximum possible responsiveness. In addition, SHF will consider pre-financing requests for HC's approval, whenever requested and feasible.

| Date | SHF | CERF |
|-------------|--|---|
| 22 Dec 2016 | | <ul style="list-style-type: none"> • HCT Somalia informed of the CERF UFE allocation |
| 23 Dec 2016 | | <ul style="list-style-type: none"> • HC proposes focus on drought to HCT |
| 28 Dec 2016 | <ul style="list-style-type: none"> • ICCG requested to provide prioritization gaps and priorities for CERF/SHF-funded drought response | |
| 11 January | <ul style="list-style-type: none"> • ICCG discusses and endorses the integrated approach | |
| 13 January | <ul style="list-style-type: none"> • Integrated Approach and the draft CERF Prioritization Strategy submitted for endorsement to SHF AB and HCT, respectively | |
| 16 January | | <ul style="list-style-type: none"> • CERF Prioritization Strategy submitted to the CERF secretariat (OCHA/HC) |
| 20 January | <ul style="list-style-type: none"> • SHF Allocation Strategy circulated to clusters with call for proposals (HFU/CCs) | |
| 31 January | <ul style="list-style-type: none"> • Deadline for the submission of SHF projects (IPs) | <ul style="list-style-type: none"> • [HCT Somalia internal] 30 Jan – Deadline for the submission of CERF Application and Projects |
| 3 February | <ul style="list-style-type: none"> • Cluster Coordinators finalize the review of submission recommend projects and IPs to be funded (CC) | |

| | | |
|------------|---|--|
| 3 February | <ul style="list-style-type: none"> Joint technical review and feedback to IPs (CCs/HFU) | |
| 5 February | <ul style="list-style-type: none"> SHF Advisory Board approval of projects | |
| 6-8 Feb | <ul style="list-style-type: none"> IPs resubmit proposals within 48 hours. | |
| 10 Feb | <ul style="list-style-type: none"> Technical review at HFU level finalized (HFU) | |
| 15 Feb | <ul style="list-style-type: none"> Projects approved | <ul style="list-style-type: none"> [CERF] 13 Feb – Deadline for the submission of CERF application and projects (UN-AFP, OCHA, HC) |
| 20 Feb | <ul style="list-style-type: none"> Grant Agreements signed (OCHA, HC, IPs) | |
| 28 Feb | | <ul style="list-style-type: none"> [HCT Somalia internal] 28 Feb – target date for approval of projects / disbursement |
| 10 March | <ul style="list-style-type: none"> 50 per cent of project funding disbursed (OCHA) | |
| 20 March | <ul style="list-style-type: none"> Remaining 50 per cent of project funding disbursed (OCHA) | <ul style="list-style-type: none"> Deadline for all CERF projects to be reviewed and decisions made |
| | <i>Note: SHF timeline only applicable for SHF batch 1 projects.</i> | |

Annexes**I. Cluster envelopes (CERF and SHF)**

| Cluster | CERF | | Agency | \$* | | SHF | | SHF+CERF | |
|--------------|-------------------|-------------|--------|-------------------|-------------|-------------------|-------------|-------------------|-------------|
| | split | % | | | % | split (1+2) | % | split | % |
| Education | 600,000 | 3% | UNICEF | 600,000 | 3% | 3,200,000 | 12% | 3,800,000 | 8% |
| Food Sec. | 7,500,000 | 42% | FAO | 3,750,000 | 21% | 6,100,000 | 23% | 13,600,000 | 30% |
| | | | WFP | 3,750,000 | 21% | | | | |
| Health | 1,500,000 | 8% | WHO | 400,000 | 2% | 3,900,000 | 14% | 5,400,000 | 12% |
| | | | UNICEF | 700,000 | 4% | | | | |
| | | | IOM | 400,000 | 2% | | | | |
| Logistics | 750,000 | 4% | WFP | 750,000 | 4% | | | 750,000 | 2% |
| Nutrition | 3,300,000 | 18% | UNICEF | 1,550,000 | 9% | 3,900,000 | 14% | 7,200,000 | 16% |
| | | | WFP | 1,750,000 | 10% | | | | |
| Protection | 400,000 | 2% | UNFPA | 275,000 | 2% | 3,750,000 | 14% | 4,150,000 | 9% |
| | | | UNICEF | 125,000 | 1% | | | | |
| Shelter | 700,000 | 4% | UNHCR | 350,000 | 2% | 450,000 | 2% | 1,150,000 | 3% |
| | | | IOM | 350,000 | 2% | | | | |
| WASH | 3,250,000 | 18% | UNICEF | 2,100,000 | 12% | 5,700,000 | 21% | 8,950,000 | 20% |
| | | | IOM | 1,150,000 | 6% | | | | |
| Total | 18,000,000 | 100% | | 18,000,000 | 100% | 27,000,000 | 100% | 45,000,000 | 100% |

II. CERF envelopes per agency*

| | US\$ | % |
|--------------------|-------------------|-------------|
| FAO | 3,750,000 | 21% |
| IOM | 1,900,000 | 11% |
| UNFPA | 275,000 | 2% |
| UNHCR | 350,000 | 2% |
| UNICEF | 5,075,000 | 28% |
| WFP | 6,250,000 | 35% |
| WHO | 400,000 | 2% |
| Grand Total | 18,000,000 | 100% |

* The apportionment among UN agencies, funds and programmes within CERF-funded clusters is tentative and subject to finalization within clusters.

III. SHF Process Guidelines

1. Project submission and prioritisation

When prioritising projects review committees should take into account the following principles and criteria:

- Following the HC’s endorsement of the SHF reserve strategy, including cluster envelopes, review committees will proceed to identify, review and submit relevant proposals to address the specific needs elaborated in this document. SHF eligible partners will be selected based upon their capacity to absorb the allocated funds, respond promptly in the priority areas and work closely with cluster coordinators and other partners during the project cycle.
- Full project proposals will be developed and uploaded into the Grant Management System (GMS) by the implementing partners that seek funding (via <https://chfsomalia.unocha.org>). The Cluster Coordinators and review committees should, as they are performing their strategic and technical review, advise whether the request is valid and funding should be granted. Requests recommended for approval are subject to technical review by the Humanitarian Financing Unit (HFU/OCHA Somalia) and Funding Coordination Section (FCS/OCHA headquarters).
- Programming must reflect the distinct needs of men, women, boys and girls during the implementation period. As gender issues are manifested in different ways for each cluster, an overarching gender-sensitive approach will be ensured through prioritizing proposals that highlight their strategy towards overcoming obstacles that prevent vulnerable groups from receiving access to lifesaving services. A major focus will be placed on supporting female-headed households, as well as pregnant and lactating women who are particularly vulnerable from health- and nutrition-related risks. Children between the ages of six months and five years will also be a programming priority, as they face significant risks from malnutrition-related health complications.
- Organisations that have an ongoing SHF project and apply for the same activities under this allocation (SA 2017) should clearly indicate how the new funding will complement the previous SHF project.
- Selected projects should help achieve the HRP overall strategic priorities and cluster objectives. Projects that are ranked as ‘high’ in the HRP should be prioritized.
- All projects must address life-saving needs. The proposals must be backed by credible data to demonstrate the severity of needs and activities must be interconnected across clusters.
- Implementing partners must be eligible to receive SHF funding, present in the locations targeted in this allocation round or have the ability to immediately execute activities in the selected locations.
- Projects should be implemented within 12 months and should not have a budget of less than \$100,000.
- This allocation is open to non-governmental organisations only. If and when feasible, clusters should prioritize the selection of non-governmental partners directly responsible for the implementation of projects. While SHF is guided by the long-term global target of 70 per cent of funding to Country-Based Pooled Funds funding to be channelled through the non-governmental organizations (NGOs), with some 25 per cent through national partners, the overarching objective remains that funding should be channelled through non-governmental partners that are best-placed to deliver prioritized activities in accordance with humanitarian principles in a timely, effective and impactful manner at the given time and location.

2. Review of projects

- Project proposals will undergo both a ‘strategic’ and a ‘technical’ review process using the Grant Management System (GMS). For the strategic review, each cluster will convene a Strategic Review Committee/ Cluster Review Committee.
- Clusters should apply prioritization matrices (score cards) per project with standard scoring in at least the following key areas (i) strategic relevance (ii) programmatic relevance (iii) cost effectiveness / value for

money. The score card should be made available to HFU and will be recorded in the GMS to ensure transparency and accountability of the allocation process.

- The technical review committee which will include technical experts from the relevant cluster and HFU staff will in its review of projects pay further attention to the following:
 - The technical soundness/quality of the proposal
 - The financial efficiency of the project
 - The coherence between the narrative, work-plan, log-frame and budget.
 - The complementarity and consistency of projects across sectors, seeking to build synergies with other sectors.
- To ensure timely allocation and disbursement of funds, only three revision rounds will be allowed for proposals. Projects that fail to reach the required level of quality after three rounds of revision may not be funded, and the funding earmarked for the project may be relocated to other priorities or clusters.

3. Budgeting and finance

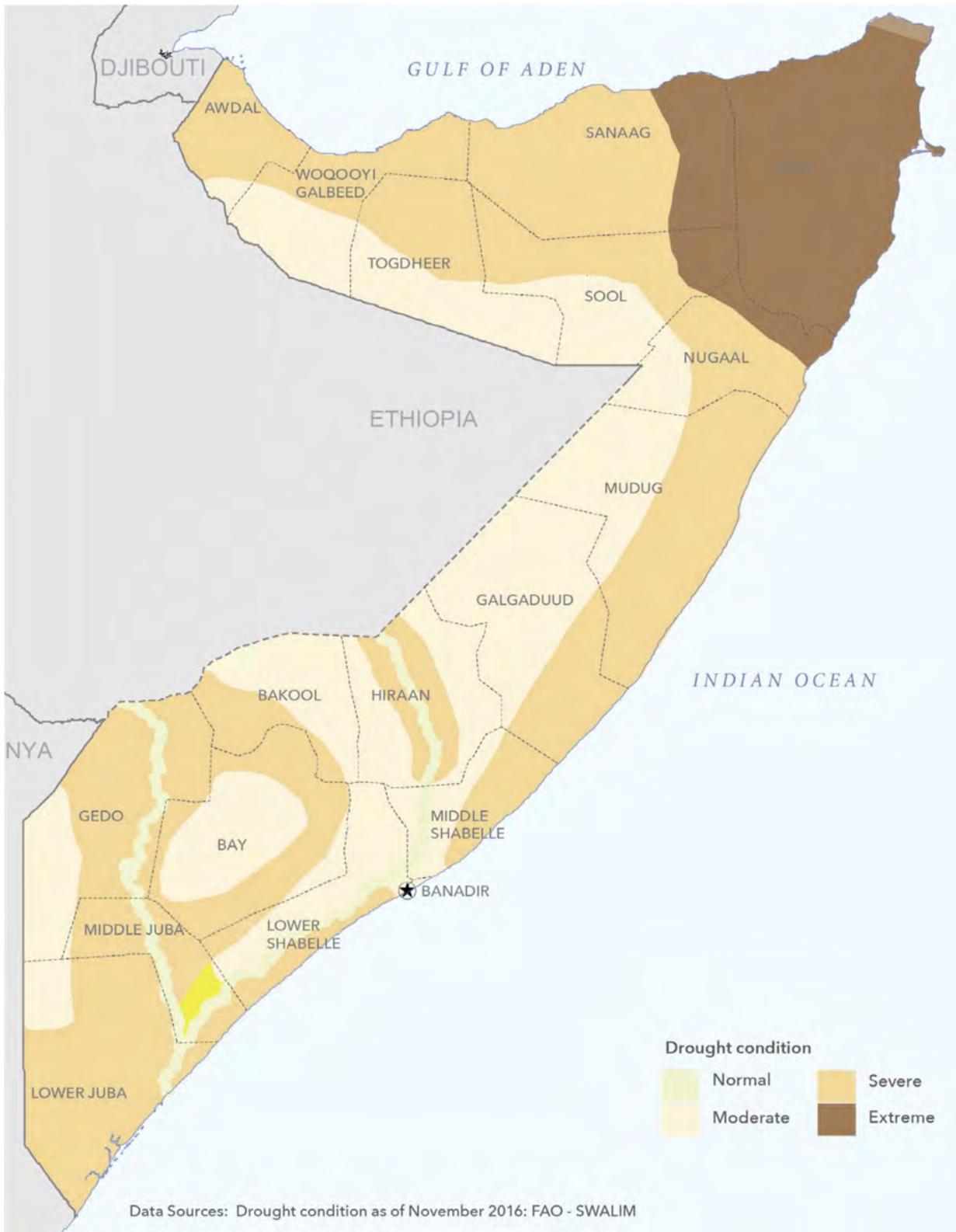
- Projects that can demonstrate ‘value for money’ relative to the project budget should be prioritized. Factors to consider include maximum reach and impact for given cost, outcome and beneficiary reach for each dollar invested, cost effectiveness of the intervention including, minimizing support and overhead costs.
- Projects that can demonstrate low indirect costs as a proportion of direct costs should be ranked favourably. Information on direct and indirect costs is contained in the Country-Based Pooled Funds Operational Handbook.
- To reduce overhead costs, pass through arrangements where organisations simply pass on funding to their implementing partner organisation without providing any meaningful guidance, coordination, capacity building, technical advice, monitoring and evaluation capacities or any other function of additional value are not eligible for funding.
- Partners with submissions across different clusters should ensure that common costs (administrative and operational) are rationalised.
- Partners should adhere to the Country-Based Pooled Funds basic definitions and guidance including on project budget preparation, use of budget narrative and itemized budgetary breakdowns. The HFU will recirculate the relevant guidance and should be contacted in case additional clarity is required.

4. Who to contact?

OCHA Somalia, Humanitarian Financing Unit:

- For general queries related to the allocation round contact Matija Kovač, +254(0)732391043, kovaem@un.org or Afifa Ismail, +254(0)708515570, afifa@un.org.
- Food Security and Protection programmatic issues: Afifa Ismail, +254(0)708515570, afifa@un.org & Eva Kiti, +254 (0)705000720, kiti@un.org.
- Education, Health and Nutrition programmatic issues: Patricia Agwaro, +254(0)207629144, agwaro@un.org & Umikalthum Shukri Noor, +254 20 7629159, nooru@un.org.
- Shelter and WASH programmatic issues: John Ndiku, +254(0)705000722, ndiku@un.org & Umikalthum Shukri Noor, +254 20 7629159, nooru@un.org or Evalyne Lwemba, +254 (0) 733-272-017, lwembae@un.org.
- For budget/financial issues contact officers above or Mary-Bernadette Obadha, +254 2076 29117, obadha@un.org & Linda Onyango, +254(0)734800140, onyangol@un.org.

IV. Drought conditions in Somalia as of November 2016 (FAO/SWALIM)



V. Projected drought conditions, Feb-May 2017 (FSNAU/FEWSNET/SWALIM)

